ISSN: 2322 - 0902 (P) ISSN: 2322 - 0910 (O)



Review Article

A CRITICAL REVIEW ON *HRIDYA* (CARDIOTONIC) ACTION OF *DADIM* (*PUNICA GRANATUM* LINN.) WITH SPECIAL REFERENCE TO AYURVEDIC AND MODERN ASPECT

Pansare Tabassum Arif 1*, Borokar Archana Ajabrao², Dodke Pranita Chandu²

*1Associate professor, 2PG Scholar, Dept. of Dravyaguna, Government Ayurvedic College, Osmanabad, Maharashtra, India.

ABSTRACT

Cardiovascular diseases pose an alarming threat to global health. Heart disease is still the leading cause of death in India, Killing 1.7 million Indians in 2016. According to Ayurved, *Hriday* or Heart is a vital organ as any type of damage to this organ leads to loss of life. *Hridya mahakashaya* (group of cardiotonic drugs i.e. drugs having beneficial action on the heart) possessing sour taste has been explained in Charak Samhita. These drugs are useful in maintaining cardiac health and also mental health. *Dadim* (*Punica granatum* Linn.) means Pomegranate is one of the *Dravyas* explained under *Hridya* group. By means of its virtues, *Dadim* performs *Agnideepan, Rasa-Dhatwagnideepan, Pittashamana, Vatanuloman* and the *Hridya* function; and strengthens heart moreover nourishes brain. *Hriday* is one of the sites for *Mana* (psyche). *Amla rasa* of *Dadim* performs *Tarpana karma* of *Hriday*, satiates mind and improves mental strength. In this review the antioxidant, anti-inflammatory, anti-hypertensive, Anti-stress, thrombolytic, anxiolytic and anti-depressant actions of *Dadim* have been focused which are the key factors in treatment of cardiovascular diseases. This is an attempt made to explain the *Hridya* action of *Dadim* according to Ayurvedic as well as modern aspect. This article spreads a hopeful array for the researchers working on cardiovascular diseases.

KEYWORDS: *Dadim, Amla, Hridya*, Cardiotonic, Punica, Pomegranate.

INTRODUCTION

The current status of heart disease in India is alarming; with projections suggesting that by the year 2020, the burden of cardiovascular diseases in India will exceed that of any other country in the world. It is estimated that 17.5 million people die each year in India from cardiovascular diseases, amounting to a staggering 31% of all deaths worldwide. 80% of all cardiovascular deaths are due to heart attacks and strokes, 74% of urban Indians are at risk of cardiovascular diseases. There are estimated 40 million heart patients in India. Out of which 19 million reside in urban areas and 21 million in rural areas. This suggest heart diseases are fast becoming an epidemic in rural India and a structured solution is needed for combating the issue.[1] Although many types of cardiovascular diseases are enlisted in contemporary science, only a few explanations are available in Ayurvedic classics. The synthetic drugs like organic nitrates, calcium antagonist and beta blockers are recently used to treat the cardiovascular diseases but they are not free from side effects like hypotension, bradycardia and dizziness etc.[2] Herbal medicines are increasingly gaining greater acceptance from the public and medical profession, the common belief that, herbal

formulations are safer than modern drugs has lead to increasing use of herbal preparations.^[3] The role of plant based bioactive compounds or phytochemicals has attracted much attention due to their unique cardioprotective activity. Several epidemiological studies suggest that dietary patterns characterized by relatively high intakes of fruits and vegetables are significantly associated with reduced risk of coronary heart disease and stroke.^[4-7] Fruits and vegetables present a heart-healthy and colorful array of phytochemicals including carotenoids and polyphenols like flavonoids, resveratrol, ellagitannins, isothiocyanates and organosulfur compounds.

Phytochemicals are potent antioxidants and anti-inflammatory agents, thereby counteracting oxidative damage and inflammation which underlie the pathogenesis of CVD.[8-11] Keeping continuously increasing scenario of CVD in mind and as fruits are possesses a heart healthy and colorful array of phytochemicals it is necessary to focus on the fruits which are helpful to keep the heart healthy and protect from CVD. In this review we have focused on Hridya action i.e. cardiotonic action of the fruit Dadim which is commonly known as Pomegranate (*Punica granatum* Linn.) and used as an edible fruit.

Punica granatum Linn. belonging to the family Lytheraceae, although previously placed its own family Punicaceae recent Phylogenetic studies have shown that Punica belongs in the family Litheraceae.[12] Pomegranate is recognized as grenade by the French, granada by the Spanish, and literally translates to seeded ('granatus') apple ('pomum').[13] It is commonly known as Pomegranate. Aacharya charak has placed Dadim in the Hridya mahakashay [14] and Aacharva Vagbhata has placed it in Amla gana in Sutrasthana chapter 10/25, 26. [15] Amla rasa or sour taste is said to be good for heart in Ayurved.[16] Hridya means Cardiac tonic, the drugs which are helpful in maintaining the cardiac and mental health are called as Hridva.[17] Also the medicines or herb that give strength to Hriday are called Hridya dravyas. Cardiotonic drugs are substances that increase the contracting mechanism within the heart, thereby causing more blood to be pumped throughout the circulatory system. These drugs usually affect intracellular calcium levels in the heart muscle to achieve the desired increase in muscle action.[18] According to Ayurved, Hriday or heart is not just an organ but is a vital organ (Marma), the physical, physiological and emotional damage can leads to loss of life. If Hriday does not function properly, the other organs and tissues are also affected and damaged due to lack or inadequate supply of nutrition and oxygen. [19]

Pomegranate juice is rich in tannins, possesses anti-atherosclerotic properties, has antianti-oxidative effects. and potent characteristics. As some antioxidants have been shown to reduce blood pressure, Pomegranate juice consumption may reduce systolic blood pressure, inhibits serum ACE activity, and is convincingly a heart-healthy fruit. Pomegranate juice consumption inhibits serum angiotensin converting enzyme activity and reduces systolic blood pressure.[20] Pomegranate juice flavonoids inhibit low density lipoprotein oxidation and cardiovascular diseases. Pomegranate juice has shown considerable antiatherosclerotic, anti-hypertensive, antioxidant, and anti-inflammatory effects in human subjects and mouse models. The principal mechanisms of action of pomegranate juice may include decreased systolic blood pressure, thus causing an overall positive effect on the progression of atherosclerosis and the ensuing potential development of coronary heart disease.

In this review an attempt has been made to explain the *Hridya* (cardiotonic) action of *Dadim* according to Ayurvedic as well as modern aspect. *Dadim* is the cheapest and easily available dietary fruit and lot of research had proved that *Dadim* reverses plaque buildup in the arterial walls. This

fruit appears to have more potential as a health supplement rich in natural antioxidants and merits further intensive study.

Methodology

Literary review of Dadim was taken from an Ayurvedic classical texts viz. Samhita and *Nighantus*, different textbook of Dravyagunavidnyan for comprehensive information of the drug *Dadim*. The research work done by scholars on this herb regarding related pharmacological activities was also compiled.

OBSERVATIONS

Vernacular Name [21]

Sans.-Dadim; **Eng.**- Pomegranate; **Hind.**- Anar; **Ben.** & Mah.- Dalimb; **Punj**.-Daru; **Guj**.-Dadam; **Can**-Dalimbay; **Tel**.- Dadima, Dalimba; **Tam**.-Madalai, Madalam; **Mal.**-Madalam, **Fr.**- Grenadier cultive; **Ger**.-Granate baum.

Taxonomical Classification [22]

Kingdom- Plantae; Subkingdom- Viridiplantae; Infrakingdom- Streptophyta; Superdivision-Embryophyta; Division-Tracheophyta; Subdivision - Spermatophyta; Class- Magnoliopsida; Superorder - Rosanae; Order - Myrtales; Family - Lytheraceae; Genus - Punica L.; Species - Punica granatum L.

Habitat and Morphology [23-28]

Pomegranate is considered as an excellent tree for growing in arid zones for its resistance to drought conditions. It is now widely cultivated in Mediterranean, in tropical and subtropical areas. It is native from the Himalayas in northern India to Iran but has been cultivated and naturalized since ancient times over the entire Mediterranean region. It is also found in India and more arid regions of South-east the East Indies, and tropical Pomegranate plants require full sun, tolerate our alkaline soils, summer heat and winter lows to 10 degrees. It is adaptable to deep, loamy, well drained soils which are preferred but it has some tolerance to less than ideal drainage and to mild alkaline condition up to pH 7.5.

The Pomegranate tree typically grows 12 to 16 feet, has many spiny branches, and can be extremely long lived. The leaves are glossy and lance shaped, and the bark of the tree turns gray as the tree ages. Heterostylous funnel shaped red flowers are characteristic to this plant and are found either in singles or in clusters of up to five, flowers are large, red and have tubular calyx that eventually becomes the fruit. The ripe Pomegranate fruit can be up to five inches wide with a deep red, leathery skin, is grenade-shaped, and crowned by the pointed calyx. The fruit contains many seeds separated by white,

membranous pericarp and each surrounded by small amounts of tart, red juice.

Pharmacological uses [29-36]

Dadim is considered as "a pharmacy unto itself" in Ayurvedic medicine and is used as an antiparasitic agent, a blood tonic, to heal ulcers, also possesses anticancer, anti inflammatory, antioxidant, anti-viral, neuroprotective activity, hepatoprotective, function, anti-atherogenic reproductive hypoglycemic and antiglycemic effect. Along with this many researches has proved that pomegranate effectively used in the treatment of prevention of cancer, cardiovascular diseases, diabetes, dental conditions, stomach disorders, anaemia, erectile dysfunction, bacterial infections. antibiotic resistance, and ultraviolet radiations-induced skin damage. Other potential applications include infant brain ischemia, male infertility, Alzheimer's disease, arthritis and obesity. Bhavprakash has stated its use in Daha (burning sensation), Jwara (fever). And the pharmacological actions include Balya- Balapradam (providing strength), Medhya (brain tonic), effect), Shukralam (having aphrodisiac Hridva (cardiac tonic).

Phytochemicals [25, 37]

Fruits are believed to be a potential source of natural phenolics that have been associated with reducing the risk of cardiovascular diseases. Phytochemical analysis of *Punica granatum* indicated the presence of alkaloids, flavonoids, phenolic compounds, tannins, lignins, fats and oils, inulin, cardiac glycosides and carbohydrates. These classes of compounds were responsible for antioxidant and free radical scavenging effect of plant material. It also chelates iron and possesses reducing power. The beneficial Pomegranate constituents are ellagic and gallic acid, ellagitannins, punicic acid, flavonoids, anthocyanidins, anthocyanins and estrogenic flavonols and flavones.

DISCUSSION

In different Ayurvedic texts and Nighantus, regarding references of *Dadim*, variation in the rasas is generally observed. Aacharya charak has mentioned the three *Rasas* of *Dadim* such as *Amla*, *Kashaya*, *Madhura* whereas Aacharya Sushruta stated that *Dadim* possesses the *Madhura* and *Amla rasa*, whereas Bhavaprakash Nighantu reveals *Madhura*, *Kashaya*, *Amla rasa* of *Dadim*.

Some Aacharya has explained the three types of *Dadim* according to their *Rasas* viz. 1) *Madhura* 2) *Madhuramla* and 3) *Amla*. [36, 38, 39, 40]

Ayurvedic aspect of *Hridaya*

The word *Hriday* is composed of three syllables, i.e. hri+da+ya=hriday. The first syllable

denotes the suction activity of *Hriday* (*Hridayam* i.e. venous return), second points out the pumping activity of *Hriday* (*Samvardhanam* i.e. supply of oxygenated blood) and lastly the third syllable means control of these above two functions (*Yama*). The etymological derivation of the word *Hriday* consists of three verbs viz.

Hri Aaharane- to extract, accept from Da Daane- to give, return to and In Gatau- to be in motion

Thus *Hriday* is that organ in the body which receives, gives out and in a state of motion, the indication is to the organ Heart. The *Hriday* is vital for all the normal mental and physical activities because the entire sense, perception representing the life or movement of the body depend on the Hriday. Furthermore, the *Hriday* is the substratum of *Rasa*, Vyana vayu, Buddhi, Indriya, Atma and Para oja. Charak has stated that heart is the seat of consciousness which is primarily a function of the brain.[41] Sushruta has mentioned that heart is placed in the thoracic cavity between both nipples and extends up to the end of stomach [42] Both Acharyas have mentioned that only Hriday is the seat of Chetana and anatomical heart in the body. The heart harbours Chetana (Atman, soul or spirit). Atman is enclosed in the body and inseparably connected with Manas, Indriya etc. Heart is the site of origin of cardiac impulse, therefore it also harbours the Aatmik Gunas (like Dnyan, Vidnyan, Ichccha, Dwesh, Sukhh, Dukhh and Prayatna). Atman is the driver behind this mind-body complex; it expresses various desires which are gratified by the mind-body apparatus.

Heart evolves from the clear part of Rakta and Kapha. Hriday is the only organ that has distinction of being the origin or seat (Moolsthan) of two equally important Srotasas i.e. Pranavaha and Rasavaha srotas [43] and is one among the three important Marmas (vital spots) in human body [44] Rasavaha srotas is responsible for converting the Aahar Rasa to Rasa Dhatu and providing nourishment to all other body constituents and *Pranyaha srotas* is responsible for uninterrupted supply of the *Ambarapeeyoosh* (oxygen) through breathing. Rasa Dhatu is the first tissue emerging out of the nutritive fluid Aahar Rasa. Rakta circulars with Rasa all over the body and is responsible for Jeevan *Karma*, sustaining the life processes by supplying *Pran* to all body constituents. *Rasa-rakta* complex is essential for continuation of life. The human body is nourished by Shuddha rakta circulated by Hriday with the help of *Vyanavayu*.[45]

The functioning of heart is a complex phenomenon. All the *Vayu* types are involved in it.

Prana is responsible for dilatation and relaxation of chambers, valves etc. and acceptance of Rasa-rakta complex in the heart (Aadan). Udan is related with the contraction of same part (*Visarga*); the resultant Vyan is accountable for pushing the Rasa-rakta complex for circulation along the aorta, (Vikshep). The synchronization among all the moving parts is significant for the sustenance of life process (Yogkshem). Saman indirectly influences the heart by providing it the first nutritive fluid resulting from the digestive process in the gut. Sadhak pitta resides in the heart and drives its nourishment from Pachak Pitta. It is responsible for mental faculties like intellect (Buddhi, Medha) and ego (Ahamkar). Tactful use of these modalities to get his or her work done under the purview of Sadhak Pitta. Hence in some stages of Hridrog, mental signs and symptoms are observed. Pachak pitta is situated in Pachyamanashaya (small intestine) and its chief function is digestion and generation of Aahar rasa. It also imparts nourishment and strength to other Pitta types spread all over the body. Avalambak Kapha is situated in the heart itself and it is responsible for smooth functioning of heart by maintaining its nourishment level. For this, it receives the essence of Aahar rasa (anna veerya) and its own potency. Agni is the converter per excellence in internal milieu. *Aahar* rasa is capable of generating all the seven *Dhatus* while Rasa Dhatu has a function of Preenan (i.e. to maintain the fluid level and balance of the body by circulating along the vessels) attributed to it.

Aacharva Charak has mentioned the five types of *Hridrog* (cardiac disorders) nearly 2500 years ago. The etiological factors of Hriday roga are -Ativyayama (physical exertion), Atisara (purgation), Chhardi (vomiting), Ama and Aghata (injury). The other factors which are responsible for *Hridroga* are Murccha (fainting), Jwara (fever), Kasa (cough), Shwasa (dyspnoea), Chinta (anxiety), Bhaya (fear), Trishna (thirst), Atiutsaha (excitement), Bhrama (mental confusion), and Aruchi (anorexia).[46] Charak discusses about the role of improper exercise, stress, physical and mental trauma, excessive use of Tikshna Ahara (pungent and spicy foods) and Amadosha (Undigested substances which act as toxin) as a causative factors of Hridrog.[47] Manas is the seat of various emotions and stressful conditions producing mental symptoms like agitation etc. Psychological factors like prolongs stress, anxiety, fear, grief etc. affect Rasa adversely. These various factors affect the Agni function first which results in generation of *Ama* which is contaminating and toxic in nature and it exhibits a special capacity to cause occlusion of various spaces and channels in the internal environment. The presence of Aam leads to

contamination of *Rasa* and vitiation of *Doshas*. This contaminated rasa and vitiated *Dosha* complex reaches the heart. This complex is incapable of nourishing the heart as a normal Rasa does in combination with *Avalambak Kapha*. This leads to malnourishment of the heart which manifests as *Hridrog*. The predominance of *Dosha*, involvement of particular *Dhatu* and *Rasa* lead to variation in sympomatology, severity and prognosis. The principles useful to treat *Hridrog* are twofold i.e. to maintain *Rasa-rakta* circulation (*Preenan* and *Jeevan*) and to ensure smooth beating of heart (by generation and conduction of cardiac impulse).

Hridya action of Amla rasa

In the ancient literature of Ayurveda, many herbs are described as *Hridya*. It is generally stated that Hridya is the drug which is excellent for the heart [11] The other quote explains that Hridya meansthe drug beneficial for mind as stated in Commentaries by Gangadhar & Yogratnakar on Chapter 4 of Sutrasthan of Charak Samhita. *Amla rasa* is good for heart.[8] Amla rasa is also claimed to nourish the *heart*.^[9,10] This view is further sustained with the description of group of ten plants which are good for heart (Hridya Dasaimani'.) Under this group, only the plants possessing sourness are quoted. These are beneficial to increase the threshold of stress as well as lessen the hazardous effects of stress in the body. These herbs help to repair the body tissue particularly CVS against the harmful damages caused by stress. Hridya group of drugs are Amla Rasa Pradhana (dominating) and rich source of vitamin C. Vitamin C is proved to be a potent antioxidant in addition to good stress buster. It is very much obvious that *Hridya* property had a wide spectrum of application in Ayurveda.

Amla Rasa is one among the Shadrasas [52], which consists of Agni and Prithvi Mahabhutas [53], allied with Gunas like Snigdha (unctuous), Laghu (light) etc. [54] It is *Hridva* (good for heart and mind) and *Ushna* (hot) in potency. It supports digestion and has a mild warming effect on the body as a whole. Indriya bodhana (stimulates sense organs), Rochana (improves taste), Brumhana (produces stoutness), Tarpana (satisfaction), Preenana (nourishment), Kledana (creating moistness), Anulomana (brings the Vata in the normal direction) etc are other Karmas performed by *Amla Rasa*. Its specific action on *Doshas* can be listed out as Vatahara (alleviates Vata), Pittasleshmakara (augments Pitta and Kapha) and Raktakrut [55] (increases Rakta). It alleviates Vata by *Ushna and Snigdha Gunas.* One of the most important properties of *Amla rasa* is *Anulomana* of *Vata*.

Dadim (Punica granatum Linn.) has been illustrated as 'Hridya' in Ayurvedic texts [14,52,56-58]

Dadim possesses Amla, Madhura, Kashaya rasa, Madhura vipaka, Anushna veerya and Snigdha guna^[52] Dadim (Punica granatum L.) breakdowns the pathophysiology (Samprapti) of Hridroga by means of its virtues as described above. The general properties of Amla rasa shows that Amla rasa is Pittaprakopaka (vitiates Pitta)^[59] but Aacharya Vagbhta has mentioned Dadima as an exception for this property. Amla rasa of Dadima doesn't vitiate Pitta, but instead of that it helps to alleviate Pitta (due to its Madhur vipak and Anushna veerya) ^[60] This is the characteristic property of Dadim.

As Amla rasa is composed of Tej (Agni) and Prithvi Mahabhutas, it is Agneya in origin [59] Due to this it performs the function of Rasadhatvagnideepana (stimulates Rasadhatvaani) and also helps to bring Samana vayu in its normal state and pathway. This Samana vayu in its healthy state executes the task of Agni-sandhukshana and helps to breakdown the pathophysiology of *Hridroga* by means of *Deepan* karma (stimulating Agni). Because of proper functioning of Agni, the process of digestion of food occurs correctly resulting in the formation of healthy Aahar-rasa which helps in generating all the seven *Dhatus. Thus it* encourages the organic metabolism by Agnideepan and Dhatwagnideepan action resulting in improved structural & functional form of *Dhatus*. As the first tissue emerging out of the nutritive fluid Aahar Rasa i. e. Rasa Dhatu is of improved quality, it promotes and strengthens the health of all tissues of the body. The 'Rasadhatu' has an effect on the health of other successive *Dhatus* (tissues) of the body since these *Dhatus* develop sequentially and nourish further Dhatus. Thus Dadim acts at level of Rasa by enriching the nutritional value of the Rasa (circulating plasma) which in turn facilitate the synthesis and nourishment of the best quality of successive Dhatus. The next Dhatu is Rakta. Dadim is a best haematinic used in anaemia, grossly the colour and shape of its seed is as that of RBCs. Rakta and Amla Rasa comes under the similar category i.e., both have the domination of Agni Mahabhuta and in this manner Amla Rasa can be the absolute solution in Rakta Kshaya. Amla Preeti (desire for sour taste) is one of the prominent features of Rakta Kshaya^[61] Dalhana commenting on this explains the cause for this longing of sour taste. Rakta kshaya sequentially leads to the *Vriddhi* of *Vata* and to pacify this *Vata* the desire for Amla Rasa is created by the body itself; in that way the balance of the system can be restored [61]

In *Hridroga* the predisposing factors causes generation of *Aam*, contamination of Rasa and vitiation in *Doshas* creating obstruction in *Rasavaha srotasa* leading to provocation of *Vata*. This also results in diminished supply of nourishment and

Pranvayu to Hriday. By means of Vatanulomana property of Amla rasa, Dadim brings Vata in normal direction. There is a requirement of clear *Srotasas* for tissue perfusion. Dadim helps in the opening of channels by its Agneva property of Amla rasa and Angideepan (stimulating Agni) and Aampachan (digesting Aam) Karma (action); and activates microcirculation. The clear channels facilitate Dhatu Poshana (Tissue Nutrition) by nourishing Dhatus which finally results in production of excellence of tissues and boosts Ojas (immunity). After proper digestion and assimilation of food or drug, the respective *Dhatu* (tissue) get enriched with the nutrition (essence) and carry out their respective functions in optimum power. Therefore Dadim performs the functions of *Hridya* (nourishing heart), providing strength (Balapradam), nourishing brain aphrodisiac (*Medhyam*) and having (Shukralam). Its Madhur vipaka supports the Dhatuposhan (nourishing tissues) Karma (action).

Amla rasa is beneficial for Mana (pschye) and in Ayurveda it has mentioned that Hriday is one of the site for Mana (pschye), by means of this property Amla rasa Dadim performs the Tarpana (nourishing) karma (action) of Hriday, satiates mind (Mana prasadana) and improves mental strength.

Dadim is mainly useful to get rid of Symptoms of Pittaj Hridrog like Ooshma (feeling of warmth), Daha (burning sensation), Chosha (sucking sensation in cardiac region), Hriday Klam (fatigue of heart), Dhoomayan (feeling of hot air or fumes emerging from external orifice especially mouth), Trishna (thirst), Moorcha (fainting), Sweda (sweating in cardiac region, Mukhshosh (dryness of mouth) etc.

Modern Aspect of *Hridya* action Antioxidant property

Treatment of cardiovascular diseases (CVD) in elderly is not easy and need prolonged treatment and there is a need for the safer drugs to use them for Ayurveda offers period. satisfactory management strategies for CVD through preventive and curative approaches. Most of the degenerative diseases are caused by free radicals. Antioxidants are the agents responsible for scavenging free radicals. Antioxidants are phytochemicals, vitamins and other nutrients that protect our cells from damage caused by free radicals. Oxidative stress is responsible for many of today's diseases that results from an imbalance between formation and neutralization of pro oxidants. Oxidative stress is initiated by free radicals, which seek stability through electron pairing with biological macromolecules such as proteins, lipids and DNA in healthy human cells and cause protein and DNA damage along with lipid peroxidation. These changes contribute to

cardiovascular diseases. Plants are the important source for free radical scavenging molecules. Various synthetic antioxidants are on the use, but they are suspected to be carcinogenic. [62] Natural antioxidants therefore, have gained importance. Most of the fruits, vegetables, culinary herbs and medicinal herbs contain high levels of antioxidants. [63] Fruit possesses a spectrum of phytochemicals that could be the accountable factor for its varied biological activities, including the antioxidant potential.

Punica granatum fruit rind extracts showed good antioxidant effect, which could be due to the available phytoconstituents. Punica granatum rind is more potent scavenger of superoxide radical. Superoxide anions are highly toxic to cellular components. [37] *Punica granatum* is the rich source of flavonoids, these flavonoids are effective antioxidants mainly because they scavenge superoxide anions [64] According to a research study stated in American journal of clinical nutrition, Punica granatum being rich in antioxidants can prevent the oxidization of LDL 'bad' cholesterol.[65] Studies have confirmed the suspicion that the flavonoids in pomegranate comprise a potent antioxidant with additional inhibition properties which enzyme preparations of the juice and oil potential dietary supplements for promoting longevity and preventing heart disease. [66] Pomegranate extract have been shown to scavenge free radicals and decrease macrophage oxidative stress and lipid peroxidation in animals^[67] and increase plasma antioxidant capacity in elderly humans. Pomegranate peel juice exhibited significantly decreased plasma carbonyl content (a bio-marker for oxidant/ antioxidants impairment in various inflammatory diseases)[68] A clinical trial demonstrated pomegranate juice inhibits serum angiotensin converting enzymes (ACE) and reduces systolic blood pressure in hypertensive patients.^[69] Studies have shown that pomegranate contains more antioxidants than green tea, cranberries and even red wine. Pomegranate in our daily diet can improve blood flow, help to prevent heart diseases such as heart attacks, stroke or clogged arteries and it also promote healthy blood pressure levels and low cholesterol. [65] It contains vitamin C and flavonoids like Punicalgin which act as antioxidant[70,71] Antioxidants are body guards for the heart vessels which prevent them from clogging. [72]

Anti-inflammatory property: Atherosclerosis, a major degenerative disease of arteries involves a series of inflammatory and oxidative modifications within the arterial wall [73] Emerging research shows that obesity, hypertension, dyslipidemia, diets rich in saturated fats and reduced physical activity are the risk factor for atherosclerosis, which is also

characterized by inflammation and burden.^[74-82] Oxidative stress, an imbalance between free radical formation and antioxidant status, is the major contributor to CVD, and inflammation is a manifestation of oxidative stress. Oxidative stress induces inflammation by acting on the pathways that generate inflammatory mediators like adhesion molecules and pro-inflammatory cytokines.[83,84] Recent human studies have shown significant positive associations between oxidative stress and inflammation and indicators of vascular damage, like impaired endothelial function [85] and arterial function.[86-88] Oxidative stress and inflammation lead to endothelial dysfunction by reducing nitric oxide (NO) bioavailability due to the formation of peroxy nitrate, which is cytotoxic. [85,89,90] Thus, both oxidative stress and inflammation initiate, participate in, and enhance the process of atherosclerosis, and are the principle targets of therapeutic interventions with dietary phytochemicals, in preserving the endothelium or reversing atherosclerosis.[91-98]

Pomegranate fruit has been rated to contain the highest antioxidant capacity in its juice, when compared to other commonly consumed polyphenol rich beverages in the united states.[99,100] The principle antioxidants polyphenol in pomegranate juice include the ellagitannins and anthocyanins. [101] Ellagitannins account for 92% of the antioxidant activity of pomegranate juice and are concentrated in the peel, membrane and piths of the fruit. [102] Nitric oxide plays an important role as an antioxidant and anti-inflammatory agent in the endothelial cells and thereby attenuates the progression of atherosclerosis.[103] Pomegranate juice has also been shown to prevent oxidative destruction of nitric oxide and enhance its antioxidant and anti-inflammatory functions.[104] In short the principle mechanism of action of pomegranate juice may include- increased serum antioxidant capacity, decreased plasma lipids and lipid peroxidation, decreased oxidized-LDL uptake by macrophages, decreased intima media thickness, decreased atherosclerotic lesion areas, enhanced biological actions of nitric oxide, decreased inflammation, decreased angiotensin converting enzyme activity and decreased systolic blood pressure, thereby causing an overall favourable effect on the progression of atherosclerosis and the subsequent potential development of coronary heart disease.

Anti-stress

Stress may be classified as physical, emotional and social etc. where long time stressful condition lead to various complications like hypertension, atherosclerosis and other similar disorders which can be compiled under life style

disorders. High levels of cortisol can also raise heart rate and increase blood pressure and blood lipid (cholesterol and triglyceride) levels. Increases risk factors to both heart attacks and stroke. Vitamin C is found to increase HDL and reduce LDL to considerable levels.[105] Cortisol is a hormone secreted by the adrenal glands in response to stress. Earlier studies demonstrated that vitamin C abolished secretion of cortisol in animals that had been subjected to repeated stress. The vitamin helps to decrease both the physical and psychological effects of stress on people. Treatment with high-dose sustained-release ascorbic acid palliates blood pressure, cortisol, and subjective response to acute psychological stress^[106] Vitamin C has potent antioxidant properties i.e. it is able to lessen the damage caused by oxidizing chemicals, such as free radicals. These oxidizing chemicals, sometimes called reactive oxygen species, or ROS, are the normal byproducts of the cellular reactions which take place inside the body. Vitamin C decreases this damage by binding to oxidizing chemicals converting them to less harmful molecules. Reducing oxidative damage can have several benefits for the body, including reducing stress and heart disease.

Anti-hypertensive action

Angiotensin II is a key regulator of blood pressure (BP). Several actions leading to an increase in BP are elicited by Ang II via the angiotensin AT1 receptor (AT1R), including vasoconstriction, renal sodium reabsorption (directly or through the release of aldosterone), vasopressin release, and facilitation of sympathetic nerve activity.[107] The pressor responses to Adr, NA, PE, Ang II and 5- HT were significantly (p<0.05) increased in Ang II treated hypertensive rats as compared to control rats. The pressor responses to Adr, NA, PE, Ang II and 5- HT were significantly (p<0.05) reduced in case of Ang II treated rats that received PJ extract (100 and 300 mg/kg/day, p.o.) for 4 weeks as compared to only Ang II treated rats.[108] Also reduction in ACE activity may contribute to lowering blood pressure. It is known that reactive oxygen species (ROS) contribute to the pathogenesis of numerous cardiovascular diseases including hypertension, atherosclerosis, cardiac hypertrophy, heart failure, NAD(P)H oxidase being the predominant source of ROS.[109] Activation of this enzyme leads to a variety of intracellular signaling events. Ang II, via activation of the AT1 receptor, stimulates NAD(P)H oxidases activity in vascular smooth muscle cells increasing superoxide anion formation and nitric oxide inactivation, effects associated with the pathogenesis of hypertension.[110, 111] SOD, CAT and GSH are the three primary antioxidant enzymes among the endogenous systems

for removal of reactive oxygen species.[112,113] Pretreatment with pomegranate juice (PI) restored the antioxidant enzyme level which in turn indicates the protective effect of PI against oxidative stress. Increased serum ACE activity is associated with enhanced susceptibility to lipid peroxidation and hence the inhibitory effect of pomegranate juice on serum ACE activity can further contribute to an antioxidant environment[114] In-vitro study using chronic administration of PJ (100 and 300 mg/kg/ day, p.o.) for 4 weeks in Ang II treated rats, proved the inhibitory effect of PJ on Ang II receptors [108] Thus, pomegranate juice significantly reduced mean arterial blood pressure, vascular reactivity changes to various drugs, and prevented oxidative damage in angiotensin model of hypertension. The antioxidant activity, serum ACE inhibition activity and blockade of angiotensin receptor may be partly responsible for its antihypertensive action.

Thrombolytic potential of *Punica Granatum* Linn.

Platelet count was found to increase when a thrombus was formed and subsequently increased when treated with both the Pomegranate fruit extract and standard streptokinase. The increase in the level of platelets when treated with the extracts were lower when compared with that of the drug, streptokinase. This marginal increase could be credited for the reocclusion, a major drawback in thrombolytic therapies. [115] Studies reported that streptokinase activates platelets, thereby limiting its efficiency as a thrombolytic agent. In contrast, the level of platelets did not increase significantly when treated with fruit extracts, proving its safety and thrombolytic efficiency in vivo. During reperfusion, oxidative stress reaches higher peaks and has a more sustained duration than other pathogenic mechanisms of ischemic cell death, the risks and hurdles associated with the currently used thrombolytic agents such as tPA overshadows the supposed benefits as thrombolytic agent, demanding an urge for sources with both antioxidant and thrombolytic property. In- vivo study using Punica *aranatum* in experimental rats reported that the fruit extract conferred good antioxidant protection against the oxidative stress that was found to be peaked during the thrombus formation and lysis. The fruit Punica granatum has an augmentive effect on thrombolysis by rendering good oxidative protection with its numerous antioxidants. [116]

Anxiolytic, Anti-depressant and CNS stimulant activity

Different studies suggest that natural products, such as polyphenolic and alkaloids compounds that isolated from plants potentially delayed the neurodegeneration and also improve

memory and cognitive function. Plants and their constituents play their protective roles via increased SOD and catalase levels, restoration of GSH, decreased MDA levels and also protects of neurons against ROS as antioxidant activities. inflammatory properties of plants and their constituents as well as due to their interactions with pro-inflammatory cytokines such as IL-6, IL-1\beta, and TNF- α and mediated by over expression of BCl-2 which is inducible nitric oxide synthase (iNOS). Some protective effects of these natural compounds may be due to reduction of Ca2+, Na+ and enhancement of K+ level or 'anti-glutamatergic' effect. Furthermore, neuroprotective action of plants and components occur via inhibition of the acetylcholinesterase (AChE) activity and decreased MDA levels in the neural system via modulating GABAergic and glutamatergic neurons, and also increasing amount of amino acids and serotonin (5-HT) in the neurotransmitters systems or as ligand for some receptors like 5-HT2A, α2, β and D2.[117] Proinflammatory cytokines including IL-1 β , TNF- α and IL-6 have been reported to be significantly elevated in the cerebro-spinal fluid or plasma of Alzheimer's disease patients. [118-119] The mechanism of the reduction of IL-1β, TNF-α and IL-6 by pomegranates is uncertain, since its multiple active components such as anthocyanins, ascorbic acid, ellagic acid, gallic acid, fumaric acid, caffeic acid, catechin, EGCG, quercetin, rutin, tannins, alkaloids and flavanoids, multifunctional action, thus making it pharmacologically complex. Our current results, in agreement with previous reports, suggest that pomegranates in diet indeed decreased the cytokine levels. [120-125] Some studies suggest that the anxyolitic-like effect of Pomegranate is dependent on interactions with both GABAergic (related to Mg) and serotonergic (5-HT1A) systems. [126]

When oxidative stress causes anxiety, antioxidants may have therapeutic potential in the meantime. The production of reactive oxygen species (ROS) dominates the defence system of the brain, the lipid-rich brain structure can be susceptible to lipid peroxidation that creates a chain reaction of free radicals, which can reduce membrane fluidity and damage membrane proteins leading to the loss of receptors, enzymes, and ion channels and eliminating the membrane integration that ultimately causes cell death. In addition to oxidative damage to proteins, lipids, and nerve cell membranes (neurons), oxidation can also occur in other sensitive sectors and transmitter of biological nucleic acids. As a result, oxidative stress can change neural transmission, neuronal function, and overall brain activity. [127] Polyphenols have shown their ability to relieve

anxiety-related behaviour in rodents. [128] Some polyphenols have medicinal conditions that show a minor conflicting activity, which may show effects such as anxiety reduction without side-effects. [129] Pomegranate juice is rich in phenolic compounds, which is higher than many other fruit juices. Phenolic compounds form an important group of plant compounds as secondary metabolites that are produced in response to the environmental stress. Due to having hydroxyl groups, these compounds could neutralize free radicals and act as electron or hydrogen donors. [130] Oral administration of hydroalcoholic extract of pomegranate seeds, once a day for 14 days, significantly improved the disorder caused by cerebral ischemia on stress and anxiety behaviours. Since PGSE contains phenolic compounds including ellagic acid in free and bond forms as well as other flavonoids, subsequent disorders of ischemia disorders can be improved using the method of sweeping oxidants and free radicals produced by the brain's ischemia. [131]

Several studies on behaviours of rats showed significant decrease in the duration of immobility in fast swimming test (FST), increase in the distance travelled, number of central entries in open field test (OFT) and number of entries in open arm in elevated plus maze test (EPM) by *Punica granatum* in dose dependant manner. The antidepressant action might be due to the presence of flavonoid.[132] Major flavonoid found in Punica granatum is ellagic acid, since ellagic acid is reported to produce anxiolytic action.[133] These results of *Punica granatum* may be due to presence of testosterone in it.[134] Since there is evidence that testosterone could attenuate immobility in healthy rats and act as antidepressant increasing central dopaminergic and 5hydroxytrptaminergic metabolism^[135] Another study suggests that anti-depressant like effect might be due to the estrogen which is an important component of Punica granatum.[136] Hence role of estrogen or estrogen like compound as anti-depressant have been well documented. [137] From above discussion it may be concluded that Punica granatum is most effective for its CNS stimulant, anxiolytic and antidepressant effects.

CONCLUSION

The mortality and morbidity rates due to cardiovascular diseases become a worldwide issue. Researches on organ targeting and low toxic effects drugs are the need of time. *Dadim* is the cheapest and easily available dietary fruits possess an antioxidant capacity more than green tea and red wine, due to this *Dadima* plays a major role in the treatment of heart diseases as oxidative stress is the main cause for CVD. Also by means of *Amla rasa Dadima*

performs the function of Agneesandhukshana and *Dhatwagnideepana* it helps to bring the vitiated *Vayu* in its healthy states and pacifies *Ama* and breakdown the pathophysiology of *Hridrog*. In Avurvedic classics Hriday is mentioned as one of the site for Mana (psyche) and *Amla rasa* is beneficial for mind, so that Amla rasatmaka Dadima perform the function of Hriday tarpana, satiates mind and improves mental strength. Pomegranate juice is rich in Vitamin C, flavonoids like Punicalgin, tannins, possesses antiatherosclerotic action, and has an anti-aging effects and potent anti-oxidant properties. Pomegranate juice has also been shown to prevent oxidative destruction of nitric oxide and enhance its antioxidant and anti-inflammatory functions and prevent the oxidization of LDL 'bad' cholesterol. Pomegranate juice consumption inhibits serum angiotensin converting enzyme activity and reduces systolic blood pressure. Pomegranate juice has considerable anti-atherosclerotic. hypertensive, antioxidant, and anti-inflammatory, anti-stress, anxiolytic and CNS depressant activity in human subjects and mouse models.

REFERENCES

- 1. Current state of heart disease statistics in India 2016- Medicounsel, blog.medicouncel .com>2016 /09/12. [cited 2017 August 24]
- 2. Hardman JG, Limbird LE. Goodman and Gilman's. The pharmacological basis of therapeutics. 10th ed. Mc Graw-Hill Medical publishing division (NY): p.843-65.
- 3. Arya DS, Nandave M, Ojha SK et al. Mayocardial salvaging effects of Ocimum sanctum in experimental model of mayocardial necrosis: A haemodynemic, biochemical and histoarchitectural assessment. J Curr Sci, 2006; 91: p.667-72.
- 4. Kris-Etherton PM, Lefevre M, Beecher GR et al. Bioactive compounds in nutrition and health-research methodologies for establishing biological function: the antioxidants and anti-inflammatory effects of flavonoids on atherosclerosis. Annu Rev Nutr. 2004; 24: p.511-38.
- 5. Law MR, Morris JK. By how much does fruit and vegetables consumption reduce the risk of ischemic heart disease? Eur J Clin Nutr. 1998; 52: p549-56.
- 6. Joshipura KJ, Hu FB, Manson JE et al. The effect of fruit and vegetable intake on risk for coronary heart disease. Ann Intern Med. 2001; 34: p.1106-14.
- 7. Joshipura KJ, Ascherio A, Manson JE et al. Fruit and vegetable intake in relation to risk of ischemic stroke. JAMA. 1999; 282: p.1233-39.
- 8. Tipoe GL, Leung TM, Hung MW, Fung ML. Green tea polyphenols as an anti-oxidant and anti-

- inflammatory agent for cardiovascular protection. Cardiovascular Hematol Disord Drug Targets. 2007; 7: p.135-144.
- 9. Cho SY, Park SJ, Kwon MJ, et al. Quercetin suppresses pro-inflammatory cytokine production through MAP kinases and NF-kappaB pathway in lipopolysaccharide- stimulated macrophage. Mol Cell Biochem. 2003; 243: p.153-160.
- 10. Bhatt DL, Anti-inflammatory agents and antioxidants as a possible "third great wave" in cardiovascular secondary prevention. Am J Cardiol. 2008; 101: p.4D-13D.
- 11. Basu A, Lucas EA. Mechanisms and effects of green tea on cardiovascular health. Nutr Rev. 2007; 65: p.361-75.
- 12. Pomegranate simple English Wikipedia, the free enclyopedia; https://simple.m.wikipedia.org> wiki> punica. [cited- 2017 August 28]
- 13. Dhalkari chandulal, Indurkar Maya, Wagatkar Jayashri. Pomegranate: Natural remedy for treating periodontal disease. International journal of advanced education and research. 2016; 1(8): p.27-31.
- 14. Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey. Caraka- Chandrika Hindi Commentary Caraca Samhita -1 (Hindi Translation). Varanasi; Chaukhamba Surbharati Prakashan. Reprint 2017: p. 80.
- 15. Dr. Bramhananda Tripathi. Astanga Hrdayam of Srimadvagbhata. Nirmala Hindi Commentary (Hindi Translation). Delhi: Chaukhamba Sanskrit Pratishthan; reprinted 2017, p.155.
- 16. Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey. Caraka- Chandrika Hindi Commentary Caraca Samhita -1 (Hindi Translation). Varanasi; Chaukhamba Surbharati Prakashan. Reprint 2017: p. 453.
- 17. Charaka gangadhar commentary or A. P. Jawalgekar ref.
- 18. What is the definition of cardiotonic? / reference. Com https://www.reference.com> health> definition [Cited- 2017 September 04].
- 19. Straight from samhita's: Hridhya mahakashayathe natural Ayurvedic cardiac tonics or heart health promoters; https://www.google.co.in/amp/s/drraghuramys.wordpress.com/2015/06/30 [cited 2017 September 16]
- 20. Aviram M, Dornfeld L. Pomegranate juice consumption inhibits serum angiotensin converting enzyme activity and reduces systolic blood pressure. Athero 2001; 158: p.195-8.
- 21. K.M. Nadkarni. Indian Materia Medica (Vol I). 2nd ed. Mumbai; Popular Prakashan Private Limited. 1927; Reprinted 2005. p.1131-35.

- 22. ITIS Standard report page: Punica granatum L. Taxonomic serial no.: 27278; https://www.itis.gov>servlet>singleRpt [cited 2017- 18].
- 23. Mars M. Pomegranate genetic resources in the Mediterranean region. Plant Genetic Resources Rev. 1995; p.345-54.
- 24. Schalau J. Backyard Gardener- Growing Pomegranates. 2001: p.1-2.
- 25. Jurenka J. Therapeutic Application of Pomegranate. Alternative Medicine Review. 2008; 13(2): p.128-144.
- 26. http://www.agric.nsw.gov.au./pomegranate growing. [cited- 2011november 15]
- 27. https://www.crfg.org/pubs/ff/pomegranate.html. [cited- 2011 November 22]
- 28. Albrecht M, Jiang W, Kumi- Diaka J. Pomegranate extracts potently suppress proliferation, xenograft growth, and invasion of human prostate cancer cells. J. Med. Food. 2004; 7: p.274-83.
- 29. Pirbalouti AG, Koohapayeh A, Karimi I. The wound healing activity of flower extracts of Punica granatum and Achillea kellalensis in wistar rats. Acta polonia pharmaceutics drug research. 2010; 67(1): p.107-10.
- 30. Lad V, Frawley D, Santa FE. The Yoga of Herbs. Lotus Press. New Maxico. 1986: p.135-6.
- 31. Naqvi SA, Khan MS, Vohora SB. Antibacterial, antifungal, and antihelminthic investigations on Indian medicinal plants. Fitoterapia.1991; 62: p.221-28.
- 32. Akhlagi M, Band B. Mechanisms of flavonoid protection against myocardial ischemia-reperfusion injury. J. Mol Cell Cardiol. 2009; 46: p.309-17.
- 33. Caceres A, Giron LM, Alvarado SR, Torres MF. Screening of antimicrobial activity of plants popularly used in Guatemala for treatment of dermatomucosal diseases. J Ethnopharmacol. 1987; 20: p.223-37.
- 34. Aviram M, Volkova N, Coleman R et al. Pomegranate phenolics from the peels, Arils and Flowers are antiatherogenic studies in vivo in atherosclerotic apolipoprotein E-deficient mice and in vitro in cultured macrophages and lipoproteins. J Agric Food Chem. 2008; 56: p.1148-57.
- 35. Sharrif Moghaddasi Mohammad and Hamed Haddad Kashani. Chemical composition of the plant Punica granatum L. (Pomegranate) and its effect on heart and cancer. J of medicinal plants research. 2012; 6(40): p.5306-10.
- 36. Dr. Chunekar K.C., Bhavaprakash nighantu (Hindi Translation), Amradi phala varga, 7th edition, Varanasi; Chaukhamba Bharati Academy. 1986, Reprint-2015, p.570-71.

- 37. S. Rajan, S. Mahalakshmi, VM. Deepa, et al. Antioxidant potentials of Punica granatum fruit rind extracts. Int. J of Pharmacy and Pharmaceutical sciences. 2011; 3(3):p.82-88.
- 38. Dr. Brahmanand Tripathi and Dr. Ganga Sahay Pandey. Caraka- Chandrika Hindi Commentary Caraca Samhita -1 (Hindi Translation). Varanasi; Chaukhamba Surbharati Prakashan. Reprint 2017: p. 518.
- 39. Ambikadatta Shastri. SushrutSamhita (Hindi Translation).Varansi: Chaukhamba Bharati Academy; 2005,
- 40. Prof. Priyavrat Sharma. Dravyaguna Vidnyan (vol-2). Varanasi; Chaukhamba Bharati Academy. Reprint 2015. P.340-43.
- 41. Kashinath Shastri and Gorakhnath Chaturvedi. Vidhyotani Hindi commentary, Charaka Samhita-1. Chaukhambha Bharati Academy, Varanasi. reprint year 2009; p.583
- 42. Kaviraj Ambika Dutt Shastri. Ayurvedtatva sandipika Hindi Commentary, Sushuruta Samhita-1, Chaukhambha Sanskrit Sansthan, Varanasi. Reprint year 2011; page 73.
- 43. Yadavaji Trikamaji Aacharya Editor, Sushruta samhitha-1, Chaukhambha Surbharati Prakashan, Varanasi. 2013; p.Sarira Sthana9/12.
- 44. Yadavaji Trikamaji Aacharya Editor, Charaka samhitha-2, Chaukhambha Surbharati Prakashana, Varanasi. 2013; p. ChikitsaSthana 26/2.
- 45. Yadavaji Trikamaji Aacharya Editor, Charaka samhitha-2, Chaukhambha Surbharati Prakashana, Varanasi. 2013; p.516.
- 46. B. Ram et al. A Clinical Study of Arjun on Hrida-Roga (Angina Pectoris), World Journal of Pharmaceutical Research. 2016; 5(2): p.1498-1511.
- 47. Yadavaji Trikamaji Aacharya Editor, Charaka samhitha-2, Chaukhambha Surbharati Prakashana, Varanasi. 2013; p. Chikitsa Sthana 26/45,
- 48. Vidhyotani Hindi commentary by Kashinath Shastri and Gorakhnath Chaturvedi, Charaka Samhita purvardha Sutra sthan ch.25,Verse 40, Chaukhambha Bharati Academy; Varanasi: Reprint- 2009. p.467.
- 49. Vidhyotani Hindi commentary by Kashinath Shastri and Gorakhnath Chaturvedi, Charaka Samhita purvardha Sutra sthan ch.26, Verse 42/2; Chaukhambha Bharati Academy, Varanasi: reprint year 2009.p.508.
- 50. Agnivesha, 'Charaka Samhita', revised by Charaka and Dridhbala with Ayurveda Dipika'commentary, by Chakrapanidatta, edited by Laxmidhar divedi, sutra sthan ch.26, verse 42/2, Chaukhamba Krishnadas Academy, Varanasi: Reprint 2012.
- 51. Agnivesha, 'Charaka Samhita', revised by Charaka and Dridhbala with Ayurveda Dipika'commentary,

- by Chakrapanidatta, edited by Laxmidhar divedi, sutra sthan ch.4, verse 10, Varanasi; Chaukhamba Krishnadas Academy. Reprint -2012.
- 52. Dr. Chunekar K.C., Bhavaprakash nighantu (Hindi Translation), Amradi phala varga, 7th edition, Varanasi; Chaukhamba Bharati Academy. 1986, Reprint-2015, p.102.
- 53. Paradakara HSS, Ashtangahrudaya with Sarvanga sundara commentary of Arunadutta and Ayurveda rasayana commentary of Hemadri, 9th ed. Chaukhambha Orientalia Varanasi; 2011: p. 175.
- 54. Sharma.S, Ashtanga Sangraha with Sasilekha commentary of Indu. 2nd ed. Chaukhambha Sanskrit Series Office Varanasi. 2008: p. 144.
- 55. Prof. Sharma Priyavat. Sushrut Samhita-1, Annapan vidhiradhyaya, Chaukhamba Surbharati Prakashan Varanasi: p.141.
- 56. Prof. Sharma P. V., Dravyaguna Vidnyan -1, Chaukhamba bharati academy Varanasi; 2001: p.33.
- 57. Prof. Sharma P. V., Kaiyadev nighantu, Aushadhi varga-59, Chaukhamba Oriental Varanasi; 1979: p.308.
- 58. Prof. Priyavrat Sharma. Dravyaguna Vidnyan (vol-1). Varanasi; Chaukhamba Bharati Academy. Reprint 2015. p.218.
- 59. Dr. Bramhananda Tripathi. Astanga Hrdayam of Srimadvagbhata. Nirmala Hindi Commentary (Hindi Translation). Delhi: Chaukhamba Sanskrit Pratishthan; reprinted 2017, p.156.
- 60. Acharya JT, Susrutha Samhita with Nibandha sangraha commentary of Dalhana. Reprint ed. Chaukhambha Sanskrit Sansthan Varanasi (India); 2010. p. 69.
- 61. Singh RP, Chidmara murthy KN, Jayaprakash GK, Studies on the antioxidant activity of pomegranate seed extracts using in vitro models. J Agric Food chem. 2002; 50: p.81-86.
- 62. Dragland, S., Several culinary and medicinal herbs are important sources of dietary antioxidants. J. Nutrition. 2003.
- 63. Hazra B, Biswas S, Mandal N. Antioxidant and free radical scavenging activity of Spondias pinnata. BMC comple and alter Med. 2008; 8(63): p.1-10.
- 64. S. Radhika, K. H. Smila, R. Muthezhilan. Antidiabetic and hypolipidemic activity of Punica granatum Linn on alloxan induced rats. World journal of medical sciences. 2011; 6(4): p.178-82.
- 65. Shubert, Y. S., Lansky, E. P. and Neeman, I. Antioxidant and eicosanoid enzyme inihibition properties of pomegranate seed oil and fermented juice flavonoids. J. Ethnopharmacol.
- 66. Tanaka T, Nonaka G, Nishioka I. Punicafolin an ellagitannins from leaves of Punica granatum. Phytochemistry. 1985; 24: p.2075-78.

- 67. Torres JC, Fresno VA. Determination of alkaloids in drugs unification of techniques prescribed by the Spanish Pharmacopeia IX. Ed. V. Pomegranate Rind. Ars. Pharm. 1970; 11: p.337-40.
- 68. Yurdasheva NP, Rakhimov DA, Ismailov ZF. Pectin from Punica granatum fruit peel. Khim. Prir. Soedin. 1978; 3: p.393-94.
- 69. Dr. Paranjape Prakash, Indian Medicinal Plants, Chaukhamba Sanskrit Pratishthan, 2005, p.64-65.
- 70. Afaq F., Saleem M., Krueger C.G., Reed J.D., Muktar H.-, Anthocyanin and hydrolysable tannin rich pomegranate fruit extract modulates MAPK and NF Kappa B pathways and inhibits skin tumorigenesis in CD-1 mice. Int. J. Cancer. 2005; 113(3): p.423-33.
- 71. Stitzinger M.,-Lipids, inflammation and atherosclerosis, Doctoral thesis, Digital repository of Leiden university, Leiden / Amsterdam center for Drug Research,2007-02-01, handle-http://hdl.handle.net/1887/9729.
- 72. Fan J, Watanabe T. Inflammatory reactions in the pathogenesis of atherosclerosis. J Atheroscler Thromb. 2003; 10: p.63-71.
- 73. Holvoet P. Relations between metabolic syndrome, oxidative stress and inflammation and cardiovascular disease [in Dutch]. Verh K Acad Geneeskd Belg. 2008; 70: p.193-219.
- 74. Singh U, Jialal I. Oxidative stress and atherosclerosis. Patho-physiology. 2006; 3: p. 129-42.
- 75. Couillard C, Ruel G, Archer WR, et al. Circulating levels of oxidative stress markers and endothelial adhesion molecules in men with abdominal obesity. J Clin Endocrinal Metab. 2005; 90: p.6454-6459.
- 76. Davi G, Guagnano MT, Ciabattoni G, et al. Platlate activation in obes women: role of inflammation and oxidant stress. JAMA. 2002; 288: p.2008-2014.
- 77. Vasdev S, Gill VD, Singal PK. Modulation of oxidative stress induced changes in hypertension and atherosclerosis by antioxidants. Exp Clin Cardol. 2006; 11: p.206-16.
- 78. Flouris AD, Faught BE, Klentrou P. Cardiovascular disease risk in adolescent smokers: evidence of a smoker lifestyle. J Child Health Care. 2008; 12: p.221-31.
- 79. Neumann AL, Martins IS, Marcopito LF, Araujo EA. Dietary patterns associated with risk factors for cardiovascular disease in a Brazilian city. Rev. Panam Salud Publica. 2007; 22: p.329-39.
- 80. Kamphuis MH, Geerlings MI, Tijhuis MA, et al. Physical inactivity, depression and risk of cardiovascular mortality. Med Sci Sports Exerc. 2007; 39: p.1693-99.
- 81. Gordon JL, Lavoie KL, Arsenault A, et al. Health behaviors and endothelial function. J Behav Med. 2008; 31: p.5-21.

- 82. Valko M, Leibfritz D, Moncol J, et al. Free radicals and antioxidants in normal physiological functions and human diseases. Int J Biochem Cell Biol. 2007; 39: p.44-84.
- 83. Ceriello A, Motz E. Is oxidative stress the pathogenic mechanism underlying insulin resistance, diabetes and cardiovascular disease? The common soil hypothesis revisited. Arterioscler Thromb Vasc Biol. 2004; 24: p.816-23.
- 84. Lavi S, Yang EH, Prasad A, et al. The interaction between coronary endothelial dysfunction, local oxidative stress and endogeneous nitric oxide in humans. Hypertension. 2008; 51: p.127-133.
- 85. Kals J, Kampus P, Kals M, et al. Inflammation and oxidative stress are associated differently with endothelial function and arterial stiffness in patients healthy subjects and in with atherosclerosis. [Published online ahead of print April 9 2008] Scand J Clin Lab Invest. 2008; 68: Available http://www.ncbi.nlm.gov/sites/entrez. Accessed 29 July 2008.
- 86. Booth AD, Wallace S, McEniery CM, et al. Inflammation and arterial stiffness in systemic vasculitis: a model of vascular inflammation. Arthritis Rheum. 2004; 50: p.581-88.
- 87. Kals J, Kampus P, Kals M, et al. Impact of oxidative stress on arterial elasticity in patients with atherosclerosis. Am J Hypertens. 2006; 19: p.902-908.
- 88. Grattagliano I, Palmieri VO, Portincasa P, et al. Oxidative stress induced risk factors associated the metabolic syndrome: a unifying hypothesis. J Nutr Biochem. 2008; 19: p.491-504.
- 89. Qamirani E, Ren Y, Kuo L, Hein TW. C-reactive protein inhibits endothelium-dependant NOmediated dilation in coronary arterioles by activating p38 kinase and NAD (P) H oxidase. Arterioscler Thromb Vasc Biol. 2005; 25: p.995-1001.
- 90. Aviram M, Rosenblat M, Gaitini D, et al. Pomegranate juice consumption for 3 years by patients with carotid artery stenosis reduces common carotid intima-media thickness, blood pressure and LDL oxidation. Clin Nutr. 2004; 23: p.423-33.
- 91. Alexopoulos N, Vlachopoulos C, Aznaouridis K, et al. The acute effect of green tea consumption on endothelial function in healthy individuals. Eur J Cardiovascular Prev Rehabil. 2008; 15: p.300-05.
- 92. Shih PH, Yeh CT, Yen GC. Anthocynins induce the 104. Dr. J.L.N Shastry and Dr. K. Niteshwar. Ayurvedic activation of phase II enzymes through the antioxidant response element pathway against Chem. 2007; 55: p.9427-35.

- 93. Aviram M, Volkova N, Coleman R, et al. Pomegranate phenolics from the peels, arils, and flowers are antiatherogenic: studies in vivo in atherosclerotic apolipoprotein e-deficient (E0) mice and in vitro in cultured macrophages and lipoproteins. J Agric Food Chem. 2008; 56: p.1148-57.
- 94. de Nigris F, Balestrieri ML, Williams-Ignarro S, et al. The influence of pomegranate fruit extract in comparison to regular pomegranate juice and seed oil on nitric oxide and arterial function in obese zucker rats. Nitric oxide. 2007; 17: p.50-54.
- 95. Terao J, Kawai Y, Murota K. Vegetables flavonoids and cardiovascular disease. Asia Pac J Clin Nutr. 2008; 17(1): p.291-293.
- 96. Spiller F, Alves MK, Vieira SM, et al. Antiinflammatory effects of red pepper (Capsicum baccatum) on Carrageenan and antigen-induced inflammation. J Pharm Pharmacol. 2008; 60: p.473-78.
- 97. Tribolo S, Lodi F, Connor C, et al. Comparative effects of quercetin and its predominant human metabolism on adhesion molecule expression in activated human vascular endothelial cells. Atherosclerosis. 2008; 197: p.50-56.
- 98. Mertens-Talcott SU, Jilma-Stohlawetz P, Rios J, et al. Absorption, metabolism, and antioxidant effects of pomegranate (Punica granatum L.) Polyphenols after ingestion of a standardized extract in healthy human volunteers. J Agric Food Chem. 2006; 54: p.8956-61.
- 99. Seeram NP, Aviram M, Zhang Y, et al. Comparision of antioxidant potency of commonly consumed polyphenol-rich beverages in the United states. J Agric Food Chem. 2008; 56: p.1415-22.
- 100. Gil MI, Tomas-Barberan FA, Hess-Pierce B, et al. Antioxidant activity of pomegranate juice and its relationship with phenolic composition and processing. J Agric Food Chem. 2000; 48: p.4581-89.
- 101. Seeram NP, Lee R, Heber D. Bioavailability of ellagic acid in human plasma after consumption of ellagitannins from pomegranate (Punica granatum L.) juice. Clin Chim Acta. 2004; 348: p.63-68.
- 102. Napoli C. Ignarro LI. Nitric oxide and atherosclerosis. Nitric oxide. 2001; 5: p.88-97.
- 103. Ignarro LJ, Byrns RE, Sumi D, et al. Pomegranate juice protects nitric oxide against oxidative destruction and enhances the biological actions of nitric oxide. Nitric oxide. 2006; 15: p.93-102.
- management for heart disease. 1st Chaukhambha Orientalia, Varanasi; 2003.
- oxidative stress-induced apoptosis. J Agric Food 105. Stuart Brody, Ragnar Preut, Kerstin Schommer, Thomas H. Schürmeyer. A randomized controlled trial of high dose ascorbic acid for reduction of

- blood pressure, cortisol, and subjective responses to psychological stress. Psychopharmacologia. 2002; 159(3): p.319-324.
- 106. Steckelings UM, Rettig R, Unger T. Angiotensin in the Kidney: A Key to Understanding Hypertension? Cell Metabolism: Previews 2007; 5: p.7-8.
- 107. Harshal Waghulde, Mahalaxmi Mohan, Sanjay Kasture, R.Balaraman. Punica granatum attenuates Angiotensin-II induced hypertension in Wistar rats. International Journal of PharmTech Research. 2010; 2(1): p.60-67.
- Angiotensin- (1-7) blocks the angiotensin II stimulated superoxide production. cological Research 2007; 56: p.86-90.
- 109. Wang HD, Johns DG, Xu S, Cohen RA. Role of superoxide anion in regulating pressor and vascular hypertrophic response to angiotensin II. Am J Physiol Heart and Circ Physiol 2002; 282: p.697-702.
- 110. Rajagopalan S, Kurz S, Munzel T, Tarpey M, Freeman BA, Griendling KK. Angiotensin IImediated hypertension in the rat increases vascular superoxide production via membrane NADH/NADPH oxidase activation. Contribution to alterations of vasomotor tone. J Clin Investigation 1996; 97: p.1916-23.
- Vaishnaw 111. Kumar KS, Weiss IF. YN. Radioprotection by antioxidant enzyme activity in aspirin-treated rats. General Pharmacology 1988; 26: p.613-17.
- 112. Kumar KS. Vaishnaw YN. Weiss Radioprotection by antioxidant enzymes and enzyme mimetics. In: Weiss JF, Simic MG. (Eds.), Pharmacology and Therapeutics 1988; vol. 39: p.301-9.
- 113. Keidar S, Kaplan M, Shapira H, Brook JG, Aviram M. Low-density lipoprotein isolated from patients with essential hypertension exhibits increased propensity for oxidation and enhanced uptake by macrophages: a possible role for angiotensin II. Atherosclerosis 1994; 107: p.71-84.
- 114. Shalini H. Kumar and Pushpa A. Thrombolytic potential of Punica granatum and lipid profile: A correlation analysis. World **Iournal** of Pharmaceutical Research, 2016; 5(4): p. 1780-93.
- 115. McRedmond JP, Harriott P, Walker B, Fitzgerald DJ. Streptokinase-induced platelet activation anti-streptokinase antibodies involves cleavage of protease-activated receptor-1. Blood, 2000; 95: p.1301-1308.
- 116. Reza Mohebbatia, Mohammad Reza Khazdairb, c, Mahdiyeh Hedayatia. Neuroprotective Effects of Medicinal Plants and Their Constituents on Different Induced Neurotoxicity Methods: A

- Review. Journal of Reports in pharmaceutical sciences. 2017; 6(1): p.34-50.
- 117. Fillit H, Ding WH, Buee L, KAmlan J, et al. Elevated circulating TNF levels in Alzheimer's disease, Neurosci. Lett. 1991; 129: p.318-20. PMID: 1745413
- 118. Blum-Degen D, Muller T, Kuhn W, Gerlach M, Przuntek H, Riederer P. IL-1βand IL-6 are elevated in the cerebrospinal fluid of Alzheimer's and de novo Parkinson's disease patients. Neurosci. Lett. 1995; 202: p.17-20. PMID: 8787820
- 108. Polizio AH, Gironacci MM, Tomaro ML, Pena C. 119. Shukla M, Gupta K, Rasheed Z, Khan KA, Haqqi TM. Consumption of hydrolyzable tannins-rich pomegranate extract suppresses inflammation and joint damage in rheumatoid arthritis. Nutrition. 2008; 24: p.733-43. doi: 10.1016/j.nut.2008.03. 013 PMID: 18490140
 - 120. Neyrinck AM, Van-Hee VF, Bindels LB, De Backer F, Cani PD, Delzenne NM. Polyphenol-rich extract pomegranate peel alleviates inflammation and hypercholesterolaemia in highfat diet-induced obese mice: potential implication of the gut microbiota. British Journal of Nutrition.2013; 109: p.802-09.
 - 121. Celik F, Gocmez C, Bozkurt M, I. Kaplan I, Kamasak K, Akil E, et al. Neuroprotective effects of carvacrol and pomegranate againstmethotrexateinduced toxicity in rats. European Review for Medical and Pharmacological Sciences.2013; 17: p.2988-2993. PMID: 24302176
 - 122. de Oliveira de JFF, Garreto DV, da Silva MCP, Fortes TS, de Oliveira RB, Nascimento FRF, et al. Therapeutic of biodegradable potential microparticles containing Punica granatum L. (pomegranate) in murine model of asthma. Inflamm. Res.2013; 62: p.971-80. doi: 10.1007/s00011-013-0659-3 PMID: 23979691
 - 123. Asgary S, Sahebkar A, Afshani MR, Keshvari M, Haghjooyjavanmard S. Rafieian-Kopaei M. Clinical Evaluation of Blood Pressure Lowering. Endothelial Function Improving, Hypolipidemic and Anti-Inflammatory Effects of Pomegranate Juice in Hypertensive Subjects. Phytother. Res. 2014; 28: p.193-99. doi: 10.1002/ptr.4977 PMID: 23519910
 - 124. Winand J, Schneider YJ. The anti-inflammatory effect of a pomegranate husk extract on inflamed adipocytes and macrophages cultivated independently, but not on the inflammatory vicious cvcle between adipocytes and macrophages. Food Funct. 2014; 5: p.310. doi: 10.1039/c3fo60443h PMID:24336779
 - 125. Mahsa Hadipour Jahromy, Azadeh Shariatifar, Somaye Samiee, et al. Involvement of Serotonergic System and Magnesium on Anxiolytic Effects of

- Neuroscience, 2014; 4: p.293-98.
- 126. Dean OM, van den Buuse M, Bush AI, et al. A role for glutathione in the pathophysiology of bipolar disorder and schizophrenia? Animal models and 132. Girish C, Raj V, Arya J et al. Involvement of the relevance to clinical practice. Curr Med Chem. 2009; 16(23): p.2965-76.
- 127. Berry A, Capone F, Giorgio M, et al. Deletion of the life span determinant p66Shc prevents agedependent increases in emotionality and pain sensitivity in mice. Exp Gerontol. 2007; 42(1-2): p.37-45.
- 128. Atmaca M, Tezcan E, Kuloglu M, Ustundag B, Tunckol H. Antioxidant enzyme malondialdehyde values in social phobia before Psychiatry Clin Neurosci. 2004; 254(4): p.231-5.
- 129. Fukumoto LR, Mazza G. Assessing antioxidant and prooxidant activities of phenolic compounds. J Agric Food Chem. 2000; 48(8): p.3597-60.
- 130. Marvam Rafieirad and Hamid Abbaszadeh. 136. Mori-Okamoto J, Otawara-Hamamoto Y, Yamato h Pomegranate seed extract reduces ischemia induced anxiety in male rats. J Herbmed Pharmacol. 2017; 6(2): p.85-89.

- Pomegranate in Male Mice. World Journal of 131. Ohlsson A, Ulleras E et al. Mixture effects of dietary flavonoids on steroid hormone synthesis in the human adrenocortical H295R cell line. Food chem. Toxicol. 2010; 48(11): p.3194-3200.
 - GABAergic system in the anxiolytic-like effect of the flavonoid ellagic acid in mice. Eur. J. Pharmacol. 2013: 710(1-3): p.49-58.
 - 133. Kim HP, Son KH, Chang HW et al. Antiinflammatory plant flavonoids and cellular action mechanisms. J. Pharmacol. Sci. 2004; 96: p.229-45.
 - 134. Buddenberg TE, Komorowski M et al. Attenuating of testosterone on depressive-like behaviour in the forced swim test in healthy male rats. Brain Res. Bull. 2009; 79: p.182-86.
 - after citalopram treatment. Eur Arch 135. Kim ND, Mehta R, Yu W et al. Chemopreventive therapeutic and adiuvant potential pomegranate (Punica granatum) for human breast cancer. Breast Cancer Res. Treat. 2002; 71(3): p.203-17.
 - et al. Pomegranate extract improves a depressive and bone properties in menopausal syndrome model ovariectomized mice. Ethnopharmacol. 2004; 92: p.93-101

Cite this article as:

Pansare Tabassum Arif, Borokar Archana Ajabrao, Dodke Pranita Chandu. A critical review on Hridya (cardiotonic) action of Dadim (Punica granatum Linn.) with special reference to Ayurvedic and Modern aspect. International Journal of Ayurveda and Pharma Research. 2018;6(1):26-39.

Source of support: Nil, Conflict of interest: None Declared

*Address for correspondence **Dr. Pansare Tabassum Arif**

Associate professor, Dept. of Dravyaguna, Government Avurvedic College, Osmanabad, Maharashtra, India.

Email: tabasum.pansare@yahoo.com

Phone: 7709257791

Disclaimer: IJAPR is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJAPR cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of IJAPR editor or editorial board members.