



President's Message



Welcome to July 2021 issue

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It has been said that when the Mughal emperor of India, Akbar the Great inquired from his courtiers as to which profession has the highest number of people, one of the courtiers replied physicians. Akbar ordered the courtier to prove his point. Next day, the courtier came in late to the court with his mouth and nose covered with a piece of cloth. When asked, the courtier explained that overnight he has developed a bad cold. Almost immediately, all the dozens of members of the court started giving medical advice. Some said to take ginger, some basil, some turmeric, and so forth. After the hundreds of advices were finished, the courtier removed the piece of cloth and said "Emperor, see every person here is a physician". An analogous situation has developed with COVID-19. Everybody has become a physician. The patient does not even have time to develop his/her COVID-19 symptoms in full. Friends, relatives and well-wishers of all sorts start advising medications. Take basil (*Ocimum basilicum* L.) or *Ocimum tenuiflorum* L. (holy basil) leaf juice; take dried ginger slices with tea; inhale vapors from boiling *Cinnamomum verum* Presl bark (cinnamon), or *Laurus nobilis* L. (bay leaf) leaves, or *Elettaria cardamomum* (L.) Maton seeds (cardamom) in water. In fact, the list goes on and on. Inhalation therapy is becoming a popular item in countries like Bangladesh, where people cannot bear the expenses of modern doctors, hospitals, drugs, and intensive care units.

The million dollar question is do these folk remedies work? *In silico* studies and ethnic information suggests that they may be useful, if not in full, then at least in part. A recent study has concluded that essential oils can give good results in the management of upper respiratory infections in patients with COVID-19 [<https://doi.org/10.1016/j.hermed.2021.100451>]. To be noted is that when the different spices mentioned above are boiled in water, the boiling releases the volatiles in the spices, which mainly are components of essential oils. Which begs the further question, where do we go in the research field – experiment with synthetic high priced antivirals (e.g. remdesivir), which also gives a plethora of adverse effects, or conduct further research with these "poor man's drugs"? I leave the answer to the readers.