**Medicinal Plants with Antibacterial and Wound Healing Activity: A Review**

C Lalthansangi, RK Lalremtluangi, Esther Lalhmingliani\*, M Vabeiryureilai

Department of Zoology, Mizoram University, Aizawl-796004, Mizoram, India

**\* Corresponding author:**

Email: [es\_ralte@yahoo.in](mailto:es_ralte@yahoo.in); Ph: +91-8575475947

**Email of co-author:**

[nupuiichinzah15@gmail.com](mailto:nupuiichinzah15@gmail.com)

**Abstract**

The rising prevalence of drug-resistant diseases necessitates the identification and isolation of novel bioactive components from medicinal plants utilizing standardized modern analytical methods. Understanding the molecular and cellular mechanisms that occur during normal wound healing has progressed significantly. Wound healing, whether accidental or surgical, necessitates the complex interactions of blood cells, soluble mediators, tissues, cytokines, and a plethora of growth factors. The fundamental goal of wound therapy is to either reduce the amount of time necessary for healing or to limit the negative outcomes. Because of the presence of various essential active phytoconstituents, plants have immense potential for wound management and therapy. Plants have a solid reputation in the field of wound treatment and repair due to their long history of use, low cost, and safety, but actual proof supporting their wound healing capabilities is lacking. Healing is a survival strategy that attempts to preserve normal anatomical structure and function. Through several mechanisms of action, phytochemicals are known to have potential antibacterial and wound-healing effects against susceptible and resistant microorganisms. Furthermore, various challenges and problems must be overcome in order to generate new antimicrobials and wound healing characteristics from plant extracts, while efforts have been undertaken to improve the antibacterial and wound healing activity of chemical compounds. In this review, we made an effort to shed light on the numerous plants that may be useful in therapeutic treatment because of their potential antibacterial and wound-healing properties.

Keywords: Wound healing, antibacterial, phytochemicals, bioactive compounds, pathogens.

**Introduction**

There have been several reports of the therapeutic effects of natural products and plant products 1,2 made of active principles such alkaloids, flavonoids, and biomolecules 3. Many plants utilized in traditional medicine are now included in the modern world's health care system. To date, more than 11,000 species of herbal plants are used medicinally, with roughly 500 of these commonly utilized in Asian and other countries 4,5. WHO has long promoted traditional medicines as safe treatments for diseases of both microbial and non-microbial origin 6. According to WHO, 80% of the world's developing nations still reap the benefits of using conventional medications made from medicinal plants 7,8,9.

The utilization of natural compounds obtained from microbial, animal, or plant sources has caught the interest of many researchers despite the fact that synthetic antimicrobial medications have been approved in many nations 10,11. These chemicals have shown promising benefits in combating antibiotic resistance in bacterial infections 12. Plant-derived chemicals are a diverse class of chemical substances found naturally in plants. Based on their chemical compositions, they are divided into various primary classes, which include alkaloids, tannins, terpenoids, and polyphenols. The bioactive compound which promotes antibacterial and wound healing events can be therapeutically used to improve the antibacterial and wound healing activity.

Plants include a diverse range of phytochemicals that can be used to generate innovative drugs with specific biological effects 13. Due to widespread, incorrect, irregular, and indiscriminate antibiotic use, antimicrobial resistance has developed, rendering many currently available medications ineffective 14,15,16. As a result, there is a rising need for the development of innovative antimicrobial agents that can cut down on the use of antibiotics and stop the emergence of resistance. Researchers have been urged to isolate and identify novel bioactive chemicals from plants to tackle microbial resistance 17,18,19,20. And, as current antimicrobials fail to treat infectious diseases, a lot of researchers have turned to natural products as a source of new bioactive compounds 21,22. Furthermore, due to the ineffectiveness of some drugs, severe side effects, and the high cost of existing medications, there has been a growth in the use of medicinal plants as a treatment for human health in recent years, as well as a significant interest in pursuing therapies that are less aggressive to the human body 23.

**Antibacterial Activity**

Long before civilization realized the existence of microbes, it was widely accepted that certain plants had healing properties, that they contained what we now call antibacterial principles. Plants have been utilized to cure common infectious diseases since antiquity, and some of these ancient remedies are still used in the routine treatment of diverse disorders 24. Antimicrobial resistance is now a serious global issue. It occurs when bacterial, viral, fungal, and parasitic infectious organisms become resistant to conventional treatments, posing a risk to the public's health by dispersing infectious diseases and causing enormous global economic losses owing to food spoilage and crop damage 25,26. Due to the wide variety of secondary metabolites and phytochemicals found in medicinal plants, researchers are becoming more and more interested in them as a means of combating antimicrobial resistance 27.

**Medicinal plants with antibacterial activity**

Extracts derived from medicinal plants have been shown to have a variety of biological actions, including antibacterial, anti-inflammatory, and antioxidant properties 28. Antimicrobial compounds generated from medicinal plants may inhibit the growth of bacteria, fungi, viruses, and protozoa by mechanisms different from those used by currently available antimicrobials. They may also be clinically useful in treating microbial strains that are resistant to current antimicrobials 29. Chemically complex molecules have high therapeutic promise since they have fewer side effects than synthesized medications and have a low likelihood of developing resistance 30,31. Furthermore, the synergistic interaction of the extracts' active ingredients is what causes medicinal plant extracts to effectively prevent bacterial development 32. Medicinal plants contain a wide range of chemical components that have been shown *in vitro* to have antibacterial properties 33. Many investigations have shown that both natural and synthetic coumarin derivatives have antibacterial activity 34,35,36. Various scientifically evident plants used for management of antibacterial activity are given below:

**Acalypha indica Linn. (Euphorbiaceae):**

A. indica L. is a common weed plant that has been used to cure pneumonia, asthma, rheumatism, and a variety of skin disorders. The presence of flavonoids, kaempferol, glycosides, mauritianin, ciltoria, and nictiflorin in A. indica leaves and flowers resulted in antioxidant activity*.* Raja et al. demonstrated the antibacterial activity of aqueous and acetone extract of plant leaves 37.

***Ageratina adenophora***

Manandhar *et al.* confirmed that the methanolic extracts of *A. adenophora* exhibited antibacterial activities against *Escherichia coli*, *Staphylococcus aureus Salmonela Typhi*, *Citrobacter koseri* and *Klebsiella pneumoniae* 38.

***Artemisia vulgaris***

Methanolic extracts of *A. vulgaris* exhibited antibacterial activities against the five tested microorganisms like *K. pneumoniae*, *E. coli*, *S. Typhi*, *S. aureus*, and *C. koseri*. This was demonstrated in the study done by Manandhar *et al.* 38*.*

***Cinnamomum tamala***

The methanolic extracts of *C. tamala* was experimented for its antibacterial activities against *E. coli*, *S. Typhi*, *K. pneumoniae*, *S. aureus*, and *C. koseri*. The findings demonstrated that the extract has antibacterial activity against all the microorganisms used in the study 38.

***Ferulago campestris***

Basile *et al*. 39 discovered that some pyranocoumarins and coumarins which is isolated from the roots of *F. campestris* shown substantial antibacterial action against both gram-positive and gram-negative bacteria. Aegelinol 40 and agasyllin 41 in particular were more active against ATCC strains of *E. aerogenes*, *S. aureu*s, *S. enterica* and *E. cloacae* (MIC = 32 μg/mL for agasyllin and 16 μg/mL for aegelinol).

***Hypericum olympicum***

The primary components of *H. olympicum* include spathulenol, farnesene and E-anethole with other components including terpenes, E-caryophyllene, germacrene D and a new form of acylphloroglucinol. The methanolic extract of *H. olympicum* demonstrated a wide range of extremely potent antibacterial activity, with the maximum activity found against *K. pneumoniae* and *S. enteritidis* 42.

***Ocimum kilimandscharicum***

*O. kilimandscharicum*, an aromatic undershrub in the Laminaceae family with pubescent quadrangular branchlets is a traditional medicine used to treat a number of diseases such as cough, bronchitis, viral infections, anorexia, and wounds. According to Mahesh *et al.,* it has proteins, flavonoids, tannins and other essential elements. In addition to having antibacterial and wound-healing capabilities, flavonoids also have antioxidant and free radical scavenging activities 43.

***Oxalis corniculate***

The methanolic extracts of *O. corniculate* was studied for its antimicrobial activities against different microorganisms which include *C. koseri,* *E. coli*, *S. Typhi*, *S. aureus* and *K. pneumoniae* 38. And the result indicates that the methanolic extracts of *O. corniculate* exhibit antimicrobial activities in all the tested microorganisms.

**Punica granatum**

Due to its versatility and nutritional advantages in the human diet, *P. granatum* (pomegranate) consumption has increased. In particular, it is high in bioactive chemicals that belong to the phenolic compound family, such as tannins and anthocyanins. Alexandre *et al.* 44 observedthat the antioxidant activity and phenolic component concentration were shown to be highly associated to antimicrobial activity in a study of antimicrobial action on pomegranate peel extracts. As a result, high-pressure pomegranate peel extracts could be used to generate high-value bioactive compounds for antioxidant and antibacterial applications. Additionally, Mostafa *et al.* 45 examined the potential antibacterial activity of ethanolic extracts of *P. granatum* and discovered that it is variable in its efficacy against the tested bacterial strains.

***Syzygium aromaticum***

For its antibacterial action, an ethanolic extract of *S. aromaticum* proved possibly beneficial with varying effectiveness against the examined bacterial strains. In the study conducted by Pundir *et al.* 46 the ethanolic extracts of *S. aromaticum* inhibited the development of all the examined food-associated bacteria, with the diameter of the zone of inhibition ranging from 25 to 32 mm. It had the largest zone of inhibition diameter of 32 mm against E. coli, followed by S. aureus (31 mm) and B. subtilis (30 mm). The *S. aromaticum* ethanolic extract showed similar zone of inhibition of 28 mm in diameter against B. megaterium and B. sphaericus. Sulieman *et al.* 47 also shown antibacterial activity of *S. aromaticum* ethanolic extract against *E. coli, S. aureus*, and *B. subtilis*, with the highest antibacterial activity against *E. coli*. *S. aromaticum* antibacterial effect is linked to the presence of eugenol (2 methoxy-4 allyl-phenol) 48. Its high tannin content (10-19%) gives further antibacterial properties 49.

***Thymus vulgaris***

At a dosage of 10 mg/ml, Mostafa *et al.* 45 studied the antibacterial activity of *T. vulgaris*, which was possibly effective with varying efficiency against the investigated bacterial strains.

**Ziziphus nummularia**

Z. nummularia contains a high concentration of phytochemical substances, mainly cyclopeptide alkaloids. In 1983, one of the first investigations revealed the isolation of new cyclopeptide alkaloids, nummularine-N and nummularine-M, as well as the existence of a number of cyclopeptide alkaloids in the root bark of the plant 50. Cyclopeptide alkaloids are natural macrocyclic molecules with intriguing biological and chemical properties that are abundant in the family Rhamnaceae, particularly in the *Ziziphus* genus 51,52. Beg *et al.* used several extraction solvents to assess the antibacterial activity of *Z. nummularia* extracts from leaves, fruits and bark against the gram-positive bacterium *S. aureus* and the gram-negative strain *E. coli*. 53. The outcomes demonstrated that the methanolic extract of the fruits had the strongest antibacterial activity against both of the tested strains, followed by hexane and chloroform extracts; the aqueous extract of all plant parts exhibited no antimicrobial activity 53. Interestingly, the fruit of the plant was shown to have significant antibacterial action against various gram-positive strains tested 54.

Another study found that the ethyl acetate and chloroform fractions of *Z. nummularia* were efficient against both gram-positive and bacteria gram-negative, but the methanol and aqueous fractions had no activity against any of the microorganisms examined 55. According to Gautam *et al*. the ethanolic extract of *Z. nummularia* was more effective than the aqueous extract at killing *S. aureus* and *P. aeruginosa* while having no effect on *B. subtilis* 56. Sharma *et al.* ascribed *Z. nummularia's* antibacterial activity to the presence of flavonoids, glycosides, saponins and alkaloids in the plant's leaf extracts, indicating that leaf extracts could be a viable treatment for a variety of ailments 57.

These potentially useful plant extracts could be utilized as natural alternatives to chemically-based antibacterial treatments to prevent food poisoning and preserve food without posing any health risks.

**WOUND HEALING**

Physical injuries that result in an opening or breach in the skin's barrier function and normal architecture are called wounds. They result in the loss of epithelial continuity, whether or not underlying connective tissue is also lost 58. Following an injury, the skin has an amazing ability to regenerate itself. Several processes are involved in the complex (yet orderly) phenomenon of wound healing, including the induction of an acute inflammatory response by the wound, the regeneration of parenchymal cells, the migration and proliferation of both parenchymal and connective tissue cells, the synthesis of extracellular matrix proteins, the remodelling of connective tissue, and the development of wound strength. Any modifications to any of these procedures may result in a delay in healing or even complete healing failure 59.

According to current estimates, approximately 6 million people worldwide are affected by chronic wounds 60. Wound epidemiology research is extremely limited. In order to aid in wound healing, medical therapy for wounds involves injecting medications either locally (topically), systemically (oral or parenterally), or both 61. Antiseptics, antibiotics and disinfectants and have a broad spectrum of non-selective antibacterial effect when administered topically 62. Topical antibiotics has been frequently used in clinical settings in cuts, wounds and burns to treat localized skin infections. However, overuse of topical antibiotics can result in consequences such as the development of resistant organisms 63. As a result, efforts should be aimed toward developing an agent that can expedite wound healing when it is normal or when it is hindered by various agents such as corticosteroids, anti-neoplastic, or non-steroidal anti-inflammatory drugs 64.

A variety of cell strains and their by-products work together to repair cuts on the skin, which is an essential physiological activity 65. This literature review's objective is to draw attention to the biological mechanisms at work during the healing of wounds, with a focus on the cells, growth factors, and cytokines involved in the process of tissue repair.

**Stages of wound healing**

**Inflammatory stage**- The lesioned blood vessels constrict and the released blood coagulates during a vascular inflammatory reaction, contributing to the vessel's integrity. Coagulation is the aggregation of thrombocytes and platelets in a fibrin network, which is dependent on the action of particular stimuli *via* the activation and aggregation of these cells 66. By releasing lysosomal enzymes and reactive oxygen species and enabling the elimination of various cell debris, inflammatory cells promote the healing of wounds 67.

**Proliferative stage**- The proliferative stage's goal is to reduce the lesioned tissue area by contraction and fibroplasia, thereby generating a strong epithelial barrier which will stimulate keratinocytes. This stage is in charge of the lesion's closure, which involves angiogenesis, fibroplasia, and reepithelialisation. Within the first 48 hours of the lesion's onset, these processes start in the lesion's microenvironment and can go on for up to 14 days 68. Granulation tissue appears four days after the wound and starts to expand. Its name comes from the granular appearance of newly formed tissue, which gives the developing stroma this characteristic. In accordance with Calin *et al*. 69 increased fibroblastic proliferation, collagenous and elastic biosynthesis, which results in the formation of a three-dimensional extracellular network of connective tissue, and fibroblast production of chemotactic factors and IFN-beta are the mechanisms by which granulation tissue is formed. The process of wound contraction, which is carried out at this stage by myofibroblasts, which are abundant in alpha smooth muscle actin, was found by Medrado *et al.* 67.

**Remodelling stage**- The third stage of healing, known as remodelling, starts two to three weeks following the initiation of the lesion and lasts for a year or longer. Maximizing tensile strength through extracellular matrix reconfiguration, breakdown, and resynthesis is the main objective of the remodelling stage. The granulation tissue is gradually transformed during this last stage of lesion healing in an effort to restore normal tissue structure, leading to scar tissue that is gradually becoming less cellular and vascular 70 and has a higher concentration of collagen fibres.

**Medicinal plants with wound healing potential**

Traditional medicine has been called as an alternative medicine, non-conventional medicine, phyto-medicine, complementary medicine, herbal medicine, natural medicine, indigenous medicine, ethno medicine, folk medicine etc 71. It has been estimated that 70% of Ayurvedic wound healing medications are plant-based, 20% are mineral-based, and the other 10% are animal-based 72.The following are the scientifically proven plants used for wound healing management:

**Acalypha indica Linn. (Euphorbiaceae):**

A. indica L. is a weed plant that has been reported to be useful in the treatment of pneumonia, asthma, rheumatism and several other skin conditions. The presence of flavonoids, kaempferol, glycosides, mauritianin, ciltoria, and nictiflorin in A. indica leaves and flowers resulted in antioxidant activity. A. indica dried leaf ethanolic extract has been used to heal wounds and bedsores 73,74.

***Ageratum conyzoides*:**

*A. conyzoides*, a member of the Asteraceae family, is a prevalent weed known as goat weed and white weed. According to Chah *et al.'*s research, when the leaves are put to wounds, they function as an antiseptic and heal the wounds75.

***Aloe vera* Linn. (Liliaceae):**

Davis investigated the wound healing property of *A. vera*. One of the oldest medicinal plants in the world is *A. vera* Linn. (Liliaceae). It is applied topically to treat wounds, burns, insect bites, bruises, welts, skin lesions, eczema, and sunburns. When mice were given 100 mg/kg/day of *A. vera* orally, and when they were given 25% aloe vera topically, the size of the wound was reduced by 62.5% and 50.80%, respectively. These results suggest that *A.* *vera* aids in the healing of wounds. The amino acids and vitamins C and E found in *A. vera* leaves are essential for wound healing 76.

***Anthocephalus cadamba* Roxb. (Rubiaceae):**

The primary components of the bark of *A. cadamba* Roxb. (Rubiaceae) are triterpenes, saponins, and the indole alkaloids cadambine, 3adihydrocadambine, cadamine, isocadamine, and isodihydrocadambine. Umachigi *et al.* investigated wound healing activity and discovered that when hydro-alcoholic *A. cadamba*ointment was applied, the epithelization period was reduced, as was the scar area. Tensile strength and hydroxyproline content both increased significantly. The crude hydro-alcoholic extract encouraged wound contraction substantially. As a result, the plant extract may be effective as a wound healing agent 77.

***Argemone mexicana* Linn.:**

Using excision and incision wound models, various *A. mexicana* L. (Family: Papaveraceae) leaf extracts were examined for their capacity to speed up the healing of wounds in rats. The effects of test samples on the rate of wound healing were evaluated using the wound closure rate, period of epithelialization, skin breaking strength, weights of the granulation tissue, determination of hydroxyproline, superoxide dismutase (SOD), catalase, and histopathology of the granulation tissues. For the activity comparison, Nitrofurazone (0.2% w/w) in Simple ointment I. P. was utilized as the reference standard. The study's findings revealed that rats treated with methanolic and aqueous extracts of *A. mexicana* healed faster than those treated with other extracts. The chloroform extracts of the selected plants yielded encouraging results as well, but to a lower extent than the comparable methanolic and aqueous extracts. The petroleum ether extract yielded no noteworthy findings. The presence of phytoconstituents in chloroform, methanol, and aqueous extracts, such as alkaloids, triterpenoids, tannins, and flavonoids, which are known to promote wound healing due to their astringent, antioxidant, and antimicrobial properties, may be responsible for the extract's capacity to heal wounds. The current study supports the use of *A. mexicana* leaves for wound healing, as reported in folkloric research 78.

***Arnebia densiflora*:**

*A. densiflora* roots steeped in butter were previously used to treat minor wounds. This plant's roots have been shown to contain alkannin derivatives such as methyl-n-butylalkannin, dimethylacrylalkannin, teracrylalkannin and isovalerylalkannin. According to Kosger *et al.* rats given *A. densiflora* healed faster than the control group. Wound closure and collagen production were accelerated, and healing occurred on the 14th day following injury79.

***Carica papaya* Linn.:**

*C. papaya* L. is a member of the Caricaceae family. Azarkan *et al.* discovered that papaya fruit includes a combination of cysteine endopeptidases like papain. Papaya contains chympopapain A and B, omega endopeptidase, chitinase, protease inhibitors, and proteins. It also contains papaya endopeptidases II and IV. Given that papaya fruits have the ability to cure wounds, papaya latex was administered to the burn wound using hydrogel as a carrier method80.

***Centella asiatica* (Linn.) Urban (Apiaceae):**

In addition to being recognized as Asiatic Pennywort, *C. asiatica* is also known as Brahmi in Unani and Mandookaparni in Ayurvedic medicine. It is a herbaceous, perennial plant in the Apiaceae family81. Saponins containing triterpens, such as madecassic acid, asiatic acid, madecassoside and asiaticoside have been shown to be the most active therapeutic biomarker molecules in plants 82. A cream containing 1% *C. asiatica* extract has been shown to promote chronic wound healing 83.  Shukla *et al*. investigated the wound healing activity of asiaticoside topical treatment in both normal and diabetic mice. Because of an increase in collagen synthesis and wound tissue tensile strength, the rate of wound healing in normal animals was considerably increased 84.

Liu explored the effect of madecassoside on wound healing through a variety of mechanisms such as antioxidative activity, angiogenesis and collagen synthesis 85.

***Curcuma longa* Linn.:**

*C. longa* L. belonging to family Zingiberaceae, has been reported to exhibits anti-inflammatory, antibacterial and antifungal activities in the study by Rao. It uses rhizomes and includes 1,7-bis, 6-hepta-diene-3, 5-dione, turmerol, and curumin (diferuloyl methane). Analgesic and anti-inflammatory effects are present in curcumin. *C. longa* volatile oil has antibacterial and anti-inflammatory properties as well. *C. longa* also includes protein, lipids, and vitamins (A, B, C, and so on), all of which aid in wound healing and regeneration. *C. longa* has been used to treat wounds in rats86.

***Euphorbia nerrifolia*Linn. (Euphorbiaceae):**

*E. neriifolia* L. flourishes in north, central, and southern India 87. Bigonia *et al.* investigated the wound healing activity of *E. neriifolia* leaf in an excision and dead space wound model. Increased protein and hydroxyproline concentration in *E. neriifolia* improved wound contraction and epithelialization 88. Gour *et al.* also investigated the anti-inflammatory and analgesic properties of plant hydroalcoholic leaf extract and discover positive results 89.

***Ficus racemosa*Linn. (Moraceae):**

*F. racemosa* L. is a large deciduous tree scattered all over India specifically in north India 90. Murti *et al.* investigated the wound healing activities of an aqueous and an ethanolic extract of *F. racemosa* roots on an incision and excision wound model. Aqueous root extract promoted epithelialization and collagen synthesis, which raised the percentage of wound closure rate 91.

***Helianthus annus* Linn.:**

An ornamental annual herb from the Asteraceae family, *H. annus* L. is typically found in swampy places and has an upright, rough, and hairy stem. Tribals utilize the herb in traditional medicine to treat colic, eye inflammation, dysuria, sores, bone fractures and tiger bites. Deshpande *et al.* found that using an alcoholic extract of *H. annus* as an ointment to a rat's excised lesion resulted in a considerable reduction in total healing time. Histology verified this, as early fibroblast appearances were observed. Early emergence and increased build-up of mucopolysaccharides have been identified as indications of accelerated 92.

***Hygrophila auriculata:***

Dev & Roy 93 used an excision wound model to investigate the wound healing potential of the root of *H. auriculata* in Swiss albino mice. The animals in the study were separated into three groups of six (3 males and 3 females) apiece. Carboxymethyl cellulose (control) was applied topically to animals in group 1. Group 2 mice were given a reference medication (a positive control). Animals in Group 3 were given a root extract of *H. auriculata*. The evaluation of healing was done by measuring wound area, histomorphological observations, and DNA and protein content calculation. The findings showed that the extract-treated group's wound area was less than that of the control group. In comparison with the control group, epithelialization was faster in the treated group. Protein and DNA levels were also higher in treated mice than in control mice. The extent of healing in the treated animals was equivalent to the positive control group. As a result, the findings indicate that the root of *H. auriculata* has wound healing capability.

***Kigelia pinnata:***

*K. pinnata*, a member of the Bignoniaceae family, is a tiny tree found in South, Central, and West Africa, as well as India. According to Sharma *et al.* the bark has been pharmacologically established to have wound healing propertiesas well as antibacterial, antifungal, antiamoebic, antiulcer and antioxidant activity 94.

***Lantana camara* Linn. (Verbanaceae):**

*L. camara* L. (Verbanaceae), a shrub native to tropical America, has become entirely naturalized as an ornamental plant in many parts of India. According to Kurian's research, the herb contains wound healing qualities along with abortifacient, antimalarial and anti-inflammatory. Wound contraction has been aided by hydro-alcoholic extract and fresh juice of leaves95.

***Lawsonia inermis* Linn. (Lythraceae):**

The leaves of *L. inermis* L. (Lythraceae), sometimes known as henna, are used in the treatment of burns, skin inflammations, wounds, and ulcers as a decoction or ointment. The leaves have antifungal and antibacterial properties as well. Henna is said to contain the natural colour naphthaquinone, lawsone. Sakarkar *et al.* discovered that both oral ingestion and topical application of ethanol extract of henna leaves with lawsone resulted in a significant healing response in both wound models. Furthermore, it was discovered that topical application of ethanol extract as well as separated lawsone was more efficacious than oral administration. Thus, application of ethanolic extract to the skin for wound healing can be successfully developed 96.

***Morinda citrifolia***

In the study by Nayak, animals treated with *M. citrifolia* extract showed a considerable improvement in wound-healing activity when compared to those given placebo control treatments. When compared to control rats given normal water, the extract-treated animals demonstrated a faster decrease in the size of wound and a shorter period of epithelialisation 86.

***Napoleona imperialis:***

*N. imperialis* belongs to the plant family Lecythidaceae. It is a tall, woody shrub found primarily in tropical rain forests. The leaf is used as an analgesic, tonic, anti-tussive, anti-asthmatic, and wound dressing on a local level. The numerous ointments made with *N. imperialis* displayed a successful wound healing effect in the study by Esimone *et al.* a standard antibiotic used in wound healing97.

***Ocimum sanctum*Linn. (Labiaceae):**

*O. sanctum* L. sometimes known as 'Tulsi' is a widely spread plant in India and other areas of the world. It has antibacterial, analgesic, immunostimulatory, anti-inflammatory, and free radical scavenging effects. Plant flavonoids' free radical scavenging action aids in wound healing. Asha *et al*. evaluated the topical wound healing activity of the leaves of *O. sanctum* aqueous extract 98. Goel *et al*. used an excision wound model in wistar albino rats to investigate the wound healing activities of a cold *O. sanctum* aqueous extract as well as its effect on tumour necrosis factor- (TNF-). Wound healing was observed to occur more quickly in rats treated with *O. sanctum* extract compared to the control group as a result of enhanced TNF- production 99.

***Resina draconis:***

Huihui *et al.* 100 used excision and incision wound models in rats to evaluate the wound healing potential of *R. draconis* (Dracaena cochinchinensis). In addition to histological exams, the expression of vascular endothelial growth factor (VEGF) and transforming growth factor-1 (TGF-1) and the percentage of wound contraction were all recorded. The study provides a scientific justification for the traditional usage of *R. draconis* in wound care.

***Rubia cordifolia* Linn:**

Karodi *et al.* 101investigated the wound healing activity of a crude extract of *R. cordifolia* L. (Indian madder) in mice. The alcoholic extract and its hydrogel were evaluated for their healing effectiveness on an excision wound model in mice, and the work provides a scientific explanation for the traditional usage of this plant in wound management. More *et al.* and Umachigi *et al.* also investigated the presence of tannins, phytosterols, anthraquinone glycosides and saponins in an ethanol extract of *R. cordifolia*. Tannins and anthraquinones are the primary phyto-constituents found in this plant, and they might be in charge for wound healing 102,77.

***Tectona grandis* Linn.*:***

*T. grandis* L. belongs to the Verabinaceae family and comprises primarily tannins, carbohydrates and anthraquinone glycosides. It is applied topically to treat burns and as an anti-inflammatory medication. It is primarily used to treat burns, inflicted wounds, and skin ulcers. According to Majumdar *et al.* *T. grandis* L. extract improved breaking strength, wound contraction, and collagenation when used topically or internally 103.

***Terminalia superba:***

Dougnon *et al.* 104 investigated the wound healing and antibacterial effects of *T. superba* bark ethanolic extract. The ethanol extract's antibacterial activity and *in vivo* wound healing characteristics on infected lesions by reference strains of *E. coli* ATCC 25922 and *S. aureus* ATCC 25923 in wistar rats were also examined. *T. superba's* antibacterial qualities contribute to the development of a better traditional medicine.

***Tridax procumbens* Linn. (Asteraceae):**

*T. procumbens* L. (Asteraceae) is a tropical American native that has become naturalized in tropical Africa, Australia and Asia, including India. According to Diwan *et al.* the leaf of *T. procumbens* includes primarily crude protein, crude fiber (17%), soluble carbohydrate (39%), and calcium oxide (5%). Villagers use the juice of this plant's leaves to stop bleeding from animal cuts and bruises. This juice has the ability to accelerate two stages of healing: epithelialization and collagenization, while delaying scarring and granulation 105.

***Wedelia chinensis*:**

*W. chinensis* Merrill (Syn. Wedelia calendulaceae) (Asteraceae) is a well-known herbal remedy in both the Ayurvedic and Unani systems of medicine. Verma *et al*. 106 investigated the wound healing efficiency of *W. chinensis* ethanolic leaf extract in excision, incision, and dead space wound models. When compared to control treatments, mice treated with *W. chinensis* extract shown a substantial increase in wound-healing activity. *W. chinensis'* wound-healing property may be related to the phytoconstituents present in the plant, and the faster wound healing process may be a product of either the individual or additive actions of the phytoconstituents.

**CONCLUSIONS**

In conclusion, we believe that studying medicinal plants as antibacterial and wound healing agents is crucial for understanding medicinal flora and their true worth, but that using a standard technique of analysis is essential. Similarly, the concentrations or dilutions utilized must be suitable. There is a lot of evidence that medicinal plants are particularly efficient in treating infectious diseases because they are necessary for human survival. The plants have a lot of potential as a source of new antibacterial compounds. They are widely available, inexpensive, and nearly without side effects. Plant derivative substances, including phytochemicals, have even been used to treat a variety of infectious disorders, exhibiting intriguing antibacterial activity and wound healing against a variety of human pathogens. Some of these chemicals have both intrinsic antibacterial action and the ability to change antibiotic resistance. While some of them are inefficient as antibiotics on their own, they can combat bacterial antibiotic resistance when used in combination with other antibiotics. Finally, because of their qualities, people have been more interested in herbal-based medications in recent years. To assure its safety, many types of investigations on the mechanisms of action, interactions with antibiotics or other medicinal plants or substances, and the pharmacokinetic profile of the extracts should be prioritized.

**FUTURE DIRECTIONS**

Combining conventional and modern knowledge can result in more effective antibacterial and wound healing agents with fewer adverse effects. The major challenge in the creation of novel phytochemicals has been the translation of *in vitro* investigations to *in vivo* experiments, and then to human clinical trials. Natural antimicrobial drugs present a particular challenge since a variety of parameters, such as tissue penetration, maximum attainable plasma concentration, and bioavailability, might affect their activity. However, further research is needed to have a better knowledge of the precise mechanisms as well as the pharmacological and pharmacokinetic attributes of the compounds.

**REFRERENCES**

1. Kumar B, Vijayakumar M, Govindarajan R, Pushpangandan P. Ethnopharmacological approaches to wound healing exploring medicinal plants of India. *Journal of Ethnopharmacology*. (2007) 114:103-113.
2. Jaric S, Popovi´c Z, Ma´cukanovic-Jocic M. An ethnobotanical study on the usage of wild medicinal herbs from Kopaonik Mountain (Central Serbia). *Journal of Ethnopharmacology*. (2007) 111: 160-175.
3. Chitra P, Suguna L, Chandrakasan G. Influence of arginine wound healing in rats. *Journal of Clinical Biochemistry and Nutrition*. (1995) 18: 111.
4. Saklani A, Kutty SK. Plant-derived compounds in clinical trials. *Drug Discovery Today.* (2008) 13: 161-171.
5. Zhou SF, Zhou ZW, Li CG, Chen X, Yu X, Xue CC, Herington A. Identification of drugs that interact with herbs in drug development. *Drug Discovery Today.* (2007) 12: 664-673.
6. Hena JV. Antibacterial potentiality of *Hibiscus rosasinensis* solvent extract and aqueous extracts against some pathogenic bacteria. *Herbal Tech Industry*. (2010) 21-23.
7. Mishra A, Sharma A, Kumar S, Saxena A, Pandey A. *Bauhinia variegata* leaf extracts exhibit considerable antibacterial, antioxidant, and anticancer activities. *BioMed Research International.* (2013) 2013: 1-10.
8. Duraipandiyan V, Ayyanar M, Ignacimuthu S. Antimicrobial activity of some ethnomedicinal plants used by paliyar tribe from Tamil Nadu, India. *BMC Complementary and Alternative Medicine.* (2006) 6.
9. Chin Y, Balunas M, Chai H, Kinghorn A. Drug Discovery from Natural Sources. *American Association of Pharmaceutical Scientists.* (2006) 8.
10. Gyawali R, Ibrahim SA. Natural products as antimicrobial agents. *Food Control*. (2014) 46: 412-29.
11. Moloney MG. Natural products as a source for novel antibiotics. *Trends in Pharmacological Sciences.* (2016) 37(8): 689-701.
12. Rossiter SE, Fletcher MH, Wuest WM. Natural products as platforms to overcome antibiotic resistance. Chemical Reviews. (2017) 17(19): 12415-12474.
13. Blassan PG, Parimelazhagan T, Chandran R. Anti-inflammatory and wound healing of *Rubus fairholmianus* Gard. Root-An *in vivo* study. *Industrial Crops and Products*. (2014) 54: 216-218.
14. WHO. Antimicrobial Resistance. *World Health Organization: Geneva, Switzerland.* (2014).
15. Baym M, Stone L, Kishony R. Multidrug evolutionary strategies to reverse antibiotic resistance. *Science.* (2015) 351.
16. Davies J, Davies D. Origins and evolution of antibiotic resistance. *Microbiology and Molecular Biology Reviews.* (2010) 74: 417-433.
17. Khameneh B, Diab R, Ghazvini K, Fazly Bazzaz B. Breakthroughs in bacterial resistance mechanisms and the potential ways to combat them. *Microbial Pathogenesis.* (2016) 95: 32-42.
18. Tortorella E, Tedesco P, Palma EF, January G, Fani R, Jaspars M, dePascale D. Antibiotics from deep-sea microorganisms: Current discoveries and perspectives. *Marine Drugs.* (2018) 16: 355.
19. Penesyan A, Kjelleberg S, Egan S. Development of novel drugs from marine surface associated microorganisms. *Marine Drugs.* (2010) 8: 438-459.
20. Talib WH. Anticancer and antimicrobial potential of plant-derived natural products. *Phytochemicals-Bioactivities and Impact on Health*. (2011) 141-158.
21. Redo MC, Rios J, Villar A. review of some antimicrobial compounds isolated from medicinal plants reported in the literature 1978-1988. *Phytotherapy Research.* (1989) 3: 117-125.
22. Silver LL, Bostian KA. Discovery and development of new antibiotics: the problem of antibiotic resistance. Antimicrobial Agents and Chemotherapy*.* (1993) 37: 377-383.
23. Bruning NS, Sonpar K, Wang X. Host country national networks and expatriate effectiveness: A mixed-methods study. *Journal of International Business Studies*. (2012) 43: 444-450.
24. Heinrich M, Barnes J, Gibbons S, Williamson EM. Fundamentals of pharmacognosy and phytotherapy. Churchill Livingstone, Edinbrugh. (2004) 245-252.
25. Khameneh B, Iranshahy M, Soheili V, Fazly Bazzaz BS. Review on plant antimicrobials: A mechanistic viewpoint. *Antimicrobial Resistance & Infection Control.*(2019) 8: 118.
26. Tanwar J, Das S, Fatima Z, Hameed S. Multidrug resistance: An emerging crisis. *Interdisciplinary Perspectives on Infectious Diseases.*(2014) 2014.
27. Anand U, Jacobo-Herrera N, Altemimi A, Lakhssassi N. A Comprehensive review on medicinal plants as antimicrobial therapeutics: potential avenues of biocompatible drug discovery. *Metabolites.*(2019) 9: 258.
28. Mehta SR, Yusuf S, Peters RJG, Bertrand ME, Lewis BS, Natarajan MK, Malmberg K, Rupprecht HJ, Zhao F, Chrolavicius S. Effects of pretreatment with clopidogrel and aspirin followed by long-term therapy in patients undergoing percutaneous coronary intervention: The PCI-CURE study. *Lancet* (2001) 358: 527-533.
29. Shankar SR, Rangarajan R, Sarada DVL, Kumar CS. Evaluation of antibacterial activity and phytochemical screening of *Wrightia tinctoria* L. Pharmacognosy Journal*.* (2010) 2: 19-22.
30. Lewis K, Ausubel FM. Prospects for plant-derived antibacterials. *Nature biotechnology.* (2006) 24: 1504-1507.
31. Ruddaraju LK, Pammi SVN, Guntuku GS, Padavala VS, Kolapalli VRM. A Review on anti-bacterials to combat resistance: from ancient era of plants and metals to present and future perspectives of green nano technological combinations. *Asian Journal of Pharmaceutical Sciences.* (2020) 15: 42-59.
32. Wagner H, Ulrich-Merzenich G. Synergy research: approaching a new generation of phytopharmaceuticals. *Phytomedicine.* (2009) 16: 97-110.
33. Cowan MM. Plant products as antimicrobial agents. *Clinical Microbiology Reviews.* (1999) 12: 564-582.
34. Smyth T, Ramachandran V, Smyth W. A study of the antimicrobial activity of selected naturally occurring and synthetic coumarins*. International Journal of Antimicrobial Agents*. (2009) 33(5): 421-426.
35. Kayser O, Kolodziej H. Antibacterial activity of simple coumarins: structural requirements for biological activity. *Zeitschrift für Naturforschung C*. (1999) 54(3-4): 169-174.
36. Melliou E, Magiatis P, Mitaku S, Skaltsounis AL, Chinou E, Chinou I. Natural and synthetic 2, 2-dimethylpyranocoumarins with antibacterial activity. *Journal of Natural Products.* (2005) 68(1): 78-82).
37. Raja RV, Savitha S. Wound healing properties of medicinal plants (*Acalypha indica* and *Azadirachta indica*). *Journal of Bioscience Technology.* (2013) 4: 525-530.
38. Manandhar S, Luitel S, Dahal R. *In vitro* Antimicrobial activity of some medicinal plants against human pathogenic bacteria. *Journal of Tropical Medicine*. (2019) 2019: 1-5.
39. Basile A, Sorbo S, Spadaro V, Bruno M, Maggio A, Faraone N, Rosselli S. Antimicrobial and antioxidant activities of coumarins from the roots of *Ferulago campestris* (Apiaceae). Molecules. (2009) 14(3): 939-952.
40. Gyawali R, Ibrahim SA. Natural products as antimicrobial agents. *Food Control*. (2014) 46: 412-429.
41. Moloney MG. Natural products as a source for novel antibiotics. *Trends in Pharmacological Sciences.* (2016) 37(8): 689-701.
42. Shiu WKP, Rahman MM, Curry J, Stapleton P, Zloh M, Malkinson JP, Gibbons S. Antibacterial acylphloroglucinols from *Hypericum olympicum*. *Journal of natural products.* (2012) 75: 336-343.
43. Mahesh SP, Patil MB, Ravi K, Sachin RP. Evaluation of aqueous extract of leaves of *Ocimum kilimandscharicum* on wound healing activity in albino wistar rats, *International Journal of PharmTech Research*. (2009) 1(3): 544-550.
44. Alexandrea MC, Sara S, Sónia AO, Armando JD, Maria FD, Jorge AS, Manuela P. Antimicrobial activity of pomegranate peel extracts performed by high pressure and enzymatic assisted extraction. *Food Research International*. (2019) 115: 167-176.
45. Mostafa AA, Abdulaziz, Khalid SA, Turki MD, Essam NS, Marwah MB. Antimicrobial activity of some plant extracts against bacterial strains causing food poisoning diseases. *Saudi Journal of Biological Sciences*. (2018) 25: 361-366.
46. Pundir RK, Jain P, Sharma C. Antimicrobial activity of ethanolic extracts of *Syzygium aromaticum* and *Allium sativum* against food associated bacteria and fungi. *Ethnobotanical Leaflets*. (2010) 14: 344-360.
47. Sulieman AME, El-Boshra IMO, El-Khalifa EA. Nutritive value of Clove (Syzygium aromaticum) detection of antimicrobial effect of its bud oil. *Research Journal of Microbiology*. (2007) 2: 266-271.
48. Gupta C, Garg AP, Uniyal RC. Antibacterial activity of Amchur (dried pulp of unripe *Mangifera indica*) extracts on some food borne bacteria. *Journal of pharmaceutical research*. (2008)1: 54-57.
49. Namasombat S, Lohasupthawee P. Antibacterial activity of ethanolic extracts and essential oils of spices against Salmonella and other enterobacteria. *KMITL*, *Journal of Science and Technology.* (2005) 5: 527-538.
50. Pandey VB, Singh JP, Seth KK, Shah AH, Eckhardt G. Cyclopeptide alkaloids from *Zizyphus nummularia*. *Phytochemistry.*(1984) 23: 2118-2120.
51. Tuenter E, Exarchou V, Apers S, Pieters L. Cyclopeptide alkaloids. Phytochemistry Reviews*.*(2017) 16: 623-637.
52. Joullié MM, Richard DJ. Cyclopeptide alkaloids: Chemistry and biology. *Chemical Communications.*(2004) 2011-2015.
53. Beg M, Teotia U, Farooq S. *In vitro* antibacterial and anticancer activity of Ziziphus. *Journal of medicinal plants studies.*(2016) 4: 230-233.
54. Aman S, Naim A, Siddiqi R, Naz S. Antimicrobial polyphenols from small tropical fruits, tea and spice oilseeds. *Food Science and Technology International.*(2014) 20: 241-251.
55. Ullah A, Mustafa G, Hanif M, Mohibullah M, Bakhsh S, Rashid SA. Zaman A, Rehman F, Khan BA, Amin A. Antibacterial and antibiofilm properties of traditional medicinal plant from Sheikh Buddin range. Pakistan Journal of Pharmaceutical Sciences*.*(2019) 32: 1313-1319.
56. Gautam S, Jain AK, Kumar A. Potential antimicrobial activity of *Zizyphus nummularia* against medically important pathogenic microorganisms. *Asian journal of traditional medicines.*(2011) 6: 267-271.
57. Sharma S, Singh J, Maherchandani S, Kashyap SK. Antibacterial activity of *Ziziphus nummularia* and *Prosopis cineraria* leaves extracts against staphylococcus aureus and *Escherichia coli*. *Veterinary Practitioner.*(2012) 3: 46-48.
58. Shivani R, Ramandeep S, Preeti T, Satinder K, Alok S. Wound healing Agents from Medicinal Plants: A Review. *Asian Pacific Journal of Tropical Biomedicine*. (2012) 1910-1917.
59. Akkol EK, Koca, U, Yilmazer D, Toker G, Yesilada E. Exploring the wound healing activity of *Arnebia densiflora* (Nordm.) Ledeb. By *in-vivo* models. *Journal of Ethnopharmacology.* (2009) 124: 137-141.
60. Kumar B, Vijayakumara M, Govindarajan R, Pushpangadan P. Ethanopharmacological approaches to wound healing-exploring medicinal plants of India. *Journal of Ethanopharmacology*. (2007) 114:103-113.
61. Bairy KL. Wound healing potential of plant product. *Journal of Natural Remedies.* (2012) 2: 11-20.
62. Vowden P, Vowden K, Carville K. Antimicrobials made dressing easy. *Wounds International.* (2011) 2: 1-6.
63. Schwartz RA, Al-Mutairi N. Topical antibiotics in dermatology: an update. *Gulf Journal of Dermatology and Venereology*. (2010) 17: 1-19.
64. Raina R, Prawez S, Verma PK, Pankaj NK. Medicinal plants and their role in wound healing. *VetScan*. (2008) 3: 1-7.
65. Shaw TJ, Martin P. Wound repair at a glance. *Journal of cell science*. (2009) 122: 3209-3213.
66. Martin P. Wound Healing - Aiming for perfect skin regeneration. *Science*. (1997) 276: 75-81.
67. Medrado A, Costa T, Prado T, Reis S, Andrade Z. Phenotype characterization of pericytes during tissue repair following low-level laser therapy. *Photodermatology, Photoimmunology and Photomedicine*. (2010) 26:192-197.
68. Li J, Chen J, Kirsner R. Pathophysiology of acute wound healing. Clinics in Dermatology. (2007) 25: 9-18.
69. Calin MA, Coman T, Calin MR. The effect of low-level laser therapy on surgical wound healing. *Romanian Reports on Physics*. (2010) 62: 617-627.
70. Robbins SL, Cotran RS, Abbas AK, Fausto N, Kumar V, Zacharias MC, Perkins JA. Robbinse Cotran Patologia: Bases Patológicas das Doenças. 7. ed. *Rio de Janeiro: Elsevier*. (2005) 1592.
71. Payyappallimana U. Role of traditional medicine in primary health care an overview of perspectives and challenges. *Yokohama Journal of Social Sciences.* (2009) 14: 51-77.
72. Mittal A, Sardana S, Pandey A. Herbal boon for wounds. *International Journal of Pharmacy and Pharmaceutical Sciences*. (2013) 5: 1-12.
73. Jagatheeswari D, Deepa J, Ali HSJ, Ranganathan P. *Acalypha indica*an important medicinal plant: a review of its traditional uses and pharmacological properties. *International Journal of Research in Botany*. (2013) 3: 19-22.
74. Mullick A, Mandal S, Bhattacharjee R. *In vitro* assay of antioxidant and antibacterial activity of leaf extract and leaf derived callus extract of *Acalypha indica*. *International Journal of Pharmacy and Biological Sciences.* (2013) 3: 504-510.
75. Chah KF, Eze CA, Emuelosi CE, Esimone CO. Antibacterial and wound healing properties of methanolic extracts of some Nigerian medicinal plants. *Journal of Ethnopharmacology*. (2006) 164-167.
76. Davis R. Inhibitory and stimulatory systems in Aloe vera. *Aloe Today Winter*. (1992).
77. Umachigi SP, Kumar GS, Jayaveera KN, Kishore DV, Ashok CK, Dhanapal R. Antimicrobial, wound healing and antioxidant activities of *Anthocephalus cadamba*. *African Journal of Traditional, Complementary and Alternative Medicines*. (2007) 4 (4): 481-487.
78. Dash GK, Murthy PN. Evaluation of *Argemone mexicana* Linn. Leaves for wound healing activity. *Journal of Natural Products and Resources*. (2011) 1 (1): 46-56.
79. Kosger HH, Ozturk M, Sokmen A, Bulut E, Sinan A. Wound healing effects of *Arnebia densiflora* root extracts on rat palatal mucosa. *European Journal of Dentistry*. (2009) 96-99.
80. Azarkan M, Moussaoui A, Wuytswinkel D, Dehon G, Looze Y. Fractionation and purification of the enzymes stored in the latex of *Carica papaya*. *Journal of Chromatography B*. (2003) 229-238.
81. Jamil SS, Nizami Q, Salam M. *Centella asiatica*(Linn.) Urban o’A review. *Natural Product Radiance.* (2007) 6: 158-170.
82. Hasim P, Sidek H, Helan MHM, Sabery A, Palanisamy UD, Ilham M. Triterpene composition and bioactivities of Centella asiatica. *Molecules.* (2011) 16: 1310-1322.
83. Kosalwatna S, Shaipanich C, Bhanganada K. The effect of one percent Centella asiatica cream on chronic ulcers. *Siriraj Hospital Gazette*. (1988) 40: 456-461.
84. Shukla A, Rasik AM, Jain GK, Shankar R, Kulshrestha DK, Dhawan BN. *In vitro* and *in vivo* wound healing activity of asiaticoside isolated from *Centella asiatica*. *Journal of Ethanopharmacology.* (1999) 65: 1-11.
85. [Liu M](http://www.ncbi.nlm.nih.gov/pubmed/?term=Liu%20M%5BAuthor%5D&cauthor=true&cauthor_uid=18484522), [Dai Y](http://www.ncbi.nlm.nih.gov/pubmed/?term=Dai%20Y%5BAuthor%5D&cauthor=true&cauthor_uid=18484522), [Li Y](http://www.ncbi.nlm.nih.gov/pubmed/?term=Li%20Y%5BAuthor%5D&cauthor=true&cauthor_uid=18484522), [Luo Y](http://www.ncbi.nlm.nih.gov/pubmed/?term=Luo%20Y%5BAuthor%5D&cauthor=true&cauthor_uid=18484522), [Huang F](http://www.ncbi.nlm.nih.gov/pubmed/?term=Huang%20F%5BAuthor%5D&cauthor=true&cauthor_uid=18484522), [Gong Z](http://www.ncbi.nlm.nih.gov/pubmed/?term=Gong%20Z%5BAuthor%5D&cauthor=true&cauthor_uid=18484522). Madecassoside isolated from Centella asiatica herbs facilitates burn wound healing in mice. *Planta Medica.* (2008) 74: 809-815.
86. Nayak BS, Sandiford S, Maxwell A. Evaluation of the Wound-healing activity of ethanolic extract of *Morinda citrifolia* L. leaf. *Evidence-Based Complementary and Alternative Medicine.* (2009) 351-356.
87. Kumara SM, Pokharen N, Dahal S, Anuradha M. Phytochemical and antimicrobial studies of leaf extract of Euphorbia neriifolia. *Journal of Medicinal Plants Research.* (2011) 5: 5785-5788.
88. Bigoniya P, Rana AC. Wound healing activity of Euphorbia neriifolia leaf ethanolic extract in rats. *Journal of Natural Remedies*. (2007) 7: 94-101.
89. Gaur K, Rana AC, Nema RK, Kori ML, Sharma CS. Anti-inflammatory and analgesic activity of hydro-alcoholic leaves extract of Euphorbia neriifolia. *Asian Journal of Pharmacy and Clinical Research.* (2009) 2: 26-29.
90. Paarakh PM. Ficus racemosa an overview. *Natural Product Radiance.* (2009) 8: 84-90.
91. Murti K, Kumar U. Enhancement of wound healing with roots of Ficus racemosa in albino rats. *Asian Pacific Journal of Tropical Biomedicine.* (2012) 2: 276-280.
92. Deshpande PJ, Pathak SN, Shankaran PS. Healing of experimental wounds with *Helianthus annus*. *Indian Journal of Medical Research*. (1965) 53: 539.
93. Dev D, Roy B. Wound-healing potential of roots of *Hygrophila auriculata* Schumach. in swiss albino mice. *Applied Clinical Pharmacology and Toxicology.* (2019).
94. Sharma UK, singh A, Sharma U, Kumar M, Rai D, Agrahari A. Wound healing activity of *Kigelia pinnata* bark extract. *Asian Journal of Pharmaceutical and Clinical Research*. (2010) 73-75.
95. Kurian JC. Plants that heal. *Owners Oriental Watchman Publishing House, Pune*. (1995) 190.
96. Sakarkar DM, Sakarkar UM, Shrikhande VN, Vyas JV, Mandavgade S, Jaiswal SB, Purohit RN. Wound healing properties of Henna leaves. *Natural Product Radiance*. (2004) 406-412.
97. Esimone CO, Ibezim EC, Chah KF. The wound healing effect of herbal ointments formulated with *Napoleona imperialis*. *Journal of Pharmaceutical and Allied Sciences*. (2005) 294-299.
98. Asha B, Nagabhushan A, Shashikala GH. Study of wound healing activity of topical Ocimum sanctum in albino rats. *Journal of Chemical and Pharmaceutical Research*. (2011) 3:122-126.
99. Goel A, Kumar S, Singh DK, Bhatia AK. Wound healing potential of Ocimum sanctum with induction of tumor necrosis factor-α. *Indian Journal of Experimental Biology*. (2010) 48: 402-406.
100. Huihui L, Shaohui L, Dan X, Xiao Z, Yan G, Shanyu G. Evaluation of the wound healing potential of *Resina Draconis* (*Dracaena cochinchinensis*) in animal models. *Evidence-Based Complementary and Alternative Medicine.* (2013).
101. Karodi R, Jadhav M, Rub R, Bafna A. Evaluation of the wound healing activity of a crude extract of *Rubia cordifolia* L. (Indian madder) in mice. *International Journal of Applied Research in Natural Products*. (2009) 2(2): 12-18.
102. More BH, Gadgoli C, Padesi G. Hepatoprotective activity of *Rubia Cordifolia,* *Pharmacologyonline*. (2007) 73-79.
103. Majumdar M, Nayeem N, Kamath JV, Asad M. Evaluation of *Tectona grandis* leaves for wound healing activity. Pakistan Journal of Pharmaceutical Sciences. (2007) 120-124.
104. Dougnon TV, Klotoe JR, Anago E, Yaya NS, Fanou B, Loko F. Antibacterial and wound healing properties of *Terminalia superba* Engl. and Diels. (Combretaceae) in albino wistar rats. *Journal of Bacteriology and Parasitology.* (2014) 5: 5.
105. Diwan PV, Tillo LD, Kulkarni DR. Steroid depressed wound healing and *Tridax procumbens*. *Indian Journal of Physiology and Pharmacology*. (1983) 32-36.
106. Verma N, Khosa RL, Kumar V. Wound healing activity of *Wedelia chinensis* leaves. *Pharmacologyonline.* (2008) 2: 139-145.