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Herbodetox agents: Naturally detox our internal organs

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Abstract---From the skin to the liver, the human body has a built-in detoxification mechanism that keeps it running properly on a daily basis. The natural system has been undermined by our contemporary way of life, which includes increased levels of stress, pollution, and poor eating habits. The identification of naturally occurring herbs that may aid in the cleaning of the urinary system and/or other organs is urgently needed. These plants can be found in abundance in the wild. The actions of herbal agents and pollutants increase the body's vigour while also detoxifying the critical organs. The capacity of nature's detox herbs to cleanse the kidney, liver, intestines, skin, and blood of toxins has been revived in this study that aids the lungs, kidneys, digestive system, and skin.

Keywords---Detoxifiers, Toxins, Kidney, Liver, Skin.

Introduction

Detoxifying our bodies with herbs has been a popular technique since ancient times, and while its popularity waned in the latter half of the twentieth century, it

appears to be rebounding in recent years. Herbal detoxification, in its most basic form, is a natural technique to stimulate the organs of our body that are responsible for detoxification. Even though the human body is meant to expel all hazardous elements on a daily basis, the amount of toxic elements to which we may be exposed has increased unnaturally in our period due to an increasingly polluted environment and an irregular lifestyle. As a result of the increased exposure to toxins, natural detox chemicals have become increasingly important, resulting in a variety of health problems, including degenerative diseases and chronic symptoms. Detox-diet is a well-known concept that refers to a diet that allows our bodies to naturally rid themselves of poisonous substances. Any proper and fully fledged herbal detox treatment must include a proper diet. However, it would be entirely incorrect to assume that a regular diet and a detoxification diet have any similarities. A general diet is designed to help you lose weight and/or get the body shape you want in a short amount of time. When it comes to battling harmful substances, this type of diet isn't very effective. A detoxifying diet, on the other hand, focuses on cultivating the habit of consuming what nature provides us depending on our unique health requirements and conditions.

There are many plants in nature that provide the greatest answers for treating various diseases and health concerns with minimal negative effects. The practise of herbal detox can be divided into numerous categories based on the herbs employed, including organ detox, heavy metal detox, fat detox, and alcohol detox. The detoxifying effects of herbs and their mechanisms in several important organs are the main emphasis of this section.

1. Toxicity

The basic principle behind herbal detoxification science is quite complex, and one must strive to grasp it step by step before being able to profit from it. In general, the first step in any herbal detox programme is to gain a better understanding of what toxins are and how they effect our bodies. Toxins are typically unique forms of proteins or conjugated proteins produced by pathogenic bacteria, higher plants, and animals. A toxin's toxicity is defined as its ability to cause harm to the cell or organism that it is injected into. Toxins are combated by the human body's inherent defence mechanisms. Throughout our whole life cycle, a collection of antibodies, including leukocytes, constantly engage toxins with the goal of protecting us from diseases and other health concerns. However, there are occasions when the amount of toxins put into our bodies is so great that they outnumber and overwhelm the human body's natural defences. The symptoms of those specific pollutants begin to show up in certain conditions, with noticeable impacts on our health.

Varied toxins have different effects on the human body based on their level of toxicity and the degree of exposure. The consequences of toxicity can be delayed, chronic, long-lasting, or acute. Acute poisoning has the fastest consequences of any of them. Acute poisoning has the fastest consequences of any of them. This type of poisoning occurs when a large amount of a very poisonous material, such as bleach or kerosene, is inhaled, eaten, drunk, or absorbed. The effects of ingesting an acute toxic drug are usually immediate, even if they are less obvious

and noticeable most of the time and manifest themselves as erratic breathing, skin rashes, or mild to severe headaches. Exogenous toxins account for the majority of toxic chemicals with high toxicity levels. Their impacts on our bodies frequently manifest as long-term ailments. However, these symptoms may reappear after coming into contact with the dangerous material in question from time to time. The more often a person comes into contact with the particular drug that intoxicates the body, the more severe the symptoms get over time¹.

Endocrine disrupting chemicals, carcinogens, and reproductive toxins are the three types of toxic compounds that have a delayed or long-term effect. Endocrine disrupting chemicals (EDCs) are compounds that target the body's endocrine system, as the name implies. Endocrine disruptors are recognised for their ability to alter the flow of several hormones in our bodies, making their effects exceedingly unpredictable. Carcinogens, on the other hand, are poisons that frequently cause cancer. These potentially lethal toxins put the cell's DNA at risk of being altered or damaged. The unregulated proliferation of the afflicted cells is caused by DNA damage, a phenomenon that can lead to cancer.

The human reproductive system is also harmed by reproductive poisons. Teratogens, which cause metabolic and physical defects in the developing foetus if a pregnant woman comes into contact with them, Mutagens, which affect the genetic component of cells, Lactation toxins, which are transferred from the breast-feeding mother to her baby, and Infertility or sterility toxins, which affect the fertility of both men and women, are the four categories of toxins.

Vaccinations and shots, which we receive after a few months of birth and throughout our lives, are the least expected but most common sources of toxins. Toxins are rarely expected to enter our systems through vaccinations, which are provided solely for the purpose of curing or preventing diseases. Vaccination programmes, on the other hand, have a number of long and short-term adverse effects. Toxic substances can harm our immune systems as well. The allergic reaction or hypersensitivity to particular chemicals is one of the most frequent types of immunological dysfunction. According to a study conducted by the US National Toxicology Program in 1984, the majority of immune system damage was caused by excessive levels of chemical toxins disrupting our natural metabolic processes. Curing and preventive strategies for health disorders caused by interaction with toxic substances can be easily found in nature in the form of various plants, which is fortunate for us.

2. Liver Toxicity

The liver performs a wide range of critical activities in the body's upkeep and performance. Carbohydrate, protein, and fat metabolism, detoxification, and bile secretion are only a few of the important tasks. As a result, maintaining a functioning liver is critical for general health and well-being. Environmental pollutants, bad dietary habits, alcohol, and prescription and over-the-counter drug usage, among other things, are known to harm and weaken the liver, leading to hepatitis, cirrhosis, and alcoholic liver disease². Toxic liver disease can be caused by a variety of factors, including medications. A variety of over-the-counter (OTC) and prescription medications can cause toxic liver disease. If used

in excess or while drinking alcohol, the over-the-counter medications NSAIDs, aspirin, ibuprofen, and naproxen sodium can cause toxic liver damage. Antifungal treatments including niacin, steroids, and allopurinol for the treatment of gout, as well as antiviral pharmaceuticals for the treatment of HIV infection, are available in addition to antibacterial medications like amoxicillin-clavulanate and erythromycin. Popular herbs could actually be harming your liver. Supplements containing aloe vera, black cohosh, cascara, comfrey, ephedra, or kava should be avoided. Certain toxins can harm the liver if they are exposed to them at work. Carbon tetrachloride, paraquat, and polychlorinated biphenyls are all examples of vinyl chloride, which can be found in a range of home and industrial products. Drug-induced liver injury can be divided into three categories (Fig. 1). Direct hepatotoxicity, idiosyncratic hepatotoxicity, and indirect hepatotoxicity are among them. In animal models with a latency time measured in days, direct drug-induced liver injury is prevalent, dose-related, predictable, and reproducible³. Direct drug-induced hepatotoxicity has an intrinsic cause, especially when the offending substances are given in high dosages. The most common type of direct drug-induced hepatotoxicity is characterised by elevated serum liver enzymes and the absence of jaundice. Symptoms include a high level of serum ALT and a low level of alkaline phosphatase (Alkp). Coagulopathy, unconsciousness, and increased ammonia levels are further symptoms of severe hepatic failure, which usually appear within days⁴. Acute fatty liver, sinusoidal blockage, and nodular regrowth are some of the other pathologies associated with direct hepatotoxicity. Hepatotoxicity caused by idiosyncratic drugs is a rare but unpredictable medical disease. Idiosyncratic hepatotoxicity is most commonly caused by an idiosyncratic metabolic or immunological reaction. It has a variable latency duration that can span from days to years. Both alanine aminotransferase and alkaline phosphatase levels are raised, with the former enzyme showing higher levels⁵. Chronic hepatitis, mixed or cholestatic hepatitis, and bland cholestasis are other characteristics of idiosyncratic drug-induced hepatotoxicity. Acute hepatitis, immune-mediated hepatitis, fatty liver, and chronic hepatitis are phenotypes linked to drug-induced indirect hepatotoxicity⁶.

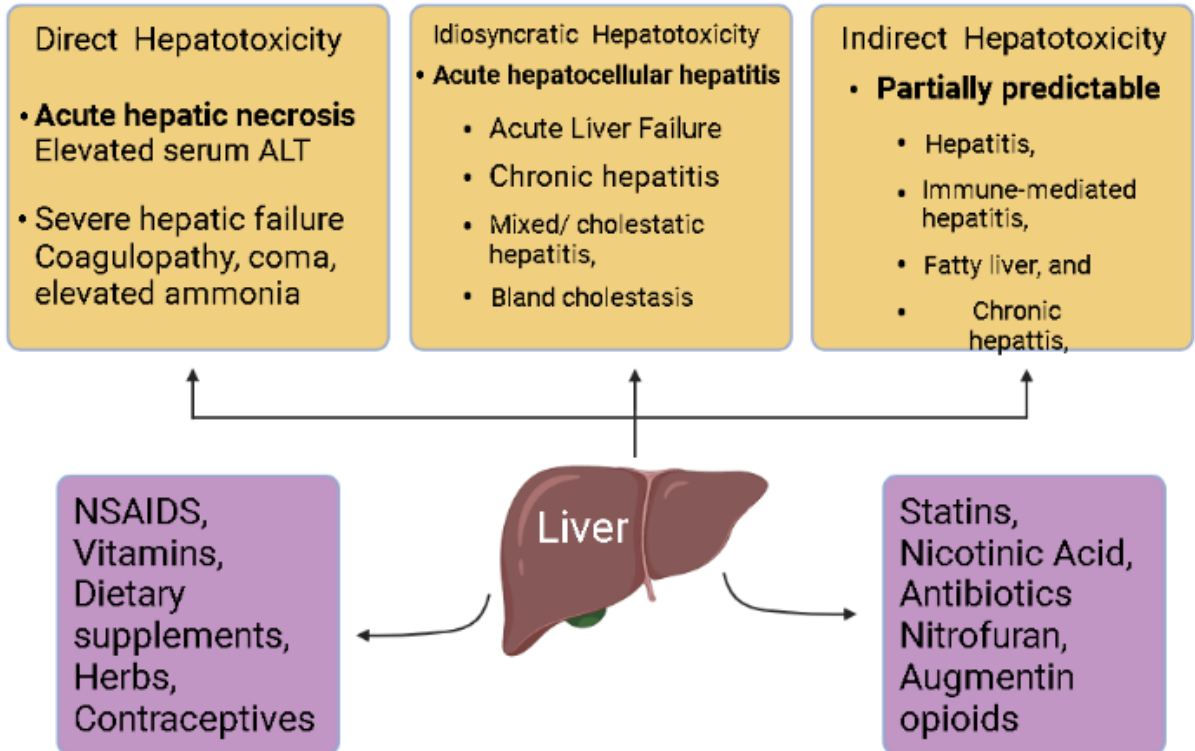


Figure 1: Drugs and dietary supplements can induce many types of liver disease. The use of medications and dietary supplements can cause three different forms of drug-induced hepatotoxicity. Direct hepatotoxicity is typically intrinsic and moderate in comparison to idiosyncratic and indirect hepatotoxicity, where ALF can occur in the first two and the third can be largely foreseeable.

2.1 Herbal detox agents for liver

Zingiber officinale, often known as African ginger, Gingembre (French), or Jengibre (Spanish), is an extensively utilised rhizome used for medicinal and culinary purposes. Undocumented ethnomedicinal uses include stimulation of salivary duct secretion, toothache alleviation, nasal decongestion, cold, cough, and asthma when the plant's peeled rhizome component is chewed raw, processed, or decocted. Additional uses include diuretic, expectorant, antirheumatic, carminative, and infective hepatitis and other liver disorders⁷. An ethanol extract of *Zingiber officinale* rhizome was tested for its effect on carbon tetrachloride (CCl₄) and acetaminophen-induced liver damage in rats⁸.

The primary phenolic compounds in the three plant extracts employed to study liver detoxification treatment dandelion—leaf and root extracts, as well as a commercial root powder—were identified by HPLC analysis⁹. Oil Red O staining and triglyceride levels study both revealed lower lipid and triglyceride buildup. The MTT assay was used to investigate cytotoxicity, and the results showed that none of the doses tested were harmful. The extracts regulated the expression of a

number of genes and long non-coding RNAs that are important in the control of adipogenesis, according to DNA microarray analysis. Our findings suggest that the dandelion extracts utilised in this investigation may have a substantial role in adipogenesis and lipid metabolism, suggesting their therapeutic potential as possible candidates for obesity treatment.

Through its antioxidative, anti-lipid peroxidative, antifibrotic, anti-inflammatory, immunomodulating, and liver regenerating effects, *Silybum marianum* (milk thistle) has been shown to have clinical applications in the treatment of toxic hepatitis, fatty liver, cirrhosis, ischemic injury, radiation toxicity, and viral hepatitis¹⁰. In the process of liver fibrogenesis, hepatic stellate cells play a key role. They multiply and change into myofibroblasts in response to fibrotic effects (e.g., prolonged ethanol exposure, carbon tetrachloride, etc.). Myofibroblasts are responsible for the deposition of collagen fibres in the liver. The effect of silybin on the transition of hepatic stellate cells into myofibroblasts was studied in a recent study. Silybin [10⁻⁴ mol/l concentration] inhibited 75 percent of the growth of freshly isolated rat hepatic stellate cells. It also inhibited the conversion of stellate cells to myofibroblasts and suppressed the gene expression of fibrosis-related extracellular matrix components¹¹.

The effects of alfalfa plant and sprout saponins on diet-induced liver cholesterol accumulation, bile acid excretion, and jejunal and colonic morphology, as well as alfalfa plant and sprout saponin-free alfalfa plant saponin-free alfalfa plant saponin-free alfalfa plant saponin-free alfalfa plant saponin-free alfalfa plant saponin-free Cholesterol-saponin interactions have been proposed as explanations underlying alfalfa's hypocholesterolemic effects and morphological alterations in the intestine¹². Significant amounts of cholesterol were bound by alfalfa plant saponins in both ethanol solution and micellar suspension. Saponins from alfalfa sprouts had a smaller but still substantial interaction with cholesterol. Another indicator of saponin-cholesterol interaction was the ability of sprout saponins to strongly suppress the growth of *Trichoderma viride*. The interaction between saponin and cholesterol is a major aspect of alfalfa's hypocholesterolemic effect.

Turmeric, a bright yellow spice extracted from the tuberous rhizome of the plant *Curcuma longa*, has been used for centuries in traditional Indian and Chinese medicine to treat a variety of ailments, including jaundice and hepatic disorders, rheumatism, anorexia, diabetic wounds, and menstrual problems. Curcumin's anti-inflammatory benefits are supported by anecdotal and experimental evidence, however, there is insufficient clinical evidence to warrant further clinical research and development of this phytochemical as a safe nutraceutical medication for chronic human inflammatory illnesses. Curcumin is a poor regulator of humoral or cell-mediated immune responses, according to the research. Curcumin appears to boost antibody production, according to limited experimental evidence. Curcumin, on the other hand, reduces the synthesis of cytokines by macrophages and lymphocytes, particularly those with proinflammatory effects, as well as T-lymphocyte proliferative and cytotoxic responses in vitro¹³. Curcumin's inhibitory effects on T-cell activities in vitro have yet to be tested in vivo to see if they can prevent transplant rejection or reduce the severity of T-cell-mediated inflammatory disorders. Curcumin appears to have a key role in inhibiting T-cell proliferation, cytokine production, and inflammation via inhibiting transcription factors NF-B and AP-1.

Table 1: A Summary of herbal agents, their active constituents and mechanism of action for detoxification of liver

Herbal Agents	Active Constituents	Mechanism of Action	References
Zingiber officinale	6-gingerol, 6-shogaol, and 6-paradol.	Protects against CCl ₄ and acetaminophen-induced damage.	[7,8]
Dandelion	Beta-cryptoxanthin, lutein and zeaxanthin, vitamins A, B1, B2, B3, C, E, and K; alpha and beta carotene; beta-cryptoxanthin; beta-cryptoxanthin; lutein; zeaxanthin; tannins; caffeine; caffeine and coumaric acid;	Decreases lipid and triglyceride accumulation. Inhibits adipocyte differentiation.	[9]
Milk thistle	silibinin (silybin), silychristin, and silidianin,	increased protein synthesis and antifibrotic action, as well as anti-inflammatory and immunomodulatory properties, are only some of the potential benefits of this compound.	[10,11]
Alfalfa	The flavonoids, isoflavonoids, sterols, and derivatives of coumarins, as well as protein and vitamins A, B, B1, and B6, as well as vitamins C and E and vitamin K, as well as minerals calcium, potassium, and iron and zinc	Alfalfa's steroidal saponin fraction, combined with fibre from the plant, is thought to be responsible for alfalfa's hypocholesterolemic.	[12]
Turmeric	curcumin (diferuloylmethane), desmethoxycurcumin, and bisdemethoxycurcumin are the major constituents responsible for turmeric's yellow hue.	TNF- α activated human endothelial cells, which were inhibited in their inflammatory response by interfering with the NF- κ B pathway.	[13]

3. Skin toxicity

Dermal toxicity refers to a substance's ability to create a local response and/or systemic poisoning in humans or animals when it comes into contact with the skin. Toxic chemicals' absorption through the skin is influenced by their chemical makeup and solubility to varying degrees. In order to assess the impact of nanoparticles on people who come into touch with them dermally, a thorough understanding of the link between dermal and systemic exposure is required. The following are some of the most frequent skin toxins: By skin contact, paraformaldehyde is mildly hazardous. It was recently identified as a potential human carcinogen. When skin is exposed to paraformaldehyde, it can produce itching and a rash, which can lead to a skin allergy if exposed repeatedly. M- and o-phenylenediamine are found in hair dyes, and they irritate and sensitize the skin, damage DNA, and have the potential to cause cancer in some people.

According to a recent animal research from the National Institute for Occupational Safety and Health, or NIOSH, skin exposure to the poisonous fluorinated chemical originally used to produce Teflon could offer the same health risks as consuming the molecule in water or food. The research, which will be published in the peer-reviewed journal *Food and Chemical Toxicology* next month, looked at the effects of the chemical PFOA on the immune systems of mice who were exposed to high doses of the molecule via the skin. The substance is one of hundreds in the PFAS family of fluorinated chemicals.

3.1 Skin detoxification using herbal agents

Many dietary plant items, including as fruits, vegetables, drinks, herbs, and spices, contain polyphenols. Several of these substances have been discovered to suppress inflammation and cancer in experimental animals, as well as possessing significant biological characteristics. Furthermore, epidemiological studies have shown that those who eat foods high in particular polyphenols have a lower risk of developing inflammatory diseases. Polyphenols in food have anti-inflammatory properties¹⁴. Inflammation has long been treated with aspirin and other non-steroidal anti-inflammatory medicines (NSAIDs). COX-2 expression in mouse skin was reduced by pre-treatment with green tea extract enriched with catechin and epigallocatechin gallate (EGCG), which was activated by the tumour promoter 12-O-tetradecanoylphorbol-13-acetate (TPA). In TPA-stimulated human mammary epithelial cells (MCF-10A) in culture, EGCG inhibited COX-2¹⁵. Both green tea catechin and EGCG reduced IL-1-dependent pro-inflammatory signal transduction in cultured respiratory epithelial cells and showed COX inhibition efficacy in LPS-induced macrophages¹⁶. This shows that downregulation of COX-2 in skin fibroblasts may be one of the anti-inflammatory mechanisms used by these drugs to combat skin inflammation such atopic dermatitis^{17, 18}.

Triacylglycerols, sterols, tocopherols, and diterpenes of the kaurene family make up the majority of the lipid fraction in green coffee beans, with the latter accounting for up to 20% of the total lipids¹⁹. Green coffee oil is used in cosmetics for its properties of maintaining natural skin humidity²⁰ and may also have a potential as a sun protector due to the ultraviolet absorption property of the main fatty acid, linoleic acid²¹. Commercialized coffee fruit extracts containing CGA,

condensed proanthocyanidins, quinic acid, and ferulic acid have demonstrated promising results in facial skin care²².

Table 2: A Summary of herbal agents, their active constituents and mechanism of action for detoxification of skin

Herbal Agents	Active Constituents	Mechanism of Action	References
Herbal Tea	compounds such as carotenoids and phenolic acids as well as flavonoids and coumarins.	Inhibition of proinflammatory enzymes like cyclooxygenase 2 (COX-2), lipoxygenase (LOX), and inducible NO synthase may also be a molecular mechanism for tea polyphenols' anti-inflammatory effects (iNOS) in various epithelial cells.	[14-18]
Coffee	triacylglycerols, sterols, tocopherols, and diterpenes, Green coffee oil, CGA, condensed proanthocyanidins, quinic and ferulic acid,	maintains natural skin humidity and acts as a sun protector.	[19-22]

4. Kidney Toxicity

The kidney is the primary organ responsible for a variety of important functions in the human body, including detoxification, regulation of extracellular fluids, homeostasis, and excretion of toxic metabolites²³. The term "nephrotoxicity" refers to a rapid decline in kidney function caused by the toxic effects of drugs and substances. There are several types, and some medicines may have multiple effects on renal function. Nephrotoxins are chemicals that cause kidney damage. Nephrotoxicity should not be confused with the fact that some drugs are mostly excreted through the kidneys and must have their dose altered to account for the reduced renal function (e.g., heparin). Most medications have a stronger nephrotoxic effect in people who already have renal failure. (Drugs cause and induce about 20% of nephrotoxicity; this number is higher in the elderly due to increased life expectancy and poly-medications.)

ACE inhibitors, Gentamicin, amphotericin B (including radiocontrast medium), immunoglobins, mannitol, and aminoglycosides are all hazardous substances that cause nephrotoxicity. With Cardiovascular Disease -blockers, diuretics, and vasodilators, to name a few. Sulphonamides, methotrexate, aciclovir, diethylene glycol, and triamterene cause tubular blockage. Bacteria-lactam antibiotics, rifampicin, vancomycin, ciprofloxacin, nonsteroidal anti-inflammatory drugs (NSAIDs), ranitidine and cimetidine, furosemide and thiazides, phenytoin, and acute interstitial nephropathy cause Lithium salts, Ciclosporin, Chronic interstitial nephritis.

The most prevalent nephrotoxic antibiotic is gentamicin. The most prevalent nephrotoxic aminoglycoside is gentamicin²⁴. Despite careful patient monitoring, the rate of gentamicin-induced nephrotoxicity is significant²⁵. The most convenient site of harm caused by aminoglycoside drugs is the proximal tubule epithelial cells of the kidney²⁶. The expression of a particular transporter in the proximal tubule appears to be responsible for gentamicin-induced drug accumulation and nephrotoxicity^{27, 28} (Figure 2). Although the exact mechanisms of aminoglycoside antibiotic-induced kidney injury are unknown, oxidative stress induction and impairment of intracellular organelle functionality are thought to be implicated²⁹⁻³¹ (Figure 2). Aminoglycosides have been shown to induce cytotoxicity in mitochondria, lysosomes, and the endoplasmic reticulum^{32, 33} (Figure 2). Furthermore, drug buildup in tubular cell plasma membranes may contribute to aminoglycoside-induced nephrotoxicity^{34, 35} (Figure 2).

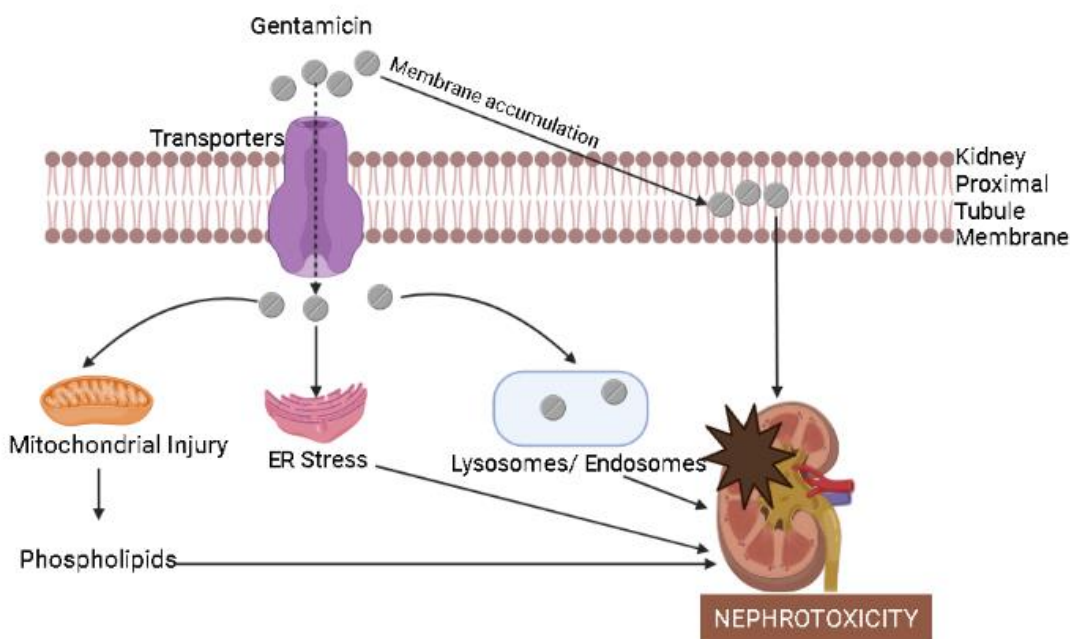


Figure 2. Mechanisms of gentamicin-induced nephrotoxicity as documented in prior studies

4.1 Herbal detox agents for kidney

Pedaliium murex Linn (family: Pedaliaceae) (*P. murex*), also known as Large Caltrops and Gokhru (India), is a shrub native to India's southern Deccan area and parts of Ceylon. The plant's many parts are used to cure a variety of diseases, including coughs, colds, and as an antiseptic. The plant's nephroprotective properties have been studied pharmacologically. In a Cisplatin-induced renal damage model on Wistar rats, the nephroprotective effect of the ethanolic extract of the dried fruits of *P. murex* was assessed utilising serum creatinine, blood urea, and change in body weight as indices of kidney damage. The typical medication was cystone. The impact of extract on Cisplatin-induced kidney damage in rats was studied in five groups (n=6). For 10 days, Group 1 was given

similar amounts of vehicle (distilled water), which served as a usual control. Cisplatin 5 mg/ kg body weight, single dose, i.p. was given to groups 2, 3, 4, and 5. (intraperitoneal). To check for the persistence of renal injury, blood was taken from group second on the 5th day and from group third on the 15th day. The fourth group received a curative regimen of 250 mg/kg ethanolic extract of *Pedalium murex* linn, whereas the fifth group received cystone (standard medication) 500 mg/kg combined with cisplatin 5 mg/kg for five days. Animals were anaesthetized with chloroform and slaughtered after two weeks of therapy. Blood was subsequently drawn through heart puncture, and the kidneys were promptly dissected and placed in 10% formalin for histological examinations^{36, 37}. At a dose of 250 mg/kg, p.o., the results demonstrated a significant change in body weight, serum creatinine, and urea levels. When compared to cystone, the ethanolic extract of *P. murex* dried fruits demonstrated considerable nephroprotective effects³⁸. The effects of ethanolic and aqueous extracts of *P. murex* fruits (300 and 600 mg/kg, p.o. body weight) on cadmium chloride-induced (3 mg/kg/s.c.) renal toxicity in rats were measured using blood urea nitrogen, serum creatinine, urinary protein, urine to serum creatinine ratio, lipid peroxidation, glutathione, and catalase in the kidney. The results show that in a dose-dependent manner, ethanolic and aqueous extracts with CdCl₂ greatly reduced kidney damage³⁹⁻⁴¹ (Figure 3).

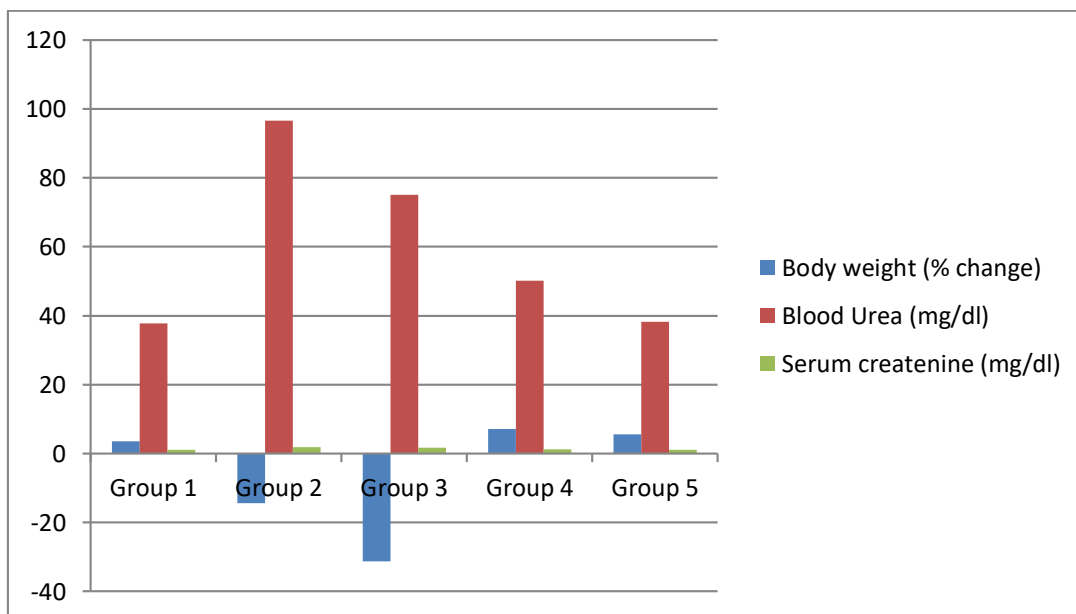


Figure 3: A graph demonstrating the variations in body weight percent, blood urea, and serum creatinine in wistar rats, based on data from the study done in 2009 by Prafulla Adkar⁴¹.

Traditional herbalists have utilised fenugreek seeds to treat renal issues⁴². The primary alkaloid phytoconstituent of fenugreek seeds, trigonelline (N-methylnicotinic acid, N-methyl betaine), suppresses oxidative stress in the kidney and reduces renal cell death and fibrosis. The antiurolithiatic properties of

fenugreek seeds are thought to be due to increased diuresis, antioxidant activity, and a decrease in urine concentrations of stone-forming components.

In cultured rat embryos, chlorpyrifos was also found to cause mitotic defects and dose-dependent apoptosis. Organophosphates have been shown to cause apoptosis in immune cells by exerting a direct effect on mitochondria, resulting in DNA damage and cellular death. Apoptosis in immune cells occurs as a result of a direct influence on mitochondria, which results in DNA damage. Reduced mitochondrial function eventually leads to altered reabsorption in the proximal convoluted tubule, resulting in urea, uric acid, and creatinine balance problems. Curcumin is essential for the detoxification of chlorpyrifos-exposed kidneys. Curcumin keeps biochemical levels like urea, uric acid, and creatinine in check⁴³. It also restores Glomerulus, Bowmens capsule, PCT, and DCT to their original state, ensuring normal nephron absorption and reabsorption. Curcumin appears to promote a higher level of bioremediation of chlorpyrifos-induced kidney injury.

Table 3: A Summary of herbal agents, their active constituents and mechanism of action for detoxification of kidney

Herbal Agents	Active Constituents	Mechanism of Action	References
Pedelum murex Linn.	polyphenolics (flavonoids and phenolics), glycosides like sapogenin (diosgenin-0.06%) and soluble proteins (20.14 mg/g).	Pedaliium murex (P. murex) Linn. is used traditionally for various ailments in India and has been investigated for its antiulcerogenic, nephroprotective, hypolipidemic, aphrodisiac, antioxidant, antimicrobial and insecticidal properties.	[41]
Saunf (Trigonella foenum-graecum)	carbohydrates, proteins, lipids, alkaloids, flavonoids, fibers, saponins, steroidal saponins, vitamins, and minerals, nitrogen compounds	Reduces oxidative stress in kidney and increases the production of urine.	[42]
Curcuma longa	curcumin (diferuloylmethane, the primary constituent responsible for yellow color of turmeric), desmethoxycurcumin, and bisdemethoxycurcumin.	Maintains the level of urea, uric acid creatinine, absorption and reabsorbtion in nephrone.	[43]

5. Gallbladder toxicity

The gallbladder is a digestive accessory organ that stores and concentrates bile in between meals. The gallbladder contracts in reaction to food and discharges bile into the small intestine. Bile acids enter the intestinal lumen in this way, making dietary lipid absorption easier. The gallbladder contributes significantly to the composition of bile moving into the main bile ducts and into the intestine due to its specific absorptive and secretory characteristics. In several clinical situations, including gallstone disease, the gallbladder undergoes structural and functional alterations. The danger of gallbladder poisoning, on the other hand, is little understood. Gallbladder toxicity is caused by antibiotics like erythromycin and ampicillin, which leads to hypersensitivity-induced cholecystitis. In addition, studies have connected cyclosporin, dapson, anticoagulant treatment, narcotics, and anticholinergic medications to gallbladder disease. Bile builds up as a result, which can cause irritation. Cholecystitis can also be caused by bile duct abnormalities, tumours, acute illness, and various infections.

5.1 Herbal detox agents for gallbladder

Hitrechol® is a herbal drug that has been used to treat gallstone disease since the 1970s. It is useful to treat early-stage cholesterol gallstones, as well as solitary and numerous cholesterol gallstones. Hitrechol® is made up of a pure extract of *G. hederacea* that contains saponins, essential oil, and phenolic chemicals (such as flavonoids, tannins, caffeic acid, and chlorogenic acid⁴⁴. The chemical structure of Hitrecholsaponin ®'s ursolic acid is comparable to that of UDCA, one of the bile acid compositions in mice gallbladders that has been shown to be efficient in dissolving gallstones via lysis of cholesterol crystals^{45, 46} and modifying bile secretion⁴⁷. Saponins and essential oils have been shown to lower total cholesterol levels considerably^{48, 49}. Anti-inflammatory⁵⁰, antispasmodic⁵¹, liver-protective⁵², choleric⁴⁷, litholytic⁵³, antioxidant⁵⁴, antibacterial⁵⁵, and anticancer⁵⁶ are all probable pharmacological properties of *G. hederacea* active components, according to certain investigations. It can assist to minimise the inflammatory process induced by mechanical irritation in the gallbladder wall due to gallstones, as well as relax the muscle cells in the bile ducts, allowing bile to flow more freely⁵⁷. Hitrechol® TID (three times daily) was found to be the most effective dose regimen for reducing gallstone formation and improving liver protection by modifying bile composition, increasing antioxidative biomarkers, and suppressing IFN-gamma release.

Psyllium (PSY) has a well-documented lipid-lowering action. PSY lowers the lithogenic index and reduces the production of cholesterol gallstones. This was investigated by feeding male golden eagles. Syrian hamsters were fed lithogenic diets containing 5 g/100 g fat, 0.4 g/100 g cholesterol, and 0, 4, or 6% PSY or 1% cholestyramine (CHY). In PSY and CHY-fed hamsters, the molar percentages of biliary lipids, BC (biliary Cholesterol), PL, and bile acids were significantly different from controls. The effects of feeding 6 percent PSY were similar to those of feeding 1 percent CHY in terms of lowering the molar percentage of BC and raising the molar percentage of bile acids (Figure 4). The LI was standardised to a value of 1.0 in hamsters fed 6 percent PSY or 1 percent CHY. The addition of 4

and 6 percent PSY or 1 percent CHY to the gallstone-inducing diet greatly reduced the production of cholesterol gallstones⁵⁸.

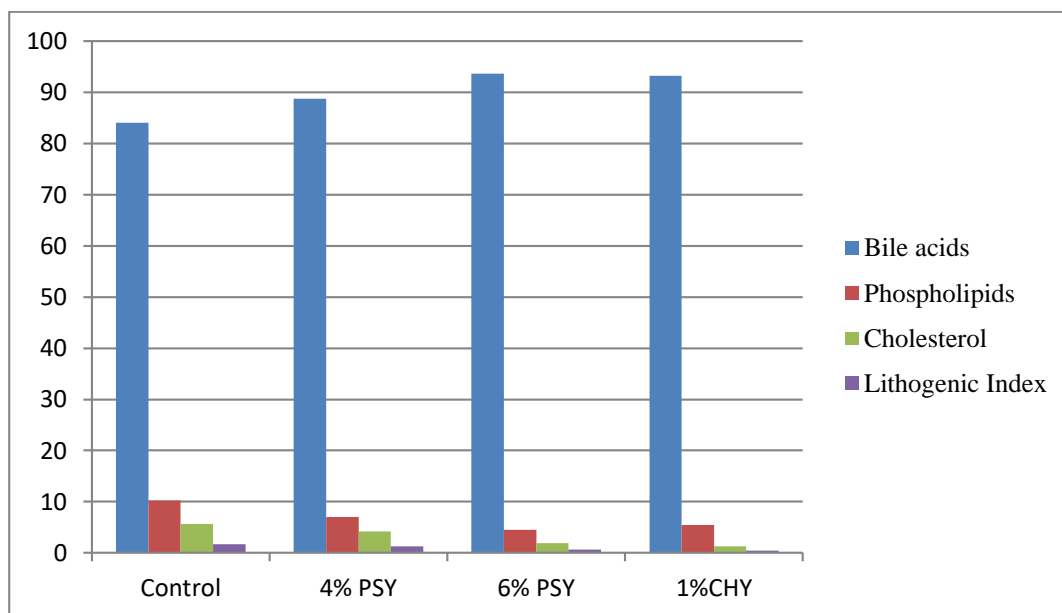


Figure 4: A Graph elucidating the lipid lowering effect of psyllium from the result presented by Elke A. in 1999⁵⁸

Table 4: A Summary of herbal agents, their active constituents and mechanism of action for detoxification of Gallbladder

Herbal Agents	Active Constituents	Mechanism of Action	References
Glechoma hederacea	Saponins, flavonoids, tannins, caffeic acid, and chlorogenic acid.	Decreases gallstone formation and increases liver.	[57]
Psyllium	hexoses, pentoses, and uronic acid are all examples of this.	absorption of more water and the stimulation of regular bowel movements.	[58]

6. Cardiac toxicity

Cardiotoxicity refers to the occurrence of heart electrical malfunction or muscular harm. As the heart weakens, it becomes less efficient in pumping blood and hence circulating it. Chemotherapy medications such as anthracyclines, Trastuzumab, bevacizumab, lapatinib, and sunitinib can cause cardiotoxicity⁵⁹. Chemotherapy medications such as Aunorubicin, Epirubicin, and Idarubicin, as well as Cyclophosphamide, Fluorouracil, and Mitoxantrone, can cause cardiac toxicity. All of these medications have the potential to cause heart failure (HF) or other problems⁶⁰⁻⁶² (See Figure 5). Anorexia nervosa complications; heavy metal intake side effects; long-term usage or ingestion of large dosages of some strong stimulants like cocaine; or an inappropriately supplied medicine like bupivacaine.

POPs, such as PCBs, OCs, PBDEs, dioxins, furans, and PFOEs; phthalates, BPA, and hydrocarbons; and hydrocarbons may cause it. Cardiotoxic effects can also be caused by tricyclic antidepressants, cardiac glycosides, and adrenergic medications.

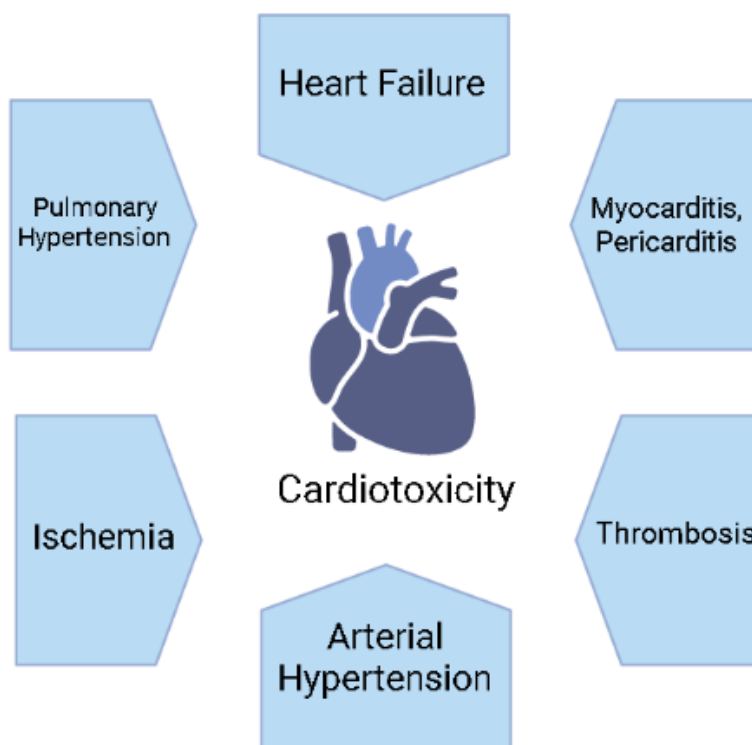


Figure 5: Cardiotoxicity as a result of cancer treatment [4,9].

6.1 Heart detoxification using herbal agents

Garlic (*Allium sativum*), a Liliaceae family member, is a popular cultivated food all over the world. Garlic is one of the earliest cultivated plants, hailing from Central Asia. Fresh garlic homogenate (FGH) 250 mg/kg in combination with captopril (CAP) was found to be more efficient in lowering SBP, cholesterol, triglycerides, and glucose⁶³. Catalase activities in heart tissue were dramatically increased in rats treated with FGH, SACS (Sallyl cysteine sulphoxide), CAP, FGH+CAP, and SACS+CAP, in addition to Super Oxide Dismutase (SOD). In addition, combining FGH 250 mg/kg with CAP resulted in a significant decrease in blood LDH and Creatine Kinase Myocardial Band (CK-MB) activity as well as an increase in cardiac tissue homogenate. Furthermore, the combination of SACS and CAP had a super-additive (synergistic) effect on blood pressure reduction and angiotensin converting enzyme (ACE) inhibition. Concurrent usage of garlic or its bioactive ingredient, SACS, with captopril may have a positive effect, according to this study.

In albino rats, the alcoholic and aqueous extracts of *Caesalpinia crista* were tested for protection against isoproterenol-induced myocardial infarction (85 mg/kg bw). Increased levels of marker enzymes such as creatine kinase-isoenzyme (CK-MB), lactate dehydrogenase (LDH), serum glutamate oxaloacetic transaminase (SGOT), and serum glutamate pyruvate transaminase (SGPT) in serum, along with increased lipid peroxide and reduced glutathione content in heart homogenates, indicated heart damage caused by isoproter. The increased marker enzyme levels in serum and heart homogenates in isoproterenol-induced myocardial infarction were significantly reduced (p 0.01) after pretreatment with an ethanolic and aqueous extract of *Caesalpinia crista* at a dose of 400 mg/kg body wt, orally for 30 days⁶⁴. Histopathological examination demonstrated that the extract provided significant protection against cardiac necrosis⁶⁵.

Table 5: A Summary of herbal agents, their active constituents and mechanism of action for detoxification of heart

Herbal Agents	Active Constituents	Mechanism of Action	References
<i>Allium sativum</i>	phytoconstituents such as quercetin and other sulfur-containing phytoconstituents are found in sativum.	Inhibiting ACE reduces a number of pathways known to reduce plasma volume and vasoconstriction which contributes to garlic's ability to lower blood pressure.	[63]
<i>Caesalpinia crista</i>	ethanolic seed extract of <i>Caesalpinia crista</i> for the presence of flavonoids, alkaloids, tannins, triterpenoids, coumarin glycosides, and proteins.	The polyphenols in <i>C. crista</i> extracts quench free radicals in many ways. Antioxidant activities were shown by extracts, which also protected DNA and the cell membrane from oxidative stress. As a result, herbal medicine may be utilised to treat oxidative stress-related illnesses. Thus protecting the heart from isoproterenol induced myocardial infarction.	[64, 65]

Future prospects

The kidneys aid in blood filtering and waste and excess fluid elimination through urine. Toxins may be eliminated from the digestive system more quickly with the help of the digestive tract. Perspiration and germs are easily evacuated through the pores of the skin. The body's defences are strengthened in order to combat any diseases that may enter. The liver's job of protecting the body from toxins and keeping them out of the bloodstream is made easier by herbal detox agents. Detoxing the body's major organs using herbs not only removes toxins, but also improves overall vigour and function. This could be very useful in the future without causing any harmful side effects.

Conclusion

The study looked at the detoxification effects of numerous medicinal plants on various regions of the body, such as the kidneys and liver. For the treatment of renal detoxification, liver detoxification, and other ailments, a variety of medicinal plants and extracts have been used. These plants' medicinal potential is likely owing to their neuroprotective, cytoprotective, immunomodulatory, antioxidant, and anti-inflammatory characteristics, as well as their ability to lower oxidative stress and numerous toxins found in body parts that might harm our important organs. As a result of this, it can be stated that herbal medicine contains a wide range of pharmaceuticals that can be used to treat and revitalise a wide range of illnesses. As a result, more research is needed to better understand the various characteristics and mechanisms of drugs.

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