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Opinion Article

Pragmatic Studies and Chemical Constituents in Traditional Medicine

Fabio Gori*

Department of Traditional Medicine, Center of Natural Medicine, S. Giuseppe Hospital, Empoli, Italy

DESCRIPTION

Pragmatic Trials (PT) aim to find out how effective treatment is in practice in daily work. Explanatory trials aim to find out if the treatment has any effect, but in most cases it is compared to placebo under ideal conditions. The PT answers questions about the overall effectiveness of the intervention and cannot examine the contributions of its various components. Participants in these studies need to represent a wider population because the results need to be generalized. The selection criteria should be wide enough to include patients with more medical diseases and patients taking other medications. It is a more satisfying and wise way to choose conditions that are often unsatisfactory with traditional treatments such as: bowel syndrome or panic crisis.

In Pragmatic trials, placebo is not normally required, whereas it is necessary with both arms of conventional practice, for the purpose of providing evidence to facilitate practical practice options. The treatment process is more complex because it includes patients with wider criteria, thus requires a larger patient population and may require a handbook for defining treatment parameters. The main advantage of PT is that it can provide direct evidence of efficacy in clinical practice. However, they have significant methodological limitations: especially the lack of placebo and blindness, increased cost, need for several therapists, more complexity, and lack of clarification of the mechanism of action, but PT should not be seen as a substitute for explanatory trials, but as a mandatory complement that identifies and strengthens evidence primarily from explanatory trials, the only ones that can reliably confirm efficacy.

The chemical constituents of herbal remedies

The other black herbal medicine box is missing information about the composition of the remedy. Herbs are natural products and their chemical composition varies according to several factors, such as the species of plant, the chemicals used, the anatomy of the plant used (seeds, flowers, roots, leaves, etc.) but also storage, sun exposure, humidity, soil type, harvest period, geographical area; and merchandized products with the same label of the same product whose content and concentration of chemical constituents change from batch to batch; and even the same manufacturer may put on the market at different times products containing different substances despite being standardized to achieve high pharmaceutical quality. This variation can lead to significant differences in pharmacological activity: Both pharmacodynamic and pharmacokinetic concerns are involved.

Adverse and side effects are another open issue, because among citizens there is a respect for all that is natural, period, as a choice, more cultural fashion than thinking that patients put in their bodies chemical substances of vegetal origin; it is not known that the salicylic glucosides and lactonic sesquiterpenes of many families Composite often cause allergic reactions; that some plant components may be carcinogenic such as safrole alkaloids, bergapten and pyrrolizidines alkaloids. The problem of drug interference is no small matter, especially for elderly patients using more modern synthetic drugs; some plants reduce or improve the bioavailability of certain drugs by inducing or inhibiting cytochromes (St. John's Wort extract, grapefruit juice, etc.). In addition, the use of herbal extracts during pregnancy or lactation requires close medical supervision as many herbs have also not been studied in pregnant mice.

Advances in high throughput experiments have resulted in huge databases of genomic, protein and chemical data, combined with efficient separation methods and powerful spectrometric methods for the identification and elucidated the structure, which can be used to identify active compounds. A powerful and deep biological approach that integrates such diverse and vast information sources must in fact fully understand the pharmacological effects of natural products; and DNA microarrays could provide a suitable high-throughput platform for drug research and development from natural products. There are three main applications of DNA microarrays: in pharmacodynamics to discover new drugs; in pharmacogenomics to predict adverse events; in pharmacognosy for the correct botanical identification and authentication of crude plant materials in the context of standardization and quality control.

Correspondence to: Fabio Gori, Department of Traditional Medicine, Center of Natural Medicine, S. Giuseppe Hospital, Empoli, Italy, E-mail: f.gori@usl11.toscana.it

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