

Contents lists available at ScienceDirect

Journal of Ethnopharmacology

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Review on plants with CNS-effects used in traditional South African medicine against mental diseases

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ABSTRACT ARTICLE INFO Article history: The majority of the population in South Africa use traditional health care to treat various menta<mark>l</mark> conditions. Received 15 May 2008 In this review, we present ethnobotanical information on plants used by the traditional healers in South Received in revised form 2 August 2008 Africa to treat mental illnesses, specifically epilepsy, depression, age-related dementia and debilitative Accepted 5 August 2008 mental disorders. Details of the recent scientific studies conducted on some of these plants are reviewed. Available online 15 August 2008 Extracts of Searsia chirindensis, Cotelydon orbiculata and Leonotis leonurus have shown in vivo anticonvulsant activity. Extracts from Searsia dentata and Searsia pyroides showed spontaneous epileptiform Keywords: discharge in mouse cortical slices, and acted as NMDA-receptor antagonists. Apigenin, amento flavone and Ageing agathisflavone with affinity to the benzodiazepine site on the GABAA-receptor were isolated from Sear-Alzheimer's disease sia pyroides. Naringenin with a finity to the GABA_A-benzodiazepine receptor was isolated from Mentha **Epilepsy** Depression Agapanthus campanulatus, Boophone disticha, Mondia whitei and Xysmalobium undulatu<mark>n</mark> exhibited Mental health South African traditional medicine antidepressant-like activity in three *in vivo* models for depression. Amaryllidaceae alkaloids with activity to the serotonin transporter were isolated from Boophone disticha. The alkaloid mesembrine, which act as a serotonin reuptake inhibitor, was isolated from Sceletium tortuosum. Investigations of plants used to treat age-related dementia and debilitative mental disor lers lead to the isolation of a number of Amaryllidaceae alkaloids with acetylcholinesterase inhibitory activity from Boophone disticha and Crinum species. Extracts of Mentha aquatica, Gasteria croucheri, Ruta graveolens and Scotia brachypetala inhibited MAO-B. Naringenin was isolated from Mentha aquatica as a MAO inhibitor. Only a small number of the more than 300 southern African plant species reported to treat or affect the CNS have been scientifically evaluated. Very few of the active compounds have been isolated and

1. Introduction

Currently in South Africa a dual healthcare system exists: one based on traditional medicine and another based on Western medical practice. The use of traditional medicine in South Africa is widespread where it is estimated that as high as 80% of the

Abbreviations: ACh, acetylcholine; AChE, acetylcholinesterase; Alb, Alz disease; AlDS, acquired immune deficiency syndrome; BIC, bicuculline butyrylcholinesterase; CNS, central nervous system; DAT, dopamine transporter; DOPA, dopamine; GABA, γ-aminobutyric acid; HIV, Human immunodeficiency virus; MAO, monoamine oxidase; MAOI, monoamine oxidase inhibitor; NAT, noradrenalin transporter; NMDA, N-methyl-D-aspartic acid; PD, Parkinson s disease; PIC, picrotoxin; PTZ, pentylenetetrazole; SERT, serotonin transporter; SSRI, serotonin reupfake inhibitor.

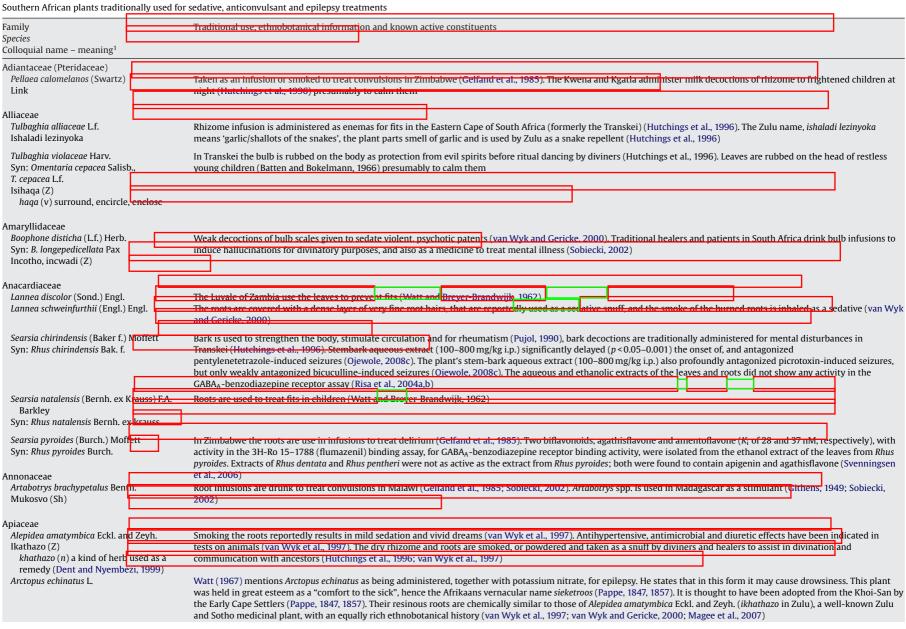
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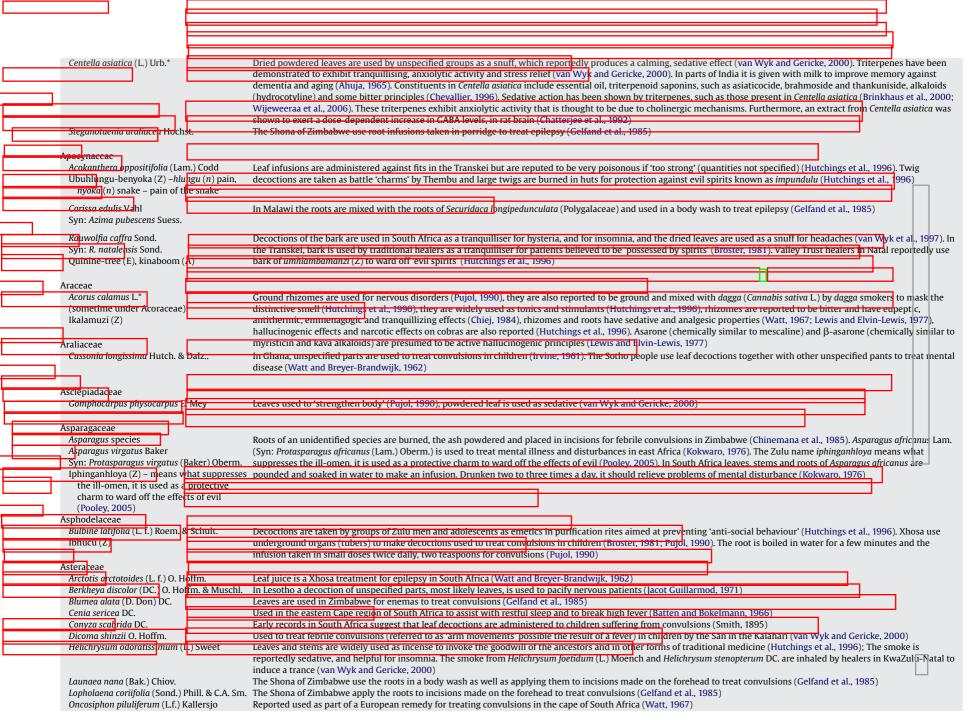
black population consult traditional healers. The more available traditional healthcare system offers a cheap, individualized and culturally appropriate alternative to the costly allopathic system. The state healthcare system with 8000 doctors including 18 neurologists provides aid for 85% of the population (approximately 38 million people) whereas 15% of the population (approximately 7 million people) is covered by private healthcare system with 12,000 doctors including 55 neurologists (Eastman, 2005). The number of traditional healers, on the other hand, outnumbers the allopathic doctors by at least 10 to 1 (Morris, 2001).

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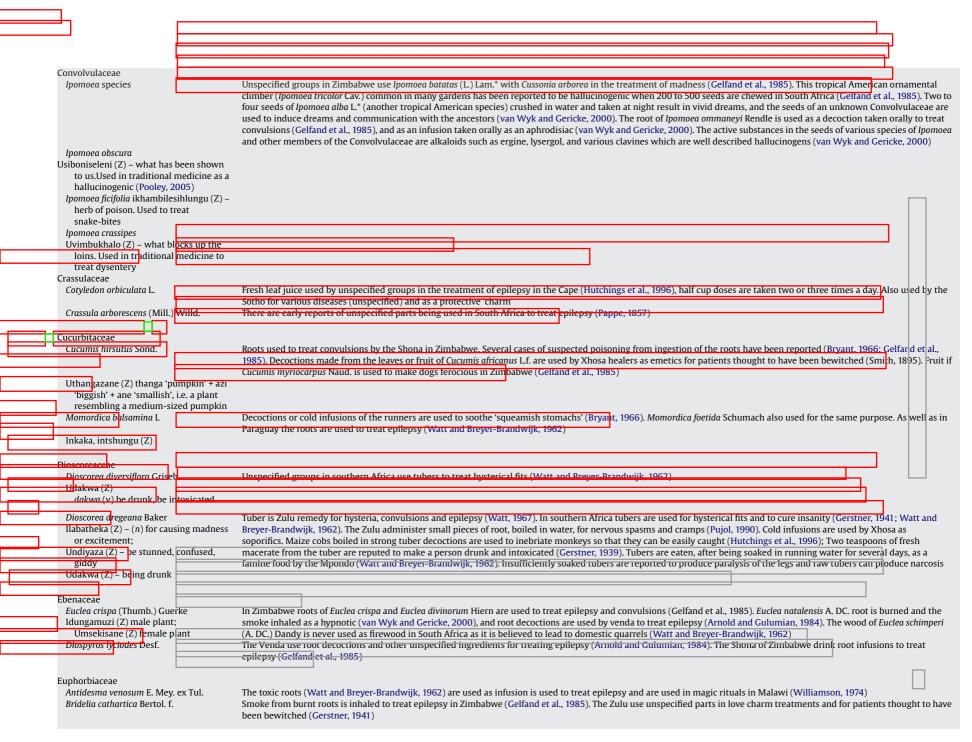
Traditional practice may include psychological, spiritual and cultural elements, as well as a medical element. This review deals with the medical element, namely the plants traditional healers use in their treatments. In this paper we will review plants used in South African traditional medicine in these categories of indications: epilepsy and convulsions, depression, age-related and debilitative mental disorders.

Table 1



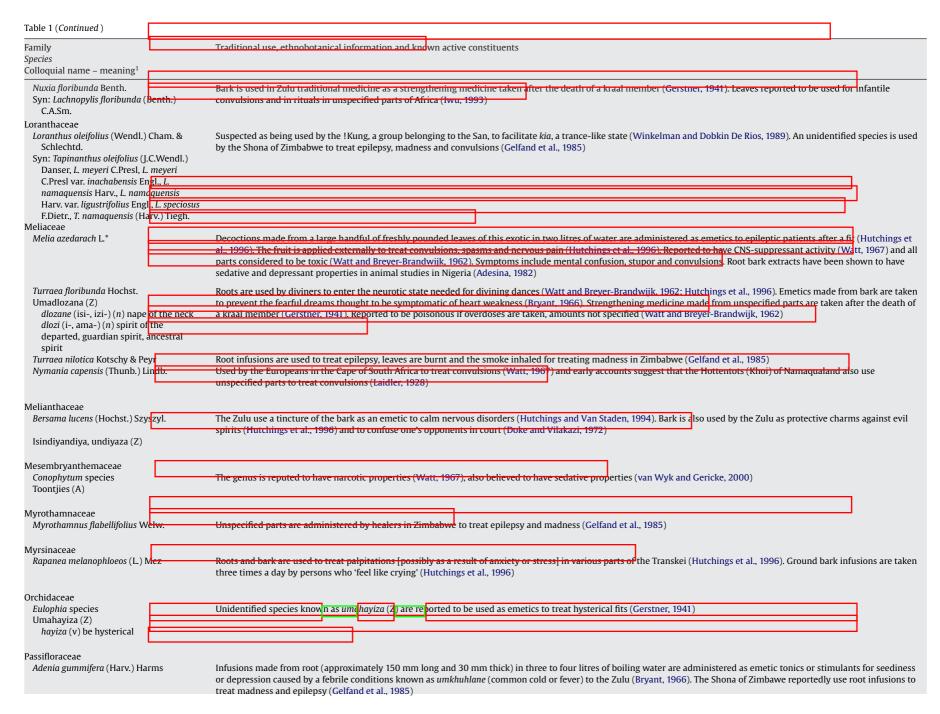


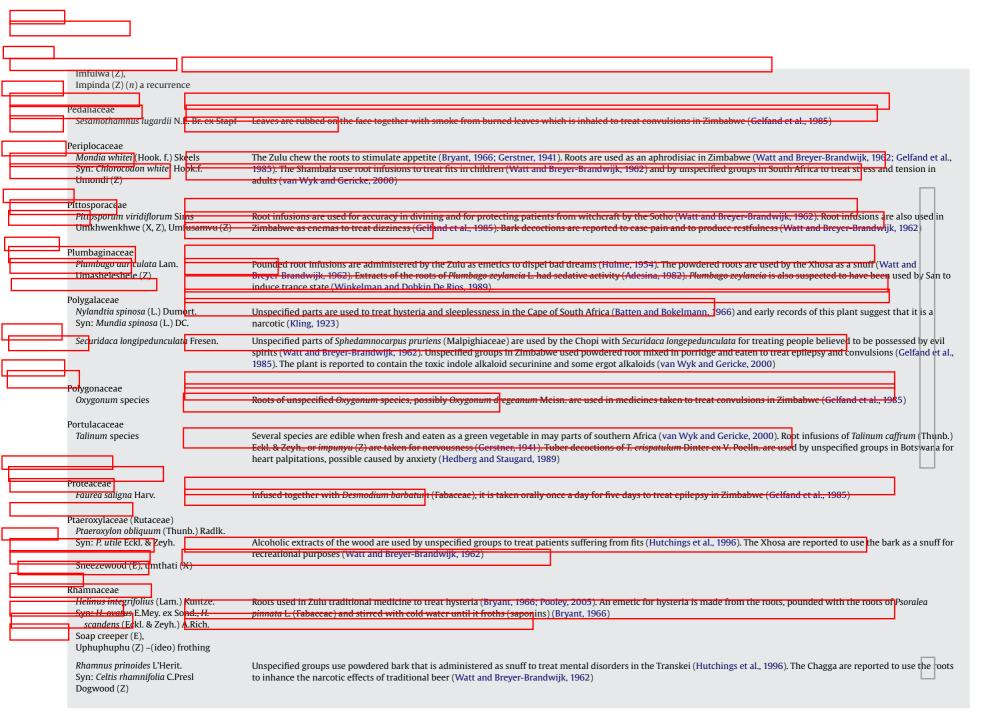
Family	Traditional use, ethnobotanical information and known active constituents
Species	
Colloquial name – meaning ¹	
Oncosiphon suffruticosum (L.) Kallersjo	Used by unspecified groups in South Africa to treat infantile convulsions (van Wyk and Gericke, 2000). Fresh plant material that is crushed with Exomis microphylla (Chenopodiaceae) or Ruta graveolens (Rutaceae, wynruit (A)) to treat infantile convulsions (van Wyk and Gericke, 2000)
Tarchonanthus camphorates L.	Dried leaves are reported to have slightly narcotic effects when smoked (Watt and Breyer-Brandwijk, 1962). Smoking the dried leaves in a pipe is sedative (van Wyk and Gericke, 2000)
Vernonia neocorymbosa Hilliard	Roots are used to treat hysteria by Zulu (Gerstner, 1939). Macerated leaves are used for treating epilepsy by the Swazi (Watt and Breyer-Brandwijk, 1962)
Bignoniaceae Markhamia obtusifolia (Bak.) Sprague Tecomaria capensis (Thunb.) Spach Lungana (Z)	The roots are used for children with convulsions in East Africa and Malawi (Williamson, 1974) Dried powdered bark infusions are taken for sleeplessness (Roberts, 1990); reported to induce sleep (Hutchings et al., 1996)
Lungana (2)	
Boraginaceae	
Lithospermum cinereum DC.	The plant is used as a sedative by the Sotho (Ashton, 1943). Details of the administration were not given
Capparaceae	
Bosica albitrunca (Burch.) Gil <mark>g & Ben</mark>	Known as fructus simulo, the unripe fruit is used to treat epilepsy in southern Africa (Watt, 1967; van Wyk and Gericke, 2000). The Zulu are reported to use this plant for
Umlalampisi (Z)	magical purposes (Pooley, 1993)
lala (n) sleep, lie down; mpisi (n) hyena	
Maerua angolensis DC.	In South Africa the Venda use the leaves and bark which are heated over a fire, without water, and the resultant vapour or steam is inhaled to treat children with
	convulsions (Mabogo, 1990, Venter and Venter, 1996)
Celastraceae	
Maytenus senegalensis (Lam.) Excell	The Shona from Zimbabwe reportedly use the root which is chewed, and the leaves which are rubbed on the face, to treat epilepsy (Gelfand et al., 1985). Coates-Palgrave
	(2002) mentions the inclusion of this plant in beer as an aphrodisiac
Syn: Gymnosporia senegalensis (Lam.)	
Loes. Maytenus heterophylla (Eckl. & Zeyh.)	In various parts of East Africa, root decoctions are taken for epilepsy (Kokwaro, 1976)
N.K.B. Robson	iii various parts of East Africa, foot decoctions are taken for epitepsy (kokwaro, 1976)
Syn: Gymnosporia heterophylla (Eckl. &	
Zeyh.) Loes.	
Pleurostylia capensis (Turcz.) L bes	In the cape of South Africa unspecified parts are used to encourage sleep and to bring good dreams (De Jager, 1963)
Syn: Cathastrum capense Turc 2., P. africana Loes.	
Chenopodiaceae	
Exomis microphylla (Thumb.)	Early accounts recall that Europeans and Africans have used a milk decoction of the leaf in treatments of epilepsy in South Africa (Smith, 1888; Watt, 1967). Refer to Oncosiphon suffruticosum; used in a treatment for infantile convulsions, together with Ruta graveolens (van Wyk and Gericke, 2000)
Combretaceae	
Combretum adenogonium Ste va. ex. A. Rich.	Unspecified parts are used in Zimbabwe for the treatment of convulsions in children (Celfand et al., 1985)
Syn Combretum ternifolium Engl & Diels	
Combretum molle R. Br. ex G. Don	Roots are used for convulsions and as an aphrodisiac in Zimbabwe (Gelfand et al., 1985)
Terminalia species	An emetic of roots of <i>T. phanerophlebia</i> Engl. & Diels and <i>Terminalia sericea</i> Burch. ex DC. are used to cause and protect against an illness called <i>amanxebha</i> (Gerstner, 1941; Watt and Breyer-Brandwijk, 1962, Hutchings et al., 1996). Traditionally believed to be caused by witchcraft this ailment takes the form of a pain in the chest and shoulders (Watt and Breyer-Brandwijk, 1962). Roots of <i>Terminalia stenostachya</i> Engl. & Diels to treat epilepsy in Zimbabwe (Gelfand et al., 1985)
Commention	
Commelina africana L.	Cold infusions are used to bathe restless sleepers, especially children (Watt and Breyer-Brandwijk, 1962); root decoctions are administered by Xhosa orally for fits (Bolofo and Johnson, 1988; Hutchings et al., 1996). Plants are used in decoctions with <i>Tephrosia capensis</i> (Fabaceae) for heart complaints and nervous ailments in Lesotho (Watt and Breyer-Brandwijk, 1962)

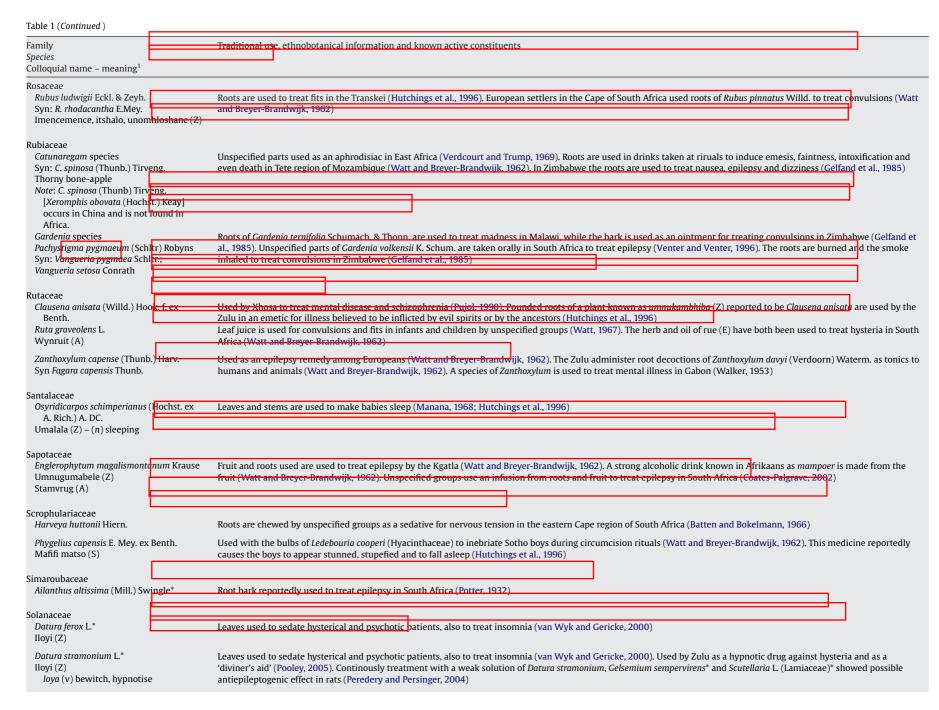


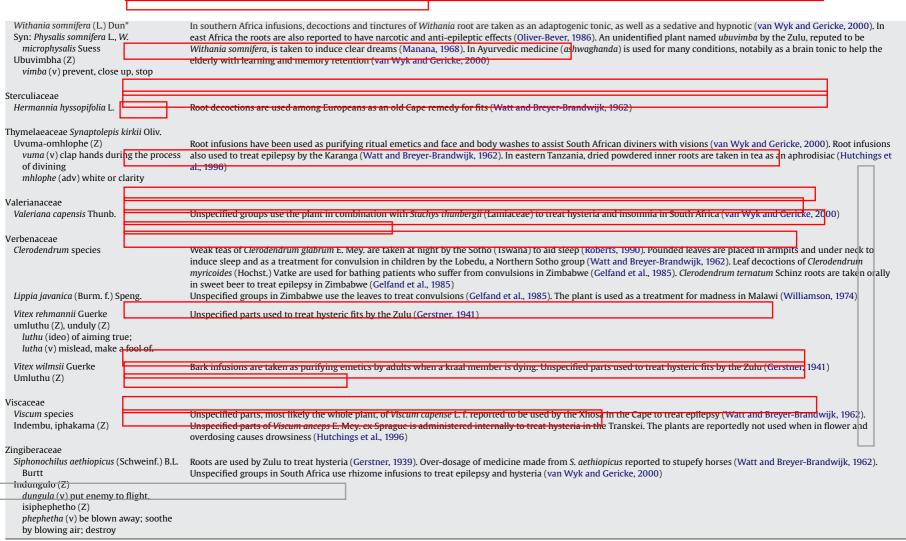
amily	Traditional use, ethnobotanical information and known active constituents	
pecies olloquial name – meaning ¹		
Croton gratissimus Burch. Ihubeshane-elikhulu	The fumes from ground leaves mixed with those of other <i>Croton</i> species place on hot coals are inhaled to treat insomnia (Palmer and Pitman, 1972)	
Flueggea virosa (Roxb. ex Willd.) Voigt. Jatropha curcas L. Inhlakuva (Z) also the Zulu name for castor-oil bean (Ricinus communis)	Leaf sap is reported to be used to treat epilepsy and mental illness in East Africa (Haerdi, 1964) Roots and leaf infusions of this exotic species are used for convulsions and fits by unspecified groupd in Africa (Adesina, 1982). Roots are administered as tonics Zimbabwe (Gelfand et al., 1985). The leaves <i>Ricinus communis</i> L. (Euphobiaceae) also and exotic is taken orally to treat madness in Zimabawe (Gelfand et al., 1985).	
abaceae		
Abrus precatorius L. Syn: A. squamulosus E.Mey. Umkoka (Z)	Roots are used as sedatives and anticonvulsants in Amerindian and African medicine (Hutchings et al., 1996). Extracts from the roots have moderate sedative et 1982). The leaves with palm oil are taken to treat convulsions in Ghana and Gabon (Dalziel, 1937)	effect (Adesin
Acacia amythethophylla Steud. ex A. Rich.	Root infusions are taken to treat convulsions in Zimbabwe (Gelfand et al., 1985). Acacia nigrescens Oliv. roots are applied to the body in an ointment to treat con Zimbabwe (Gelfand et al., 1985).	nvulsions in
Acacia karoo Hayne Isikhombe, umunga (Z)	In Zimbabwe the roots are used for general body pains, dizziness, convulsions and as an aphrodiasiac (Gelfand et al., 1985)	
Bauhinia thonningii Schumach Bolusanthus speciosus (H. Bol.) Harms	Powdered root, as well as those from <i>Bauhinia candicans</i> Benth. * are taken in porridge to treat convulsions by the Shona of Zimbabwe (Gelfand et al., 1985) Roots reported to have sleep-inducing effect by the Tsonga people (Liengme, 1981)	
Caesalpinia bondac (L.) Roxb.	Unspecified groups in southern Africa use the plant to treat infantile convulsions (Watt, 1967). An unidentified Caesalpinia species is used as a Chopi remedy for (Watt and Breyer-Brandwijk, 1962)	or convulsion
Chamaecrista mimosoides (L.) Greene	Cold water root infusions are taken and rubbed on the body to remember 'forgotten dreams' by Zulu (Hulme, 1954). Used by Xhosa and Mfengu to induce sleep	
Imbubu yotaboni (Z), umbonisela (Z)	placed under pillows or sleeping mats (Watt and Breyer-Brandwijk, 1962). The Sotho use plant decoctions for loss of appetite in children (Watt and Breyer-Brandwijk, 1962). The Sotho use plant decoctions for loss of appetite in children (Watt and Breyer-Brandwijk, 1962).	ndwijk, 1962
Desmodium barbatum (L.) Benth.	Infused together with Faurea saligna (Proteaceae), it is taken orally once a day for five days to treat epilepsy in Zimbabwe (Gelfand et al., 1985)	
Syn: D. dimorphum Welw. ex Baker var. argyreum Welw. ex Baker, Nicolsonia barbata (L.) DC. var. argyraq (Welw. ex		
Baker) Schindl.		
Millettia grandis (E.Mey.) Ske	The Zulu use mixture of roots ground with those of Croton species with one part lion fat. a little ground lion bone and one portion python fat that is burned in tranquilliser and to dispel worries (Palmer and Pitman, 1972). In unspecified parts of southern Africa, residues from evaporated ground roasted roots mixed will licked from fingers to induce sleep (Palmer and Pitman, 1972)	
Mimosa pugica L.* Mimosa pigra L.	Unspecified parts are used to treat children's convulsions in Madagascar (Jenkins, 1987). In Mauritius, decoctions of young leaves and stems are given for insomnervousness (Gurib-Fakim et al., 1993). Leaves are also used for insomnia in Ecuador (Schultes and Raffauf, 1990). The Zulu name umazifisa means 'self-desire' a	
Imbune (Z) buna (v) wilt, droop, become emaciated	used as an ingredient in preparations designed to make an enemy impotent (Hutchings et al., 1996)	
Umazifisa (Z)		
Newtonia hildebrandtii (Vatke) Torre Udongolokamadilika (Z), umfomothi (Z) man medicine	Drops of a decoction made from roasted ground bark mixed with water and elephant dung are licked from the hands to drive away 'starts' while sleeping (Palm 1972)	ner and Pitm
Senna didymobotrya (Fresenius) N.W. Irwin & R.C. Barneby	The roots are burned and the smoke inhaled to treat madness, while decoctions of the root are taken orally for convulsions in Zimbabwe (Gelfand et al., 1985). occidentalis (L.) Link are used in India to treat convulsions in children (Lal and Gupta, 1973)	Seeds of S.
Syn. Cassia didymobotrya Fresen.		
Senna petersiana (Bolle) J.M. Lock	A decoction of the roots together with <i>Diospyros lycioides</i> (Ebenaceae) and <i>Euclea natalensis</i> (Ebenaceae) are taken to treat epilepsy in Venda, South Africa (Arno Gulumian, 1984)	old and
Syn. Cassia petersiana Bolle		
		d to be toxic
Tephrosia capensis (Jacq.) Pers. Isidamvulu, isikhwali (Z)	The Sotho used cooked roots for palpitations and decoctions of the plant with Commelina africana (Commelinaceae) for weak hearts and nervousness. Reported (Watt and Breyer-Brandwijk, 1962)	u to be toxic

Gentianaceae Chironia krebsii Griseb.	Used for relieving uneasiness during pregnancy by the Sotho (Watt and Breyer-Brandwijk, 1962). Preparations from Chironia baccifera L. are reported to produce sleepiness and perspiration (Watt and Breyer-Brandwijk, 1962)
Hyacinthaceae Ledebouria cooperi (Hook. f.) Syn: Scilla adlamii Baker, Scil cinerascens Van der Merwe cooperi Hook.f., Scilla galpi Scilla glaucescens Van der I inandensis Baker, Scilla pet der Merwe, Scilla pusilla Ba	(Scrophulariaceae) and causes the boys to appear stunned, stupefied and to fall asleep (Hutchings et al., 1996) Scilla ii Baker, Ierwe, Scilla blata Van
rogersii Baker, Scilla rupesti Merwe, Scilla saturata Bako icubudwana (Z)	s Van der
Schizocarphus nervosus (Burc Merwe Syn. Ornithogalum nervosum acerosus Van der Merwe, S (Baker) Van der Merwe, S (Kunth) Van der Merwe, Sc Baker, Scilla nervosa (Burct Scilla rigidifolia Baker, Scille Baker var. acerosa Van der	Burch., S. gerrardii igidifolius illa gerrardii) Jessop, rigidifolia
Scilla rigidifolia Baker var. 1 Baker Ingcino, ingcolo (Z)	
Hypoxidaceae Hypoxis hemerocallidea Fisch	& C.A. Mey Corm infusions used to treat insanity in South Africa (Pujol, 1990). Anticonvulsant activity of Hypoxis hemerocallidea corm aqueous extract in mice has been demonstrated (Ojewole, 2008b).
Lamiaceae Ballota africana (L.) Benth. Syn: Marrubium africanum L.	Infusions or brandy tinctures are used, in the Western Cape for the treatment of hysteria and insomnia (van Wyk and Gericke, 2000)
Hemizygia bracteosa (Benth.)	The leaves are smoked or chewed by the San in Botswana to give energy for dancing and as a stimulant (van Wyk and Gericke, 2000). The Shona of Zimbabwe are reported used powdered leaves orally to treat fits (Gelfand et al., 1985)
Hoslundia opposita Vahl	In Zimbabwe root infusions are used to treat fits and epilepsy (Gelfand et al., 1985). Hoslundia species are used in West Africa to treat epilepsy and mental illness (Ayensu, 1978). Leaf extracts showed GABAergic activity (Risa et al., 2004a,b)
Leonotis leonurus (L.) R.Br. Ocimim canum Sims	This plant is reported to be mildly narcotic (Watt and Breyer-Brandwijk, 1962). Leaves are reported to have been smoked for partial paralysis and epilepsy (Watt and Breyer-Brandwijk, 1962; Hutchings et al., 1996). Aqueous extracts are reported to have anticonvulsant activity in animal studies (Bienvenu et al., 2002) The Ndebele of Zimbabwe use the whole plant together with the seeds of Ricinus communis L.* and Chenopodium ambrosidiodes L.* as snuff to treat madness (Gelfand et al.,
Pycnostachys urticifolia Hook	1985). Unspecified groups in Malawi burn the leaves and inhale the smoke, and also wash the body of the patient with decoctions of the leaves, to treat convulsions (Gelfan et al., 1985). In central Africa the leaves together with those of Cymbopogon densiflorus Stapf. are macerated and used as a treatment for epilepsy (Watt, 1967). Ocimum speci are used in west Africa to treat delirium (Ayensu, 1978) The roots are eaten in porridge, or applied to the face and used in washes to treat madness and convulsions in Zimbabwe (Gelfand et al., 1985).
Salvia chamelaeagnea Berg. Stachys thunbergii Benth.	Unspecified groups in the cape of South Africa used an infusion of the dried leaves as a treatment for convulsions (Watt and Breyer-Brandwijk, 1962) Unspecified groups use the plant in combination with Valeriana capensis (Valerianaceae) to treat hysteria and insomnia in South Africa (van Wyk and Gericke, 2000). Stachy aethiopica L. is reportedly burnt in huts to cure feverish delirium in Lesotho (Jacot Guillarmod, 1971) The Standard was the roots and lower as a body wash for convulsions (Colfand et al. 1985)
Tinnea zambesiaca Bak. Lauraceae Cinnamomum camphora (L.)' C.H. Eberm.*	The Shona of Zimbabwe use the roots and leaves as a body wash for convulsions (Gelfand et al., 1985) Ness & Although not an indigenous plant it has become a popular traditional medicine to treat a variety of complaints, used to treat hysteria (Watt and Breyer-Brandwijk, 1962)
Loganiaceae (Buddlejaceae and Buddleja (L.) species	Strychnaceae) Used together with Heteromorpha trifoliate (Wendl.) Eckl. & Zeyh. and Cussonia paniculata Eckl & Zeyh. by Sotho in South Africa to treat early nervous and mental illnesses (Watt and Breyer-Brandwijk, 1962)









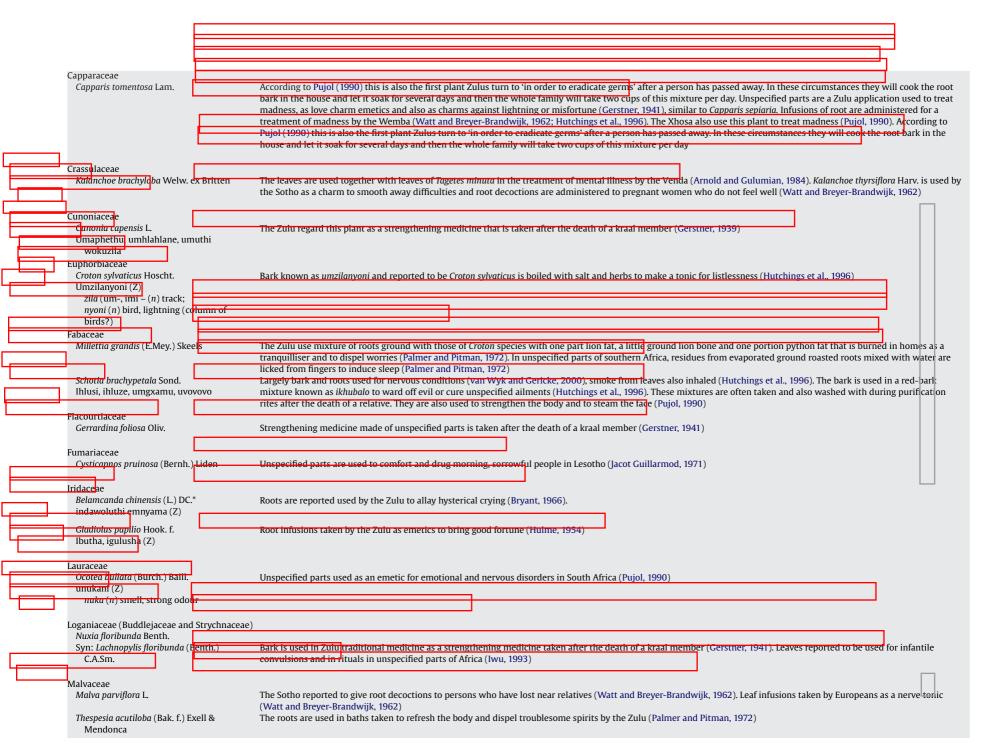
¹(A): Afrikaans, (E): English, (S): Sotho, (Sh): Shona, (X): Xhosa, (Z): Zulu; * non-indigenous species.

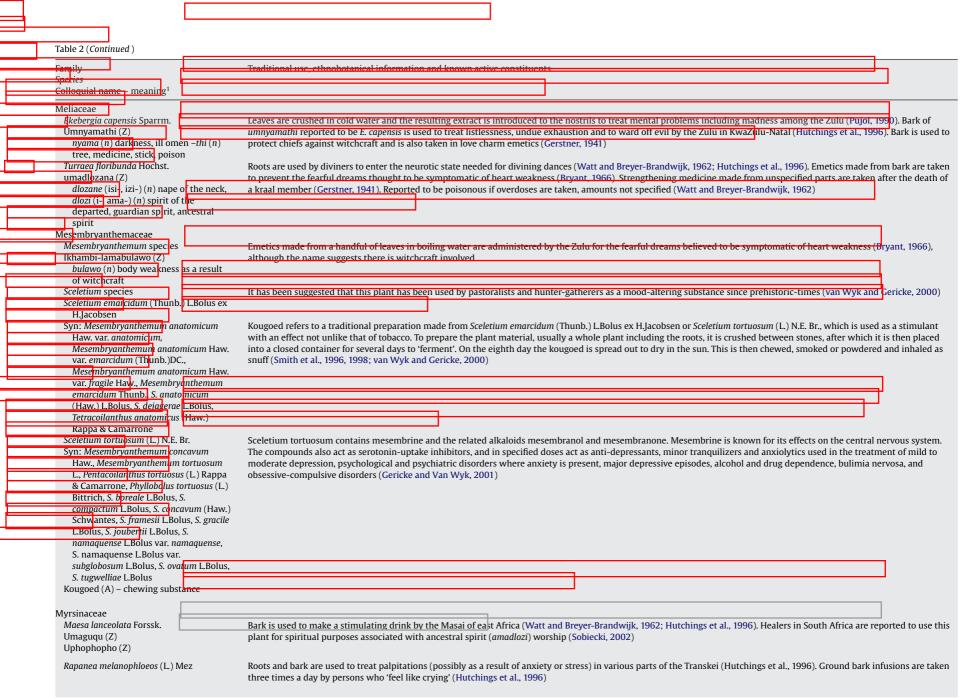
Table 2			
Southern African plants tr	Southern African plants traditionally used for treat depression and similar CNS ailments		
- Family	Traditional use, ethnobotanical information and known active constituents		
Species			

Family Species	Traditional use, ethnobotanical information and known active constituents	
Colloquial name – meaning ¹		
Alliaceae Agapanthus campanulatus F.M.Leight. (Agapanthaceae) Syn: A. patens F.M.Leight. Ubani (Z)	Used in the initiation of traditional healers (Hutchings et al., 1996). Various parts are used by the Sotho to treat people with a type of mental illness k (Laydevant, 1932). The Zulu are reported to use unidentified species of Agapanthus for inducing visions (imibono) and dreams (Sobiecki, 2002). Extrac (Nielsen et al., 2004)	•
Amaryllidaceae Ammocharis coranica (Ker-Gawl.) Herb. Boophone disticha (L.f.) Herb. Syn: B. longepedicellata Pax Incotho, incwadi (Z)	Used to treat serious afflictions (unspecified) caused by witchcraft (Hulme, 1954). Known to contain buphanidrine (Gibbs, 1974) which exhibited affi transporter (SERT) protein (Sandager et al., 2005) Weak decoctions of bulb scales given to sedate violent, psychotic patients (van Wyk and Gericke, 2000). Traditional healers and patients in South Afr to induce hallucinations for divinatory purposes, and also as a medicine to treat mental illness (Sobiecki, 2002). Amaryllidaceae alkaloids, buphanidr isolated from <i>Boophone disticha</i> exhibited affinity to the serotonin transporter (SERT) protein (Sandager et al., 2005)	ica drink bulb infusions
Crinum species umduze (Z)	Cherylline was isolated from Crinum moorei (Elgorashi et al., 2001) and showed good affinity to the serotonin transporter (SERT) protein (Elgorashi e unidentified species is reported to be used in a similar manner as Boophone disticha for inducing hallucinations (Sobiecki, 2002)	al., 2004). An
C. bulbispermum (Burm.f.) Milne-Redh. & Schweick. C. macowanii Baker Syn: C. gouwsii Traub, C. macowanii Baker subsp. confusum I.Verd. C. moorei Hook.f. C. imbricatum Baker, C. macowanii Baker, C. schmidtii Regel		
Pancratium tenuifolium Hochst. ex A.Rich Syn: Chapmanolirion juttae Dinter, P. chapmannii Harv.	Reportedly used by San in Botswana to induce hallucinations by rubbing the bulb into incisions on the head (Dobkin De Rios, 1986)	
Scadoxus puniceus (L.) Friis & Nordal Syn: Haemanthus magnificus Herb., Haemanthus natalensis Pappe ex Hook., Haemanthus puniceus L. var. puniceus	Known to cause CNS excitation or depression and visual disturbances (Veale et al., 1992)	
Anacardiaceae Searsia chirindensis (Baker f.) Moffett Syn: Rhus chirindensis Bak. f.	Bark is used to strengthen the body, stimulate circulation and for rheumatism (Pujol, 1990), bark decoctions are traditionally administered for menta Transkei (Hutchings et al., 1996)	l disturbances in
Asclepiadaceae Gomphocarpus physocarpus E. Mey Stapelia gigantea N.E. Br.	Leaves used to 'strengthen body' (Pujol, 1990), powdered leaf is used as sedative (van Wyk and Gericke, 2000) Hot stem infusions are administered by Zulu healers as emetics to treat hysteria (Bryant, 1966). An unidentified plant called <i>uzililo</i> (Z), which is most <i>Huernia hystrix</i> , is used by Zulu to treat mental disorders. Plants are reputed by Zulu to be used to prepare a medicine capable of causing death (Hulm have been reported (Watt and Breyer-Brandwijk, 1962)	
Syn: S. cyclista C.A.Lückh., S. gigantea N.E.Br. var. pallida E.Phillips, S. marlothii N.E.Br., S. nobilis N.E.Br., S. youngii N.E.Br. Ililo elikhulu (Z) lilo (n) lamentation, khulu (adj) large		
Xysmalobium undulatum (L.) Aiton.f.	Roots administered in the Transkei by Xhosa to treat hysteria (Hutchings et al., 1996). Roots contain several glycosides, and extracts have exhibited w antidepressant activity (Hutchings et al., 1996). Leaf extracts exhibited SSRI (antidepressant) activity (Nielsen et al., 2004)	eak CNS depressant and
Asphodelaceae		
Bulbine latifolia (L. f.) Roem. & Schult. ibhucu (Z)	Decoctions are taken by groups of Zulu men and adolescents as emetics in purification rites aimed at preventing 'anti-social behaviour' (Hutchings et underground organs (tubers) to make decoctions used to treat convulsions in children (Broster, 1981; Pujol, 1990). The root is boiled in water for a fe	

ibhucu (Z)

underground organs (tubers) to make decoctions used to treat convulsions in children (Broster, 1981; Pujol, 1990). The root is boiled in water for a few minutes and the infusion taken in small doses twice daily, two teaspoons for convulsions (Pujol, 1990)





Oleaceae	
Olea woodiana Knobl.	The bark is used in South Africa by the Zulu as a nerve tonic and reputed to have stimulating properties that induce a good feeling (Pujol, 1990). The bark is also reported to
Isadlulambazo, umhlwazimamba, umnqumo (Z)	stimulate the appetite and the leaves are also used for their stimulating properties (Pujol, 1990)
Orchidaceae	
Ansellia africana Lindl.	Stem infusions are taken by the Zulu as antidotes to bad dreams and smoke from burning roots is inhailed for the same purposes (Hutchings et al., 1996). The leaves and stems
Imfe-nkawu (Z)	are used to make an infusion for treating madness in the Mpika district of Zambia (Gelfand et al., 1985). Used for various protective charm purposes and also as an aphrodisiac in Zimbabwe (Gelfand et al., 1985)
Passifloraceae	
Adenia gummifera (Harv.) Harms	Infusions made from root (approximately 150 mm long and 30 mm thick) in three to four litres of boiling water are administered as emetic tonics or stimulants for seediness
Imfulwa (Z),	or depression caused by a febrile conditions known as umkhuhlane (common cold or fever) to the Zulu (Bryant, 1966). The Shona of Zimbawe reportedly use root infusions to
Impinda $(Z)(n)$ a recurrence	treat madness and epilepsy (Gelfand et al., 1985)
_	
Poaceae	
Cymbopogon nardus (L.) Rendle Syn: C. afronardus Stapf, C. validus (Stapf)	The Zulu use the whole plant, boiled with milk and drunk twice daily (two small cups) to strengthen the nervous system and to stimulate the body (Pujol, 1990). This grass is reported to be used to reduce the appetite and revitalise the nerves of moody people (Hutchings et al., 1996)
Stapf ex Burtt Davy validus (Stapf.)	reported to be used to reduce the appetite and revitainse the nerves of moody people (materings et al., 1990)
Stapf. ex Burtt. Davy	
Isicunge (Z)	
Polygalaceae	
Nylandtia spinosa (L.) Dumort.	Unspecified parts are used to treat hysteria and sleeplessness in the Cape of South Africa (Batten and Bokelmann, 1966) and early records of this plant suggest that it is a
Syn: Mundia spinosa (L.) DC.	narcotic (Kling, 1923)
Rutaceae	
Clausena anisata (Willd.) Hook. f. ex	Used by Xhosa to treat mental disease and schizophrenia (Pujol, 1990). Pounded roots of a plant known as umnukambhiba (Z) reported to be Clausena anisata are used by the
Benth.	Zulu in an emetic for illness believed to be inflicted by evil spirits or by the ancestors (Hutchings et al., 1996)
Sapotaceae	
Sideroxylon inerme L.	Emetics made from unspecified parts are taken to dispel bad dreams (Watt and Breyer-Brandwijk. 1962)
AmaSethole (-amhlophe)	
Vitellariopsis marginata (N.E. Br.)	The Zulus use the root of this tree which is dark red in making of 'psychoactive medicine that cure moody people rendered neurotic by way of witchcraft' (Pujol, 1990), Root
AmaSethole	and leaf decoctions are also taken orally or as enemas, by Zulus as blood purifiers, strengtheners and sexual stimulants (Hutchings et al., 1996). Root infusions are taken twice
	daily for idliso, poisoning in Zulu culture thought to be caused by sorcery (Hutchings et al., 1996)
1(A), Afrilana (7), 7, 1, , , * , an indiana and	and the second s

¹(A): Afrikaans, (Z): Zulu; * non-indigenous species.

2. Plants used for mental health ailments

Traditional healers in South Africa make use of a plethora of plants. Nearly 150 plant species from 63 families are used for the indications epilepsy and convulsions (Table 1), possibly reflecting the severity of this problem in the population. The families most often represented are Fabaceae (15 species), Asteraceae (13 species) and Lamiaceae (9 species) (Table 1). Over 40 plant species are used for ailments that could be described as depression (Table 2). These plants come from 26 different families. The number of plants used for dementia and age-related mental problems are lower with only 15 species from 7 families recorded (Table 3), which could be due to a previous demographic situation, where traditional healers less frequently had very old patients. Amaryllidaceae is the best-represented family with six species (Table 3). Mental health problems constitute a serious problem in southern Africa. Not surprisingly, a large number, well over 300 species, of plants are used by traditional healers in their treatment of these ailments (Sobiecki, 2002).

3. Plants used for convulsions and epilepsy

3.1. Epilepsy in southern Africa

The prevalence of epilepsy in developing countries is generally higher than in developed countries (Sander and Shorvon, 1996). A recent study reports an increased risk of dying and a greater proportion of deaths that are epilepsy-related in Africa - as high as a six-fold increase in mortality in people with epilepsy. This is higher than the two- to three-fold increase reported in developed countries (Christianson et al., 2000; Diop et al., 200<mark>5). The</mark> reasons for this gap between the developed and the developing countries are not entirely clear but suggestions have been made that it might be due to social deprivation (Sander, 2003). Interestingly, recent data suggest that people from socio-economically deprived backgrounds in developed countries are more likely to develop epilepsy (Heaney et al., 2002). A study from 2000 on the prevalence of epilepsy in a large rural community situated in the Northern Province in South Africa showed a lifetime prevalence in children as high as 73/1000 (Christianson et al., 2000).

Some infectious diseases might be a part of the explanation. Neurocysticercosis caused by *Taenia solium* (pork tapeworm) infections may trigger epileptic outburst (Garcia et al., 2003; Deciorgio et al., 2005). A study on 578 epileptic patients in Preto ia showed neurocysticer osis in 28% of the patients (van As and Jou pert 1991). HIV infection of the CNS or opportunistic infections caused by HIV might also trigger epileptic seizures (Garg, 1999; Visudti bhan et al., 1999). With an estimated 5.5 million HIV positives in South Africa at the end of 2006 with a prevalence of 39% in the Kwa Zulu-Natal province this is an alarming scenario (UNAIDS, 2006, 2007).

Epilepsy is often viewed with a certain degree of fear and risk of contagious effect due to the cultural attitudes and beliefs in South Africa. Studies conducted in townships showed that the parents of epileptic children believe that the disorder is caused by various parameters including bewitchment, fear or evil spirits (Eastman, 2005). It is viewed as a shameful disorder and has severe social implications in African communities as it carries a stigman. Sufferers are often shunned and discriminated against with respect to education, employment and marriage (Andermann, 1995; Haskind and Birbeck, 2005).

This cultural influence is also prominent in the treatment of the disorder where many people seek treatment by traditional healers and traditional medicine. A survey in 2000 showed, that 4 2.5% of epileptic children received traditional medicine alone or together

with Western medicine whereas 34.6% received no treatment at all (Christianson et al., 2000).

3.2. Studies on plants used to treat convulsions and epilepsy in South Africa

Numerous plants used in the traditional South African medicine have been screened for compounds with affinity to the flumazenil-sensitive benzodiazepine modulatory sites on the GABA (γ-aminobutyric acid) subtype A receptor. Initially, the aqueous and ethanol extracts of 43 South African medicinal plants traditionally used to treat epilepsy and convulsions were tested in the GABA_A-benzodiazepine receptor-binding assay (Risa et al., 2004a).

In a second study, 46 ethanol extracts from 35 species both indigenous and exotic that are traditionally used precominantly as sedatives or to treat various CNS-related ailments were tested in the GABAA-benzodiazepine receptor-binding assay (Stafford et al., 2005). These investigations led to the screening, isolation and identification of the flavonoids apigenin, amentof avone and agathisflavone as the active compounds from *Searsia F. A. Barkley* (basionym: *Rhus*) species (Anacardiaceae) (Svenningsen et al., 2006) and viridiflorol and (S)-naringenin from *Mentha aquatica L.* (Lamiaceae) (Jäger et al., 2007).

The binding of apigenin and amentoflavone to the flumazenil site has previously been reported (Nielsen et al., 1988; Viola et al., 1995) but apigenin showed no anticonvulsant properties in vivo (Viola et al., 1995; Avallone et al., 2000). Another group reported amentoflavone to be a relatively weak negative allosteric modulator of GABA action acting independently the flumazenil binding site (Hanrahan et al., 2003). Thus, the use of these plants as anticonvulsive agents suggests involvement of a different neurotransmitter system. Further functional characterization of the Searsia extracts showed inhibitory effects on spontaneous epileptiform discharges in mouse cortical slices (Pedersen et al., 2008). Interestingly, the effect was not caused by the previous isolated flavonoids. The extracts contained N-methyl-D-aspartic acid (NMDA) receptor antagonists, which might explain the effect of the plants reported by the traditional healers. However, these findings need be confirmed by in vivo anticonvulsive studies before any conclusions can be made.

A number of southern African plants have shown in vivo anticonvulsant activity against seizures produced in mice by pentylenetetrazole (PTZ), picrotoxin (PIC), bicuculline (BIC) and NMDA. However, most of the studies have been conducted on plant extracts and the active constituents are yet to be identified. Recently, Ojewole (2008c) reported on the anticonvulsant effect of Searsia chirindensis (Baker f.) Moffett (syn = Rhus chirindensis Baker f.) stem-bark aqueous extract in mice. Searsia chirindensis stembark aqueous extract (100-800 mg/kg i.p.) significantly delayed the onset of, and antagonized PTZ induced seizures. The extract (100-800 mg/kg i.p.) also profoundly antagonized PIC induced seizures, but only weakly antagonized BIC induced seizures. Risa et al. (2004a) showed that the aqueous and ethanolic extracts of the leaves and roots of Searsia chirindensis showed very weak GABA_Abenzodiazepine receptor binding compared to other Searsia species tested (Risa et al., 2004a, Svenningsen et al., 2006) suggesting a different mechanism of action than the classical benzodiazepines.

Ojewole et al. conducted several *in vivo* studies on extracts from South African medicinal plants including the fruit of *Tetrapleura tetraptera* (Schum.et Thonn.) Taub. (Fabaceae) (Ojewole, 2005), avocado leaf (*Persea americana* Mill. (Lauraceae)), (Ojewole and Amabeoku, 2006), *Harpagophytum procumbens* D.C. ex Meisn. (Pedaliaceae) roots (Mahomed and Ojewole, 2006), *Sutherlandia frutescens* (L.) R.Br. (variety *Incana* E.Mey.) (Fabaceae) shoots (Ojewole, 2008a) and *Hypoxis hemerocallidea* Fisch.Mey. & Ave-Lall.

Schweick. C. macowanii Baker Syn: C. gouwsii Traub, C. macowanii Baker subsp. confusum I.Verd. C. moorei Hook.f. C. imbricatum Baker, C. macowanii Baker, C. schmidtii Regel Scadoxus multiflorus (Martyn) Raf. Syn: Haemanthus katharinae Baker, Haemanthus multiflorus Martyn, Haemanthus multiflorus Martyn, Haemanthus otaviensis Dinter, Haemanthus sacculus E.Phillips unacardiaceae Lannea schweinfurthii (Engl.) Engl. The Vhavenda traditionally used decoctions made from root bark mixed with a fungus found growing on the roots to help family members to forget a recently passed awai	mily ecies	Traditional use, ethnobotanical information and known active constituents
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Used to treat serious afflictions (unspecified) caused by witchcraft (Hulme, 1954). Known to contain buphanidrine (Gibbs, 1974) which exhibited affinity to the seroton in transporter (SERT) protein (Sandager et al., 2005) Boophone districha (L.f.) Herb. Syn: B. longepedicellatar Pax Incotho, incode, incode). Crinum species unidee hallucinations for divinatory purposes, and also as a medicine to creat mental illness (Sobiecki, 2002). Traditional healers and patients in South Africa Challe and Incotho, incode desirable and patients in South Africa Challe and Incotho, incode desirable and patients in South Africa Challe and Incotho, incode desirable and patients in South Africa Challe and Incotho, incode desirable and patients in South Africa Challe and Incotho, incode in Incode and Incode in Incode in Incode and Incode in Incode and Incode in Incode and Incode in Incode		
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South African Crinum species were tested by Elgorashi et al. (2004). Lycorine-type alkaloids were the most active among the alkaloids tested. 1-0-acetyllycorine showed at C50 of 0.96 mM which was more potent than galanthamine (IC50 = 1.9 mM, positive control in this study). Lycorine and 1,2-0-diacetyllycorine (a semi-synthetic der varive) were 100 times less active Syn: C. gouwsii Traub, C. macowanii Baker subsp. confusum LVerd. C. moorei Hook.f. C. imbricatum Baker, C. macowanii Baker, C. schmidtii Regel Scadoxus multiflorus (Martyn) Raf. Syn: Haemanthus katharinae Haker, Haemanthus multiflorus Maityn, Haemanthus otaviensis Dinters, Haemanthus sacculus E.Phillips anacardiaceae Lannea schweinfurthii (Engl.) Engl. The Vhavenda traditionally used decoctions made from root bark mixed with a fungus found growing on the roots to help family members to forget a recently passed awa relative (Mabogo, 1990). They are also used as a protection against a sleeping sickness known as vhulangwane and to help people forget all unpleasant events. The roots are covered with a dense layer of very fine root hairs, that are reportedly used as a seadure snuff, and the smoke of the burned roots is inhaled as a seadure (van Wyk and		
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Gericke, 2000)		
		Gericke, 2000)
	nnonaceae	

as protective charms against witchcraft (Mabogo, 1990). An Annona sp. is used in Ghana as an epilepsy treatment (Irvine, 1961)

brahmoside and thankuniside, alkaloids (hydrocotyline) and some bitter principles (Chevallier, 1996)

Syn: Protasparagus africanus (Lam.) Oberm. disturbance (Kokwaro, 1976). The plant contains steroidal saponins and lignans (Debella et al., 2000)

chrysophylla Bojer

Centella asiatica (L.) Urb.*

Asparagus africanus Lam.

A. concinnus (Baker) Kies

Syn: A. africanus Lam. var. concinnus Baker

Apiaceae

Asparagaceae

given with milk to improve memory against dementia and aging (Mukhatji, 1953). Constituents in C. asiatica include essential oil, triterpenoid saponins, such as asiaticocide,

In South Africa leaves, stems and roots are pounded and soaked in water to make an infusion. This is drunken two to three times a day, it should relieve problems of mental

Dried powdered leaves are used by unspecified groups as a snuff, which reportedly produces a calming, sedative effect (van Wyk and Gericke, 2000). In parts of India it is

(Hypoxidaceae; Syn = Hypoxis rooperii T. Moore) corms (mislead-

Table 3 (Continued)

east Africa the roots are also reported to have narcotic and anti-epileptic effects (Oliver-Bever, 1986). An unidentified plant named ubuvimba by the Zulu, reputed to be W. somnifera, is taken to induce clear dreams (Manana, 1968). The roots are one of the most highly regarded herbs in Ayurvedic medicine. They are rejuvenating tonics used for ingly called the 'African Potato') (Ojewole, 2008b). All these studies Cold water root infusions are taken and rubbed on the body to remember 'forgotten dreams' by Zulu (Hulme, 1954). Used by Xhosa and Mfengu to induce sleep by being placed under pillows or sleeping mats (Watt and Breyer-Brandwijk, 1962). The Sotho use plant decoctions for loss of appetite in children (Watt and Breyer-Brandwijk, 1962). In southern Africa infusions, decoctions and tinctures of Withania root are taken as an adaptogenic tonic, as well as a sedative and hypnotic (van Wyk and Gericke, 2000). In ingredients may include Agapanthus africanus, Cissus, Galium and Clematis species. Similar decoctions are used by the Sotho for treating hysteria and also in the training of healers to develop memory and make initiates (ithwasa) mentally fit for their work (Watt and Breyer-Brandwijk, 1962) shared the interesting fact that the aqueous extracts of these various plants delayed and antagonized the onset of PTZ and or every second day for a month (Watt and Breyer-Brandwijk, 1962). Other PIC induced seizures while the effect on BIC induced seizures was weaker and only present in high doses. When tested in the flumazenil-binding assay, extracts of Hypoxis hemerocallidea showed no effect, thus suggesting a different mechanism of action than the classical benzodiazepines (Risa et al., 2004a) Another study investigated a Northern Sotho remedy, Sehlare sa Seebana, for treatment of epilepsy (Jäger et al., 2005). The recipe for this herbal remedy contains six plants, Acrotome inflata Benth. (Lamiaceae), Aptosimum indivisum Burch. ex Benth. (Scrophulariaceae), Asparagus suaveolens Burch. (Syn. = Protasparagus suaveolens (Burch.) Oberm.; Asparagaceae), Barleria bolusii Oberm. (Acanthaceae), Commiphora marlothii Engl. (Burseraceae) and Sesamum triphyllum Welw. ex Asch. (Pedaliaceae). Equal parts of the An infusion of the plant or chewing leaves is reported to improve memory by the Kwanyama of Namibia (Rodin, 1985) plants are placed in a red-hot clay pot and the patient inhales the smoke. Both aqueous and ethanol extracts of Aptosimum Albizia adianthifolia (Schumach.) W.F. Wight The Venda healers use the roots for improving memory, inducing dreams about medicinal plants (Mabogo, 1990) indivisum and Asparagus suaveolens and the aqueous extract of Commiphora marlothii showed dose-dependent GABA_A-benzodiazepine receptor binding. Most of the plants have not been chemically investigated. Three metabolites: verbascoside, pinocembrinin 7neohesperidoside and shanzhiside methyl ester were isolated from <u>Aptosimum indivisum. Barleria bolusii contains verbascos</u>ide, which Zulu make decoction from the whole plant to treat hysteria, a cupful is administered daily is known to inhibit the GABA receptors, but did not show activity (Daels-Rakotoarison et al., 2000; Jäger et al., 2005). Verbascoside was also isolated from *Craterocapsa tarsodes* Hilliard an<mark>d B.L. Burtt</mark> (Campanulaceae) – another plant used in Northern S<mark>otho tradi-</mark> tional medicine for treatment of epilepsy (van Heerden et al., 2002). Traditional use, ethnobotanical information and known active constituents Several Amaryllidaceae alkaloids isolated from *Crinui*n L. species were screened for potential activity in the GABA_A-benz reating age associated decline in cognitive function (Parrotta, 2001) binding assay (Elgorashi et al., 2006a). However, none of the tested alkaloids displayed any affinity to the binding site. Watt (1967), one of the earliest researchers to recognize the potential of African plants in improving mental health, reported the use of Cotyledon orbiculata L. (Crassulaceae; subspecies not specified) leaves to treat epilepsy. Studies have demonstrated that both aqueous and methanol extracts of Cotyledon orbiculata have anticonvulsant properties in vivo (moderate protection against PTZ, BIC, PIC and NMDA induced seizures in mice) (Amabeoku et al., 2007). A recent study of the ethanolic extract, however, did not show in v<mark>itro GABA_A-benzodiazepine receptor binding activity (</mark>Stafford et al., 2005) suggesting another mechanism of action. Another plant investigated for potential anticonvulsive effects Hutchings et al., 1996) is Leonotis leonurus (L.) R.Br. (Lamiaceae) (Bienvenu et al., 2002), which was reported to have narcotic effects and is used as a substitute for Cannabis L. (Watt and Breyer-Brandwijk, 1962). The aqueous extracts of Leonot's leonurus (400 mg/kg) protected against or delayed seizures induced by PTZ, PIC and NMDA, but did not protect against BIC-induced seizures. In this study, the cies ethanol extracts of the three species of Leonotis (Pers.) R.Br. had Lephukhuphukhu (Z) -phukuphuku (isi-izi-) Syn: Physalis somnifera L., W. microphysalis spe weak GABAA-benzodiazepine receptor binding activity only at the highest concentration tested (10 mg/ml) (Risa et al., 2004a). The Imbubu yotaboni (Z), umbonisela (Z) Chamaecrista mimosoides (L.) Greene do aqueous extracts however were not active, suggesting that the antiup, st non-indig convulsant mechanism is not via GABA_A-benzodiazepine receptor. Myosotis afropalustris C.H. Wr. Aptosimum decumbens Schinz The ethyl acetate fraction of Centella asiatica (L.) Urb. (Apiaceae) Withania somnifera (L.) Dun* lose Colloquial name - meaning increased the effect of the i.p. administrated antiepileptic drugs | vimb (v prevent, il | 1(V): Venda, Z) Zulu; | 1 phenytoin, valproate and gabapentin (Vattanajun et al., 2005) and Muvhadangoma (V) (n) foolish person decreased the PTZ-kindled induced seizures in rats (Gupta et al., Scrophulariaceae 2003). This effect might be due to an increase in GABA levels caused Boraginaceae by the extract as reported by Chatterjee et al. (1992). The neuropro-Solanaceae Suess tective properties of the plant in monosodium glutamate treated Family rats were investigated by Ramanathan et al. (2007). The general behavior, locomotor activity and the CA1 region of the hippocampus was protected by *Centella asiatica*. The levels of catalase, superoxide dismutase and lipid peroidase in the hippocampus and striatum were improved indicating a neuroprotective property of the extract.

Very few studies have been conducted on the antiep leptogenic effect of plant extracts. Peredery and Persinger (2004) demonstrated a possible antiepileptogenic effect of a weak splution of Datura stramonium L. (Solanaceae), Gelsemium sempervirens L. (Loganiaceae) Scutellaria lateri flora continuously administrated after lithium pilocarpin induced SE in rats. Interestingly, after removal of extract administration the animals displayed numbers of spontaneous seizures comparable to control group. Another group investigated the antiepileptogenic effect of Acorus calamus L. (Araceae) in ferric chloride-induced epileptgenesis in rats (Hazra et al., 2007). Pretreatment with ethanolic extract of Acorus calamus 200 mg/kg p.o. for 14 days) decreased the wet dog shake behavior (a distinct epileptic behavior) in rats and decreased the spike wave discharges in EEG recordings. The effect was comparable to diazeparn 20 mg/kg. Also, a significant decrease in superoxide dismutase and level of peroxidation was observed, which confirmed the findings in a previous study (Tang et al., 2005).

Extensive studies have been conducted on the non-plant Withania somnifera (L.) Dun (Solanaceae). The plant grows in South Africa and might be imported by Asian immigrants. The many reported CNS effects include antiepileptic, anxiolytic, memory enhancing and antiparkinsonian properties. It has profound CNS depressant actions and it has been shown to possess anticonvulsant properties in acute and chronic models of epilepsy. Binding assays and functional assays indicated that the extract of Withania somnifera possessed its anticonvulsant activities through the GABAA receptor system. However, no bioassay-guided isolation has yet determined the active compound(s) (Kulkar ni and Dhir, 2008).

3.3. Conclusions

This review illustrates the difficulties of studying plants in assays for convulsions and epilepsy. The variety of effects, the lack of selectivity, the need for functional assays at match between *in vitro* and *in vivo* findings make it at class to examine these plants for potential new anti-epile ptic drugs. So far, very few compounds have been isolated and characterized. Most of the studies are conduced on extracts and the mechanism of action might involve several different neurotransmitter systems. When used by the traditional healers, the medicinal often combined thus increasing the potential number of tive compounds in the pool of ingredients making the identification of active components very difficult.

4. Plants used for depression

4.1. Depression in South Africa

Depressive disorders, including major depression and dysthymia, are significant and disabling illnesses. It is estimated that one in five individuals is affected by a mood disorder in his or her lifetime. The World Health Organization estimates that major depression is the fourth most important cause worldwide of loss in disability-adjusted life years, and will be the second most important cause by 2020 (Murray and Lopez, 1996). Depression affects an estimated 121 million people worldwide.

In South Africa in 1990, the overall suicide rate was 17.2 per 100.000, which is slightly higher than that in the WHO report (2001). Initial estimates from the South African National Burden of Disease Study (2000) indicated suicide as the 11th out of 20

leading causes of mortality (Bradshaw et al., 2003). South Africa has a history of traumatized citizens and is a society in transition. Suicidal behavior among the black population in South Africa has appeared to be on the increase (Lourens and Naseema, 1998). South African, black youth do not only increasingly consider suicide as an option when they cannot cope, but act on it in certain cases as well – especially when they are under severe depression (Meel, 2003). Depressive symp oms (64%) are highly prevaler t immediately before suicide (Heila et al., 1997).

South Africa is in a HIV/AIDS epidemic of shattering dimensions (Dorrington et al., 2001). At the turn of the Millennium about 200,000 had died of AIDS-related illnesses and about five million were estimated to be infected (Harber, 2002). Depression in HIV-positive individuals is significantly higher, although depressive symptoms may not be strong enough to warrant a psychiatric diagnosis (Fukunishi et al., 1997). Depressive symptoms and suicidal ideation are common among HIV-positive patients, occurring at comparable or greater rates than those found in a variety of other medically ill populations (Judd and Mijch, 1996). In South Africa, as is the case in most Third World countries, there is a serious limitation for this care as treatment for severe mental disorders is not available in most primary health care settings.

The ailment of depression is not recognized in traditional practice. However, a number of other states and conditions with symptoms similar to depression are known, for example the condition 'being put down' by the ancestors. Persor's inflicted with curses and evil spirits have symptoms that often resemble a depressed state accompanied by lethargy. The incongruence between indigenous and western disease nomenclature makes it more difficult to evaluate the use of plants in a western scientific paradigm.

4.2. Studies on plants used to treat depression in South Africa

Seventy five extracts from 34 indigenous plant species used in South African traditional medicine or taxonomically related to these were investigated for their affinity for the serotonin reuptake transport protein, making use of an *in vitro* SERT birding assay (Nielsen et al., 2004). Five plant species with high affinity were identified; they were Agapanthus campanulatus F.M. Leight, Boophone disticha (L.f.) Herb., Datura ferox L. (exotic species), Mondia whitei (Hook.f.) Skeels and Xysmalobium undulatum [L.) Aiton f.

Ethanolic extracts from Agapanthus campanulatus, Bophone disticha, Mondia whitei and Xysmalobium undulatum were screened for functional inhibition of SERT, noradrenalin uptake (NAT) and dopamine uptake (DAT) using COS-7 cells expressing hSERT, hNAT or hDAT (Pedersen et al., 2008). Extracts from Agapanthus campanulatus, Boophone disticha and Mondia whitei showed an effect in the functional assays. Ethanolic extracts from Agapanthus campanulatus, Boophone disticha, Mondia whitei and Xysmalobium undulatum, were investigated for in vivo antidepressant-like effects in three animal models for depression (Pedersen et al., 2008). The assays employed were forced swim test in both mice and rats and the tail suspension test in mice. All four extracts exhibited antidepressant-like effects in the animal models in various degrees.

Bioassay-guided fractionations of *Boophone disticha* (Amaryll-idaceae) lead to the isolation and identification of two alkaloids, buphanadrine and buphanamine with affinity for SERT (Sandager et al., 2005). Structurally, buphanamine and buphanadrine have the benzo-1,3-dioxole moiety in common with the clinically used SSRI paroxetin, which could explain their affinity to the traditional use and reported hallucinogenic effects obtained after accidental or purposeful overdosing with *Boophone disticha* extracts (De Smet, 1996; van Wyk et al., 2002) indicate that the alkaloids reach the CNS.

The activity of these alkaloids inspired further of several Amaryllidaceae alkaloids in the SERT binding assay (Elgorashi et al., 2006a). Several Amaryllidaceae alkaloids exhibited high affinity for SERT. Cherylline showed the highest activity (IC $_0$ = 3.4 μ M) in the $[^3H]$ -citalopram binding assay. Cherylline shares some structural similarities to sertraline and 4-(indol-3-yl)piperidine type SSRIs, which could explain the high affinity of the compound. Epivittatine (IC $_5$ 0 = 12.1 μ M), powelline and martidine (IC $_5$ 0 \sim 20 μ M) showed good activity. Epibuphanisi he and 0-methylmartidine showed moderate activity (IC $_5$ 0 = 78 μ M and IC $_5$ 0 = 40 μ M, respectively).

Sceletium tortuosum (L.) N.E.Br. has been used as a moodaltering substance from prehistoric times by pasto alists and hunter-gatherers in southern Africa (Gericke and Van Wyk, 2001). It contains the alkaloid mesembrine, which acts as a sero on a reuptake inhibitor (Gericke and Van Wyk, 2001). Sceletium tortuosum has been developed into a commercial product, which is sold for treatment of mild depressions and for elevation of the consumer's mood.

4.3. Conclusions

The screening programme for plants with inhibitory activity on the SERT leads to identification of five plants with promising activity. Four of these plants were further investigated in animal models for depression, where they showed activity in various degrees. From one of the plants Boophone disticha, the active constituents, Amaryllidaceae alkaloids, have been isolated. Further investigations are required to establish the safety and clinical efficacy of the plant extracts.

5. Plants used for age-related dementia and debilitative mental disorders

5.1. Age-related dementia and debilitative mental <mark>d</mark>isorders in southern Africa

The increasing average life expectancy is leading to major demographic changes worldwide. CNS disorders associated with old age, such as Alzheimer's (AD) and Parkinson's disease (PD) and other 'senile' dementia will have dramatic societal and economic impact in the next decades (World Health Report, 1998). The number of elderly people in Africa is increasing very rapidly. Figures from the UN Project Life expectancy in Africa to increase from under 40 years in 1950 to almost 60 years in 2010 (Ineichen, 2000), however, due to HIV life expectancy in southern Africa, which reached 59 years in the early 1990s, is expected to fall to 45 years by 2010. In South Africa life expectancy was 45 years (1950–1955) and rose to currently around 58 years (1995–2000) but is expected to drop again over the next decade to 56 years (United Nations, 2003).

The HIV epidemic is further complicated by the development of a subcortical dementing illness known as AIDS demential complex (ADC) (Guillemin and Brew, 2007). Highly active antiretropy in all therapy (HAART) has effectively lengthened HIV infected patients' life expectancy; indeed some are approaching an age where the risk of Alzheimer's disease (AD) is starting to become significant. Furthermore, many such patients have hyperlipidemia, which in creases the risk of AD. Consequently, it has been predicted, by Guillen in and Brew (2007) that HIV infected patients are at an increased risk of AD or ADC.

Out of the approximately 100 studies of the prevalence of dementia that have been carried out worldwide, only a small number have been conducted in Africa (Ineichen, 1998, 2000). In fact very few studies have taken place in developing countries, despite

the fact that by 2025, ar estimated 68% of the world's elderly will be living in them (Chandra et al., 1994). Hardly any epidemiological studies of mental illness in Africa have centered on or indeed on more general psychogeriatrid problems.

There are relatively a small number of reported African herbal treatments for age-related CNS disorders (Adams et al., 2007; Neuwinger, 2000). Perhaps the lower life expectancy in Africa, presently and particularly in the past, might explain why there are only a few traditional treatments for age-related illnesses. Many of the plants used to treat age-related brain disorders throughout the world are reviewed by Adams et al. (2007). Thirteen African plants are reported to be used in the context of age-related CNS disorders (Adams et al., 2007).

5.2. Alzheimer's disease

In the absence of any disease (e.g. AD, hardening of arteries in the brain) a person's mental abilities are expected to remain largely intact throughout their life. Alzheimer's disease is by far the most frequent cause of dementia, increasing in prevalence from less than 1% below the age of 60 to more than 40% above the (Lindeboom and Weinstein, 2004). Alzheimer's disease is a chronic, progressive, neurodegenerative disorder of the brain characterized clinically by deterioration in the key symptoms of activities of daily living, behavior, and cognition.

The prevalence of AD among indigenous South African subjects is not known. Local neurologists and old-age psychiatrists rarely encounter the disorder (De Villiers and Louw, 1996). Cultural attitudes in Africa surrounding dementia may have contributed to this apparent low prevalence. One suggestion is that dementia sufferers may not survive for long. They may die quickly, from conditions such as pneumonia or diarrhoea due to the decreasing status of the olderly in the developing world (Chandra et al., 1994; Levkoff et al., 1995). Another explanation is that dementia, like other kinds of mental illness, remains a stigmatised condition, and as such may be hidden from researchers (Ineichen, 2000). Given that rural communities still have difficulties in accessing tertiary health care and that memory impairment may be accepted as part of normal ageing, patients do not readily interface with clinicians (De Villiers and Louw, 1996). The demented may not even be seen as ill De Villiers and Louw, 1996). Among the Tuareg of Niger, senility is believed to be a possible consequence of an old person neglecting her duty of regular prayer (Rasmussen, 1997). Ihezue and Okpara (1989) consider that mental illness is thought of as 'African' and indigenous traditional healers might be more likely to be consulted than Western-trained doctors.

The cholinergic hypothesis states that the cognitive decline in AD is secondary to deficits in central cholinergic neurotransmission resulting from a loss of acetylcholine (ACh) (Weinstock, 1999). Of the various possible strategies for enhancing cholinergic activity in the brain, acetylcholinesterase (AChE) inhibition has been by far the most extensively used (Weinstock, 1999). Acetylcholinesterase inhibitors enhance central cholinergic function by inhibiting the enzymes that degrade ACh, thereby increasing the availability of ACh to stimulate nicotinic and muscarinic receptors within the brain. Since their introduction into clinical practice, AChE inhibitors have been, and remain, the standard approach to the symptomatic treatment of AD. In the United States, these agents are the only approved pharmacologic approach shown to be effective in this disease (Grossberg, 2003).

Understanding of the pharmacologic and toxic properties of cholinesterase inhibitors has been available for over a century (Felter and Lloyd, 1898). Perhaps, the earliest records of toxic effects of cholinesterase inhibitors concern the perential African plant *Physostigma venenosum* Balf. (Fabaceae). The seeds of this

plant, indigenous to Calabar on the coast of Nigeria in West Africa, were used by local people for "trial by ordeal" to determine the guilt or innocence of an accused criminal. The alkaloid physostigmine, was first isolated from Physostigma venenosum seeds in 1864 by Jobst and Hesse (Lloyd, 1897). When the clinical potential of AChE inhibitors in AD treatment was realized, it was noted that physostigmine was not suitable due to its unfavorable pharmacokinetics, notably its short half-life. Many analogous compounds were synthesized to overcome this and resulted in rivastigmine, which is now marketed by Novartis Pharma AG (Basel, Switzerland) (Grossberg, 2003). Galanthamine, an Amaryllidaceae alkaloid originally isolated from the European snowdrop (Galanthus L. species), is currently marketed as a hydrobromide salt under the name Razadyne®, formerly Reminyl®, for the treatment of AD. For an elegant and comprehensive review of the discovery and development of this drug consult Heinrich and Teoh (2004).

5.3. Studies on plants used to treat Alzhiemer's disease in South Africa

Aqueous and ethanol extracts of five plants used in southern Africa to treat memory loss; Malva parviflora L. (leaves), Bopphone disticha (L.f.) Herb. (leaves and bulbs), Albizia adianthi olia (Schumach.) W. Wright (stem bark), Albizia suluensis Gerstner (root bark) and Crinum moorei Hook.f. (bulbs) were investigated for AChE inhibitory activity (Risa et al., 2004b) using an assay on thin layer chromatography (TLC) is also based on Ellman's reaction (Ellman et al., 1961). Promising results were obtained with Amaryllidaceae bulbs of Boophone disticha and Crinum moorei. Aqueous and ethanol extracts of Crinum moorei and Boophone disticha also showed AChE inhibiting activity in the TLC assay. These findings together with the long acting, selective, reversible, and competitive AChE inhibitory properties of galanthamine led to the search for other AChE inhibitors from the family Amaryllidaceae. Elgorashi et al. (2004) screened 23 Amaryllidaceae alkaloids, belonging to four ring types, which were isolated from Crinum moorei Hook,f., Crinum macowanii Baker, Crinum bulbispermum (Burm.f.) Milne-Redh, & Schweick, and Cyrtanthus falcatus R.A. Dyer for their AChE inhibitory activity using both the assay on TLC and a 96-well microplate assays also derived from Ellman's method.

Differences in AChE inhibitory activity could be related to structural differences, in particular different ling types. Lycorine-type alkaloids were the most active against AChE with 1-O-acetyllycorine (IC₅₀ = 0.96 μM) exhibiting inhibitory activity comparable to that of galanthamine. The inhibitory act vity of the alkaloids lycorine and 1,2 di-O-acetyllycorine was 100 times less potent than that of 1-O-acetyllycorine (Elgorashi et al., 2004)

These findings support earlier reports claiming the inhibitory activity of AChE by lycorine-type alkaloids (López et al., 2002). López et al. (2002) suggested that the aromatic ring C that gives a certain planarity to those molecules could explain the higher activity of assoanine and oxoassoanine compared to other lycorinetype alkaloids. Crinum glaucum and Crinum jagus (Amaryllidaceae) have been used in Nigeria by traditional healers for memory loss and other CNS-related ailments associated with aging. Houghton et al. (2004) isolated alkaloids from the plants and tested their AChE inhibitory properties. It is interesting to note that hamayne isolated and assayed by Elgorashi et al. (2004) from Crinum macownii showed an IC₅₀ of 553 µM against 250 µM for the compound investigated by Houghton et al. (2004). The compounds were tested in a different microplate assays the later according to the method of Perry et al. (2000). The difference between the two studies is also apparent with lycorine (IC₅₀ = 450 μ M compared to 213 μ IV). It is difficult to compare the two studies as they have used different

positive controls (galanthamine IC₅₀ = 1.9 μM and physostigmine IC₅₀ = 0.25 μM, respectively).

QSAR studies were conducted to uncover the relationship between the AChE inhibitory effects of South African Amaryllidaceae alkaloids and their physicochemical properties using stepwise multiple linear regression analysis (Elgorashi et al., 2006b). The regression analysis based on the physicochemical properties of all the alkaloids shows that strain errors, heat of formation, substituents at ring C and the aromatic ring play significant roles in the AChE inhibitory activity. Good linear regression was obtained when ring-type based models were established for crinine-type and lycorine-type alkaloids. The study also revealed that log P of most of the alkaloids investigated is comparable to that of galanthamine and this would suggest that they could pass through the brain-blood barrier (Elgorashi et al., 2006b).

Alignment of representative alkaloids with galanthamine revealed that the active binding site of 1-O-acetyllycorine might be different from that of galanthamine (Elgorashi et al., 2006b). However, the surface energy potential showed close similarities in charge distribution between 1-O-acetyllycorine and galanthamine-type alkaloids. The predictive potential of the models established in the study is however limited to this class of compounds and the physicochemical parameters in vestigated.

Several studies have been investigated the memory enhancing effect of Withania somnifera (L.) Dun (Solanaceae) and an extensive review was conducted by Kulkarni and Dhir (2008). The investigations include the isolation of withanoloids, which inhibit AChE and BuChE dose dependently. Treatment with withanoloid A also isolated from Withania somnifera induced significant regeneration of axons and dendrites in memory-deficient mice. Withanosid IV isolated from the root induced neurite outgrowth in cultured rat cortical neurons.

The effect of *Centella asiatica* (L.) Urb. on cognition and memory impairment has been widely studied. Oral administration (200 mg/kg) of *Centella asiatica* for 15 days dose-dependently enhanced the learning and memory in 3 months old mice as assessed by the radial arm maze test (Rao Sulochana et al., 2005). AChE activity levels in the hippocampus and dendritic arborisation of CA3 pyramidal neurons showed significant increase indicating, that treatment with *Centella asiatica* extract during the early postnatal developmental stages can produce long lasting beneficial effects on the mouse brain (Rao Sulochana et al., 2005). These findings were supported by improved memory in normal rats after *Centella asiatica* administration (Veerendra and Gupta, 2002). Yanan et al. (2008) suggest that *Centella asiatica* mediate its memory enhancement through the ERK/RSK signalling pathway.

5.4. Parkinson's disease

Parkinson's disease (PD) affects one in every 100 persons above the age of 65 years; it is the second most common neurodegenerative disease after Alzheimer's disease (De Rijk et al., 2000). It is the most common neurologically based movement to disorder, clinically diagnosed by the presence of bradykinesia, postural instability, resting tremor and rigidity. PD occurs worldwide, but the prevalence and incidence appear to exhibit substantial geographic and ethnic variability, with generally lower rates reported in Africa (Okubadejo et al., 2006). Much of the variation has been attributed to methodological differences of studies, but genetic ard environmental diversity may be contributory (Okubadejo, 2008).

To date PD remains an incurable disease. The currently available pharmacological and non-pharmacological treatments are able to offer only symptomatic relief for patients (Katzung, 2001). Symptoms can be managed with several different drugs most of which

either boost the levels of dopamine in the brain or mimic the effects of dopamine.

Because dopamine is preferentially deaminated by MAO-B in the human brain, MAO-B inhibitors should increase the basal central dopamine levels in patients with Parkinson's disease. The inhibitor selegiline was developed for the treatment of Parkinson's disease based on this hypothesis (Knoll, 2000). MAO-B inhibition also has neuroprotective effects. Since the oxidation step caralyzed by MAO-B yields reactive hydrogen peroxide as a byproduct of amine turnover, the generated hydrogen peroxide and other reactive oxygen species may cause deterioration in neuronal function or eventually lead to neuronal death. MAO inhibitors reduce oxidant stress by limiting the formation of this reactive species and nence, may contribute to the control of the aging process (Knoll, 2000). The enzymatic activity of MAO-B increases with age, and is particularly high around senile plaques (Yamada and Yasuhara, 2004).

A disadvantage of the treatment is that (*R*)-depreny is netabolized to (*R*)-ethamphetamine which has vasopressor properties (Vlok et al., 2006). Due to the disadvantage of the side effects associated with the traditional non-selective irreversible (AOIS (e.g. 'cheese effect') coupled with the potential therapeutic value of new inhibitors that are reversible and selective towards either MAO-A or MAO-B, the search for new MAO inhibitors is validated (Vlok et al., 2006).

5.5. Studies on plants used to treat Parkinson's disease in Sou<mark>th</mark> Africa

In a study of 20 southern African traditionally used plants which were screened for MAO inhibition and specific MAO-B inhibition activity, the non-polar extracts of Ruta graveolens L. (an exotic species that has been incorporated into South African traditional medicine) leaf material exhibited good MAO inhibitory activity (ethyl acetate extract=IC o 5 µg/ml; petroleum ether extract = $3 \mu g/ml$) and specific MAO-B inhibition (ethyl acetate extract = I_{50}° 7 μ g/ml; petroleum ether extract = 3 μ g/ml) (Stafford et al., 2007). Schotia brachypetala Sond., Mentha aquatica L. and Gasteria croucheri (Hook.f.) Baker also exhibited good MAO-B inhibition activity. MAO activity was detected using a continuous peroxidaselinked photometric assay which was carried out in the 96-well microplate format modified from Holt et al. (1997) and Schmidt et al. (2003). Positive controls were clorgyline (selective MAO-A inhibitor) and selegiline (*R*-deprenyl) (selective MAO-B inhibitor) which exhibited IC₁₀ values of 31 nM and 111 nM, respectively.

Naringenin, a flavonoid was later isolated from a 70% ethanol extract of Mentha aquatic, an indigenous mint to Africa and Europe, by bioassay-guided isolation using the same continuous peroxidase-linked photometric assay (Olsen et al., 2008). The IC₅₀ values for MAO inhibition by naringenin were found to be $3 \pm 2 \pm 33 \,\mu\text{M}$ for the rat liver mitochondr al fraction, $955 \pm 129 \,\mu\text{M}$ for NIAO-A and $288 \pm 18 \,\mu\text{M}$ for MAO-B. It has been considered doubtful whether plant constituents, especially flavonoids, are able to reach the brain. Naringenin has been shown to pass the blood-brain barrier (Youdim et al., 2004), which means that it can exert an effect on the CNS. Naringenin has been shown to have many effects outside the CNS, such as being a cancer chemopreventive agent, a mutagenic inhibitor, a genotoxicology inhibitor, and having antioxidant, hypocholesterolic, antibacterial, antiviral, antialiergic, antiangionetic, apopotic and cytostatic activity (Hodek et al., 2002). This non-selectivity might limit the compound's dlinical use. The antiparkinsonian effect of Withana somnifera has been

reviewed elsewhere (Kulkarni and Dhir, 2008; Gupta and Rana, 2007). In short, Withana somnifera significantly inhibited haloperidol or reserpine induced catalepsy; reversed all parameter of oxidative stress in the 6-hydroxydopamine model in rats

and reduced reserpine-induced vacuous chewing rhovements and tongue protrusions in animal models of tardive dyskinesia (Kulkarni and Dhir, 2008; Gupta and Rana, 2007).

5.6. Conclusions

Using ethnobotanical knowledge as a guide in deciding which southern African plants to screen for the treatment of age-related CNS ailments is perhaps not the best option, due to the relatively small number of such traditional treatments. Taxonomic based decisions, such as screening southern African Amaryll daceae for AChE inhibitors, on the knowledge that European general have given promising candidates, may be more successful. To date only one alkaloid, 1-O-acetyllycorine from Crinum moorei Hook.f., has shown activity comparable to that exhibited by galanthamine. Perhaps further studies on other Amaryllidaceae genera, such as Apodolirion Baker, Brunsvigia Heist., Cyrtanthus Aiton, Gethyllis L., Haemanthus L. and Strumaria Jacq. ex Willd. may yield novel alkaloids with promising activity.

Steroidal alkaloids of members of the Buxaceae, Sarcococca Lindl. and Buxus L. species have shown anti-cholinesterase activities by Atta-ur-Rahman and Choudhary's group (Choudhary et al., 2003, 2005; Atta-ur-Rahman et al., 2004). There are only to representative of this family in South Africa, Buxus macowanii Oliv. and Buxus natalensis (Oliv.) Hutch. which have not been investigated for cholinesterase inhibited ry activity.

6. Concluding remarks

In this review we have seen that a number of plants used in traditional medicine for mental health problems have shown activity in bioassays for selected targets matching their traditional usage. For the plants used for dementia and age-related problems, inhibition of the enzymes acetylcholinesterase or monoamine oxidase B seems to be the mechanisms of action, whereas the plants used for epilepsy and convulsion, and for depression, might influence more than one type of receptor system. Several plants seem to hold potential for further investigation and development to the fortest ment of depression, where both in vitro and in vivo studes activity.

In some cases the active constituents have been is plated and structures elucidated. This has made it possible to gain further information on how the compounds act. QSAR studies on Amaryllidaceae alkaloids isolated from *Crinum* and *Cyrthanthus* species has revealed a possible new mechanism of action. One of the alkaloids, 1-O-acetyllycorine, was more active than galanthamine, currently in clinical use, which indicate potential for further development.

Knowledge of active constituents opens up a possibility for development of standardized products, which would belp secure a more reliable medication for patients. This could be a business opportunity for companies developing traditional medicine products. Overall, the findings reported in this review yield creditability to some of the practices used in South African traditional medicine in the treatment of mental illness.

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