Review of: "The pros and cons of utilizing crude herbal preparations as opposed to purified active ingredients, with emphasis on the COVID pandemic"

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A well written argument with a lot to think about. The use of herbal treatments with hundreds, if not thousands of year worth of ‘clinical trials’ should not be delegated to the wayside because they do not meet RTC standards. Let us not forget that drugs out on the market today that have passed RTC standards are full of warnings about side effects. Enough to drive many rational people away from using them in the first place. The system for sure has saved many lives, but it is not perfect. That is not to say that we need not consider what to take on a case by case perspective when considering the use of herbal preparations as well. When all else fails, or as a reliable alternative, the majority of the planet's population still look to plant based remedies. Plants in the genus Artemisia have a very long history of effective use. Herbal treatments with species of this plant have a wide range of uses as antiparasitic and antiviral agents, to name just a few. Animals in nature also use many plants for some of the same uses humans do, further establishing the long period of ‘clinical trials’. In this case natural selection being the judge of its efficacy (Huffman 2021). This is not to say that patients should self-medicate without consulting an experienced practitioner. In the 1918 Spanish flu pandemic, the Washo First Nation Peoples in norther Arizona used Lomatium dissectum (cough root, desert parsley, Indian Balsam) to treat this respiratory disease that took the lives of hundreds of thousands world-wide. It was noted by western doctors in the region, that not a single individual on the reservation was known to have died from that flu, where in regions in the US where this plant was not available other First Nation people did succumb to the flu (Buhner 2021). A go to herb in the Washo pharmacopeia, because they had a long history of good success with this plant as a treatment for general respiratory illness, they were not hesitant to use it treat this newly emergent disease. No wonder, the plant contains a wide spectrum of active constituents (furanocoumarins; flavonoids; ichthyotoxic tetronic acids; Z- ligustilide; terpenes, sesquiterpenes, ascorbic acid, essential oil compounds.). The known properties are antibacterial, antimicrobial, antiseptic, antiviral, expectorant and immune stimulant (Phytomed 2015). The compounds are found across the plant kingdom in plants recognized in a variety of herbal treatment traditions around the world. There are many such plants out there with proven track records and solid pharmacological research on them. In this respect Western medicine needs to some catching up to do, the traditional human societies and the rest of the animal kingdom can help (Huffman).

References

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