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Research Article

Therapeutic uses of plant species for inflammation-related conditions in Limpopo province of South Africa: a mini-review and current perspectives

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Inflammation is part of a complex and efficiently regulated biological process in response to infections, injury and diseases. However, when impaired, the inflammatory response could result in undesirable effects as seen in chronic diseases such as tuberculosis (TB), type-2 diabetes mellitus (T2DM), some forms of sexually transmitted diseases (STI's) and cancer. This study was based on an ethno-botanical survey of literature citations of medicinal plants used to treat inflammation-related conditions in Limpopo province of South Africa. The results indicated that plant species belonging to different families are used to treat inflammation-related diseases and symptoms. Plant species belonging to the Fabaceae family are mostly used for these purposes, representing 16.1% of the recorded plants species. This was followed by the Asteraceae family (8.6%) and the Asparagaceae (4%). The root was the preferred plant part (50.9%) used for inflammation-related conditions, followed by the leaves (18.4%), stem bark (16.7%), whole plant (9.6%), the bulbs (3.5%) and the seed (0.9%) consecutively. The same plant species or a different part thereof is sometimes used to treat inflammation caused by different ailments. Traditional medicine continue to play a vital role in meeting the health care needs of people in under-resourced areas such as the Limpopo province of South Africa. However, a curious finding in this review is the dearth of information on the traditional uses and exploitability of a widely known plant species with demonstrated anti-inflammatory activities. Extracts from *Harpagophytum procumbens* are well known for their anti-inflammatory activities. The plant species is available in the province, but little is known about its therapeutic uses, cultivation, harvesting or exploitation. Controlled harvesting of *H. Procumbens* could potentially provide the much needed income for the people in the areas of the Limpopo province where this plant species is available.

Keywords: Medicinal plants, Limpopo province, inflammation, Fabaceae

INTRODUCTION

Inflammation is a complex and highly regulated albeit beneficial biological process which is a component of the body's response to infections, injury and diseases (Adebayo et al, 2015). However, impaired or unabated inflammatory response is implicated in the progression and severity of infections and chronic diseases such as tuberculosis (TB), type-2 diabetes mellitus (T2DM), some forms of sexually transmitted infections (STI's) and cancer (Majeed et al, 2015; Falconer et al, 2012). Infection by *Mycobacterium tuberculosis*, the causative organism for TB remains a disease burden in developing

countries, especially in poor communities. Globally, approximately one third of the human population has TB (Lyadova, 2012).

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Inflammation plays a key role in the progression of TB infections as well as in the survival of the pathogen in the host. Crucially, the prognosis of TB is highly dependent on the host-pathogen interaction (Majeed et al, 2015). This is because the pathogen utilizes the complex host defence system as an offensive tool to proliferate within the host (Lyadova, 2012) by inhibiting the synthesis of pro-inflammatory mediators that subsequently leads to host tissue destruction.

Sexually transmitted infections (STI's) are caused by micro-organisms such as bacteria, viruses and parasites. During infection, the invading organisms are recognized by the immune system, which, as part of the body's response to infection, initiates the inflammatory process. This leads to the symptoms associated with many STI's, such as redness, swelling and pain. The inflammatory process recruits more immune cells to the site of the infection thereby increasing the concentration of immune-competent cells in the area infected with the STI's. Although the inflammatory response is meant to help fight the infection, the recruitment of cells such as Cluster of differentiation 4 positive (CD4⁺) cells makes them more susceptible to Human Immuno-deficient Virus (HIV) infection and replication (Giese et al, 2015).

On the one hand, chronic inflammation is considered as a causative factor in a variety of cancers. In general, the longer the persistence of inflammation, the higher the risk of cancer. Examples of inflammatory mediators include metabolites of arachidonic acid, cytokines, chemokines, and free radicals. Chronic exposure to these mediators leads to increased cell proliferation, mutagenesis, oncogene activation, and angiogenesis. The ultimate result is the proliferation of cells that have lost normal growth control, known as cancerous cells (Sun and Kato, 2016).

On the other hand, type 2 diabetes mellitus (T2DM) characterized by persistent hyperglycemia causes a chain of abrupt biochemical and physiological changes; whose hallmark is immune dys-regulation that could contribute to prolonged inflammation which causes transformation of wounds into non-healing chronic ulcers (Falconer et al, 2012).

Pro-inflammatory cytokines such as interleukin (IL)-1 β , IL-6 and tumour necrosis factor (TNF) are involved in thymus derived cell (T-cell) mediated immune response associated with infections (Canal et al, 2016). The persistent circulation of these potent drivers of inflammation has been detected in various chronic diseases such as arthritis, cancers and T2DM (Liu et al, 2016). If unabated, systemic inflammation is thus believed to potentially lead to persistent pain (Huang et al, 2016) and progressive loss of function of the affected tissues and organ (Huang et al, 2016; Perruccio et al, 2016).

In the Limpopo province, the vast majority of the people still depend on medicinal plants for their primary health care needs. Not surprisingly, the traditional care givers possess an inherently remarkable knowledge of plants identification and therapeutic uses. Various parts of

medicinal plants are used for treating many diseases, and are often used either alone or in combination with other plant species or animal parts. The extracts are usually administered in the form of decoctions, concoctions or infusions for oral consumptions, enemas and inhalations, or as paste for topical applications on surface lesions including painful swellings and fractures (Havinga et al, 2010). In addition, several plant species are used in ethno-veterinary medicine to treat animal diseases such as diarrhoea and wound healing (Mathabe et al, 2006). One of the most widely exploited medicinal plants for painful symptoms associated with inflammation is *Harpagophytum procumbens* (Burch.) DC. ex Meisn. (Devil's Claw) from the Pedaliaceae family. For instance, *H. procumbens* products for osteoarthritis are used in the United States and are among the most frequently prescribed botanicals by medical herbalists in the United Kingdom (Conrozier et al, 2014). Numerous European studies conducted over the past twenty years support their safety and have found them to be non-inferior to other established pain treatments (Brendler et al, 2006; Brien et al, 2006; Cameron et al, 2009). There are no literature citations on the therapeutic uses of extracts of *H. procumbens* in the Limpopo province, although the plants species are available.

Therefore, the aim of this review was to investigate and collate information on medicinal plants used to treat inflammation-related conditions in the Limpopo province and to provide an update on the ethno-medical uses of the plant species as well as their phytochemistry.

MATERIALS AND METHODS

Study area

This study was focussed on the Limpopo province of South Africa which lies in the northern-most part of the South Africa in the Savanna biome, an area of mixed grassland and trees generally known as bushveld (GPS coordinates 23.4013° S, 29.4179° E). The five district/regions are the Waterberg, Capricon, Vhembe, Mopani and Sekhukhune. The Limpopo province (Figure 1) is one of the under-resourced of the nine provinces in South Africa, and consequently majority of the inhabitants rely on medicinal plants for their primary health care needs. The continued reliance on traditional form of therapy is further entrenched by factors such as low cost, ease of accessibility and innate adherence to traditional customs and beliefs. The principal home language is Sesotho, spoken by more than 50% of the 5.8 million inhabitants, followed by Xitsonga and Tshivenda (Statistics South Africa, 2016).

Ethno-botanical survey and data sourcing

An ethno-botanical survey of medicinal plants used to treat inflammation-related conditions in Limpopo province was conducted. The information was sourced from citations in search engines such as Google scholar, Web of science, Science Direct, Pubmed, Scopus etc.

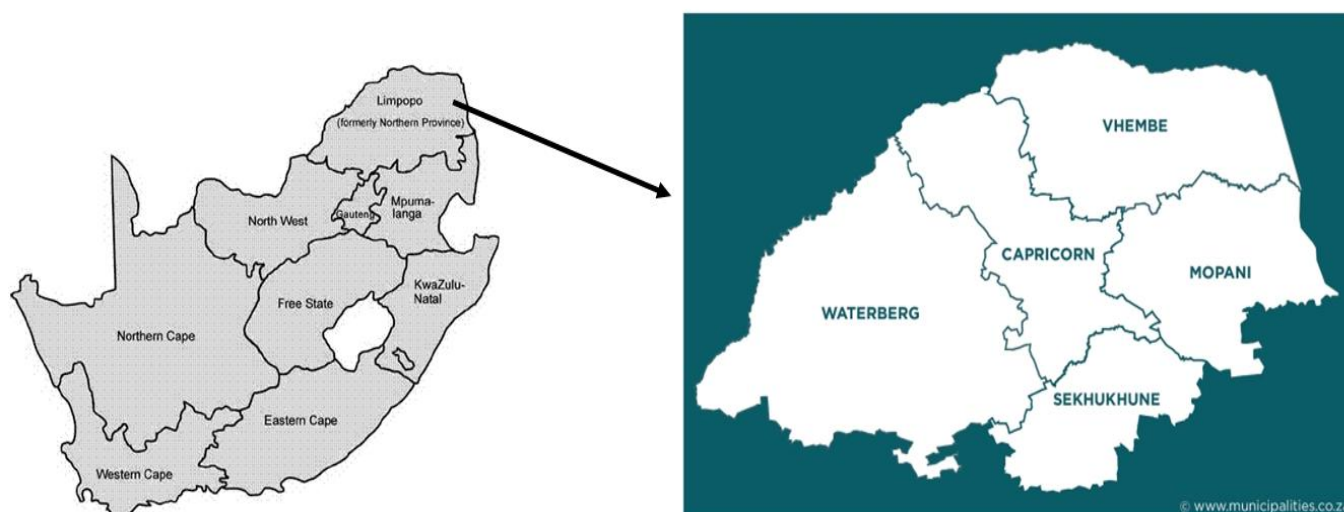


Figure 1. Map of South Africa and the five districts/regions of the Limpopo province, South Africa (www.municipalities.co.za)

RESULTS AND DISCUSSION

The continued utilisation of medicinal plants for therapeutic purposes is common practice in developing countries, especially in under-resourced areas such as the Limpopo province of South Africa.

Ethno-botanical survey of the therapeutic uses of medicinal plants by the various cultures of the Limpopo province including the Venda (Mulaudzi et al, 2012), Sepedi (Semenya et al, 2012a) and Tsonga (Luseba and van der Merwe, 2006; Mashabane et al, 2001) speaking people has been recorded. The study on the utilization of *Colophospermum mopane* (Kirk ex Benth.) Kirk ex J. Léonard from the Fabaceae family by the Vatsonga people in the Gazankulu region was recorded by Mashabane et al, (2001). The findings indicated that the plant is utilized medicinally by traditional healers in treating stomach ache, gout, diarrhoea, toothache and menstrual pain. An investigation on the trade of indigenous medicinal plants in the Venda region of the Limpopo province together with their ethnobotanical importance and sustainable use was done by Tshisikhawe et al, (2012). Sixty-nine medicinal plants species were recorded by the survey with the plant parts most preferred being roots (Tshisikhawe et al, 2012). The finding suggests that plant material is still extensively used for medicinal purposes and they will continue to do so for a considerable time to come. Botha and Shackleton, (2004) previously conducted a study on the market profiles and trade in medicinal plants in the Limpopo Lowveld of South Africa. The findings indicated that 70 different species were identified representing 40 families. The study also indicated considerable local variation and complexities in the harvesting and marketing of medicinal plants.

A comprehensive list of the plant species was compiled

and grouped according to their therapeutic uses for STI's (Table 1) (Mahwasane et al, 2013; Semanya et al, 2012a; Chauke et al, 2015), T2DM (Table 2) (Semenya et al, 2012b; Chauke et al, 2015; Semanya et al, 2012a; Mahwasane et al, 2013), and other painful conditions (Table 3) (Mathabe et al, 2006; Mulaudzi et al, 2012; Mahwasane et al, 2013; Chauke et al, 2015; Moeng, 2010) respectively. The results indicated that plant species belonging to different families are used to treat inflammation-related diseases and symptoms. Plant species belonging to the Fabaceae family are mostly used for these purposes, representing 16.1% of the recorded plants species (Figure 2). This observation is not surprising because the Fabaceae family is considered to be the second largest family of medicinal plants used for therapeutic purposes (Gao et al, 2010). This was followed by the Asteraceae family (8.6%) as previously observed by Maroyi and Mosina, (2014) and the Asparagaceae (4%). Furthermore, an ethnobotanical survey of medicinal plants used for inflammation related conditions in South Africa had 20% of the selected plant species belonging to the Fabaceae family (Adebayo et al, 2015). Fabaceae is the most common family found in tropical rainforests and in dry forests in the Americas and Africa (Rahman and Parvin, 2014). Phytochemical investigation of plants species in the Fabaceae family indicated that they frequently synthesize alkaloids, proanthocyanidins, and flavonoids such as kaempferol, quercetin and myricetin. These secondary metabolites are known to possess anti-microbial and anti-inflammatory activities. The Fabaceae family are the only group that contains pterocarpans (Sun et al, 2015; Kaennakam et al, 2015), a class of iso-flavonoids with potent anti-cancer, analgesic and anti-inflammatory activities (Tan et al, 2016).

The root was the preferred plant part (50.9%) used for inflammation-related conditions, followed by the leaves

Table 1. Plant species used to treat sexually transmitted infections in Limpopo province of South Africa

Plant species	Family	Part used	District of Limpopo	References
<i>Aloe marlothii</i>	Asphodelaceae	Leaves/root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Callilepis laureolia</i>	Asteraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Carica papaya</i>	Caricaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Carpobrotus edulis</i>	Aizoaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Centella asiatica</i>	Apiaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Cussiniaspicata</i>	Araliaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Englerophytum magalismontanum</i>	Sapotaceae	Bark	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Ficus carica</i>	Moraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Gethyllis namaquensis</i>	Amaryllidaceae	Bulb	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Grewia flavescens</i>	Malvaceae	Root	Mopani	Chauke et al, 2015
<i>Grewia villosa</i>	Malvaceae	Root	Mopani	Chauke et al, 2015
<i>Helichrysum caespititum</i>	Asteraceae	Whole plant	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Hermannia guartianiana</i>	Sterculiaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Hypoxis iridifolia</i>	Hypoxidaceae	Tuber	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Kirkia Wiimsii</i>	Kirkiaceae	Tuber	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Lessertia microphylla</i>	Fabaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Mimusops zeyheri</i>	Sapotaceae	Leaf	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Moringa oleifera</i>	Moringaceae	Seed and leaf	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Mormodica balsamina</i>	Cucurbitaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Mormodica charantia</i>	Cucurbitaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Opuntia ficus-indica</i>	Cactaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Persea Americana</i>	Lauraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Plumeria obtuse</i>	Apocynaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Puntagranatum</i>	Lythraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Schkuhria pinnata</i>	Asteraceae	Whole plant	Vhembe	Mahwasane et al 2013
<i>Tarchonanthus camphoratus</i>	Asteraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Triumfetta sp</i>	Tiliaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b

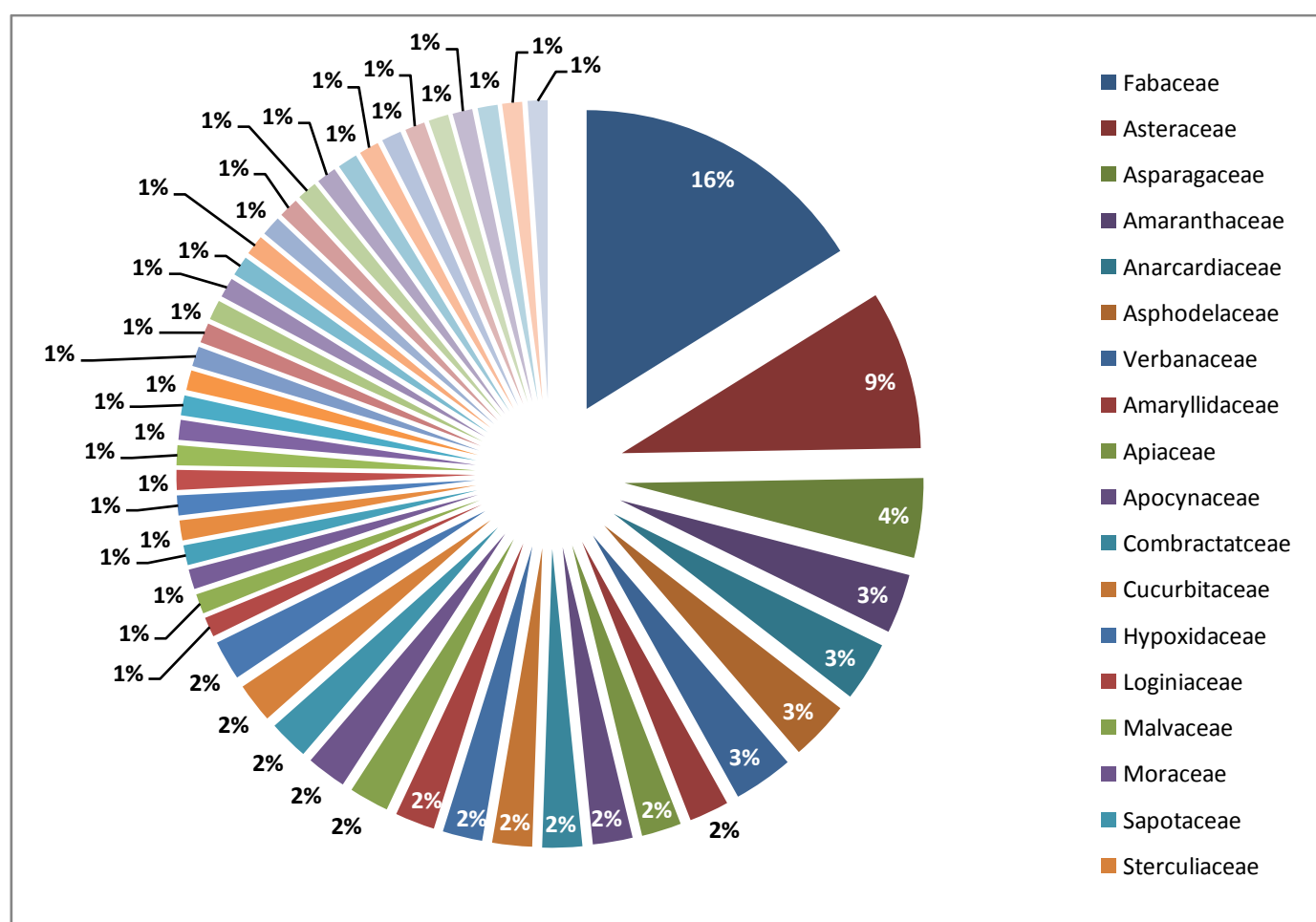


Figure 2. The percentage of plant species used for inflammation-related conditions grouped according to their families

Therapeutic uses of plant species for inflammation-related conditions in Limpopo province of South Africa: a mini-review and current perspectives

Table 2. Plant species used to treat type-2 Diabetes mellitus in Limpopo province of South Africa

Plant species	Family	Part used	District of Limpopo	References
<i>Aloe marlothii</i>	Asphodelaceae	Leaves/root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Callilepsislaureolia</i>	Asteraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Carica papaya</i>	Caricaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Carpobrotus edulis</i>	Aizoaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Centellaasiatica</i>	Apiaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Cussiniaspicata</i>	Araliaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Englerophytummagalismontanum</i>	Sapotaceae	Bark	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Ficuscarica</i>	Moraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Gethyllisnamaquensis</i>	Amaryllidaceae	Bulb	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Grewiaflavescens</i>	Malvaceae	Root	Mopani	Chauke et al, 2015
<i>Grewiavillosa</i>	Malvaceae	Root	Mopani	Chauke et al, 2015
<i>Helichrysumcaespititium</i>	Asteraceae	Whole plant	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Hermanniaquartiniana</i>	Sterculiaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Hypoxisiridifolia</i>	Hypoxidaceae	Tuber	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>KirkiaWiimsii</i>	Kirkiaceae	Tuber	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Lessertiamicrophylla</i>	Fabaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Mimusopszeyheri</i>	Sapotaceae	Leaf	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Moringaoleifera</i>	Moringaceae	Seed and leaf	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Mormodicabalsamina</i>	Cucurbitaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Mormodicacharantia</i>	Cucurbitaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Opuntiaficus-indica</i>	Cactaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Persea Americana</i>	Lauraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012a
<i>Plumeria obtuse</i>	Apocynaceae	Leaves	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Punitagranatum</i>	Lythraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Schkuhriapinnata</i>	Asteraceae	Whole plant	Vhembe	Mahwasane et al 2013
<i>Tarchonanthuscamphoratus</i>	Asteraceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b
<i>Triumfettasp</i>	Tiliaceae	Root	Capricon/Sekhukhune/Waterberg	Semenya et al, 2012b

(18.4%), stem bark (16.7%), whole plant (9.6%), the bulbs (3.5%) and the seed (0.9%) consecutively (Figure 3). This pattern of ethno-medicinal uses of plant parts

was previously reported by Semenya et al (2012a) and Mahwasane et al (2013), suggesting that the same is applicable to the whole province of Limpopo. It should be

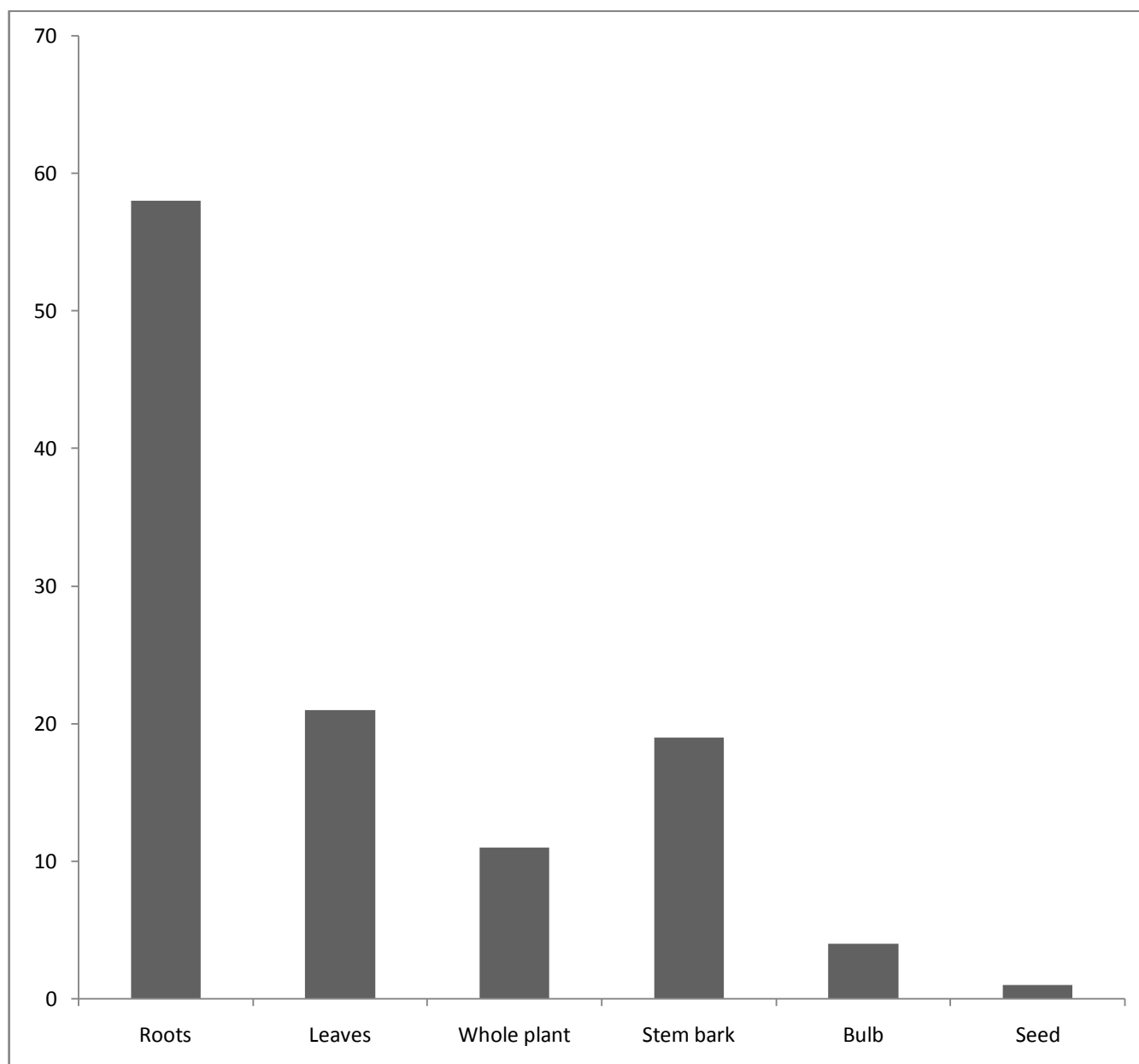


Figure 3. The plant-parts used for treating inflammation-related conditions

noted that the same plant species is sometimes used to treat inflammation caused by different diseases, and a different parts of same plant species could be used for different ailments. The parts of the plant species are usually prepared and administered in the form of decoctions, infusions, concoctions to be taken orally. In addition, the herbs may be prepared with oil as a paste to be applied externally in case of skin infections or wound dressings. Water is the most commonly used solvent for extraction, but locally available alcohol is sometimes used.

Many plant species are used in the Limpopo Province; however a curiously ignored or overlooked plant species with known therapeutic property is *H.procumbens*. Devil's Claw plants are found in the western reaches of the Limpopo Province. According to the Limpopo Province Conservation Department officials, no harvesting takes place. There is a dearth of information

on the numbers and location of Devil's Claw plants in the province, and no apparent information on the use of the plant by indigenous people. The Limpopo Province Conservation Authorities have indicated that Devil's Claw is found in a few nature reserves, such as Lanjan Nature Reserve, near the town of Alldays, but information on plant numbers and exact locations, as well as people's use of the resource is non-existent. The trade in secondary tubers of *H.procumbens* constitute the main source of income for many rural dwellers in Namibia (Mncwangi et al, 2012) where exports in 2009 was estimated at 1.06 million euros. Extract from the secondary tuber is used to treat fever, pain and arthritis, with many commercialised products developed from the extracts already on the markets.

Hence, there is a need to scientifically establish and explore the potential of developing a sustainable use of *H.procumbens* as a source of revenue generation for the Limpopo province of South Africa.

Table 3. Plant species used for pain relief in the Limpopo province of South Africa

Plant species	Family	Part used	District	Traditional uses	References
<i>Acacia rehmanniana</i>	Fabaceae	Leaves	Mopani	Headache	Chauke et al, 2015
<i>Acanthus montanus</i>	Acanthaceae	Root	Capricorn/Sekhukhune/Waterberg	Stomach aches	Semenya et al, 2012b
<i>Alepidea amatymbica</i>	Apiaceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Aloe greatheadii</i>	Asphodelaceae	Leaf	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Aloe spp</i>	Asphodelaceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Annona senegalensis</i>	Annonaceae	Root/bark/leaf	Vhembe	Pain/fever	Mahwasane et al 2013
<i>Aptosimum linearize</i>	Scrophulariaceae	Whole plant	Mopani	Toothache	Chauke et al, 2015
<i>Artemisia afra</i>	Asteraceae	Leaves	Capricorn	Flu, colds	Moeng, 2010
<i>Asparagus cooperi</i>	Asparagaceae	Whole plant	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Bauhinia galpinii</i>	Fabaceae	Root	Vhembe	Stomach pains	Mahwasane et al 2013
<i>Bidens pilosa</i>	Asteraceae	Whole plant	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Bowiea volubilis</i>	Asparagaceae	Bulb/tuber	Vhembe	Pain relief	Aremu et al, 2015
<i>Bulbin natalensis</i>	Asphodelaceae	Leaf	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Clerodendrum myricoides</i>	Lamiaceae	Leaves	Vhembe	Cold, cough	Mulaudzi et al, 2012
<i>Callilepis calycifolia</i>	Asteraceae	Roots	Capricorn	Flu, colds	Moeng, 2010
<i>Carpobrotus edulis</i>	Aizoaceae	Leaf	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Combretum imberbe</i>	Combretaceae	Root/stem bark	Mopani	Cancer	Chauke et al, 2015
<i>Combretum imberbe</i>	Combretaceae	Root	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Crinum bulbispermum</i>	Amaryllidaceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Diospyros mespiliformis</i>	Ebenaceae	Bark	Vhembe	Stomach pains	Mahwasane et al 2013

Table 3. Cont.

<i>Elephantorrhizaburkei</i>	Fabacea	Stem rhizome	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Elephantorrhiza elephantine</i>	Fabaceae	Stem rhizome	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Erythralysistemon</i>	Fabaceae	Bark	Vhembe	Oedema	Mahwasane et al 2013
<i>Guillemineadensa</i>	Amaranthaceae	Whole plant	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Gymnosporiasenegalensis</i>	Celastraceae	Root	Capricorn	Diarrhoea	Mathabe et al, 2006
Plant species	Family	Part used	District	Traditional uses	References
<i>Ilex mitis</i>	Aquifoliaceae	Root	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Indigoferadaleoides</i>	Fabaceae	Whole plant	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Lantana rugose</i>	Verbanaceae	Root/leaves	Vhembe	Fever	Mahwasane et al 2013
<i>Leonotisleonorus</i>	Lamiaceae	Leaves	Capricorn	Flu, colds	Moeng, 2010
<i>Lippiajavanica</i>	Verbanaceae	Leaves	Capricorn	Flu, colds	Moeng, 2010
<i>Mucunacoriacea</i>	Fabaceae	Root	Vhembe	Toothache	Mahwasane et al 2013
<i>Ozoroa insignis</i>	Anacardiaceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Piliostigmathonningii</i>	Fabaceae	Root/leaves/bark	Vhembe	Stomach pains	Mahwasane et al 2013
<i>Punicagranatum</i>	Punicaceae	Root	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Schkuhriapinnata</i>	Asteracea	Whole plant	Vhembe	Oedema	Mahwasane et al 2013
<i>Schotiabrachypetala</i>	Fabaceae	Stem bark	Capricorn	Flu, colds	Moeng, 2010
<i>Schotiabrachypetala</i>	Fabaceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Sclerocaryabirrea</i>	Anacardiceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Securidacalongepedunculata</i>	Polygalaceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Senna obtusifolia</i>	Fabaceae	Root	Vhembe	Swollen penis, Stomach ache	Mahwasane et al 2013

Table 3. Cont.

<i>Siphonochilusaethiopicus</i>	Zingiberaceae	Roots	Capricorn	Flu, colds	Moeng, 2010
<i>Solarumsupinum</i>	Solanaceae	Root	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Spirostachysafricana</i>	Eupobiaceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Spirostachysafricana</i>	Eupobiaceae	Stem bark	Vhembe	Colds, flu, fever	Mulaudzi et al, 2012
<i>Strigaasaiatica</i>	Orobanchaceae	Whole plant/root	Vhembe	Oedema	Mahwasane et al 2013
<i>Syzygiumcordatum</i>	Myrtaceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Syzygiumcordatum</i>	Myrtaceae	Leaves	Vhembe	Colds, fever	Mulaudzi et al, 2012
<i>Tecomacapensis</i>	Bignoniaceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Waltheriaindica</i>	Sterculiaceae	Whole plant	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Ximeniacaffra</i>	Olacaceae	Stem bark	Capricorn	Diarrhoea	Mathabe et al, 2006
<i>Ximeniacaffra</i>	Olacaceae	Leaves	Mopani	Eye ache	Chauke et al, 2015
<i>Zantedeschiaaethiopica</i>	Araceae	Root	Capricorn	Flu, colds	Moeng, 2010
<i>Zanthoxylumcapense</i>	Rutaceae	Root	Capricorn	Flu, colds	Moeng, 2010

CONCLUSION

Traditional medicinal plays a vital role in meeting the health care needs of people in under-resourced areas such as the Limpopo province of South Africa. Plant species from different families are widely used to treat inflammation associated with several diseases such as T2DM, TB, STD's, and cancer. However, the most frequently used plants species for treating these ailments belongs to the Fabaceae family.

Currently, available information on the pharmacological activities of extracts of the plant species in the Fabaceae family includes antimicrobial and anti-inflammatory activities in invitro assay systems. Considering the wide range of medicinal plants used to treat inflammation-related condition,

with same plant species often used to treat different ailments, it is imperative to continuously record and compile an ethno-medicinal list. The list provided in this review is not exhaustive, but it is an attempt at providing a comprehensive list of plant species used to treat inflammation-related conditions in the Limpopo province. Inflammation is involved in the pathogenesis and progression of many debilitating diseases such as arthritis, TB and rheumatic pain, hence it is not surprising that same plant species is often used to treat different diseases.

One of the findings in this review is the dearth of information on the traditional uses and exploitation of a widely known plant species with demonstrated anti-inflammatory activities. Extracts from the secondary tubers of *H.procumbens* are well known for

their anti-inflammatory activities. The plant species is available in the province, but little is known about its therapeutic uses, cultivation, harvesting or exploitation. Harvesting and exploitation and exportation of extracts of the plant species could potentially be providing the much needed income for the people in the areas of the Limpopo province where this plant species is available.

Conflicts of interests

There are no conflicts of interest to be declared.

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REFERENCES

- Adebayo SA, Dzoyem JP, Shai LJ, Eloff JN. (2015). The anti-inflammatory and antioxidant activity of 25 plant species used traditionally to treat pain in southern African. *BMCCompl Altern Med*, 15(1); 159-168.
- Aremu AO, Moyo M, Amoo SO, vanStaden J. (2015). Ethnobotany, therapeutic value, phytochemistry and conservation status of *Bowiea volubilis*: A widely used bulbous plant in southern Africa. *Journal of Ethnopharmacology*, 174; 308–316.
- Botha J and Shackleton C. (2004). Market Profiles and trade in medicinal plants in the Lowveld, South Africa. *Environmental Conservation*, 31(01); :38–46.
- Brendler T, Gruenwald J, Ulbricht C, Basch E. (2006). Natural Standard Research Collaboration. Devil's Claw (*Harpagophytum procumbens* DC): an evidence-based systematic review by the Natural Standard Research Collaboration. *J Herb Pharmacother*, 6(1): 89-126.
- Brien S, Lewith GT, McGregor G. (2006). Devil's Claw (*Harpagophytum procumbens*) as a treatment for Osteoarthritis: A review of efficacy and safety. *J Altern Compl Med*, 12(10): 981-93.
- Cameron M, Gagnier JJ, Little CV, Parsons TJ, Blümle A, Chrubasik S. (2009). Evidence of effectiveness of herbal medicinal products in the treatment of arthritis. Part I: Osteoarthritis. *Phytother Resear*, 23(11): 1497-515.
- Canal AM, Pezzone N, Cataldi A, Zumarraga M, Larzabal M, Garbaccio S, Fernandez A, Dominguez L, Aranaz A, Rodriguez-Bertos A. 2016. Immunohistochemical detection of pro-inflammatory and anti-inflammatory cytokines in granulomas in cattle with natural *Mycobacterium bovis* infection. *Resear Vet Sci*. doi: 10.1016/j.rvsc.2016.10.006.
- Chauke MA, Shai LJ, Mogale MA, Tshishikawe MP, Mokgotho MP. (2015). Medicinal plant use in the Mopani district, Limpopo province, South Africa. *Afr J Trad Compl Altern Med*, 12(3); 9-26.
- Conrozier T, Mathieu P, Bonjean M, Marc JF, Renevier JL, Balblanc JC. 2014. A complex of three natural anti-inflammatory agents provides relief of osteoarthritis pain. *Altern Ther Health Med*, 20 Suppl 1:32-7.
- Falconer CL, Cooper AR, Walhin JP, Thompson D, Page AS, Peters TJ, Montgomery AA, Sharp DJ, Dayan CM, Andrews RC. 2012. Sedentary time and markers of inflammation in people with newly diagnosed type 2 diabetes. *Nutr Metab Cardiovascul Dis*, 24, 956-962.
- Gao T, Yao H, Song J, Liua C, Zhua Y, Ma X, Pang X, Xu H, Chen S. (2010). Identification of medicinal plants in the family Fabaceae using a potential DNA barcode ITS2. *J Ethnopharmacol*, 130; 116–121.
- Giese S, Pelchen-Matthews A, and Marsh M. (2016). HIV–The cell Biology of virus infection and replication. *Encycl Cell Biol*, 2; 828-838.
- Havinga RM, Hart A, Putscher J, Prehler S, Buchmann C, Vogl CR. (2010). *Tamarindus indica* L. (Fabaceae): Patterns of use in traditional African medicine. *J Ethnopharmacol*, 127; 573–588.
- Huang ZY, Stabler T, Pei y FX, Kraus VB (2016). Both systemic and local lipopolysaccharide (LPS) burden are associated with knee OA severity and inflammation. *Osteoarthritis and Cartilage* 24; 1769-1775.
- Kaennakam S, Siripong P, Tip-pyang S. (2015). Velucarpins A–C, three new pterocarpans and their cytotoxicity from the roots of *Dalbergia velutina*. *Fitoterapia*, 105; 165–168.
- Liu C, Feng X, Li Q, Wang Y, Li Q, Hua M. (2016). Adiponectin, TNF- α and inflammatory cytokines and risk of type 2 diabetes: A systematic review and meta-analysis. *Cytokine* 86; 100–109.
- Luseba D and Van Der Merwe D (2006). Ethnoveterinary medicine practices among Tsonga speaking people of South Africa. *Onderstepoort Journal of Veterinary Research*, 73; :115–122.
- Lyadova I. 2012. Inflammation and immune pathogenesis of Tuberculosis progression. *Understanding Tuberculosis—Analyzing the origin of Mycobacterium tuberculosis pathogenicity*. Dr. Pere-Joan Cardona (Ed.), ISBN: 978-953-307-942-4.
- Mahwasane ST, Middleton L, Boaduo N. (2013). An ethnobotanical survey of indigenous knowledge on plants use by the traditional healers of the Lwamondo area, Limpopo province, South Africa. *South Afr J Botany*, 88; 69-75.
- Majeed S, Mir SA, Sadhna Sharma S. 2015. Dual role of inflammation in prognosis and prevention of Tuberculosis. *J Clin Cell Immunol*, 6: 2 doi:10.4172/2155-9899.1000298.
- Maroyi A, Mosina GKE (2014). Medicinal plants and traditional practices in peri-urban domestic gardens of the Limpopo province, South Africa. *Indian Journal of Traditional Knowledge*, 13(4); 665-672.
- Mashabane LG, Wessels DCJ and Potgieter MJ. (2001). The utilisation of *Colophospermum mopane* by the Vatsonga in the Gazankulu region (eastern Northern Province, South Africa). *South African Journal of Botany*, 67; 199-205.
- Mathabe MC, Nikolova RV, Lall N, Nyazema NZ. (2006). Antibacterial activities of medicinal plants used for the treatment of diarrhoea in Limpopo province, South-Africa. *J Ethnopharmacol*, 105; 286-293.
- Mncwani N, Chen W, Vermaak I, Viljoen AM, Gericke N. (2012). Devil's Claw—A review of the ethnobotany, phytochemistry and biological activity of *Harpagophytum procumbens*. *J Ethnopharmacol*, 143; 755–771.
- Moeng TE. (2010). An investigation into the trade of medicinal plants by muthi shops and street vendors in the Limpopo province, South Africa. MSc thesis, University of Pretoria, Pretoria.
- Mulaudzi RE, Ndhlela AR, Kulkarni MG, van Staden J. (2012). Pharmacological properties and protein binding capacity of phenolic extracts of some Venda medicinal

plants used against cough and fever. *J Ethnopharmacol*, 143; 185-193.

Perruccio AV, Chandran y V, Power JD, Kapoor y M, Mahomed NN, Gandhi R. (2016). Systemic inflammation and painful joint burden in osteoarthritis: a matter of sex? *Osteoarthritis and Cartilage*. <http://dx.doi.org/10.1016>.

Rahman AHM, Parvin MIA (2014). Study of medicinal uses on Fabaceae Family at Rajshahi, Bangladesh. *Resear Plant Sci*, 2 (1); 6-8.

Semenya S, Potgieter M, Erasmus L. (2012b). Ethnobotanical survey of medicinal plants used by Bapedi healers to treat Diabetes mellitus in the Limpopo province, South Africa. *J Ethnopharmacol*, 141; 440-445.

Semenya S, Potgieter M, Tshisikhawe M, Shava S, Maroyi A. (2012). Medicinal utilization of exotic plants by Bapedi traditional healers to treat human ailments in Limpopo province, South Africa. *J Ethnopharmacol*, 144; 646-655.

Statistics South Africa.(2016). Accessed online at www.statssa.gov.za on the 15th of July 2016.

Sun J and Kato I. (2016). Gut microbiota, inflammation and colorectal cancer. *Genes Dis*, 3; 130-143.

Sun X, He C, Yang X, Guo L, Li X. (2015). Isoflavones and pterocarpan from *Caraganachangduensis*. *Biochem System Ecol*, 61; 516-519.

Tan Y, An N, Li Y, Cheng S, Zhang J, Zhang X, Li Y.

(2016). Two new isoflavonoid glucosides from the roots of *Achyranthes bidentata* and their activities against nitric oxide production. *Phytochem Lett*, 17; 187–189.

Tshisikhawe MP, Van Rooyen MW, Bhat RB (2012). An evaluation of the extent and threat of bark harvesting of medicinal plant species in the Venda Region, Limpopo Province, South Africa. *International Journal of Experimental Botany*, 81; 89-100.

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