



An ethnopharmacological survey and *in vitro* confirmation of ethnopharmacological use of medicinal plants used for wound healing in Bosomtwi-Atwima-Kwanwoma area, Ghana

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ABSTRACT

Aims of the study: Wounds represent a major health burden and drain on healthcare resources in the world including Ghana and Africa. The majority of the people of Ghana and Africa still patronize traditional medicine for their health needs including various forms of wounds. The aim of this study is the identification of medicinal plants, type of wounds, dosage forms and collection methods used traditionally in treating wounds in the Bosomtwi-Atwima-Kwanwoma district, Ghana. *In vitro* screening of selected extracts from these plants on cell physiology of human dermal fibroblasts and keratinocytes was to be performed.

Materials and methods: Validated questionnaires were administered to 78 traditional healers in 54 communities of the district. Interviews and structured conversations were used to administer the questionnaires. Selected herbal material dominantly used by the healers was collected, identified and aqueous and ethanolic extracts were investigated *in vitro* on influence on cell physiology of keratinocytes and dermal fibroblasts (MTT-, BrdU-, LDH-assay). Antioxidant activities of ethanolic extracts were determined by free radical scavenging activity. Antiadhesive activity against *Helicobacter pylori* on human stomach cells was investigated for extracts reported to be used for stomach ulcer treatment.

Results: The ethnopharmacological survey revealed 104 plants species belonging to 47 families. The detailed use of these plants is documented. Aqueous extracts of *Phyllanthus muellerianus*, *Pycnanthus angolensis* and *Combretum smeathmannii* influenced the mitochondrial activity and proliferation of dermal fibroblasts and keratinocytes significantly. Ethanolic extracts of selected plants exhibited strong antioxidant activities comparable to α -tocopherol. For *Spathodea campanulata*, *Hoslundia opposita* and *Pycnanthus angolensis*, which were reported by the healers to be used also for wound healing in case of stomach ulcers, strong antiadhesive activity against *Helicobacter pylori* was demonstrated, while the extracts did not exhibit any direct cytotoxicity against the bacterium.

Conclusions: Traditional use of many wound-healing plants from Ghana can be well rationalized by the *in vitro* investigation of aqueous extracts. E.g. extracts of *Phyllanthus muellerianus*, *Pycnanthus angolensis* and *Combretum smeathmannii* exhibited significant influence on the cell viability and proliferation of keratinocytes and dermal fibroblasts.

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1. Introduction

Wounds have a tremendous impact on the healthcare economy. Chronic wounds represent a major health burden and drain on healthcare resources in the developed countries (Harding et al., 2002; JanBen, 2006). It is estimated that 70 to 80% of patients in

Africa, and also in Ghana are treated by traditional healers and herbal practitioners (Diallo et al., 1996; Nyika, 2007). People in Africa rely on traditional medicine for their health needs, including management of wounds because of the high cost of orthodox medicines, inadequate health facilities and healthcare professionals, coupled with a lack of training of health workers on skin disorders and diseases (Mahé et al., 2006). Traditional medicines and medicinal plants used for management of skin disorders and as wound healing agents (Inngjerdigen et al., 2004; Ram et al., 2004; Njoroge and Bussmann, 2007) are easily available and afford-

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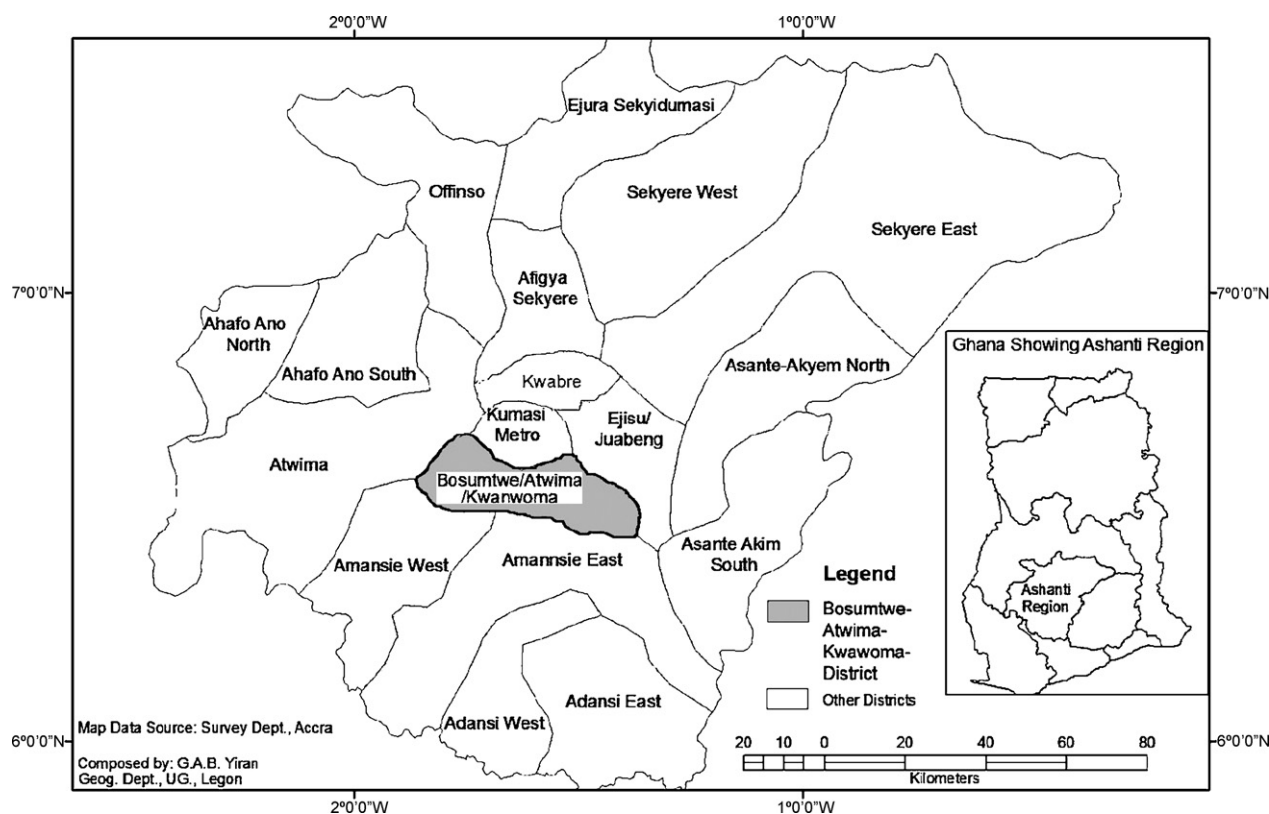


Fig. 1. Geographical description of study area. Map of Ashanti region showing the location of Bosomtwe-Atwima-Kwanwoma District.

able, sometimes free of charge. Most of these medicinal plants have been used for a long time and are assessed to be safer than isolated active compounds (Fabricant and Farnsworth, 2001). Ethnopharmacological investigations on medicinal plants used traditionally for wound-healing have shown that many active extracts and compounds can be identified which stimulate wound healing by induction of skin cell proliferation or differentiation (Deters et al., 2004, 2005a,b; Houghton et al., 2005; Zippel et al., 2009), with additional benefits by potential antioxidant and antimicrobial activities (Mensah et al., 2001; Konning et al., 2004; Jimoh et al., 2007).

Because of the huge reservoir of traditional knowledge on wound-healing plants in Ghana the following study was performed to obtain validated, quantified and reliable data on the use of wound-healing plants in an exactly defined part of the country. The aims of the study were to find out how traditional healers in the Bosomtwe-Atwima-Kwanwoma area of Ghana recognize wounds and how they classify and treat wounds with medicinal plants. It was to be investigated how the respective plants were collected and identified, which part of plants are used, how they are obtained, prepared and applied to wounds and what importance these plants have to the healers beside other non-plant based methods within the management of wounds. Additionally it was to be investigated if under *in vitro* condition with common methods of cell biology, effects associated with skin cell activity and wound healing use can be identified.

2. Material and methods

2.1. Study area and survey

Study area: Bosomtwe-Atwima-Kwanwoma District (Fig. 1), one of the 21 districts in the Ashanti Region of Ghana, 0.15–2.25°W, 5.50–7.46°N. The ethnopharmacological survey was carried out

from June to September 2007 in close cooperation with Ghana Federation of Traditional Medicine Healers Association (GHAFTRAM), an umbrella organization including all traditional healers such as herbal practitioners, fetish priests, divine healers, psychic practitioners and traditional medicine practitioners in Ghana. The executives and members of the district branch of GHAFTRAM were contacted prior to the study and informed about the objectives of the investigations. They assisted and cooperated with the survey team. Also non-members of the district branch of GHAFTRAM participated in the survey. All participants were informed about the survey and personal visits were made to their facilities, centers and homes. In respect to the local tradition, gifts in form of money or local alcoholic drinks were bestowed upon the healers prior to the interviews and administration of questionnaires. Interviews and conversations were used to administer the questionnaires.

Questionnaires were designed in English, translated into the local dialect (Asante-Twi) and administered to 78 traditional healers and herbal practitioners. Interviews were conducted together with a curator/botanist. Voucher specimens of all plants have been deposited in the Ghana Herbarium, Department of Botany, University of Ghana, with defined ID-numbers.

2.2. Plant material and chemicals

Leaves of *Parquetina nigrencens* (Afzel.) Bullock., *Phyllanthus muellerianus* (Kuntze.) Exell, *Ficus exasperata* Vahl., *Pupalia lappacea* (L.) Juss., *Hoslundia opposita* Vahl., *Combretum smeathmanni* G. Don., stem bark of *Pycnanthus angolensis* (Welw.) Warb., *Alstonia boonei* Wild. and roots from *Anchomanes difformis* (Bl.) Engl. were collected from Bosomtwe-Atwima-Kwanwoma area and identified by Dr. A. Asase, Department of Botany, University of Ghana. If not stated otherwise all chemicals were purchased by Sigma (Deisenhofen, Germany).

2.3. Preparation of plant extracts

Aqueous extracts: 10 g of the powdered plant material in 100 mL water were heated at 90 °C/15 min and centrifuged (6,000 × g, 10 min). The supernatant was concentrated at a temperature not exceeding 40 °C and lyophilized.

Ethanolic extracts: 10 g of the powdered plant material in 100 mL ethanol/water (60:40 v/v), were heated at 70 °C/30 min and centrifuged (6,000 × g, 10 min). The supernatant was concentrated and lyophilized.

Tannin contents were determined according Glasl (1983).

2.4. Methods of cell biology

HaCaT keratinocytes were kindly provided by Prof. Fusenig, Heidelberg, Germany. Primary dermal fibroblasts were obtained from surgical resectates of various Caucasian subjects. Approvals of the studies were made by the local ethical committee of University of Münster (2006-117-f-S). Isolation of dermal fibroblasts, cultivation of cells, and determination of the influence of the test extracts on cell physiology, MTT-, BrdU-, LDH-test were performed according Deters et al. (2008) and Zippel et al. (2009).

Antiadhesion assay against *Helicobacter pylori* was performed according methods described by Niehues and Hensel (2009).

2.5. Free radical scavenging activity of ethanolic extracts

Assay was performed according to Chizzola et al. (2008) using 1,1-diphenyl-2-picryl-hydrazyl (DPPH). 0.1 mM solution of DPPH in methanol was prepared and 10 μL of this solution were added to 100 μL of the ethanolic test extracts at 0.5, 1, 10, 25, 50, 100, 150 μg/mL. The plates were shaken for 30 s and after 30 min absorbance was measured at 517 nm. Inhibition of radical scavenging was calculated as (%) = $[(A_0 - A_1)/A_0 \times 100]$, with A_0 being the absorbance of the control and A_1 the absorbance of the test sample at 517 nm.

2.6. SPSS evaluation of data

Quantitative evaluation of survey data was performed with SPSS 16.0 (PASW Statistics Inc.).

3. Results and discussion

3.1. Survey on wound healing plants

An ethnopharmacological survey was carried out in the Bosomtwi-Atwima-Kwanwoma district, Ashanti region, Ghana (Fig. 1). Professional healers were mainly older than 40 years (86%), 14% older than 80 years. The respective age distribution is shown in

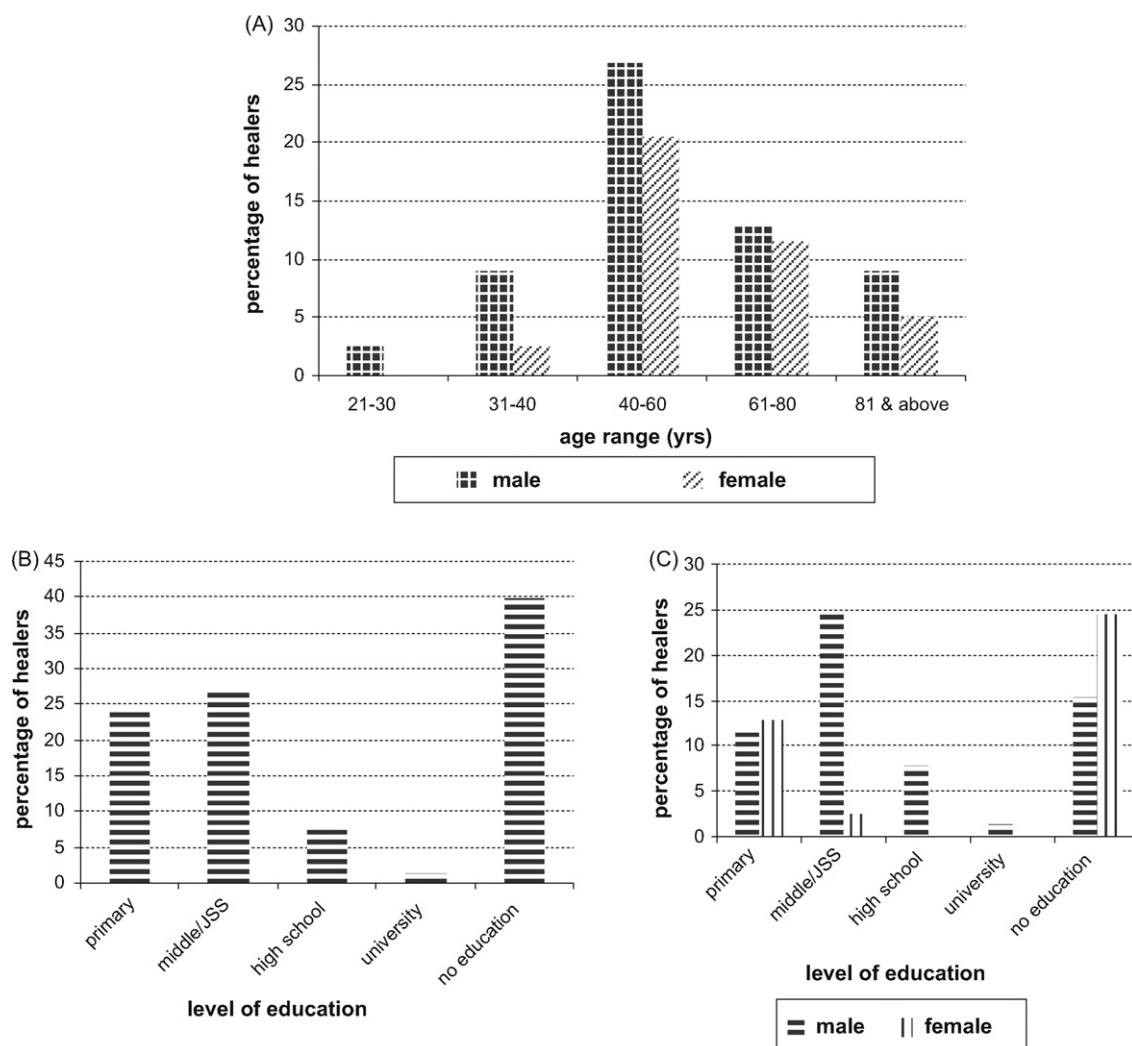


Fig. 2. Biodata analysis of healers: (A) age distribution and sex distribution. (B) Level of education. (C) Distribution of level of education and sex of healers.

Table 1
Period of practice of herbal medicine practitioners in Bosomtwi-Atwima-Kwanwoma district Ghana.

Time of practice	Frequency	(%)	Cumulative percent
0–5 years	8	10.3	10.3
5–10 years	9	11.5	21.8
11–20 years	10	12.8	34.6
21–40 years	32	41.0	75.6
>41 years	19	24.4	100.0

Fig. 2A. About two thirds of the healers are men, one third women. The respective sex and age distribution is shown in Fig. 2A.

Level of education of healers does not increase the potential qualification to practice as a traditional healer. Only 1% of them has an university degree, while the majority (40%) has no education; 50% have at most middle school/Junior secondary school (elementary) education and small proportion (8%) has high school education (Fig. 2B). Except for primary level education, male healers have higher education than female healers (Fig. 2C). Younger healers have comparably higher levels of education than the very old practitioners. The only practitioner who has university education falls within the 21 to 30 years age group.

The level of education could determine the level of readiness of healers to apply scientifically proven methods of preparation of their medicines and treatment of the ailment. The practical work of healers depends mostly on their intuition and experience achieved during practical work over the years.

Herbal practitioners constitute the majority (58%) of the healers. Fetish priests and traditional healers constitute 36 and 6%, respectively. It is important to note however, that there is no clear distinction of practice between the three kinds of healers. Each could play the role of the other, and this is common amongst traditional medical practice.

A significant proportion of the healers have been in practice for long periods of time (Table 1). Moreover, the profession requires long experience to be able to identify plants for effective management and treatment of diseases. As expected, Asantes constitute the majority of the practitioners (79%), a reflection of the fact that Asantes are the indigenous tribe of the district.

Most of the healers defined wound as a result of damage to the skin or superficial tissues caused by sharp objects, burns, microbial infections, fractures, metabolic diseases (diabetic wounds), bites and stings. It was interesting to note that also stomach sores or peptic ulcers were considered as internal wounds which are also subjected to the treatment with medicinal plants.

Healers classified wounds as cuts, injuries, abrasions, bites, acute, chronic, old wounds, boils, carbuncles, burns, hemorrhoids, skin rashes, parasitic wounds, fractures and internal ulcers. Also parasitic infections in the skin area were classified as wounds. Often non-healing wounds were considered to have spiritual reasons.

Concerning the herbal medicines 104 plant species from 89 genera, belonging to 47 families were recorded as wound healing agents (Table 2). Most recorded species (9 species/8.7%) were from the family Euphorbiaceae, followed by Apocynaceae (6 species/5.8%), Moraceae and Solanaceae (each with 5 species/4.8%). In order to investigate whether these species are already known plants for wound-healing cross-referencing was made to standard literature (Neuwinger, 1998; Burkill, 2000) (Table 2). From the 104 plants found in our survey only 26 are referenced for wound-healing by Burkill, 2000, 9 by Neuwinger and 9 by both references. This clearly shows that the survey performed within this study revealed 60 plants not described until now for wound-healing

These plants are applied mostly as poultice (for which the fresh leaves are grounded), decoction (for both superficial and internal wounds), as powdered material, washings, enemas (hemorrhoids) and as gargle for mouth sores. Leaves and aerial parts (86%), stem

bark (9%), roots (4%), seeds and fruits (1%) of these plants are used either in the fresh or dried forms for the respective preparations. The healers mentioned formulation problems such as storage and microbial contamination affecting their herbal preparations.

The identified plants are mainly collected from forests (71%), farms/gardens (18%), special farms for medicinal plants (8%) and to lesser extent from markets (3%). Bushfires, deforestation, farming and environmental pollution are having a severe impact on the availability of some of these plants.

For identification of the plants most healers (92%) use organoleptic characteristics, a typical location or habitat of the plants and long experience with the plants as the various methods used in identifying these plants. Some of the healers (6%) use or collect a particular plant(s) based on spiritual intuition for a specific type of wound.

The study shows that 28% of the healers used burnt ashes of shell of black snail (*Chrysemys scripta*), salt (12%), shea butter (10%), soil/sand (8%), clay (4%), animal faeces (3%) and fats from python (1%) as non-plant means of treatment of various wounds.

Survey data were analyzed quantitatively by SPSS 16.0 to evaluate potential correlations between different parameters and variables such as type of wound, plants used, sex of healers, level of education and location of healer within the district. It was deduced that the stem bark of *Alstonia boonei* is used for the treatment of chronic wounds by healers ($p < 0.001$). There is a direct relationship between the use of leaves of *Chromolaena odorata*, *Justicia flava* and *Hoslundia opposita* for the treatment of new wounds such as cuts, bruises and abrasions ($p < 0.03$; $p < 0.04$, $p < 0.05$, respectively). The wound healing effects of *Chromolaena odorata* has been demonstrated by Phan et al. (1998, 2001) and *Hoslundia opposita* has been shown to possess antimicrobial properties (Gundidza et al., 1992), both properties are essential in wound healing (Mensah et al., 2006).

Also, there is an increased use of *Alstonia boonei* for treatment of chronic wounds in Akosomo and Pramso areas (both $p < 0.04$) within the survey district, indicating that only in this limited case only a local use is made, while all other herbal remedies are used over the entire survey district. This indicates a good communication between the healers and a broad exchange and spreading of knowledge in the area.

The relationship between increasing level of education of healers and the use of leaves of *Ficus exasperata* for treatment of new wounds was significant ($p < 0.04$) in the district. Increasing level of education of healers has a direct influence on the use of *Alchornea cordifolia* for the treatment of stomach ulcer/sores ($p < 0.01$) Also significant correlation between the higher level of education of healer and the use of leaves of *Ficus exasperata* for treatment of boils ($p < 0.05$) is found. This may indicate a high level of knowledge of medicinal plants among educated herbal/traditional medicine practitioners in the area.

There is also a higher tendency of male healers using *Pupalia lappacea* for treatment of boils ($p < 0.032$). Healers within the age range of 41–60 years with higher level of education treat more clients with stomach ulcer/sores ($p < 0.02$). Healers within the age group of 61–80 years tend to treat boils ($p < 0.03$). This is not surprising since most people in rural and even urban areas who suffer from frequent infections tend to consult old and experienced healers who had managed difficult and severe infections with medicinal plants.

3.2. Selection of plants for in vitro investigations

Regarding the frequency of use medicinal plants recorded during the survey were clustered into 3 groups: group I (very frequently used plants, named by healers more than 10 times), group II (frequent plants, recorded between 7 to 9 times), and group III with

Table 2

Medicinal plants used for the management of various wounds in Bosomtwi-Atwima-Kwanwonwa district, Ghana, according ethnopharmacological survey. ¹Wound healing activity cross-referenced in published literature by Neuwinger (1998), or ²Burkill (2000).

Plant family/scientific name/local name (Asante-Twi)	Type of wounds	Formulations	Part of plant used
Acanthaceae <i>Justicia flava</i> Vahl. Afema	New, old, deep, chronic wounds, boils, burns, stomach ulcer Also described in ²	Poultice, decoction	Fresh leaves
Amaranthaceae <i>Althernanthera pungens</i> (L.) Link. Abirimuro <i>Pupalia lappacea</i> (L.) A Juss. Aposompo	New wounds, boils New wounds, boils Also described in ²	Decoction Poultice	Leaves Leaves
Anacardiaceae <i>Lansea welwitschii</i> (Hiern) Engl. Kumnini <i>Mangifera indica</i> L. Mango	Chronic wounds, stomach ulcer/sores Chronic and new wounds Also described in ²	Decoction Poultice	Leaves, stem bark Leaves, stem bark
Annonaceae <i>Annona squamosa</i> L. Apre <i>Pachypodanthium staudtii</i> Engl. et Diels Duawusa <i>Uvaria mocoli</i> De Wild & T. Durand. Apraduro <i>Xylopia aethiopica</i> A.Rich. Hwentia	Burns Measles, skin rashes Also described in ¹ Shingles Chronic wounds Also described in ¹	Poultice Cream with shear butter Poultice Powder, poultice	Leaves Leaves Leaves Fruits
Apocynaceae <i>Alstonia boonei</i> De Wild. Nyamedua <i>Funtumia elastica</i> (Preuss) Stapf. Funtum <i>Hunteria ghanensis</i> J. B. Hall & Leeuwenb. Akuama <i>Rauwolfia vomitoria</i> Afzel. Kakapenpen <i>Strophanthus hispidus</i> DC. Omaatwa <i>Voacanga africana</i> Stapf ex Scott-Eliot Paaku	Chronic, new wounds, boils Also described in ² Stomach ulcer/sores Stomach ulcer/sores Haemorrhoids Also described in ¹ Chronic wounds, stomach ulcer Also described in ¹ New, old wounds	Poultice Decoction Enema Root Leaves, root Decoction	Stem bark, root Stem bark Seeds Decoction Poultice, decoction Stem bark
Araceae <i>Anchomanes difformis</i> Engl. Ope <i>Colocasia esculentus</i> (L.) Schott Kooko	Snake bites, burns Also described in ¹ Stings/bites, chronic, deep wounds Also described in ²	Decoction poultice Poultice, decoction	Leaves, stem bark Leaves, stem bark
Arecaceae <i>Elaeis guineensis</i> Jacq. Abe	Chronic wounds	Powder	Leaves
Asclepiadaceae <i>Parquetina nigrescens</i> (Afzel). Bullock. Abakamo <i>Secamone afzelii</i> (Roem. & Shult.) K.Schum Kwantemaa	Boils, carbuncles, snake bites, new, old wounds Also described in ¹ Chronic wounds, skin tumor, bites	Poultice Poultice	Leaves, root Aerial parts
Asteraceae <i>Ageratum conyzoides</i> L. Guakro <i>Blumea aurita</i> DC. Plaaduru <i>Chromolaena odorata</i> (L.) R.M King & H. Rob. Mfofo (Acheampong) <i>Eclipta alba</i> Hassk. Ntum <i>Melanthera scandens</i> Schu, Nach. & Thonn. Mfofo <i>Vernonia amygdalina</i> Delile. Odwono	New, old wounds, burns Also described in ² New, old wounds Also described in ² New, old wounds Deep wounds Also described in ² Stomach ulcer/sores Also described in ² Stomach sores/ulcer	Poultice Poultice Poultice Poultice Poultice Decoction Decoction (enema)	Leaves Leaves Leaves Leaves Leaves Leaves Leaves
Bignoniaceae <i>Kigelia africana</i> (Lam.) Benth. Nufuhene <i>Nerbouldia laevis</i> Seem. Sesemasa/Sasanemasa <i>Spathodea campanulata</i> P. Beauv. Kuokuonesuo	Stomach ulcer/sores Also described in ^{1,2} Stomach ulcer Also described in ² Skin rashes, haemorrhoids, stomach ulcer Also described in ^{1,2}	Decoction Decoction, enema Decoction	Stem bark Leaves, stem bark Leaves, stem bark

Table 2 (Continued)

Plant family/scientific name/local name (Asante-Twi)	Type of wounds	Formulations	Part of plant used
Bombacaceae			
<i>Bombax buonopozense</i> P. Beauv. Akata	Stomach ulcer, burns	Decoction	Leaves
<i>Ceiba pentandra</i> (L.) Gaetn. Onyina	Stomach ulcer/sores Also described in ²	Decoction	Stem bark
Capparidaceae			
<i>Euadenia trifoliolata</i> Oliv. Densinkro	Chronic wounds	Poultice	Leaves
Caricaceae			
<i>Carica papaya</i> L. Bofere	New, old, stomach ulcer/sores Also described in ²	Poultice, decoction	Leaves
Caesalpiniaceae			
<i>Cassia alata</i> L. Osempe	Chronic wounds, shingles, burns	Poultice	Leaves
<i>Cassia occidentalis</i> L. Mmofraborodee	Stomach ulcer/sores	Decoction	Leaves
<i>Erythrophleum ivorensis</i> A. Chev. PƆtrƆdom	Old wounds	Decoction	Leaves
Cecropiaceae			
<i>Myrianthus arboreus</i> P. Beauv. Nyankama	Stomach ulcer/sores	Decoction	Leaves
Chrysobalanceae			
<i>Acioa dinklagei</i> Engl. Atwere	Old and new wounds	Poultice	Leaves
Combretaceae			
<i>Combretum smeathmannii</i> G. Don. Hwiremoo	New, old wound, boils, burns Also described in ²	Poultice	Leaves
<i>Terminalia ivorensis</i> A. Chev. Emire	Haemorrhoids, stomach ulcer, burns	Decoction	Stem bark
Crassulaceae			
<i>Kalanchoe integra</i> Kuntze. EgorƆ	Boils	Poultice	Leaves
Cucurbitaceae			
<i>Momordia charantia</i> L. Nyanya	Mouth sores, chronic wounds, stomach ulcer Also described in ^{1,2}	Poultice, decoction	Leaves, stem bark
Dioscoreaceae			
<i>Dioscorea cayensis</i> Lam. Bayere	Stomach ulcer/sores	Decoction	Leaves
Euphorbiaceae			
<i>Acalypha ciliata</i> Forssk. Mofoa	Chronic wounds, stomach ulcer Also described in ²	Decoction	Leaves
<i>Alchornea cordifolia</i> Muell.Arg. Gyama	Deep wounds, fractures, haemorrhoids, stomach ulcer Also described in ²	Decoction poultice	Leaves, stem bark
<i>Euphorbia hirta</i> L. Kakaweadwe	Deep wounds, carbuncles Also described in ^{1,2}	Poultice	Leaves
<i>Jatropha curcas</i> L. Nkrangyedua	Chronic and old wounds, boils, stomach sores Also described in ^{1,2}	Poultice, decoction	Leaves
<i>Mallotus oppositifolius</i> Muel. Arg. Nyanyafurowa (Pimpim)	New, old, chronic wounds, fractures, burns Also described in ²	Poultice	Leaves
<i>Manihot esculentus</i> L. Bankye	New wounds, stomach ulcer/sores Also described in ²	Poultice, decoction	Leaves
<i>Phyllanthus muellerianus</i> (Kuntze.) Exell. Awobe	New, old, deep and chronic wounds Also described in ²	Poultice	Leaves
<i>Phyllanthus urinaria</i> L. Bowomaguwoyki	Chronic wounds	Poultice	Leaves
<i>Ricinodendron heudelotii</i> (Baill.) Pierre ex Heckel Nwama	Stomach ulcer/sores	Decoction	Stem bark
Fabaceae			
<i>Acacia pennata</i> Willd. Nwere	Burns, new and old wounds	Poultice	Leaves, stem bark
<i>Albizia ferruginea</i> Benth. AwiemfoƆsamena	Measles	Poultice	Leaves
<i>Albizia zygia</i> J.F. Macbr. Ɔkoro	Chronic wounds, swellings, carbuncles	Powder	Seeds, bark
<i>Baphia nitida</i> Lodd. Odwono	New, old and deep wounds, stomach ulcer	Poultice	Leaves, root
<i>Milletia zechiana</i> Harm. Frafraha	New, old wounds	Decoction	Root, stem bark

Table 2 (Continued)

Plant family/scientific name/local name (Asante-Twi)	Type of wounds	Formulations	Part of plant used
Lamiaceae			
<i>Hoslundia opposita</i> Vahl. Nunum nini	Chronic and deep wounds, stomach ulcer	Poultice, decoction	Leaves, root
<i>Ocimum gratissimum</i> L. Nunum	Burns, boils, stomach ulcer	Poultice, decoction	Leaves
Lecythidaceae			
<i>Petersianthus macrocarpus</i> (P. Beauv.) Liben. Asia	Boils	Poultice, decoction	Leaves
Loranthaceae			
<i>Tapinanthus bangwenis</i> Engl. & K. Krause Nkranpan	New and chronic wounds	Poultice	Leaves, stem bark
Malvaceae			
<i>Abelmoschus esculentus</i> Moench. Nkuruma	Chronic wounds	Powder	Seeds
<i>Gossypium hirsutum</i> L. Asaawa	Boils, skin rashes	Poultice	Leaves
<i>Sida acuta</i> Burm. f. Tweta	New and old wounds Also described in ²	Poultice	Leaves
Meliaceae			
<i>Khaya ivorensis</i> A. Chev. Dubini	Boils, haemorrhoids, swellings, fractures	Poultice	Stem bark, leaves
<i>Khaya senegalensis</i> A. Juss. Kuntunkuri	Snake bites, chronic wounds	Powder, decoction	Stem bark
Mimosaceae			
<i>Caesalpinia bunduc</i> (L.) Roxb. Abubuo	Haemorrhoids Also described in ¹	Decoction	Stem bark
Moraceae			
<i>Ficus capensis</i> Thunb. Doma	New and old wounds	Poultice	Leaves
<i>Ficus elastica</i> Roxb. Amanyedua	Boils, new and old wounds	Poultice	Leaves, stem bark
<i>Ficus exasperata</i> Vahl Nyankyerenee	New, old, deep wounds, boils, burns Also described in ¹	Poultice	Leaves, stem bark
<i>Ficus lepreurii</i> Miq. Amasusuwa	Boils	Decoction	Stem bark
<i>Ficus sur</i> Forskal Doma	Stomach ulcer Also described in ¹	Decoction	Stem bark
Musaceae			
<i>Musa paradisiaca</i> L. Bɔɔdee	New wounds Also described in ²	Poultice	Stem, leaves
Myristicaceae			
<i>Pycnanthus angolensis</i> (Welw.) Warb. Otie	Haemorrhoids, stomach ulcer, chronic wounds Also described in ²	Decoction	Stem bark, leaves
Myrtaceae			
<i>Psidium guajava</i> L. Gua (Guava)	Chronic wounds	Decoction	Leaves
Passifloraceae			
<i>Adenia cissampeloides</i> (Planch. ex Benth.) Harms. Homakyem	Stings/bites	Decoction	Whole plant
Piperaceae			
<i>Piper guineense</i> Schumach. & Thonn. Sorowisa	Stomach ulcer/sores	Enema	Dried fruits
<i>Piper umbellatum</i> L. Mumuaha	Burns Also described in ^{1,2}	Poultice	Leaves
Phytolaccaceae			
<i>Hilteria latifolia</i> (Lam.) H. Wall. Anafranaku	Chronic and deep wounds	Poultice	Leaves
Poaceae			
<i>Brachyachne obtusiflora</i> (Benth.) C.E. Hubb. Aberekyere abodwese	Boils	Poultice	Roots, leaves
<i>Cymbopogon citratus</i> (DC) Stapf. Akutukankan	Boils, swellings	Poultice	Leaves
<i>Eleusine indica</i> (L.) Gaertn. Nsensan	New and old wounds Also described in ²	Poultice	Aerial parts
<i>Zea mays</i> L. Aburo	Boils, carbuncles	Poultice, powder	Fruits, leaves

Table 2 (Continued)

Plant family/scientific name/local name (Asante-Twi)	Type of wounds	Formulations	Part of plant used
Portulacaceae			
<i>Portulaca oleracea</i> L. Adwera	Boils Also described in ²	Poultice	Leaves
Rubiaceae			
<i>Morinda lucida</i> Benth. Konkroma	Haemorrhoids, stomach ulcer	Decoction	Stem bark
<i>Psydrax subcordata</i> (DC.) Bridson Ntatiadupon	Haemorrhoids, stomach ulcer	Decoction	Stem bark
Rutaceae			
<i>Zanthoxylum gillettii</i> (De Wild.) Waterman Okuo	Stomach ulcer/sores Also described in ²	Decoction	Stem bark
<i>Zanthoxylum leprieurii</i> (Guil. & Perr.) Engl. Oyaa	Stomach ulcer/sores Also described in ²	Decoction	Stem bark
Sapindaceae			
<i>Blighia sapida</i> Kon. Akyee	Snake bites, stings	Poultice	Stem bark
<i>Paullinia pinnata</i> L. Toa-ntini	New, old and chronic wounds, haemorrhoids, stomach ulcer Also described in ^{1,2}	Poultice, decoction	Roots, leaves
Solanaceae			
<i>Datura metel</i> L. Pepediewuo	Chronic, old and new wounds, stomach ulcer, haemorrhoids	Decoction, poultice	Leaves
<i>Lycopersicon esculentum</i> Mill. Tomato	Chronic wounds, burns	Poultice	Fruits
<i>Nicotiana tabacum</i> L. Ataa/taa	Stomach ulcer/sores Also described in ^{1,2}	Decoction	Leaves
<i>Physalis angulata</i> L. Tototot	Chronic wounds	Poultice	Leaves
<i>Schwenchia americana</i> L. Agyennyensu	Snake bites, chronic and new wounds	Powder, poultice	Leaves
<i>Solanum torvum</i> Sw. Kwaonsusua	New wounds, boils Also described in ^{1,2}	Poultice	Leaves
Sterculiaceae			
<i>Cola nitida</i> (Vent.) Schott & Endl. Bese (Kola)	Boils	Poultice	Leaves
<i>Theobroma cacao</i> L. Kokoo	Deep wounds	Poultice	Leaves
<i>Triplochiton scleroxylon</i> K. Schum. Wawa	Burns, stomach ulcer, haemorrhoids	Decoction, powder	Stem bark
Tiliaceae			
<i>Duboscia viridiflora</i> Mildbr. Akokoragyehin	New wounds	Poultice, powder	Stem bark, leaves
Urticaceae			
<i>Laportea ovalifolia</i> (Schumach.) Chew. Akyekyenswonsa	Boils, swellings	Poultice	Leaves
Vitaceae			
<i>Ampelocissus multistriata</i> (Bak.) Planch. Anunum	New and old wounds	Poultice	Leaves
Zingiberaceae			
<i>Aframomum melegueta</i> K. Schum. Famwisa	Mouth sores, boils, skin rashes, fractures Also described in ²	Decoction (gargle), powder	Dried seeds
<i>Zingiber officinale</i> Roscoe. Akakaduro	Chronic wounds, boils	Poultice	Rhizome

Table 3

Plants used for wound healing from group I (very frequent use, recorded more than 10 times by the 78 healers) and group II (frequent use, recorded 7 to 9 times by the 78 healers). Species in bold were selected for further detailed *in vitro* investigations.

Group I		Group II	
Plant species	Frequency	Plant species	Frequency
<i>Hoslundia opposita</i>	16	<i>Aframomum melegueta</i>	9
<i>Alchornea cordifolia</i>	13	<i>Phyllanthus muellerianus</i>	9
<i>Ficus exasperata</i>	15	<i>Mallotus oppositifolius</i>	8
<i>Chromolaena odorata</i>	11	<i>Paulina pinnata</i>	8
<i>Justicia flava</i>	11	<i>Pycnanthus angolensis</i>	8
<i>Pupallia lappacea</i>	11	<i>Spathodea campanulata</i>	8
<i>Colocasia esculentus</i>	10	<i>Alstonia boonei</i>	7
		<i>Anchomames difformis</i>	7
		<i>Combretum smeathmanii</i>	7
		<i>Musa paradisiaca</i>	7
		<i>Parquetina nigrescens</i>	7

plants recorded less than 7 times. Table 3 comprises all species found for group I (7 plants/7.3% of all species recorded, 87 hits/24% from total 363 hits during the survey) and group II (11 plants/11.5% of all species recorded, 84 hits/23% from total 363 hits during the survey). This means that 18 medicinal plants comprise 57% of all records from the healers.

The “top-18” plants were subjected to an intense review concerning details of use given by the healers. 11 plant species were selected (Table 3) for a further *in vitro* investigation for influence on cell physiology of human skin cells. One of the most cited species, *Chromolaena odorata* L., was excluded from this screening because skin activity is well documented and rationalized (Phan et al., 1998, 2001). Also *Colocasia esculentus* L. was excluded because it remained unclear from the survey which part of the plant should be used.

In three cases we found that the traditional use is related also to the treatment of stomach ulcer and therefore it was decided to investigate the three herbal remedies (*Hoslundia opposita*, *Pycnanthus angolensis*, *Spathodea campanulata*) into a screening against *Helicobacter pylori*.

3.3. Influence of extracts on skin cells under *in vitro* conditions

Aqueous and EtOH/H₂O extracts were prepared from 11 selected plants from group I and II (Table 4). The lyophilized extracts were investigated at 10 and 100 µg/mL concerning a potential influence on mitochondrial activity on keratinocytes (HaCaT cell line). Aqueous extracts from *Combretum smeathmanii*, *Phyllanthus muellerianus* and *Pycnanthus angolensis* turned out to induce the mitochondrial activity significantly.

Aqueous extracts from these three species were subjected to a more detailed investigation on human keratinocytes and primary human dermal fibroblasts (pNHf) using MTT assay and BrdU proliferation ELISA (Table 5). The stimulating effects of *Phyllanthus muellerianus* on keratinocytes were dose dependent from 10 to 100 µg/mL and the increased cellular energy status, as measured by MTT test, was accompanied by an increased cellular proliferation. Dermal fibroblasts were more sensitive against the *Phyllanthus muellerianus* extract and were stimulated within MTT and BrdU test between 5 and 20 µg/mL, while higher concentrations had inhibitory effects. Test on necrotic activity of the extract on fibroblasts was conducted at 1, 5, 10 and 20 µg/mL by quantification of

LDH-release: No significant LDH-increase was obvious, indicating the absence of necrotic activity in this dose range on human fibroblasts.

Aqueous extracts from *Pycnanthus angolensis* stimulated keratinocytes at 50 to 100 µg/mL in MTT and BrdU assay. MTT activity in dermal fibroblasts was also increased, while the cell proliferation decreased.

Combretum smeathanni extract increased keratinocytes and fibroblasts mitochondrial activity at 10 µg/mL significantly, while higher concentrations turned out to have an inhibitory effect.

3.4. Influence of extracts on adhesion of *Helicobacter pylori* on human stomach cells

Aqueous extracts from *Spathodea campanulata*, *Hoslundia opposita* and *Pycnanthus angolensis* in concentrations from 0.5 to 2.5 mg/mL were investigated in an agar diffusion test against *Helicobacter pylori*, using amoxicillin as positive control. The extracts did not effect the bacterial growth in any of the test concentrations. Within a further assay the influence of the test extracts on the adhesion of *Helicobacter pylori* to AGS human stomach cells was investigated. In principle the bacteria were pretreated with the test extracts for 2 h. Unbound extract components were washed out. The bacteria were fluorescent-labeled and coincubated with a monolayer of AGS cells. Non-adhering bacteria were washed out; cells were trypsinized and measured by flow cytometry. An untreated negative control with maximal bacterial adhesion served as 100% control, positive control with strongly reduced adhesion was an extract from fruits of *Abelmoschus esculentus* (Lengsfeld et al., 2004a,b). The respective adhesion values are given in Table 6, indicating that all three extract are strong antiadhesive agents. This proves a well-documented rational for the traditional use of the plants for treatment of stomach ulcer.

3.5. Free radical scavenging activity of selected plants

Because wound healing can positively influenced by antioxidant agents, the radical scavenging activity of the ethanolic test extracts was determined by DPPH assay (Chizzola et al., 2008) and IC₅₀ values were calculated (Table 7). Strong antioxidatives potential were found for most of the extracts. Especially for *Phyllanthus muelleri-*

Table 4

Influence of aqueous extracts and ethanolic extracts at 10 and 100 µg/mL for 72 h on mitochondrial activity of HaCaT keratinocytes (MTT-test). Data with standard deviation SD are from 3 independent experiments with each *n* = 6 replicates. Negative control: untreated cells; positive control: FCS 1%. **p* < 0.05, ***p* < 0.01 compared to the untreated control group (ANOVA).

Plant and extracts	10 µg/mL	100 µg/mL	Plant and extracts	10 µg/mL	100 µg/mL
Anchomames difformis			Astonia boonei		
H ₂ O extract	97 ± 7%	94 ± 8%	H ₂ O extract	101 ± ± 5%	103 ± 9%
EtOH/H ₂ O extract	95 ± 7%	98 ± 7%	EtOH/H ₂ O extract	101 ± 8%	103 ± 8%
Combretum smeathanii			Ficus exasperata		
H ₂ O extract	112 ± 7%*	100 ± 5%	H ₂ O extract	97 ± 6%	98 ± 6%
EtOH/H ₂ O extract	100 ± 6%	98 ± 8%	EtOH/H ₂ O extract	97 ± 6%	102 ± 8%
Hoslundia opposita			Justicia flava		
H ₂ O extract	100 ± 8%	102 ± 8%	H ₂ O extract	95 ± 9%	97 ± 9%
EtOH/H ₂ O extract	96 ± 8%	97 ± 9%	EtOH/H ₂ O extract	95 ± 7%	89 ± 5%
Parquetina nigrescens			Phyllanthus muellerianus		
H ₂ O extract	84 ± 9%*	84 ± 6%*	H ₂ O extract	107 ± 6%*	116 ± 7%*
EtOH/H ₂ O extract	91 ± 4%*	94 ± 7%*	EtOH/H ₂ O extract	105 ± 5%	99 ± 7%
Pycnanthus angolensis			Pupalia lappacea		
H ₂ O extract	104 ± 6%	115 ± 7%*	H ₂ O extract	102 ± 8%	100 ± 5%
EtOH/H ₂ O extract	99 ± 9%	104 ± 8%	EtOH/H ₂ O extract	99 ± 9%	98 ± 7%
Spathodea campanulata			Positive control		
H ₂ O extract	102 ± 6%	113 ± 8%*	123 ± 6%*		
EtOH/H ₂ O extract	98 ± 8%	103 ± 8%			

Table 5
Influence of aqueous extracts at 10, 50 and 100 µg/mL for 72 h on mitochondrial activity (MTT test) and mitogenic proliferation (BrdU incorporation ELISA) of HaCaT keratinocytes and primary skin fibroblasts. Data and SD-values are from 3 independent experiments with n = 6 replicates. Negative control: untreated cells; positive control: FCS 1%. *p < 0.05, **p < 0.01 compared to the untreated control group (ANOVA).

Extract/(µg/mL)	Keratinocytes						Primary fibroblasts										
	MTT-assay (%)			BrdU-ELISA (%)			MTT-assay (%)			BrdU-ELISA (%)							
	10	50	100	10	50	100	1	5	10	20	50	100					
<i>Phyllanthus muellerianus</i>	107 ± 6	112* ± 7	116* ± 7	106 ± 7	123* ± 7	126* ± 8	103 ± 6	109 ± 5	114* ± 5	119* ± 5	119* ± 5	102 ± 12	100 ± 8	116 ± 15	121* ± 13	62** ± 8	54** ± 9
<i>Pycnanthus angolensis</i>	102 ± 6	108 ± 5	115* ± 7	105 ± 7	122* ± 11	115 ± 8	106 ± 9	106 ± 9	106 ± 9	106 ± 9	106 ± 9	122 ± 7	131* ± 15	116 ± 5	90 ± 10	78* ± 13	78* ± 13
<i>Combretum smeathmanni</i>	112* ± 7	105 ± 5	96 ± 8	106 ± 10	131** ± 12	169 ± 10	116* ± 9	116* ± 9	116* ± 9	116* ± 9	116* ± 9	108 ± 8	82 ± 8	88 ± 9	76 ± 11	64** ± 12	64** ± 12
Positive control		123* ± 6		118* ± 9			121 ± 6					115* ± 8	115* ± 10			119* ± 7	

Table 6

Relative adhesion of FITC-labeled *Helicobacter pylori* to AGS cells, preincubated for 2 h with aqueous test extracts at 5 and 10 mg/mL. Data are related to the untreated control (=100%), positive control okra fresh extract. Data are mean ± S.D. (n = 3); *p < 0.05; **p < 0.01. n.d.: not determined.

Plant/extract	Relative adhesion (%)	
	5 mg/mL	10 mg/mL
<i>Spathodea campanulata</i>		
H ₂ O extract	46 ± 22*	49 ± 14**
EtOH extract	59 ± 5**	44 ± 11**
<i>Hoslundia opposita</i>		
H ₂ O extract	134 ± 14	48 ± 12*
EtOH extract	n.d.	15 ± 8**
<i>Pycnanthus angolensis</i>		
H ₂ O extract	79 ± 15	34 ± 10**
EtOH extract	60 ± 11*	44 ± 10**
Positive control (<i>Abelmoschus esculentus</i> fruit extract)	9 ± 6**	

Table 7

Free radical scavenging activities of ethanolic extracts of 10 selected plants used traditionally for wound healing within the district. DPPH assay plants; positive control: α-tocopherol.

Extracts	IC ₅₀ (µg/mL)	Extracts	IC ₅₀ (µg/mL)
<i>Anchomas difformis</i>	68.0	<i>Astonia boonei</i>	51.8
<i>Combretum smeathmanni</i>	7.2	<i>Ficus exasperata</i>	26.2
<i>Hoslundia opposita</i>	9.8	<i>Justicia flava</i>	81.3
<i>Parquentina nigrescens</i>	10.0	<i>Phyllanthus muellerianus</i>	7.6
<i>Pycnanthus angolensis</i>	7.8	<i>Pupallia lappacea</i>	0.8
Positive control (α-tocopherol)	0.6		

anus and *Combretum smeathmanni* the effects may be correlated to the high polyphenol content in form of tannins (14 resp. 10%),

4. Conclusion

From the above results there is strong indication that the traditional use of plant materials for wound healing as it is used by Ghanaian healers is assessed to be a valuable phytotherapeutic tool, which in many cases can be rationalized by *in vitro* investigations. The ethnopharmacological and traditional selection of plants in this African area seems to be highly effective, supporting people with effective medicines for wound healing. On the other side there is a strong need to characterize the plant material concerning quality aspects, but also for phytochemical aspects to isolate the compound(s) responsible for activity. Further *in vivo* studies should be conducted on the extracts to ascertain the pharmacological activities.

Aqueous extracts of *Phyllanthus muellerianus*, *Pycnanthus angolensis* and *Combretum smeathmanni* exhibited significant influence on the cell physiology of human keratinocytes and dermal fibroblasts *in vitro* beside strong antioxidative effects, correlated to the high tannin content. The use of plant species traditionally used against stomach ulcer seems to be due to an indirect antiadhesive effect, indicating a good and reliable base for the development of a rational phytotherapy based on the traditional herbal medicine of Ghana.

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