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Efficacy of Herbal Therapy in Managing Psoriasis

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Abstract

Psoriasis is a chronic autoimmune skin disorder characterized by red, inflamed patches covered with silvery scales, commonly affecting the scalp, elbows, knees, and lower back. While there are several conventional treatments available, their long-term effectiveness and side effects often make patients seek alternative therapies. Herbal therapy has gained increasing attention as a complementary approach for managing psoriasis due to its potential for reducing symptoms, improving skin condition, and minimizing side effects. This article reviews the efficacy of herbal treatments in psoriasis management, highlighting several commonly used herbs, their mechanisms of action, and the clinical evidence supporting their use. The article explores the potential benefits and risks associated with herbal therapy and discusses the future role of these natural treatments in psoriasis care.

Keywords: psoriasis; herbal therapy; skin inflammation; autoimmune disease; alternative treatments; clinical evidence; natural remedies; eczema; therapeutic efficacy; skin healing

Introduction

Psoriasis is a chronic, immune-mediated skin condition that affects approximately 2-3% of the global population. The condition is marked by excessive skin cell proliferation, leading to the formation of red, scaly plaques. Psoriasis can range from mild to severe, with common subtypes including plaque psoriasis, guttate psoriasis, inverse psoriasis, and pustular psoriasis. It often causes physical discomfort, including itching, burning, and tenderness, and can significantly affect a person's quality of life due to the visible nature of the condition.

While several conventional treatments are available, including topical corticosteroids, vitamin D analogs, systemic biologics, and phototherapy, these options often come with adverse effects, such as skin thinning, immunosuppression, and increased risk of infections. This has prompted many individuals with psoriasis to explore alternative or complementary therapies, including herbal treatments. Herbal remedies are appealing because they are perceived as natural and may offer relief with fewer side effects compared to traditional pharmaceutical treatments.

Numerous herbs have been investigated for their potential to manage psoriasis symptoms, with varying degrees of scientific backing. Some of the most commonly studied herbs include aloe vera, turmeric, evening primrose oil, and neem. These herbal therapies are believed to work through multiple mechanisms, including anti-inflammatory effects, antioxidant properties, immune modulation, and skin barrier repair. Despite the growing body of anecdotal evidence and limited clinical trials, the scientific understanding of herbal therapies in psoriasis management remains incomplete. This article aims to provide a comprehensive review of the available evidence regarding the efficacy of herbal therapy in the management of psoriasis.

Methods

A systematic review of published literature was conducted to examine the role of herbal therapies in psoriasis management. Relevant studies were identified from multiple academic databases, including PubMed, Scopus, and Google Scholar, using search terms such as "herbal therapy in psoriasis," "natural remedies for psoriasis," "psoriasis management," and "anti-inflammatory herbs." The search focused on studies published between 2010 and 2024 to ensure relevance to current treatment practices. Both clinical trials and observational studies that assessed the efficacy of herbal treatments for psoriasis were included.

Studies were reviewed for their methodological quality, including sample size, treatment duration, and outcome measures. Inclusion criteria also required that the studies investigate the specific impact of herbal remedies on psoriasis symptoms such as plaque size, redness, scaling, and pruritus (itching). Additional studies that provided insights into the mechanisms through which herbs work in psoriasis were also incorporated to help understand their biological plausibility.

Results

Several herbal therapies have shown promise in the management of psoriasis, with varying degrees of scientific evidence supporting their efficacy. Below are some of the most studied herbs:

Aloe Vera (Aloe barbadensis): Aloe vera is one of the most commonly used herbs for treating skin conditions, including psoriasis. A clinical study demonstrated that topical application of aloe vera gel significantly reduced the severity of psoriasis symptoms, including redness and scaling. Aloe vera is believed to have anti-inflammatory, moisturizing, and healing properties, which may contribute to its efficacy in treating psoriatic plaques [1]. It has also been suggested that aloe vera's ability to boost collagen production may promote skin regeneration and repair.

Turmeric (Curcuma longa): Turmeric, specifically its active compound curcumin, has been shown to possess potent antiinflammatory, antioxidant, and immunomodulatory effects. A clinical trial found that oral supplementation of curcumin in combination with conventional treatments resulted in a significant reduction in the severity of psoriasis lesions, including reduced scaling and erythema. Curcumin is believed to exert its effects by inhibiting pro-

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Evening Primrose Oil (Oenothera biennis): Evening primrose oil, rich in gamma-linolenic acid (GLA), an essential fatty acid, has been shown to reduce inflammation and promote skin barrier function. Some studies have indicated that oral supplementation with evening primrose oil leads to improved skin hydration and reduced redness and scaling in patients with psoriasis. While evidence is limited, it is thought that GLA may help modulate the inflammatory pathways associated with psoriasis [3].

Neem (Azadirachta indica): Neem, commonly used in traditional medicine, is believed to have significant antibacterial, antiinflammatory, and antifungal properties. A study on the use of neem oil in topical formulations for psoriasis found that it was effective in reducing scaling and inflammation, likely due to its ability to inhibit pro-inflammatory cytokines and support immune function [4]. Neem's antiviral properties also offer additional benefits in managing secondary infections that are common in psoriatic lesions.

Milk Thistle (Silybum marianum): Milk thistle, particularly its active compound silymarin, has shown potential in reducing oxidative stress and inflammation. One clinical trial found that silymarin supplementation led to a decrease in psoriasis severity scores, potentially by reducing liver-related toxin buildup that can exacerbate inflammatory conditions such as psoriasis. Although more research is needed, milk thistle's hepatoprotective properties may help reduce systemic inflammation associated with psoriasis [5].

Chamomile (Matricaria chamomilla): Chamomile is widely recognized for its anti-inflammatory and skin-soothing properties. Some studies have suggested that chamomile extracts can alleviate psoriasis symptoms, particularly in reducing itching and skin irritation. While much of the evidence is anecdotal, chamomile's ability to calm skin inflammation and promote wound healing may make it an effective adjunct treatment in psoriasis management [6].

Sandalwood (Santalum album): Sandalwood oil has shown promise in the treatment of various skin conditions due to its antiseptic, anti-inflammatory, and soothing properties. Studies investigating sandalwood's effects on psoriasis symptoms have shown positive results, particularly in reducing itching and inflammation. Its use in topical formulations has been shown to promote skin hydration and healing, thus reducing psoriatic plaques [7].

Discussion

The evidence supporting the use of herbal therapies in psoriasis management is growing, but it remains inconclusive in many cases. While some herbs, such as aloe vera and turmeric, have shown promising results in clinical trials, much of the available research consists of small-scale studies with methodological limitations, such as short treatment durations and small sample sizes. Therefore, while initial results are promising, more large-scale, randomized controlled trials (RCTs) are needed to definitively establish the efficacy and safety of these herbal therapies [8-10].

One of the advantages of herbal therapies for psoriasis is their generally mild side-effect profile compared to conventional treatments. Topical applications of herbs such as aloe vera, neem, and sandalwood may be less likely to cause skin thinning or systemic side effects, which are common with corticosteroid-based treatments. Additionally, many herbs used in psoriasis management, such as turmeric and evening primrose oil, can be used in combination with conventional treatments, offering a synergistic approach to symptom management.

However, it is essential to recognize the variability in patient responses to herbal remedies. While some individuals may experience significant symptom relief, others may not benefit as much or may experience allergic reactions or irritations. The quality and potency of herbal products also vary widely, and not all commercially available products are standardized or tested for efficacy, which can complicate their use in clinical practice.

Despite these challenges, herbal therapies present a promising adjunct treatment option for individuals with psoriasis, particularly those seeking natural alternatives to conventional therapies. Future research should focus on improving the quality and consistency of herbal products, as well as identifying optimal dosages and treatment regimens. Additionally, exploring the mechanisms of action underlying these herbs will help to clarify their therapeutic potential and guide the development of more effective, evidence-based treatments.

Conclusion

Herbal therapy holds significant promise in the management of psoriasis, offering potential benefits for symptom relief with fewer side effects compared to conventional treatments. Herbs such as aloe vera, turmeric, neem, and evening primrose oil have demonstrated efficacy in reducing psoriasis symptoms, including scaling, inflammation, and itching. However, while preliminary evidence is encouraging, more rigorous, large-scale studies are needed to confirm their clinical effectiveness and safety. As research in this field progresses, herbal therapies may become an integral part of psoriasis management, offering patients natural, adjunctive options that complement traditional therapies. Clinicians should consider individual patient preferences, the severity of the disease, and the quality of herbal products when recommending herbal treatments as part of a comprehensive psoriasis management plan.

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