A Review of Medicinal Plants in Cardiovascular Disorders: Benefits and Risks

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Abstract

Many cultivated and wild plants are used for the management of various diseases, specifically
renal and hepatic diseases and those of the immune and cardiovascular systems. In China,
medicinal plants from ancient to modern history have been used in patients with angina pectoris,
congestive heart failure (CHF), systolic hypertension, arrhythmia, and venous insufficiency for
centuries. The latest increase in the fame of natural products and alternative medicine has
revived interest in conventional remedies that have been consumed in the management of CVD.
The cardio-protective properties of the various herbs are possibly due to their antioxidative,
antihypercholesterolemic, anti-ischemic activities, and inhibition of platelet aggregation that
reduce the risk of CVD. Ethno-pharmacological and biological properties of these plants are
explored, based upon published scientific literature. Although a majority of medicinal plants
having a biological mechanism that linked with CVD management. To date, published literature
pertains to their promising scientific properties are still poorly understood. Compared with
synthetic medicines, alternative medicines do not need scientific studies before their formal

approval from the government sector and due to this purpose; their safety, as well as efficacy, are still remained elusive. Taken together, we addressed all accessible evidence on alternative medicines commonly consumed in CVD management. Our comprehensive analysis of the scientific literature indicated that many TCM is available and valuable herbal medication would be the best alternative for the management of CVD as a complementary therapy. Furthermore, practitioners should always discuss possible benefits-risks of alternative medicines with patients so that they conscious with the consumption of alternative medication.

Keywords: Herbal medicine; Phytochemicals; Cardiovascular disease; Herbal regulation; Drug interactions; Side effects; Herbal education; Patient counseling.

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Conflict of interest

All authors declare there is no conflict of interest regarding the content of the article.

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