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## ETHNOBOTANICAL STUDY ON THE USE OF MEDICINAL PLANTS WITH ANTIVIRAL INTEREST, CASE OF SARS-COV-19, IN THE REGION OF SERAIDI (ANNABA, NORTH-EAST ALGERIA)

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### ABSTRACT

The taxonomic diversity and the richness of the region of Seraidi (North-East Algeria) in medicinal plants, as well as the appearance of diseases of viral origin, in particular, the current pandemic of SARS-CoV-2, led us to the realization of an ethnobotanical survey of plants with antiviral interests. The survey was conducted based on a pre-established quiz, with 120 people from different categories of the population of Seraidi, with the aim of listing the medicinal plants used in the treatment of viral diseases and collecting as much information as possible on this subject. After analyzing, the information provided by the people interviewed, we listed 32 species belonging to 20 families, of which the Lamiaceae family is the most represented. Older women are the most affected by the use of plants; people without a higher intellectual level have the most knowledge about the use of plants with antiviral interest. The leaf is the most widely used organ, in the form of a decoction or infusion, administered orally.

**Keywords :** Medicinal plants with antiviral interest, Seraidi, ethnobotanical survey, traditional use, local population.

### Introduction

Several researches on the use of plants in traditional medicine and pharmacopoeia have resulted in the discovery of the active ingredients of many drugs used in modern medicine today (Aboudou *et al.*, 2021; Leonti *et al.*, 2017; Soh and Benoit-Vical, 2007; Cragg, and Newman, 2002). That is why, until now, plants have played a main role in the art of healing.

To avoid the risk of loss of knowledge of medicinal plants and their uses in traditional medicine and in order to translate popular knowledge into scientific knowledge, ethnobotanical survey is essential.

Ethnobotanical investigation is a science that defines the interrelation between the plant populations in a socio-cultural context (Rivière *et al.*, 2005). The studies carried out in the Northeast of Algeria have revealed a wealth of medicinal flora, but there are still species that are little explored, and unknown.

To this end, we carried out an ethnobotanical survey in order to identify the medicinal species with antiviral interests, in the region of Annaba, represented by the area of Seraidi (North-East Algeria). This study was initiated following the health crises experienced over the past three years, with the appearance of the emerging virus SARS-CoV-2 (Coronavirus, COVID-19). Several studies have been carried out to find a natural remedy against this virus (Helali *et al.*, 2019; Haoud and Mellali, 2021; Plante *et al.*, 2021; Hamdani and Nouari, 2021; Sehailia and Chemat, 2021).

As a result, our study is a contribution to the recognition of medicinal plants with antiviral interests in the

region of Northeast Algeria, Seraidi, state of Annaba, with the aim of a sustainable development of its natural resources.

On the other hand, the choice of an ethnobotanical survey within a local population is linked to their low income, leading to a return to traditional herbal medicine.

### Materials and Methods

#### Description of the study area

The commune of Seraidi is a colonial forest village, located 13 km from the city of Annaba (capital of the state), and situated in the middle of the mountain range at 850 m of altitude.

This mountain range extends over a distance of 80 km, from the island of Cap of Keep to Cap of Iron. The highest point rises to 1008m above sea level and is located at a place called "Kef Esbâa" (Saadi, 2013).

The distribution of the vegetation at the level of the Edough massif is done according to the local ecological conditions: altitude, bioclimate, topography, substrate, soil, floors,... In addition, this forest is characterized by the presence of the most beautiful formations of cork oak (*Quercus suber*), Zen oak (*Quercus faginea*), with their floral procession, to which are added groups of maritime pine (*Pinus pinaster*) and chestnut (*Castanea sativa*) (Toubal, 1989).

The Edough massif enters the sub-humid bioclimatic stage, according to the pluvial-thermal quotient of Emberger (1957), with the highest temperatures being observed in August and the lowest in January. Precipitation is mainly encountered during the cold seasons, exceeding 900 mm (Bouزيد, 2019).

### Ethnobotanical survey

In order to collect and constitute a source of information ready to be exploited on the scientific level, in the field of the valorization of medicinal plants with antiviral interest, an ethnobotanical investigation was carried out.

This information was collected using a questionnaire. The answers to the elaborated questions were made through conversations with healers, herbalists and rural women's cooperatives installed in the Seraidi region and the local population.

The people, who agreed to share their knowledge with us in the antiviral interest, enabled us to draw up a technical sheet (**Figure-01**), containing the following information: the vernacular name of the plants; the method of preparation, route of administration; and parts of the plants used.

The survey took place between July 2020 and September 2021, using the quiz that was submitted to people in direct contact with the medicinal plants mentioned above, throughout the Seraidi region. The number of people questioned is 120, of different ages, of different intellectual levels, and divided between the two sexes.

The information collected in the technical sheets has been processed and analyzed. At the same time, a bibliographical research was developed for the scientific identification of the listed taxa, in order to be able to select the species having an antiviral activity with the aim of sustainable valorization, through an in-depth phytochemical study. To do this, we consulted online documentation related to plant systematics and taxonomy (INPN, 2022; APGIII, 2009; APGIV, 2016).



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## Medicinal plants with antiviral interest

### QUIZ

Date: .....

#### ❖ Informant information:

- Sex :  Male  Feminine
- Age : ..... old
- Level of study:  Nil  Primary  Secondary  university
- Family situation:  Single  Married

#### ❖ Plant material:

- Vernacular name: .....
- Scientific name: .....
- Harvest season: .....
- Plant use:  Therapeutic  Cosmetic  Others: .....
- Plant alone  Possible association (of plant)
- Plant condition :  Fresh  Dried  After treatment
- So parched, drying method: .....
- Parts used :  Flowers  Fruits  Seeds  Stem  Bark  Rhizome  
 Bulb  Leaves
- Method of preparation :  Infusion  Decoration  Poultice  Maceration  
 Fumigation  Raw  fresh juice  powder  essential oil

#### ❖ Dose used:

- Dose not specified:  Pinch  Handle  Spoonful  Glass  Bowl
- Dose specified: Quantity in g/glass: .....
- Quantity in g/liter: .....
- Method of administration :  Oral  Direct application  Inhalation
- Duration of use (duration of treatment) :  
 One day  One week  One month  Until healing
- Method of conservation :  
 Protected from light  Exposed to light  Others: .....
- Duration of conservation: .....

**Fig. 1** : Quiz on medicinal plants with antiviral interest adopted for the ethnobotanical survey

## Results and Discussion

### Inventory of medicinal plants with antiviral interest

Our ethnobotanical study has identified 32 medicinal plants with antiviral properties used by the population of the

Seraidi region. Table-01 provides information on the listed species, specifying the scientific names in French and Arabic, the part of the plant used, the method of preparation, and the route of administration.

**Table 1 :** Médicinal Plants with anti viral Properties and their route of Administration

N°	Scientific name	Family	Vernacular name	Part used	Method of preparation	Route of administration
01	<i>Origanum vulgare</i> L.	Lamiaceae	Oregano	Leaves	Decoction / Infusion / Poullice	Oral / Inhalation
02	<i>Thymus capitatus</i> (L.) Hoffmanns. & Link	Lamiaceae	Thyme	Leaves	Decoction / infusion	Oral / Inhalation
03	<i>Lavandula angustifolia</i> Mill.	Lamiaceae	Lavender	Leaves / Flowers	Decoction / Poullice/ Raw	Oral / Direct application
04	<i>Thymus vulgaris</i> L.	Lamiaceae	Thyme	Leaves	Infusion / Decoction	Oral
05	<i>Artemisia herba-alba</i> Asso.	Asteraceae	Wormwood	Leaves	Decoction / Infusion / Maceration	Oral
06	<i>Zingiber officinale</i> Roscoe	Zingiberaceae	Ginger	Rhizomes	Decoction / Infusion / Maceration / Raw	Oral
07	<i>Curcuma longa</i> L.	Zingiberaceae	Curcuma	Rhizomes	Decoction / Direct application	Oral
08	<i>Glycyrrhiza glabra</i> L.	Fabaceae	Licorice	Rhizomes	Direct application / Infusion / Decoction	Oral
09	<i>Cinnamomum zeylanicum</i> Blume	Lauraceae	Cinnamon	Rhizomes	Decoction	Oral
10	<i>Eucalyptus globules</i> Labill.	Myrtaceae	Eucalyptus	Leaves	Decoction	Oral / Inhalation
11	<i>Syzygium aromaticum</i> (L.) Merr. & L.M. Perry	Myrtaceae	Clove	Flowers / Fruits	Essential oil / Infusion / Powder	Oral / Direct application
12	<i>Allium sativum</i> L.	Amaryllidaceae	Garlic	Bulbs	Raw / Fresh juice / Poullice / Maceration	Oral / Direct application
13	<i>Pistacia lentiscus</i> L.	Anacardiaceae	Lentiscus	Leaves / Flowers / Fruits	Essential oil / Maceration / Powder/ Infusion	Oral / Direct application
14	<i>Allium cepa</i> L.	Amaryllidaceae	Onion	Bulbs	Decoction / poullice / Raw / Fresh juice	Oral / Direct application
15	<i>Olea europaea</i> L.	Oleaceae	Olive	Leaves / Fruits / seeds	Essential oil / Raw / Decoction	Oral / Direct application
16	<i>Verbena officinalis</i> L.	Verbenaceae	Verbena	Leaves	Decoction / Infusion	Oral
17	<i>Citrus sinensis</i> (L.) Osbeck	Rutaceae	Orange	Leaves / Bark / Fruits	Decoction / Fresh juice / Raw	Oral
18	<i>Citrus limon</i> (L.) Burm.f.	Rutaceae	Limon	Fruits / Leaves	Decoction / Raw / Fresh juice	Oral
19	<i>Mentha spicata</i> L.	Lamiaceae	Menthe	Leaves	Decoction / raw	Oral
20	<i>Cupressus arizonica</i> Greene	Cupressaceae	Cypress	Leaves / Rods / Flowers	Decoction	Oral
21	<i>Melissa officinalis</i> L.	Lamiaceae	Lemon balm	Leaves	Infusion	Oral
22	<i>Pulmonaria officinalis</i> L.	Boraginaceae	Pulmonary	Leaves	Infusion	Oral
23	<i>Salvia officinalis</i> L.	Lamiaceae	Sage	Leaves	Decoction / Infusion	Oral
24	<i>Artemisia absinthium</i> L.	Asteraceae	Absinthe	Leaves	Decoction / Fresh juice	Oral
25	<i>Ziziphus lotus</i> (L.) Lam.	Rhamnaceae	Sidra	Leaves / Roots	Decoction	Oral
26	<i>Nigella sativa</i> L.	Ranunculaceae	Black bean	Seeds	Raw / Decoction / Essential oil	Oral / Direct application

27	<i>Pinus sylvestris</i> L.	Pinaceae	Pin	Leaves	Decoction	Oral
28	<i>Myristica fragrans</i> Houtt.	Myristicaceae	Nutmeg	Fruits	Decoction / Powder	Oral
29	<i>Urtica dioica</i> L.	Urticaceae	Nettle	Leaves / Roots	Decoction / Poultice / Powder	Oral / Direct application
30	<i>Origanum majorana</i> L.	Lamiaceae	Marjoram	Leaves	Decoction	Oral
31	<i>Brassica rapa</i> L.	Brassicaceae	Turnip	Rods	Fresh juice / Raw	Oral
32	<i>Arisarum vulgare</i> O.Targ.Tozz.	Araceae	Loudly	Leaves	Poultice	Direct application

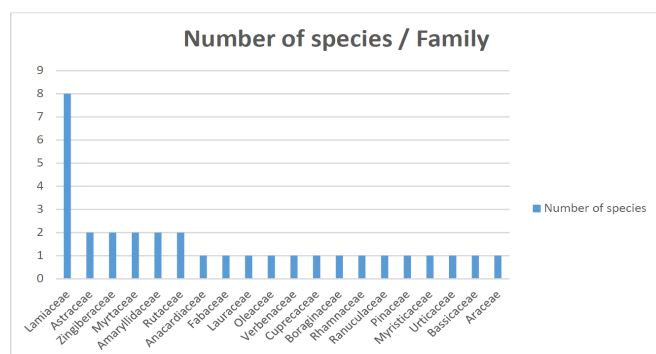
The 32 species listed are grouped into 20 families, the most represented of which is the Lamiaceae family, with 25%; the rest of the families are represented by a percentage varying from 3% to 6% (Figure-02).

This result is consistent with ethnobotanical work carried out in Algeria, Africa and the Mediterranean basin, where we observed the dominance of the Lamiaceae family (Benlamdini *et al.*, 2014; Hseini and Kahouadji, 2007; Lahsissene *et al.*, 2009; Boutabbia *et al.*, 2011; Brahmi *et al.*, 2022; Dieye and Sarr, 2021; Kouame *et al.*, 2021; Koudouvo, 2009).

We can also note that all the species identified in the Seraidi region were mentioned in the online survey conducted by Hamdani and Houari (2020), carried out on 500 people, including 49% suffering from COVID-19, in different regions of northern Algeria.

To this end, the most recommended medicinal plants with antiviral interest for the treatment and prevention against COVID-19 infection by the population of Seraidi, and cited in the majority of research work carried out in Algeria (Helali *et al.*, 2019; Haoud and Mellali, 2021; Brahmi *et al.*, 2022; Boutabia *et al.*, 2011; Bouafia *et al.*, 2021) and in Morocco (Benlamdini *et al.*, 2014; Hseini and Kahouadji, 2007 ; Lahsissene *et al.*, 2009 ; Belhaj and Zidane, 2021; Najem *et al.*, 2022) are *Origanum vulgare*, *Thymus vulgaris*, *Zingiber officinale*, *Eucalyptus globulus*, *Artemisia herba-alba*, *Syzygium aromaticum*, *Allium sativum*, *Citrus limon*, *Melissa officinalis*, *Pulmonaria officinalis*, *Ziziphus lotus*, *Urtica dioica* and *Pistacia lentiscus*.

Recent studies (Sehailia and Chemat, 2021; Tshibangu, 2020; Tahrioui *et al.*, 2020; Asdadi *et al.*, 2020; Boughendjioua *et al.*, 2022; Tahrioui *et al.*, 2020; Belhaj and Zidan, 2021; Fouedjou *et al.*, 2021) have confirmed the efficacy of the molecules extracted from the antiviral plants cited above, as well as the recommendation of their use for the treatment of patients with SRAS-CoV-2.



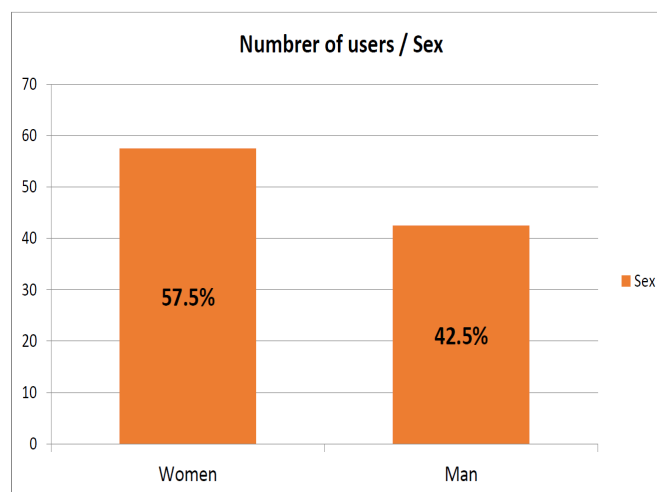
**Fig. 02:** Distribution of botanical families used in the treatment of viral diseases in the Seraidi.

### Ethnobotanical survey:

The information collected through the answers to the quiz was analyzed and discussed using the graphs illustrated below:

### Use of medicinal plants with antiviral interest according to gender:

Data analysis has shown that medical knowledge is shared between men and women, with a slight advantage going to the latter, with percentages of 57.5% for the female sex and 42.5% for the male sex (Figure-03).



**Fig. 03:** Use of medicinal plants with antiviral interest according to sex

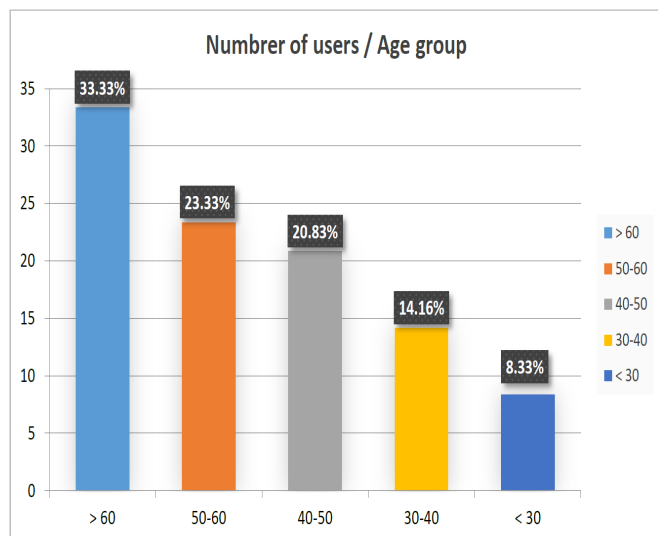
These results agree with the general rule of Mehdioui *et al.*, 2007, who affirm that women are holders of great traditional phototherapeutic knowledge inherited from mother to daughter.

Several ethnobotanical works also confirm the finding of our study, either nationally (Aribi, 2013; Boutabia *et al.*, 2011; Chermat and Gharzouli, 2015; Hamel *et al.*, 2018; Helali *et al.*, 2020; Hamdani and Houari, 2020; Brahmi *et al.*, 2022), or internationally (Koudouvo, 2009; Benkhiguel *et al.*, 2011; Laarbya, 2017; Dougnon *et al.*, 2018; Rhattas *et al.*, 2016; Kouame *et al.*, 2021).

### Use of medicinal plants with antiviral interest according to age:

The use of medicinal plants with antiviral interest is present in all age groups, with a predominance in people over 60 years old (33.33%). Then come the age groups [50-60] and [40-50] with a percentage of 23.33% and 20.83%, respectively. The age group [30-40] corresponds to a frequency of use of 14.16%. Among informants aged under

30, the percentage of use of plants is less important, with 8.33% (Figure-04).



**Fig. 04 :** Use of medicinal plants with antiviral interest according to age

It should be noted that the elderly have a great knowledge of medicinal plants in general (local vernacular names, methods of use, parts used), thus preserving a heritage from their parents.

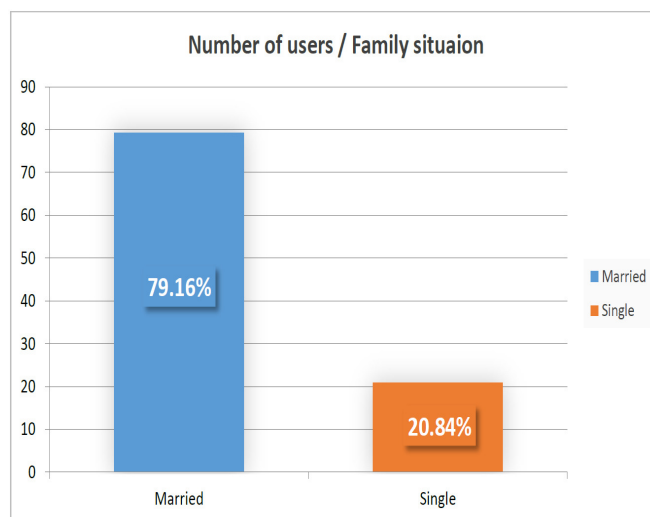
These results also indicate the existence of a close link between age and the degree of knowledge, confirming the reliability of the information held by the elderly, because they hold a good part of the ancestral knowledge that is part of the local tradition (Anyinam, 1995; Tamboura *et al.*, 1998; Hsein and Kahouadji, 2007 ; Binkhnigue *et al.*, 2011; Mahdioui *et al.*, 2007; Benlamdini *et al.*, 2014; Kouame *et al.*, 2021).

However, Helali *et al.* (2020) reported that people between the ages of 18 and 30 are the most frequent users of medicinal plants (38%), while the lowest rate is noted among people over 60, with a percentage of 6.5%. Brahma *et al.* (2022) observed the same results in western Algeria. The people interviewed in the two studies cited above live in urban areas, unlike the people questioned in this work, who live in mountainous and riverside areas.

#### Use of medicinal plants with antiviral interest according to family situation

According to the respondents, married people (79.16%) use medicinal plants with antiviral interest much more than single people (20.84%) (Figure-05). Users in couples are more interested in the field of herbal medicine (Boughrara, 2016).

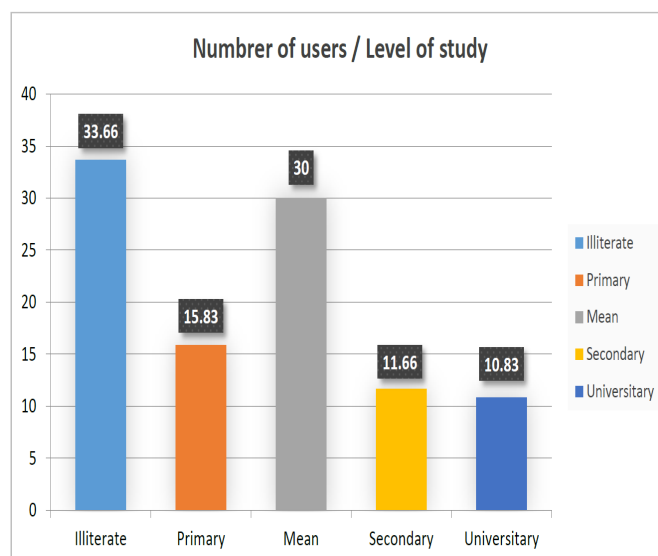
Indeed, married people are affected by the minimization of expenses and pharmacists, mainly families with dependent children (Bakiri *et al.*, 2016). These families use medicinal plants with antiviral interest as first aid against viral infections in order to lower fever and avoid convulsions. This has been confirmed through the results obtained from ethnobotanical studies conducted by Boutabbia *et al.* (2011), El-Hafian *et al.* (2014), El-Hilah *et al.* (2015), Jdaidi and Hasnaoui (2016), Boughrara (2016) and Hamel *et al.* (2018).



**Fig. 05 :** Use of medicinal plants with antiviral interest according to family situation

#### Use of medicinal plants with antiviral interest according to level of study :

The highest percentage of users of medicinal plants with antiviral interest was observed in the illiterate category, with a rate of 33.66%, followed by those with a level average of 30%. People with a primary level represent 15.83%. However, we noted, through the answers obtained, that high school students represent a percentage of use medicinal plants lesser, but not negligible, antiviral interest, with respectively 11.66% and 10.83% (Figure-06).



**Fig. 06 :** Use of medicinal plants with antiviral interest according to level of study

The observed percentages of users of medicinal plants with antiviral interest, according to the level of study correlate perfectly with the percentages in relation to age, where the age groups [ $> 60$ ans] and [ $50 - 60$ ans] correspond to people not having benefited from high-level studies (maximum college). However, high school students and university students whose age groups are less than 30 years old, correspond to the category of people whose use of plants is less important ( $< 9\%$ ).

These results reflect the socio-cultural level of the local population of the Seraidi region, which has an agricultural vocation, thus favoring the development of local products (beekeeping, development of Aromatic and Medicinal Plants, breeding of cattle and goats, market gardening, ...etc.), on the one hand. On the other hand, we can see that the population has retained their knowledge regarding the use medicinal plants as a remedy for the various pathologies encountered, through the elderly.

These results are encountered in the work of Benlamdini *et al.* (2014), in Morocco, in the eastern High Atlas (High Moulouya), with a large percentage of illiterate users, medicinal plants with antiviral interest. Academics, on the other hand, are wary of the consumption of medicinal plants, for fear of confusion, since they have no knowledge of their identifications, their virtues and especially their toxicities.

However, our results contradict those reported by Helali *et al.* (2020), Hamdi and Houari (2020) and Brahmi *et al.* (2022), where the majority of users of herbal medicine have a university level, with the percentage varying from 60 à 90%, while people with an average, primary or illiterate level represent rates below 20%, this can be explained by the fact that the people interviewed are in urban areas, far from any contact with nature (Brahmi *et al.* 2022).

#### Use of medicinal plants with antiviral interest according to the different parts of plant

Our survey of medicinal plants with antiviral activity shows that the leaf is the most used organ (48.88%), followed by the fruits, which represent 8.88% each. The other parts, namely the stems, the roots, the seeds, and the bulbs, occupy a rate, of 3.84%. The bark is the least used part, with 2.22% (Figure-07).

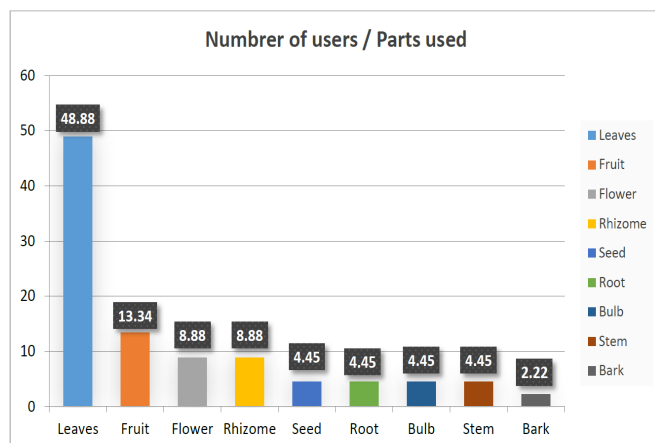


Fig. 7 : Distribution of plants according to parts used

The extensive use of the leaves is explained by the ease and speed of harvesting (Bitsindou, 1986), but also by the fact that they are the seat of photosynthesis and the storage of secondary metabolites responsible for the biological activities of plants in certain species (Bigendakou-polugeni and Lejoly, 1990). This is also reported in other works such as Ouattara (2006), Benkhniq *et al.* (2010-2011), Boutabia *et al.* (2011), Zerbou *et al.* (2011), Tahri *et al.* (2012), Diatta *et al.* (2013), Chermat and Gharyouli (2015), Jdaïdi and Hasnaoui (2016) and Kouame *et al.* (2021).

The roots are among the parts of the plant least used in the preparations of therapeutic remedies, because the removal of the roots actively contributes to the destruction of the species (Koné, 2009 ; Bouayyadi, 2015; El Amrani, 2010 ; Slimani, 2016), knowing that the harvests are carried out in a spontaneous and uncultivated state. However, we observed root consumption of *Ziziphus lotus* and *Urtica dioica*. The use of bulbs is encountered in the genus *Allium*, *Allium cepa* and *Allium sativum*.

#### Use of medicinal plants with antiviral interest according to the method of preparation:

Users prepare phytomedicines with several methods. The decoction is the most frequent method with 26.59%, followed by the infusion with 21.52%, the powder with a percentage of 15.19%, the maceration at 10.12%, the poultice at 8.86%, the fresh juice at 6.33%, and the form gross at 6.33%. While the least used, being the use of essential oils, representing 5.06% (Figure-08).

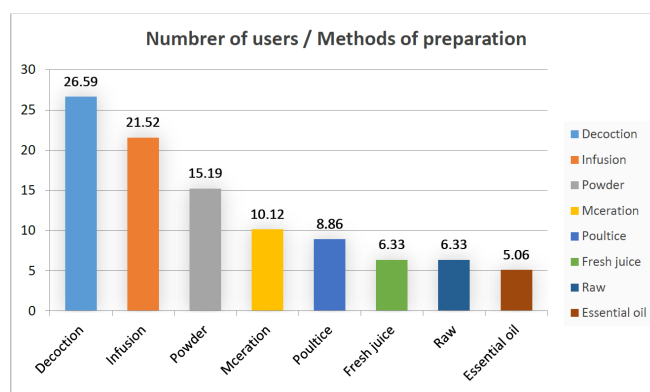


Fig. 08 : Distribution of plants according to method of preparation

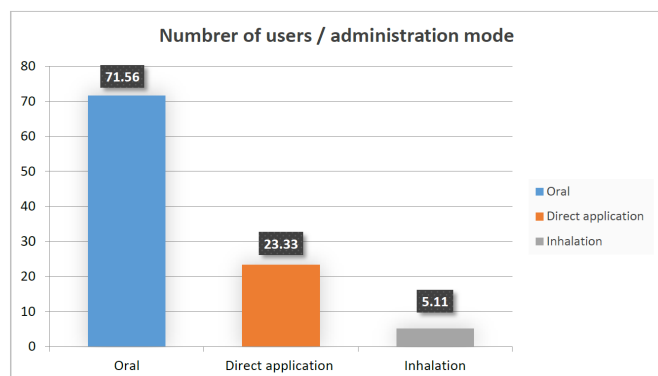
Information on how to use medicinal plants and their therapeutic properties may differ from person to person (Serine, 2008). The preparation of medicinal plants by the method of decoction not only makes it possible to warm the body and disinfect it (Tahri *et al.*, 2012), but also makes it possible to reduce toxicity when mixed with other plants, or even to cancel it altogether (Salhi *et al.*, 2010).

#### Use of medicinal plants with antiviral interest according to the route of administration :

The plant preparations used for the treatment in a traditional way are often administered orally, inhaled or by direct application. The oral route is the most used with a frequency of 71.56%, direct application represents 23.33% and 5.11% of the plants are used in the form of inhalation (Figure-09).

Oral administration correlates with the method of preparation, by decoction, infusion, or maceration. This form of preparation can only be administered orally. This explains the high percentage of users of medicinal plants with antiviral interest by oral administration (Helali *et al.*, 2020; Hamdi and Houari, 2020 ; Brahmi *et al.*, 2022 ; Boutabia *et al.*, 2011; Kouame *et al.*, 2021; Chraïbi *et al.*, 2018).

The direct applications of medicinal plants with antiviral interest are found in turmeric, which is also considered, as a condiment, highly appreciated in the Algerian kitchen, and licorice, recommended as natural dental care.



**Fig. 09 :** Distribution of plants according to route of administration

### Conclusion

The ethnobotanical survey carried out in the region of Seraidi (state of Annaba, North-East Algeria), relating to the traditional use of medicinal plants with antiviral interest by the local population, has brought us very considerable information that can be exploited in the field of the valorization of medicinal plants having antiviral activities. A number of 32 species have been identified by healers, herbalists, rural women's cooperatives, as well as local people as medicinal plants used for their antiviral activities and the treatment and prevention against COVID-19. These 32 species are grouped into 20 families, of which the Lamiaceae family is the most represented with 25%.

The collection and analysis of the data collected from the interviewees showed that older women use medicinal plants with antiviral interest more than men. In addition, the frequency of use of these plants according to intellectual level has shown that people who have not pursued higher education have a better knowledge of medicinal plants. The leaves represent the most used part of the plant, administered orally after maceration, decoction, or infusion. The other parts of the plant are consumed to lesser degrees.

This ethnobotanical work oriented us towards a sharp selection of antiviral medicinal plants, with the aim of in-depth phytochemical study, which will be presented through other scientific and research publications.

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