

Review Article

Medicinal Properties of *Clinacanthus nutans*: A review

Bann Siang Yeo¹, Yiing Jye Yap¹, Rhun Yian Koh¹, Khuen Yen Ng², Soi Moi Chye^{1*}

¹School of Health Sciences, International Medical University, Bukit Jalil, 57000 Kuala Lumpur, ²School of Pharmacy, Monash University Malaysia, Bandar Sunway, 47500 Selangor, Malaysia

*For correspondence: **Email:** chye_soimoi@imu.edu.my; **Tel:** +603-27317220

Sent for review: 27 October 2016

Revised accepted: 18 January 2018

Abstract

To date, medicinal plants are the most important resources in the discovery of new drugs. *Clinacanthus nutans* has been used traditionally in Thailand folk medicine to promote overall well-being. A few biological constituents of *C. nutans* and their physiological functions have been evaluated in previous studies. However, the mechanisms of action, potency and efficacy of the plant are still not well understood. In this review, the pharmacological properties of *C. nutans* such as anti-inflammatory effects, anti-proliferation, anti-venom and anti-bacterial activities, and their underlying mechanisms of action are presented and discussed.

Keywords: *Clinacanthus nutans*: Anti-inflammatory, Anti-proliferation, Anti-venom, Anti-bacterial properties

This is an Open Access article that uses a funding model which does not charge readers or their institutions for access and distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>) and the Budapest Open Access Initiative (<http://www.budapestopenaccessinitiative.org/read>), which permit unrestricted use, distribution, and reproduction in any medium, provided the original work is properly credited.

Tropical Journal of Pharmaceutical Research is indexed by Science Citation Index (SciSearch), Scopus, International Pharmaceutical Abstract, Chemical Abstracts, Embase, Index Copernicus, EBSCO, African Index Medicus, JournalSeek, Journal Citation Reports/Science Edition, Directory of Open Access Journals (DOAJ), African Journal Online, Bioline International, Open-J-Gate and Pharmacy Abstracts

INTRODUCTION

Complementary and alternative medicine (CAM) is becoming popular nowadays. It encompasses a wide range of practices, knowledge and treatments which are not related to modern medical profession. These include massage therapy, acupuncture, chiropractic and herbal foods [1-6]. Countries in which CAM is widely used include Southeast Asia, United States, United Kingdom and Australia [7]. Studies indicate that CAM is mostly used in treatment and management of chronic diseases but less used in depressive disorders [3]. It has some advantages over conventional medicines. For example, herbal products are cheaper than conventional treatments [8,9]. Although the use

of CAM is popular amongst patients, there is lack of scientific evidence on its clinical effectiveness. In addition, safety issues related to CAM remain of concern to scientists and health care providers [9,10].

Clinacanthus nutans is a medicinal plant and a member of the family Acanthaceae. The plant is popular in many tropical countries such as Thailand, Malaysia and Indonesia due to its ready availability and medicinal properties. The plant has different names based on the native languages of the countries. In Thailand, *C. nutans* is recognized as *Phaya Yo* or *Phaya Plong Thong* whereas it is named *Belalai Gajah* or *Sabah Snake Grass* in Malaysia. It is a short shrub with hairy branches and small oblong

leaves. Six to seven pairs of side veins are found under the leaves while white internodes and vertical strips are distributed throughout the stem. The branches are topped with dull red-coloured flowers with green base and yellow streaks on the lower lips [11-15].

In Thailand, *C. nutans* leaves are traditionally used for treating skin diseases and bites from snakes and insects [13,16]. A topical cream containing ethanolic extract of *C. nutans* leaves has been used in the treatment of viral infections such as herpes genitalis, varicella-zoster and herpes simplex [16-19]. Moreover, *C. nutans* is used as an anti-inflammatory agent to relieve swelling [12,20,21]. A cross-sectional study in Malaysia has discovered that *C. nutans* is able to act as an anti-diabetic agent [22]. Due to the pharmaceutical properties of *C. nutans*, the Thai Ministry of Public Health has shortlisted it as one of the medicinal plants for public healthcare [23]. Moreover, a survey of ethnobotanical applications of medicinal plants showed that *C. nutans* ranks amongst the top 5 commonly used plants in Singapore [24]. Previous studies have shown the presence of stigmaterol, β -sitosterol, lupeol, myricyl alcohol, botulin, sulphur-containing glycosides and glycolglycero-lipids in *C. nutans* [16,25-29]. In addition, six C-glycosyl flavones have been isolated and characterised from the leaves and stem of *C. nutans*, while chlorophyll derivatives (phaeophytins) were isolated from the leaves [13,15]. Some cerebrosides and glycerol derivatives have also been isolated from the leaves of *C. nutans* [16]. Reports from previous studies suggest that *C. nutans* is safe for consumption. Ames test revealed no evidence of mutagenic or carcinogenic effects after exposure to aqueous extract of *C. nutans* leaves [30]. No mortality or morbidity was found in animals following single and repeated dose administrations of the plant extract [30]. Furthermore, studies on the toxic effect of *C. nutans* on human gingival fibroblasts showed that the cells survived well after exposure to the plant extract [31]. In this review, the medicinal properties of *C. nutans* and its mechanism of action are discussed.

CHEMICAL CONSTITUENTS OF *C. NUTANS*

Recently, Chelyn *et al* conducted a study on the flavone C-glycoside content of the leaves of *C. nutans* from different geographical locations in Malaysia [13]. Preliminary thin layer chromatography screening of the samples demonstrated two distinguishable green and yellow fluorescent bands. Flavone C-glycosides with apigenin backbone were found in the green color band, comprising shaftoside, isovitexin and

vitexin. On the other hand, the yellow color band was identified as flavone C-glycosides containing luteolin backbone, consisting of isoorientin and orientin. Among all the compounds identified, only shaftoside was present in all the samples tested, regardless of geographical location from where the samples were collected. The other compounds were present in samples from specific geographical regions. This might be due to differences in climate and soil, and differences in stages of maturity of the plants harvested. Sample handling processes such as drying temperature and methods, as well as storage conditions might also affect the composition of the flavonoids. Since shaftoside is the only stable flavonoid in all samples, it has been suggested for use as a chemical marker for *C. nutans* raw material [13]. In another study, Sakdarat *et al* reported the presence of chlorophyll derivatives in chloroform extract of leaves of *C. nutans* [15]. In that study, compound 1, a dark green amorphous solid was identified as 13^2 -hydroxy-(13^2 -S)-phaeophytin-b through proton (^1H) and carbon-13 (^{13}C) nuclear magnetic resonance (NMR). Compound 2, which appeared as a green powder, displayed signals corresponding to amine, ester and hydroxyl functional groups in the infrared (IR) spectrum, indicating that it is a 13^2 -hydroxy-(13^2 -S)-phaeophytin-a. Compound 3, identified as 13^2 -hydroxy-(13^2 -R)-phaeophytin a by IR, ^1H NMR and ^{13}C NMR, was closely equivalent to compound 2. Results from antiviral tests showed that these compounds inhibited HSV activity [15].

Chromatographic purification of ethanol extract of *C. nutans* showed that cerebrosides appeared as a colorless solids while monoacylmonogalactosylglycerol was in pale yellow color. The cerebrosides had a glycosphingolipid structure, with sugar moieties, amide function and long chain aliphatic and olefinic groups. Methanolysis of the sample yielded methyl glucoside, trihydroxy long-chain base and fatty acid methyl esters, which further confirmed the presence of cerebrosides. Sugar and glycerol moieties were present in the monoacylmonogalactosylglycerol. The sugar was a β -D-galactopyranose while the long chain fatty acid was linolenic acid. These compounds did not exhibit anti-HSV and anti-inflammatory activities [16]. The chemical constituents of ethanolic extract of the aerial parts of *C. nutans* and their bioactivities have been reported [32]. Four new cinamides and 2-*cis*-entadamine-A showed antiviral activities against dengue virus, as well as anti-inflammatory and immune-protective activities.

Based on the structure of the active constituents of *C. nutans*, Janwitayanuchit *et al* synthesized

some 1,2-O-diacyl-3-O- β -glycopyranosyl-*rac*-glycerols in order to investigate the stereochemical influence of C-2 in the glycerol backbone on anti-HSV property [33]. It was shown that the presence of olefinic fatty acyl moieties produced higher inhibitory effects against HSV-1 and HSV-2. However, the sugar moiety (glucose or galactose) and stereochemistry at C-2 had no significant effect on anti-viral activity.

A novel polysaccharide-peptide compound has been isolated from *C. nutans* extract. The complex comprised about 87.25 % carbohydrate and 9.37 % protein. Further analysis revealed that the complex was composed of D-glucose, L-arabinose, D-mannose, D-galactose and L-rhamnose [34]. The phytochemical composition of the plant changes as a function of age. The levels of total flavonoids and total phenolic compounds were highest in 6-month-old buds [35]. The flavonoids isolated in that study included catechin, quercetin, kaempferol, luteolin, as well as phenolic acid, caffeic acid and gallic acid [35].

MEDICINAL PROPERTIES OF *C. NUTANS*

Anti-viral properties

Herpes simplex virus (HSV) is classified into two antigenic types: HSV-1 and HSV-2. Both viruses contain linear and double-stranded DNA molecules with approximately 150 kbp. Infection with HSV-1 causes cold sores, encephalitis, corneal damage, blindness and herpetic whitlow; whereas genital herpes which is a common sexually transmitted disease is mainly caused by HSV-2 [36]. Currently, there are various types of antiviral drugs available in the market for the management of HSV infections, the most commonly used of which is AcyclovirTM (ACV). However, studies have shown that the presence of mutated or resistant strains of HSV affects the efficacy of ACV [37]. Hence, CAM can be explored as a potential treatment for HSV infections.

In Thai folk medicine, *C. nutans* is commonly applied onto viral lesions or rashes on the skin. It has been demonstrated that the size of virus plaque became smaller after incubation with *C. nutans* extract, suggesting that *C. nutans* extract could affect the intracellular activity of HSV-2 [20]. Some bioactive constituents of *C. nutans* such as polyphenolics, glycosides and terpenes have been identified as promising anti-HSV agents [12, 16]. The anti-HSV activity was further evident after it was shown that *C. nutans* leaf extracts produced anti-HSV-1 and HSV-2

properties [12]. The plaque reduction assay revealed that *n*-hexane extract of *C. nutans* had a stronger anti-HSV-1 activity than dichloromethane extract or methanol extract. On the other hand, the three extracts produced only slight anti-HSV-2 activities. These findings demonstrate the potential of *C. nutans* as an antiviral agent.

In another study, Sakdarat *et al* tested the anti-viral activities of three active compounds isolated from *C. nutans* [15]. Inhibition of HSV was exhibited with 132-OH-(132-S)-phaeophytin, 132-OH-(132-R)-phaeophytin-a and 132-OH-(132-S)-phaeophytin-a at concentrations of 1.96, 3.11 and 3.11 μ M, respectively. In the pre-viral entry stage, 100% inhibition of viral activity was produced by all the tested compounds. However, at the post-viral entry stage, viral activity was inhibited by 30 %. Thus, the three compounds inhibited HSV-1 infection before the virus entered the host cell. These findings indicate that the compounds might be acting through interference with the viral envelope structure that is required for adsorption and entry of the virus into the host cells. Extracts of *C. nutans* might also have a direct inactivation action on the virus, thereby inhibiting its activity [20].

Clinical trials have been carried out to evaluate the antiviral efficacy of *C. nutans* extracts. A meta-analysis revealed that the use of *C. nutans* cream against herpes genitalis caused by HSV-2 demonstrated full recovery and 100 % crusting relative to placebo [19]. In addition, combination of *C. nutans* extract and ACV produced synergistic antiviral results [15,19]. In another study, a randomized, placebo-controlled trial demonstrated that when used topically, *C. nutans* extract improved healing of VZV lesions and reduced pain scores more rapidly in the treated group [38]. A cream formulated with *C. nutans* was also found to be effective in the treatment of herpes zoster, in another study [39]. Although *C. nutans* extract was effective in the treatment of VZV infection, its mode of action still remains unclear. Hence, further studies should be conducted to elucidate its mechanism of action. *C. nutans* extract has also been shown to be protective against human papillomavirus infection through prevention of viral particle binding to the cell receptor [40,41]. In addition, ethanolic extract of the aerial parts of *C. nutans* has been shown to be moderately effective against the dengue virus at a concentration of 31.04 μ g/mL [32,42].

Anti-inflammatory activity

Inflammation is an immune response which

eliminates pathogens such as microbes from the body. It is a protective mechanism which helps to get rid of infections and injuries via migration of leukocytes and proteins from circulation to the infected or damage sites. Consequently, this defence involves polymorphonuclear neutrophils, especially with respect to acute and chronic inflammations. Thus, dysregulation of neutrophil functions leads to the production of pro-inflammatory mediators, toxic reactive oxygen species and release of myeloperoxidase (MPO) and elastase, resulting in inflammation-induced tissue lesions [43,44].

The anti-inflammatory effect of *C. nutans* leaf extract on neutrophils has been demonstrated using ear and paw edema rat models [21]. In addition, inhibition of neutrophil marker enzyme, MPO activity was found to be associated with reduced neutrophil migration. Furthermore, *C. nutans* exerted concentration-dependent inhibitory effects on chemotaxis and chemokinesis of neutrophils. This in turn attenuated superoxide anion generation as well as the release of MPO and elastase. The anti-inflammatory effect of *C. nutans* was further tested on recurrent aphthous stomatitis [45]. In a clinical evaluation, patients were instructed to apply the *C. nutans* in orabase to the lesion 4 times daily. Results obtained showed that *C. nutans* treatment shortened the healing time when compared to placebo, although the duration of pain was not affected [45]. In a docking study, some active phytochemical constituents of *C. nutans* were shown to bind to human neutrophil elastase enzymes involved in inflammation [46]. These compounds included β -sitosterol, clinacoside A-C, cycloclinacoside A1, lupeol, shaftoside, vitexin, isovitexin, as well as orientin and isoorientin. Isovitexin and isoorientin showed preference for HNE, nitric oxide synthase, squalene synthase, xanthine oxidase, HNE, and matrix metalloproteinases II and III. On the other hand, clinacoside B produced the lowest binding energy for all the candidate enzymes except xanthine oxidase and squalene synthase, while orientin and vitexin docked and bound to nitric oxide synthase and HNE only. All the compounds were predicted to have inhibitory potential against cytochrome P4502D6, with the exception of isoorientin and orientin.

Mai *et al* elucidated the mechanism involved in the anti-inflammatory property of *C. nutans* through the application of lipopolysaccharide (LPS)-treated RAW264.7 macrophages and human embryonic kidney cells transfected with Toll-like receptor-4 (TLR-4) [47]. Extracts of *C. nutans* reduced the expression of nitric oxide (NO) and cytokines, and also inhibited the

expression of LPS-triggered TLR-4 inflammatory proteins like ERK, p65, p38, c-Jun N-terminal kinases and interferon regulatory factor 3.

Antioxidant properties

Chemotherapy drugs and radiotherapy may induce oxidative stress resulting in cell damage. These are unwanted side effects of cancer therapy which may be reduced by compounds with antioxidant properties. *C. nutans* extracts are potential cytoprotective antioxidant agents. In a comparative study of antioxidant properties of various solvent extracts of *C. nutans*, higher DPPH and galvinoxyl radical scavenging activities were obtained with CHCl_3 when compared with methanol and aqueous extracts, while the aqueous extract exhibited the highest NO radical scavenging activity [14]. A comparative study of DPPH radical scavenging activity between young and old buds of *C. nutans* revealed that buds aged 12 months were more active than 6 month-old, with IC_{50} values of 64.6 and 73.5 $\mu\text{g/mL}$, respectively [35]. However, the younger buds had higher activity in FRAP assay. In another comparative *in vitro* study, ethyl acetate and ethanol extracts of *C. nutans* were shown to have higher DPPH radical scavenging, oxygen radical absorbing and β -carotene bleaching potential than extracts from dichloromethane and hexane [48].

Anti-cancer properties

Chloroform extract of *C. nutans* has been shown to be capable of inhibiting the proliferation of some human cancer cells, when compared to the aqueous and methanol extracts which exerted relatively weak inhibitory effects [14]. Interestingly, the cytotoxic effect and percentage of inhibition were significantly lower in endothelial cells exposed to the three extracts [14]. The bioactive component of *C. nutans*, CNP-1-2 inhibited the growth of human gastric cancer cells SGC-7901 [34]. Similarly, it has been demonstrated that extracts of 6-month-old *C. nutans* buds exhibited significant anticancer activity against HeLa cancer cells [35]. In addition, *C. nutans* extracts have produced anti-carcinogenic effects against MCF-7 cells [48]. These results show that the extracts of *C. nutans* exert cancer-inhibitory properties, thereby supporting their use in cancer treatment.

Huang *et al* showed that *C. nutans* ethanolic extract exhibited potent tumoricidal effect in tumour-bearing mice [49]. ICR mice injected with HepA hepatocarcinoma tumour cells received *C. nutans* treatment (3 and 10 mg/kg) for 10 days, resulting in significant reduction in tumour size,

when compared to the untreated group. The hepatoma cells were in apoptotic state after the treatment. This was confirmed by increased Bax and Caspase-3 protein expressions in the cells. Furthermore, the hepatoma cells showed reduced proliferation with de-activation of Akt protein. Although *C. nutans* extracts inhibit various types of cancer, studies have shown that they are not toxic to hypoxic human Saos-2 osteosarcoma cells, which are known to be resistant to radiotherapy and chemotherapy [50].

Anti-bacterial activities

Acne develops when bacteria such as *Propionibacterium acnes* and *Staphylococcus epidermis* multiply. *Propionibacterium acnes* is a common skin anaerobe behind or in the inspissated sebum. Scientists believe that *P. acnes* could produce certain organic acids that trigger the inflammatory response in acne [43]. Chomnawang *et al* incubated the two microbial strains with *C. nutans* extract and found that the growth of the bacteria was not significantly inhibited [51]. Similar results were obtained by Yang *et al.*, who however reported that the extract inhibited the growth of *Staphylococcus aureus* and *Escherichia coli* with MIC of 12.5 mg/mL [52].

Anti-venom activity

C. nutans is a popular anti-snake venom in Thailand and Malaysia. However, it has been reported that aqueous extract of *C. nutans* had no inhibitory effect on *Naja siamensis* bite-induced neuromuscular transmission failure [53]. In another study, it was shown that extracts of *C. nutans* might prevent fibroblast cell lysis caused by *Heterometrus laoticus* scorpion venom [54], thus supporting the use of *C. nutans* as an antidote against scorpion venom.

Immuno-modulatory properties

C. nutans extract was found to enhance lymphocyte proliferation at the concentration range of 0.5 - 5 µg/mL [55]. However, it reduced the proliferation of lymphocyte at the concentration range of 1 - 5 mg/mL. At the higher concentration range of *C. nutans* extract, the activity of natural killer cells was significantly decreased while the level of IL-4 was enhanced. These results suggest the modulation of nonspecific cell-mediated immune responses, which might be useful in treating some viral infections.

Modulation of neurotransmission

Methanol extract of *C. nutans* leaves fed to Balb/c mice for 14 days activated acetylcholinesterase (AChE) and modulated cholinergic neurotransmission in mice kidney, liver, and heart [56].

Anti-nociceptive activity

Abdul Rahim *et al* showed that oral administration of methanol extract of *C. nutans* exerted both central and peripheral antinociceptive activities via activation of opioid receptors and modulation of L-arginine/NO-mediated pathway [57].

Neuro-protective effect

Studies have shown that *C. nutans* extract selectively inhibited histone deacetylase (HDAC)-1 and HDAC-6 expressions in neuronal cells, and also protected endothelial cells and astrocytes from hypoxic-induced cell death [58]. In addition, the *C. nutans* extract prevented neuronal cell death caused by oxygen/glucose deprivation [58].

Anti-hyperlipidemic effects

It has been demonstrated that water and methanolic extracts of *C. nutan* leaf lowered insulin, serum retinol binding protein-4 and fasting blood glucose in high fat and high cholesterol (HFHC)-fed rats [59]. Results obtained from studies of insulin resistance using homeostatic model showed that both extracts significantly improved insulin sensitivity in the HFHC-fed rats. The anti-hyperlipidemic effect of *C. nutans* was mediated through up-regulation of genes coding for phosphatidylinositol-3-phosphate, insulin receptor substrate, adiponectin receptor and leptin receptor [59]. The efficacies of aqueous and methanolic leaf extracts of *C. nutan* in attenuating oxidative stress were further tested in hyperlipidemia-induced rats [60]. The results indicated that both extracts increased the activities of serum antioxidant enzymes and upregulated hepatic antioxidant gene expressions.

FUTURE DIRECTION

Clinacanthus nutans is used as famous medicine among folklore healers in many countries. However, there is lack of scientific evidence on the effectiveness of this medical plant. Hence, a better understanding regarding the mechanisms of action of *C. nutans* is required. This will ultimately unveil the potential of *C. nutans* in the

treatment various diseases, and help in improving quality of life of patients. Although the role of *C. nutans* and its biological constituents have been widely documented in both *in vivo* and *in vitro* studies, the number of clinical trials carried out is limited. For example, the effect of *C. nutans* on skin rashes could be tested to further support the therapeutic efficiency of the plant. Furthermore, the possibility of *C. nutans* extracts being made into commercially available drugs remains to be explored.

CONCLUSION

Studies on the anti-viral, anti-inflammation, antioxidant, anti-cancer and anti-venom properties of *C. nutans* were reviewed in this paper. The progress of work *in vitro* and animal studies provides evidence that *C. nutans* could be explored further for its therapeutic potential.

DECLARATIONS

Acknowledgement

The authors sincerely thank all who supported this work.

Conflict of interest

No conflict of interest is associated with this work.

Contribution of authors

We declare that this work was done by the authors named in this article and all liabilities pertaining to claims relating to the content of this article will be borne by the authors.

REFERENCES

- Adams J, Hollenberg D, Lui C, Broom A. Contextualizing integration: A critical social science approach to integrative health care. *J Manipulative Physiol Ther* 2009; 32(9): 792-798.
- Chao M, Tippens K, Connelly E. Utilization of group-based, community acupuncture clinics: A comparative study with a nationally representative sample of acupuncture users. *J Altern Complement Med* 2012; 18(6): 561-566.
- Simon G, Cherkin D, Sherman K, Eisenberg D, Deyo R, Davis R. Mental health visits to complementary and alternative medicine providers. *Gen Hosp Psychiatry* 2004; 26(3): 171-177.
- Jacobson I, White M, Smith T, Smith B, Wells T, Gackstetter G, Boyko EJ, Millennium Cohort Study Team. Self-reported health symptoms and conditions among complementary and alternative medicine users in a large military cohort. *Ann Epidemiol* 2009; 19(9): 613-622.
- Wahlström M, Sihvo S, Haukkala A, Kiviruusu O, Pirkola S, Isometsä E. Use of mental health services and complementary and alternative medicine in persons with common mental disorders. *Acta Psychiatr Scand* 2008; 118(1): 73-80.
- Wu P, Fuller C, Liu X, Lee HC, Fan B, Hoven CW, Mandell D, Wade C, Kronenberg F. Use of complementary and alternative medicine among women with depression: Results of a national survey. *Psychiatr Serv* 2007; 58(3): 349-356.
- Steinsbekk A, Adams J, Sibbritt D, Jacobsen G, Johnsen R. The profiles of adults who consult alternative health practitioners and/or general practitioners. *Scand J Prim Health Care* 2007; 25(2): 86-92.
- Peng W, Sibbritt D, Hickman L, Adams J. Association between use of self-prescribed complementary and alternative medicine and menopause-related symptoms: A cross-sectional study. *Complement Ther Med* 2015; 23(5): 666-673.
- Goldman A, Cornwell B. Social network bridging potential and the use of complementary and alternative medicine in later life. *Soc Sci Med* 2015; 140: 69-80.
- Adams J. Utilising and promoting public health and health services research in complementary and alternative medicine: The founding of NORPHCAM. *Complement Ther Med* 2008; 16(5): 245-246.
- Smitinand T. Thai plant names. Bangkok: Prachachon Co. Ltd; 2001; p 140.
- Kunsorn P, Ruangrunsi N, Lipipun V, Khanboon A, Rungsihirunrat K. The identities and anti-herpes simplex virus activity of *Clinacanthus nutans* and *Clinacanthus siamensis*. *Asian Pac J Trop Biomed* 2013; 3(4): 284-290.
- Chelyn J, Omar M, Mohd Yousof N, Ranggasyam R, Wasiman M, Ismail Z. Analysis of flavone C-glycosides in the leaves of *Clinacanthus nutans* (Burm. f.) Lindau by HPTLC and HPLC-UV/DAD. *Scientific World J* 2014; 2014: 1-6.
- Yong YK, Tan JJ, Teh SS, Mah SH, Ee GC, Chiong HS, Ahmad Z. *Clinacanthus nutans* extracts are antioxidant with antiproliferative effect on cultured human cancer cell lines. *Evid Based Complement Alternat Med* 2013; 2013: 1-8.
- Sakdarat S, Shuyyrom A, Pientong C, Ekalaksananan T, Thongchai S. Bioactive constituents from the leaves of *Clinacanthus nutans* Lindau. *Bioorg Med Chem* 2009; 17(5): 1857-1860.
- Tuntiwachwuttikul P, Pootaeng-on Y, Phansa P, Taylor W. Cerebrosides and a monoacylmonogalactosylglycerol from *Clinacanthus nutans*. *Chem Pharm Bull* 2004; 52(1): 27-32.
- Vachirayonstien T, Promkhatkaew D, Bunjob M, Chueyrom A, Chavalittumrong P, Sawanpanyalert P. Molecular evaluation of extracellular activity of medicinal

- herb *Clinacanthus nutans* against herpes simplex virus type-2. *Nat Prod Res* 2010; 24(3): 236-245.
18. Jayvasu C, Balachandra K, Sangkitporn S, Bunjob M, Chavalittumrong P. Clinical trial in the treatment of genital herpes patients with *Clinacanthus nutans* extract. *Com Dis J* 1992; 18(3): 152-161.
 19. Kongkaew C, Chaikyunapruk N. Efficacy of *Clinacanthus nutans* extracts in patients with herpes infection: Systematic review and meta-analysis of randomised clinical trials. *Complement Ther Med* 2011; 19(1): 47-53.
 20. Yoosook C, Panpisutchai Y, Chaichana S, Santisuk T, Reutrakul V. Evaluation of anti-HSV-2 activities of *Barleria lupulina* and *Clinacanthus nutans*. *J Ethnopharmacol* 1999; 67(2): 179-187.
 21. Wanikiat P, Panthong A, Sujayanon P, Yoosook C, Rossi A, Reutrakul V. The anti-inflammatory effects and the inhibition of neutrophil responsiveness by *Barleria lupulina* and *Clinacanthus nutans* extracts. *J Ethnopharmacol* 2008; 116(2): 234-244.
 22. Ching S, Zakaria Z, Paimin F, Jalalian M. Complementary alternative medicine use among patients with type 2 diabetes mellitus in the primary care setting: A cross-sectional study in Malaysia. *BMC Complement Altern Med* 2013; 13(1): 148.
 23. National Drug Committee. List of herbal medicinal products A.D. 2006. Bangkok: Chuoornoom Sahakorn Karnkaset Publisher; 2006. P 59-61.
 24. Siew YY, Zareisedehzadeh S, Seetoh WG, Neo SY, Tan CH, Koh HL. Ethnobotanical survey of usage of fresh medicinal plants in Singapore. *J Ethnopharmacol* 2014; 155(3): 1450-1466.
 25. Mustapa A, Martin Á, Mato R, Cocero M. Extraction of phytocompounds from the medicinal plant *Clinacanthus nutans* Lindau by microwave-assisted extraction and supercritical carbon dioxide extraction. *Ind Crops Prod* 2015; 74: 83-94.
 26. Dampawan P, Huntrakul C, Reutrakul V. Constituents of *Clinacanthus nutans* and the crystal structure of LUP-20(29)-ENE-3-ONE. *J Sci Soc Thailand* 1977; 3: 14-26.
 27. Teshima K, Kaneko T, Ohtani K, Kasai R, Lhieochaiphant S, Picheansoonthon C, Yamasaki K. Sulfur-containing glucosides from *Clinacanthus nutans*. *Phytochemistry* 1998; 48(5): 831-835.
 28. Lin J, Yu H. Studies on the chemical constituents of Niu Xu Hua (*Clinacanthus nutans*). *Zhongyao* 1983; 14: 272-283.
 29. Teshim K, Kaneko T, Kasai K, Picheansoonthon S, Lhieochaiphant R, Yamasaki C. C-glycosyl flavones from *Clinacanthus nutans*. *Nat Med Note* 1997; 51: 557.
 30. Farsi E, Esmaili K, Shafaei A, Moradi Khaniabadi P, Al Hindi B, Khadeer Ahamed MB, Sandai D, Abdul Sattar M, Ismail Z, Abdul Majid AM, Abdul Majid AS. Mutagenicity and preclinical safety assessment of the aqueous extract of *Clinacanthus nutans* leaves. *Drug Chem Toxicol* 2016; 39(4): 461-473.
 31. Vajrabhaya LO, Korsuwannawong S. Cytotoxicity evaluation of *Clinacanthus nutans* through dimethylthiazol diphenyltetrazolium bromide and neutral red uptake assays. *Eur J Dent* 2016; 10(1): 134-138.
 32. Tu SF, Liu RH, Cheng YB, Hsu YM, Du YC, El-Shazly M, Wu YC, Chang FR. Chemical constituents and bioactivities of *Clinacanthus nutans* aerial parts. *Molecules* 2014; 19(12): 20382-20390.
 33. Janwitayanuchit W, Suwanborirux K, Patarapanich C, Pummangura S, Lipipun V, Vilaivan T. Synthesis and anti-herpes simplex viral activity of monoglycosyl diglycerides. *Phytochemistry* 2003; 64(7): 1253-1264.
 34. Huang D, Li Y, Cui F, Chen J, Sun J. Purification and characterization of a novel polysaccharide-peptide complex from *Clinacanthus nutans* Lindau leaves. *Carbohydr Polym* 2016; 137: 701-708.
 35. Ghasemzadeh A, Nasiri A, Jaafar HZ, Baghdadi A, Ahmad I. Changes in phytochemical synthesis, chalcone synthase activity and pharmaceutical qualities of Sabah Snake Grass (*Clinacanthus nutans* L.) in relation to plant age. *Molecules* 2014; 19(11): 17632-17648.
 36. Ryan K. Sherris Medical Microbiology. New York: McGraw-Hill Medical; 2010.
 37. Zakirova NF, Shipitsyn AV, Jasko MV, Prokofjeva MM, Andronova VL, Galegov GA, Prassolov VS, Kochetkov SN. Phosphoramidate Derivatives of acyclovir: Synthesis and antiviral activity in HIV-1 and HSV-1 models in vitro. *Bioorg Med Chem* 2012; 20(19): 5802-5809.
 38. Sangkitporn S, Chaiwat S, Balachandra K, Na-Ayudhaya TD, Bunjob M, Jayvasu C. Treatment of herpes zoster with *Clinacanthus nutans* (Bi Phaya Yaw) extract. *J Med Assoc Thai* 1995; 78(11): 624-627.
 39. Charuwichitratana S, Wongrattanapasson N, Timpatanapong P, Bunjob M. Herpes zoster: Treatment with *Clinacanthus nutans* cream. *Int J Dermatol* 1996; 35(9): 665-666.
 40. Sookmai W, Ekalaksananan T, Pientong C, Sakdarat S, Kongyingoes B. The anti-papillomavirus infectivity of *Clinacanthus nutans* compounds. *Srinagarind Med J* 2011; 26: 240-243.
 41. Aslam MS, Ahmad MS, Mamat AS. A review on phytochemical constituents and pharmacological activities of *Clinacanthus nutans*. *Int J Pharm Pharm Sci* 2015; 7(2): 30-33.
 42. Alam A, Ferdosh S, Ghafoor K, Hakim A, Juraimi AS, Khatib A, Sarker ZI. *Clinacanthus nutans*: A review of the medicinal uses, pharmacology and phytochemistry. *Asian Pac J Trop Med* 2016; 9(4): 402-409.
 43. Mitchell R, Robbins S. Pocket companion to Robbins & Cotran pathologic basis of disease. Philadelphia: Elsevier Saunders; 2011.
 44. Fujie K, Shinguh Y, Inamura N, Yasumitsu R, Okamoto M, Okuhara M. Release of neutrophil elastase and its role in tissue injury in acute inflammation: Effect of the elastase inhibitor, FR134043. *Eur J Pharmacol* 1999; 374(1): 117-125.
 45. Timpawat S, Vajrabhaya L. Clinical evaluation of *Clinacanthus nutans* Lindau in orabase in the treatment

- of recurrent aphthous stomatitis. *Mahidol Dent J* 2013; 14(1): 10-16.
46. Narayanaswamy R, Isha A, Wai LK, Ismail IS. Molecular docking analysis of selected *Clinacanthus nutans* constituents as xanthine oxidase, nitric oxide synthase, human neutrophil elastase, matrix metalloproteinase 2, matrix metalloproteinase 9 and squalene synthase inhibitors. *Pharmacogn Mag* 2016; 12(Suppl 1): S21-S26.
 47. Mai CW, Yap KS, Kho MT, Ismail NH, Yusoff K, Shaari K, Chin SY, Lim ES. Mechanisms underlying the anti-inflammatory effects of *Clinacanthus nutans* Lindau extracts: Inhibition of cytokine production and Toll-like receptor-4 activation. *Front Pharmacol* 2016; 7:7.
 48. Che Sulaiman IS, Basri M, Chan KW, Ashari SE, Fard Masoumi HR, Ismail M. In vitro antioxidant, cytotoxic and phytochemical studies of *Clinacanthus nutans* Lindau leaf extracts. *Afr J Pharm Pharmacol* 2015; 9(34): 861-874.
 49. Huang D, Guo W, Gao J, Chen J, Olatunji JO. *Clinacanthus nutans* (Burm. f.) Lindau ethanol extract inhibits hepatoma in mice through upregulation of the immune response. *Molecules* 2015; 20(9): 17405-17428.
 50. Liew SY, Stanbridge EJ, Yusoff K, Shafee N. Hypoxia affects cellular responses to plant extracts. *J Ethnopharmacol* 2012; 144(2): 453-456.
 51. Chomnawang M, Surassmo S, Nukoolkarn V, Gritsanapan W. Antimicrobial effects of Thai medicinal plants against acne-inducing bacteria. *J Ethnopharmacol* 2005; 101(1-3): 330-333.
 52. Yang HS, Peng TW, Madhavan P, Abdul Shukkoor MS, Akowuah GA. Phytochemical analysis and antibacterial activity of methanolic extract of *Clinacanthus nutans* leaf. *Int J Drug Dev & Res* 2013; 5(3): 349-355.
 53. Cherdchu C, Poopyruchpong N, Adcharyasucha R, Ratanabanangkoon K. The absence of antagonism between extracts of *Clinacanthus nutans* Burm. and *Naja naja siamensis* Venom. *Southeast Asian J Trop Med Public Health* 1977; 8(2): 249-254.
 54. Uawonggul N, Chaveerach A, Thammasirak S, Arkaravichien T, Chuachan C, Daduang S. Screening of plants acting against *Heterometrus laoticus* scorpion venom activity on fibroblast cell lysis. *J Ethnopharmacol* 2006; 103(2): 201-207.
 55. Sriwanthana B, Chavalittumrong P, Chompuk L. Effect of *Clinacanthus nutans* on human cell-mediated immune response in vitro. *Thai J Pharm Sci* 1996; 20(4): 261-267.
 56. Lau KW, Lee SK, Chin JH. Effect of the methanol leaves extract of *Clinacanthus nutans* on the activity of acetylcholinesterase in male mice. *J Acute Dis* 2014; 3(1): 22-25.
 57. Abdul Rahim MH, Zakaria ZA, Mohd Sani MH, Omar MH, Yakob Y, Cheema MS, Ching SM, Ahmad Z, Kadir AA. Methanolic extract of *Clinacanthus nutans* exerts antinociceptive activity via the opioid/nitric oxide-mediated, but cGMP-independent, pathways. *Evid Based Complement Alternat Med* 2016; 2016: 1494981.
 58. Tsai HD, Wu JS, Kao MH, Chen JJ, Sun GY, Ong WY, Lin TN. *Clinacanthus nutans* protects cortical neurons against hypoxia-induced toxicity by downregulating HDAC1/6. *Neuromolecular Med* 2016; 18(3):274-282..
 59. Sarega N, Imam MU, Esa NM, Zawawi N, Ismail M. Effects of phenolic-rich extracts of *Clinacanthus nutans* on high fat and high cholesterol diet-induced insulin resistance. *BMC Complement Altern Med* 2016; 16(1): 88.
 60. Sarega N, Imam MU, Ooi DJ, Chan KW, Md Esa N, Zawawi N, Ismail M. Phenolic rich extract from *Clinacanthus nutans* attenuates hyperlipidemia-associated oxidative stress in rats. *Oxid Med Cell Longev* 2016; 2016: 4137908.