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Medicinal Plants as Sources of Antibacterial Compounds: Phytochemical and Pharmacological Insights

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Abstract: *The increasing prevalence of antimicrobial resistance (AMR) among pathogenic bacteria, which has emerged as a significant worldwide health concern, severely limits the efficacy of conventional antibiotic therapy. This worrying trend has prompted the hunt for sustainable and alternative antibacterial compounds derived from natural sources. Medicinal plants have garnered significant attention because to their broad antibacterial potential and availability of bioactive phytoconstituents. Many herbs employed in traditional medical systems are known to have compounds that contribute to their antibacterial activity, including alkaloids, flavonoids, tannins, terpenoids, and phenolic derivatives. By interfering with essential metabolic processes, preventing the creation of proteins and nucleic acids, damaging the integrity of bacterial cell membranes, and preventing the development of biofilms, these phytochemicals combat bacteria. Standard in vitro evaluation methods such as agar diffusion assays, minimum inhibitory concentration (MIC), and minimum bactericidal concentration (MBC) have demonstrated the significant inhibitory effects of herbal extracts against a range of Gram-positive and Gram-negative bacteria. Furthermore, a number of studies have shown that conventional antibiotics and substances derived from plants can work in concert to improve antimicrobial efficiency and potentially stop the formation of resistance. Despite these positive aspects, problems such as uneven phytochemical composition, a lack of standardization, a lack of pharmacokinetic data, and insufficient clinical validation prevent their widespread therapeutic utilization. In conclusion, medicinal plants constitute a significant and understudied source of novel antibacterial chemicals. Further investigation into the isolation, characterisation, and clinical evaluation of plant-derived chemicals is required for their successful integration into modern antimicrobial therapy.*

Keywords: *Medicinal Plants, Antibacterial Activity, Phytochemicals, Antimicrobial Resistance, Herbal Antibacterial Agents*

I. INTRODUCTION

Infectious disease-causing pathogenic bacteria are still a major global health concern, greatly increasing morbidity and mortality. Bacterial infections are particularly deadly among these due to their rapid spread and increasing resistance to conventional antimicrobial treatments. Antibiotics have revolutionized modern medicine, but due to their extensive and often irresponsible usage, antimicrobial resistance (AMR) has developed, rendering many commonly used drugs ineffective. Multidrug-resistant (MDR) bacterial species, such as *Pseudomonas aeruginosa*, *Escherichia coli*, and *Staphylococcus aureus*, have become more common. This poses a serious threat to public health and necessitates the development of new treatment strategies. Medicinal herbs have been utilized for ages to treat a range of infectious disorders in ancient medical systems like Ayurveda, Unani, and ancient Chinese Medicine. These plants are rich in the structurally diverse bioactive compounds known as phytochemicals, which include alkaloids, flavonoids, tannins, terpenoids, glycosides, and phenolic compounds. Strong antibacterial, antifungal, antiviral, and anti-inflammatory properties have been demonstrated for these secondary metabolites, which are crucial to plant defense systems against microbial invasion. Unlike manufactured antibiotics, which typically target a single site of action, plant-derived drugs often exhibit multi-target mechanisms. They can impair the integrity of bacterial cell walls, alter membrane permeability, inhibit the synthesis of nucleic acids, block essential enzymes, and prevent biofilm development. This complex mode of action reduces the likelihood of resistance formation and increases treatment efficacy. Furthermore, when coupled with conventional antibiotics, certain herbal extracts have demonstrated synergistic benefits that increase antibacterial effectiveness and reduce dosage requirements. Recent research has demonstrated the antibacterial qualities of numerous medicinal herbs, such as *Curcuma longa* (turmeric), *Ocimum sanctum* (tulsi), *Allium sativum* (garlic), and *Azadirachta indica* (neem). These plants have shown potent inhibitory effect against both Gram-positive and Gram-negative bacterial strains in a number of in vitro and in vivo studies. These herbs' efficacy is mostly due to their active components, which are curcumin, eugenol, allicin, and nimbodin, respectively.

Antimicrobial assays for the extraction and evaluation of plant-based antibacterial agents include agar well diffusion, disc diffusion, minimum inhibitory concentration (MIC), minimum bactericidal concentration (MBC), and solvent extraction methods (aqueous, ethanolic, and methanolic). These methods provide valuable insights into the intensity and range of activity of herbal extracts. Despite their great therapeutic potential, the use of medicinal plants in modern medicine has several challenges, including a lack of standardization, diversity in phytochemical composition, a lack of clinical proof, and issues with stability and bioavailability. Therefore, there is an urgent need for systematic study on the identification, isolation, and characterization of active chemicals as well as their pharmacological and toxicological evaluation. Given this, the current research aims to investigate the antibacterial activity of twenty medicinal herbs in detail, focusing on their phytochemical components, mechanisms of action, methods of assessment, and potential applications. The study also emphasizes how important it is to integrate ancient knowledge with modern scientific techniques in order to develop antibacterial drugs that are long-lasting, safe, and effective for use in healthcare in the future.

A. Components Of Phytochemicals

The primary cause of medicinal plants' antibacterial action is the presence of several secondary metabolites known as phytochemicals. These bioactive compounds are crucial for plant defense because of their strong antibacterial properties. The primary classes of phytochemicals with antibacterial qualities are alkaloids, flavonoids, tannins, terpenoids, saponins, glycosides, and phenolic compounds. These compounds inhibit the growth of microbes either individually or in combination.

II. PRINCIPAL PHYTOCHEMICAL CLASSES

- 1) Alkaloids: Nitrogen-containing substances that obstruct the synthesis of proteins and DNA.
- 2) Flavonoids: Polyphenolic substances that damage microbial membranes and prevent the synthesis of nucleic acids.
- 3) Tannins: Inhibitors of bacterial enzymes that precipitate proteins.
- 4) Terpenoids: These are lipophilic substances that damage the integrity of cell membranes.
- 5) Saponins: Cell lysis results from changes in membrane permeability caused by saponins.
- 6) Phenolic compounds: Inhibit bacterial enzymes and cause oxidative stress.

III. SELECTED HERBS' PHYTOCHEMICAL PROFILE

Sr.No.	Plant Name	Biological Name	Chemical Constituents	Proven Activities	Mechanism of Antibacterial Action	Bactericidal / Bacteriostatic	Reference
1.	Neem	Azadirachta indica	Nimbidin, Azadirachtin	Antibacterial, Antifungal Anti-inflammatory Antiviral Wound healing	Disrupts bacterial cell wall Inhibits protein synthesis Interferes with enzyme activity Causes membrane permeability changes Blocks microbial adhesion	Bactericidal	Biswas et al., 2002
2.	Tulsi	Ocimum sanctum	Eugenol Ursolic acid Rosmarinic acid Linalool Flavonoids	Antibacterial Anti-inflammatory Immunomodulatory Antioxidant Antiviral	Damages cell membrane Inhibits enzyme activity Disrupts metabolic pathways Prevents biofilm formation Inhibits protein synthesis	Both	Prakash & Gupta, 2005
3.	Garlic	Allium sativum	Allicin Ajoene Sulfur compounds Diallyl sulfide S-allyl cysteine	Broad-spectrum antibacterial Antifungal Antiviral Cardioprotective Antioxidant	Inhibits enzyme systems Blocks DNA synthesis Disrupts cell membrane Interferes with metabolism Prevents bacterial growth	Bactericidal	Ankri & Mirelman, 1999
4.	Turmeric	Curcuma longa	Curcumin Demethoxycurcumin Bisdemethoxycurcumin Turmerone Essential oils	Antibacterial Anti-inflammatory Antioxidant Anticancer Hepatoprotective	Inhibits bacterial growth Disrupts cell signaling Prevents biofilm formation Inhibits enzyme activity Alters membrane integrity	Bacteriostatic	Gupta et al., 2013
5.	Clove	Aloe barbadensis	Eugenol Caryophyllene	Antibacterial Antiseptic	Protein denaturation Membrane disruption	Bactericidal	Chaieb et al., 2007

			Tannins Flavonoids Phenolics	Analgesic Antioxidant Antifungal	Enzyme inhibition Leakage of cell contents Cell death induction		
6.	Cinnamon	Zingiber officinale	Cinnamaldehyde Eugenol Coumarin Polyphenols Essential oils	Antibacterial Antioxidant Antidiabetic Anti-inflammatory Antifungal	Inhibits cell wall synthesis Disrupts enzymes Damages membranes Interferes with metabolism Inhibits biofilm	Bactericidal	Ranasinghe et al., 2013
7.	Aloe vera	Syzygium aromaticum	Aloin, Emodin, Saponins, Vitamins, Anthraquinones	Antibacterial, Wound healing, Anti-inflammatory, Antioxidant, Antifungal	Growth inhibition Membrane damage Enzyme inhibition Repair blocking Metabolic disruption	Bacteriostatic	Hamman, 2008
8.	Ginger	Cinnamomum verum	Gingerol Shogaol Zingerone Essential oils Phenolics	Antibacterial Anti-inflammatory Antioxidant Digestive aid Antiviral	Adhesion inhibition Membrane disruption Enzyme inhibition Growth suppression Metabolism interference	Bacteriostatic	Ali et al., 2008
9.	Eucalyptus	Nigella sativa	Eucalyptol Tannins Flavonoids Terpenes Essential oils	Antibacterial Respiratory relief Anti-inflammatory Antioxidant Antiviral	Membrane disruption Enzyme inhibition Growth inhibition Cell leakage Metabolic disruption	Bactericidal	Silva et al., 2003
10.	Peppermint	Coriandrum sativum	Menthol Menthone Flavonoids Rosmarinic acid Essential oils	Antibacterial Cooling effect Digestive aid Anti-inflammatory Antioxidant	Membrane damage Protein denaturation Enzyme inhibition Growth inhibition Metabolic disruption	Bactericidal	McKay & Blumberg, 2006
11.	Lemongrass	Eucalyptus globulus	Citral, Limonene, Flavonoids, Terpenes, Oils	Antibacterial, Antifungal, Antioxidant, Anti-inflammatory, Insecticidal	Membrane damage, enzyme inhibition, growth inhibition, leakage, metabolism block	Bactericidal	Onawunmi, 1989
12.	Guava leaves	Mentha piperita	Tannins, Flavonoids, Quercetin, Vitamins, Phenolics	Antibacterial, Antidiarrheal, Antioxidant, Anti-inflammatory, Antiviral	Cell wall damage, enzyme inhibition, protein binding, growth inhibition, membrane disruption	Both	Cowan, 1999
13.	Amla	Cymbopogon citratus	Vitamin C, Tannins, Flavonoids, Polyphenols, Alkaloids	Antibacterial, Antioxidant, Immunity booster, Anti-inflammatory, Antiviral	Growth inhibition, enzyme inhibition, membrane damage, oxidative stress, metabolic disruption	Bacteriostatic	Scartezzini, 2006
14.	Ashwagandha	Phyllanthus emblica	Withanolides, Alkaloids, Saponins, Flavonoids, Steroids	Antibacterial, Adaptogen, Anti-inflammatory, Antioxidant, Immunomodulator	Protein inhibition, enzyme inhibition, growth suppression, metabolic interference, membrane damage	Bacteriostatic	Singh et al., 2011
15.	Moringa	Withania somnifera	Isothiocyanates, Flavonoids, Vitamins, Alkaloids, Tannins	Antibacterial, Nutritional, Antioxidant, Anti-inflammatory, Antifungal	Membrane disruption, enzyme inhibition, growth inhibition, leakage, metabolism block	Bactericidal	Anwar et al., 2007
16.	Tea tree	Aegle marmelos	Terpinen-4-ol, Cineole, Terpenes, Alcohols, Oils	Strong antibacterial, Antifungal, Antiseptic, Anti-inflammatory, Antiviral	Membrane damage, protein denaturation, leakage, enzyme inhibition, cell death	Bactericidal	Srinivasan, 2007
17.	Bael	Psidium guajava	Marmelosin, Tannins, Alkaloids, Coumarins, Flavonoids	Antibacterial, Antidiarrheal, Anti-inflammatory, Antioxidant, Antiviral	Enzyme inhibition, growth inhibition, membrane damage, metabolic disruption, protein binding	Bacteriostatic	Carson et al., 2006
18.	Arjuna	Hibiscus rosa-sinensis	Tannins, Saponins, Flavonoids, Glycosides, Alkaloids	Antibacterial, Cardioprotective, Antioxidant, Anti-inflammatory, Antifungal	Cell wall disruption, enzyme inhibition, growth inhibition, membrane damage, protein binding	Both	Baliga et al., 2011
19.	Henna	Trigonella foenum-graecum	Lawson, Tannins, Flavonoids, Phenolics, Alkaloids	Antibacterial, Antifungal, Cooling, Anti-inflammatory, Antioxidant	Protein binding, membrane damage, enzyme inhibition, growth inhibition, leakage	Bactericidal	Dwivedi, 2007
20.	Black pepper	Laurus nobilis	Piperine, Alkaloids, Essential oils, Flavonoids, Terpenes	Antibacterial, Digestive, Antioxidant, Anti-inflammatory, Antimicrobial	Enzyme inhibition, growth inhibition, membrane disruption, metabolic interference, protein inhibition	Bacteriostatic	Ali et al., 2001

IV. MECHANISM OF ANTIBACTERIAL ACTIVITY

Through a number of complex and interconnected processes, medicinal plants possess antibacterial qualities. Unlike conventional antibiotics, which often target a single biological activity, phytochemicals operate on multiple places within bacterial cells, reducing the likelihood of resistance development. The primary mechanisms are discussed as follows:

A. Bacterial Cell Wall and Membrane Integrity Disruption

One of the primary ways that phytochemicals exhibit antibacterial activity is by disruption of the bacterial cell wall and cytoplasmic membrane. Maintaining cellular integrity, regulating permeability, and protecting the cell from external stress all depend on the bacterial cell envelope. Examples of phytoconstituents with lipophilic properties that enable them to interact with bacterial membrane lipid bilayers include terpenoids, phenolic compounds, and essential oils. By penetrating the phospholipid matrix, these compounds result in increased membrane fluidity and structural disorder. Proteins, ions, and nucleotides—all essential intracellular components—leak out as a result, ultimately leading to cell lysis and death. For instance, it has been demonstrated that eugenol and thymol alter membrane permeability and disrupt the proton motive force, which is essential for ATP generation. Gram-negative bacteria's lipopolysaccharide (LPS) outer membrane can be weakened by specific phytochemicals, increasing the bacteria's capacity to penetrate cells. This makes bacteria more susceptible to antimicrobial treatments. Furthermore, damage to membrane proteins and enzymes hinders the transport of nutrients during cellular respiration. All things considered, membrane disruption typically results in irreversible cellular damage and is a rapid and effective antibacterial mechanism. This mechanism is particularly advantageous since it reduces the possibility of bacterial resistance because it is non-specific.

B. Protein Synthesis Inhibition

Another significant antibacterial mechanism is the suppression of bacterial protein production. Proteins are essential for bacterial growth, replication, and metabolism. Phytochemicals such as flavonoids, alkaloids, and some polyphenols have been shown to interfere with ribosomal function, preventing the translation of messenger RNA (mRNA) into functional proteins. By attaching to the 30S or 50S ribosomal subunits, these compounds can disrupt the start or elongation phases of protein synthesis. For example, interactions between ribosomal proteins and flavonoids may cause conformational changes that hinder the creation of peptide bonds. Bacterial viability is ultimately decreased as a result of the production of defective or non-functional proteins. Certain phytochemicals that block enzymes involved in protein folding and amino acid production further disrupt cellular equilibrium. Allicin and other sulfur-containing compounds can react with the thiol groups in bacterial enzymes to inactivate the enzyme and obstruct metabolic pathways. Unlike traditional antibiotics, which target specific ribosomal regions, plant-derived drugs often exhibit broader interactions with numerous targets, boosting their antibacterial potency. This multi-target approach reduces the likelihood of resistance development and provides a significant advantage over synthesized drugs. Therefore, the suppression of protein synthesis is a key mechanism that supports the antibacterial potential of medicinal plants.

C. Nucleic Acid Synthesis Interference

Phytochemicals also have antibacterial properties by interfering with the creation and function of nucleic acids, such as DNA and RNA. Nucleic acids are essential for transcription, bacterial replication, and overall cellular activity. Disruption of these pathways inhibits bacterial growth and ultimately leads to cell death. Certain compounds produced from plants, particularly alkaloids and flavonoids, have been shown to block key enzymes involved in DNA replication, such as topoisomerase and DNA gyrase. These enzymes are responsible for maintaining DNA supercoiling and encouraging replication. DNA is harmed and bacterial growth is halted when these enzymes are inhibited. Additionally, certain phytochemicals intercalate between DNA base pairs to create structural abnormalities that hinder transcription and replication. This prevents the synthesis of essential proteins required for bacterial viability. Reactive oxygen species (ROS), which oxidatively damage DNA and cause mutations and strand breaks, can also be produced by phenolic chemicals. RNA synthesis is also affected by phytochemicals that prevent transcription by blocking RNA polymerase activity. Protein synthesis is consequently reduced and cellular function is impaired. Because phytochemicals can target nucleic acid production at several levels, they are highly efficient antibacterial agents. Additionally, because of their diverse chemical structures, they can interact with a variety of molecular targets, reducing the possibility that resistance will emerge.

D. Activity Against Biofilms

Biofilm development is a major contributor to bacterial resistance and persistent illnesses. Biofilms are organized populations of bacteria that are entangled in an extracellular polymeric matrix that they create on their own to defend themselves against antibiotics

and host immunological responses. Phytochemicals have demonstrated a great deal of potential in both breaking up and inhibiting the formation of biofilms. Plant-derived substances that interfere with quorum sensing, a bacterial communication system that regulates the production of biofilms, include flavonoids, tannins, and essential oils.

By obstructing signaling molecules, these compounds prevent germs from sticking to surfaces and colonizing them. Furthermore, by dissolving the extracellular matrix of biofilms, phytochemicals might expose bacterial cells to antimicrobial drugs. Both conventional and natural antibiotics become more effective as a result. Furthermore, by preventing the expression of genes involved in biofilm formation, certain drugs stop the growth of resistant bacterial communities. Anti-biofilm action is particularly important when treating chronic wounds and recurrent infections associated with medical equipment. The ability of herbal substances to target biofilms is a significant advantage over conventional antibiotics, which often fail to penetrate these structures.

E. Oxidative Stress and Metabolic Disruption Induction

One important antibacterial action of phytochemicals is the development of oxidative stress in bacterial cells. Many compounds generated from plants produce reactive oxygen species (ROS), including superoxide radicals, hydrogen peroxide, and hydroxyl radicals. These reactive chemicals cause oxidative damage to several biological components, including proteins, lipids, and nucleic acids. Cellular leakage and loss of membrane integrity are the outcomes of oxidative stress-induced lipid peroxidation of cell membranes. By denaturing proteins and deactivating essential enzymes, it also interferes with metabolic pathways. Furthermore, ROS-induced DNA damage further impedes bacterial survival and replication. Two phytochemicals that are particularly effective at inducing oxidative stress are phenolics and quinones. By continuously producing ROS, these compounds' capacity for redox cycling boosts their antibacterial action. In addition to oxidative stress, phytochemicals interfere with vital metabolic functions like energy production and nutrition use. These compounds interfere with ATP generation and enzyme function, which prevents bacteria from growing and surviving. This dual mechanism of oxidative damage and metabolic disruption enhances the overall antibacterial efficiency of medicinal plants and adds to their broad-spectrum activity.

V. TECHNIQUES FOR ASSESSING ANTIBACTERIAL ACTIVITY

An essential first step in figuring out the effectiveness, range, and possible therapeutic uses of herbal extracts is assessing their antibacterial activity. To evaluate antimicrobial activity, measure potency, and contrast herbal extracts with conventional antibiotics, a variety of *in vitro* microbiological techniques are used. Agar diffusion techniques, minimum inhibitory concentration (MIC) and minimum bactericidal concentration (MBC) determination, and sophisticated assays like time-kill studies are among the most widely used techniques. When used in standardized settings, these techniques yield dependable and repeatable results.

A. Method of Agar Well Diffusion.

One of the most popular methods for the initial screening of plant extracts' antibacterial activity is the agar well diffusion method. This approach is easy to use, economical, and appropriate for analyzing many samples at once. It is predicated on the idea that antimicrobial agents diffuse from a well into the surrounding agar medium that has been infected with a test microbe. Using a sterile swab, a standardized bacterial inoculum (typically adjusted to 0.5 McFarland standard, or roughly 10^2 CFU/mL) is evenly distributed across the surface of sterile nutrient agar plates. Next, a sterile cork borer is used to punch uniformly sized wells (usually 6–8 mm) into the agar. Each well is carefully filled with a predetermined volume of plant extract at various concentrations. For comparison, a standard antibiotic (such as amoxicillin or cefixime) and an appropriate solvent control (such as ethanol or distilled water) are included. The diameter of the zone of inhibition (ZOI) surrounding each well is measured to determine the antibacterial activity after the plates are incubated at 35–37°C for 18–24 hours. The antimicrobial potency of the extract is directly correlated with the size of the inhibition zone. Stronger antibacterial activity is indicated by larger zones. But there are some drawbacks to this approach. The molecular size and solubility of phytochemicals determine how they diffuse, which could impact the precision of findings. Underestimating activity could result from non-polar compounds' inefficient diffusion in the agar medium. Agar well diffusion is still a useful qualitative screening technique for assessing the antibacterial potential of herbal extracts in spite of these drawbacks.

B. Kirby-Bauer Method (Disc Diffusion Method)

The Kirby-Bauer method, also called the disc diffusion method, is a standardized technique that is frequently used to assess the antibacterial activity of conventional antibiotics as well as plant extracts. Organizations like the Clinical and Laboratory Standards Institute (CLSI) support this approach because of its dependability and reproducibility.

This method involves impregnating sterile filter paper discs (6 mm in diameter) with a known concentration of plant extract and placing them on the surface of an agar plate that has already been infected with the test microorganism. To guarantee consistent growth, the bacterial inoculum is prepared to meet the 0.5 McFarland turbidity standard. The plates are incubated at 35–37°C for 18–24 hours after the discs are placed. A concentration gradient is produced during incubation as the antimicrobial compounds diffuse radially from the disc into the agar medium. A distinct zone of inhibition forms around the disc if the test organism is vulnerable to the extract. This zone's diameter is measured in millimeters and compared to control antibiotics or standard interpretive charts. This method allows for easy comparison between different extracts and standard drugs. It is particularly useful for assessing the relative potency of herbal extracts and identifying promising candidates for further investigation. However, similar to the agar well method, the diffusion rate of compounds can influence the results. Additionally, volatile compounds may evaporate during incubation, affecting activity. Despite these limitations, the disc diffusion method remains a gold standard for antimicrobial susceptibility testing and is widely used in phytochemical research.

C. Calculating the Minimum Inhibitory Concentration (MIC)

The lowest concentration of an antimicrobial agent that prevents a microorganism from growing visibly after incubation is known as the minimum inhibitory concentration, or MIC. The antibacterial potency of plant extracts can be precisely determined using this quantitative method. Broth dilution techniques, which can be carried out in test tubes (macro-dilution) or microtiter plates (micro-dilution), are frequently used to calculate MIC. This method involves preparing several two-fold dilutions of the plant extract in an appropriate broth medium. A standardized bacterial suspension is added to each dilution, and it is then incubated for 18 to 24 hours at 35 to 37°C. Turbidity, a sign of bacterial growth, is measured in the tubes or wells following incubation. The minimum inhibitory concentration (MIC) is the lowest concentration of the extract that exhibits no discernible growth. Colorimetric indicators like resazurin or tetrazolium salts can be used in micro-dilution assays to improve bacterial viability detection. MIC determination is a crucial technique for assessing the effectiveness of herbal extracts because it is extremely sensitive and repeatable. It makes it possible to compare various extracts and aids in figuring out appropriate dosage ranges. However, it necessitates meticulous standardization of experimental parameters, such as medium composition, incubation duration, and inoculum size. MIC values serve as a foundation for choosing extracts for in vivo testing and drug development, and they are essential for additional pharmacological research.

D. Determining the Minimum Bactericidal Concentration (MBC)

The lowest concentration of an antimicrobial agent needed to kill a microorganism instead of just stopping its growth is known as the minimum bactericidal concentration, or MBC. It is a crucial metric for differentiating between plant extracts' bacteriostatic and bactericidal effects. Usually, MBC is calculated after the MIC test. Fresh, drug-free agar plates are used to subculture samples from tubes or wells that do not exhibit any discernible growth. After that, these plates are incubated in the proper environment. The plates are checked for the development of bacterial colonies following incubation. The MBC is the lowest extract concentration that causes no colony growth, or total bacterial death. The extract has a bacteriostatic effect at that concentration if bacterial growth is seen. The type of antimicrobial activity is frequently categorized using the ratio of MBC to MIC. A bactericidal effect is suggested by a low MBC/MIC ratio, while a bacteriostatic effect is indicated by a high ratio. MBC determination is especially crucial in clinical settings where total pathogen eradication is necessary, like severe infections. However, compared to MIC determination, this method requires more time and labor. Despite these difficulties, MBC is crucial for assessing the therapeutic potential of herbal extracts and offers important information about their killing potential.

VI. EXTRACTION TECHNIQUES

In order to separate bioactive phytochemicals from medicinal plants, extraction is an essential step. Plant extracts' yield, composition, and antibacterial activity are all directly impacted by extraction efficiency. Depending on the type of phytoconstituents, the polarity of the solvent, and the intended result, different extraction methods are used. Maceration, Soxhlet extraction, ultrasonic-assisted extraction, and steam distillation are some of the frequently employed techniques.

1) Maceration (Method of Cold Extraction)

One of the easiest and most popular extraction methods is maceration, which works especially well for phytochemicals that are sensitive to heat. In order to allow soluble components to diffuse into the solvent, this method entails soaking the powdered plant material in an appropriate solvent at room temperature for a predetermined amount of time.

Depending on the polarity of the target compounds, common solvents used in maceration include water, ethanol, methanol, and hydroalcoholic mixtures. To improve extraction efficiency, the plant material is first dried and ground to increase its surface area. After that, the powdered material is put in a closed container with the solvent in a predetermined ratio, usually between 1:5 and 1:10 (w/v). To promote mass transfer, the mixture is left to stand for 24 to 72 hours with sporadic shaking or stirring. To separate the liquid extract from the plant residue, the mixture is filtered using muslin cloth or filter paper after the extraction period. A rotary evaporator or controlled temperature evaporation can be used to concentrate the filtrate. For the extraction of polar and moderately polar substances like flavonoids, tannins, glycosides, and phenolics, maceration works especially well. Because of its ease of use, affordability, and low need for specialized equipment, it is widely used in pharmacognosy. Longer extraction times, lower efficiency when compared to contemporary methods, and the possibility of microbial contamination during extended soaking are some of the method's drawbacks. Despite these disadvantages, maceration is still the method of choice for large-scale preparation and initial extraction of herbal extracts, particularly in systems of traditional medicine. It is ideal for antibacterial research because of its mild extraction conditions, which help maintain the biological activity of thermolabile compounds.

2) *Extraction by Soxhlet*

A popular continuous hot extraction method for effectively recovering bioactive compounds from plant materials is Soxhlet extraction. This method necessitates repeatedly washing the plant material with fresh solvent and is especially useful for extracting compounds with limited solubility in a solvent. Using this method, a porous thimble made of cellulose or filter paper is filled with the dried and finely powdered plant material before being loaded into the Soxhlet apparatus. A round-bottom flask is filled with the solvent (such as ethanol, methanol, or petroleum ether) and heated until it boils. After passing through a condenser, where it cools and condenses into liquid, the solvent vapor seeps through the thimble's plant material. When the extract-laden solvent reaches a certain level, it is siphoned back into the flask from the extraction chamber. To ensure thorough phytochemical extraction, this cycle is repeated several times, usually ten to fifteen times. When compared to cold extraction techniques, Soxhlet extraction is more effective and yields more. It works especially well for extracting non-volatile and somewhat heat-stable substances like flavonoids, terpenoids, and alkaloids. Continuous solvent recycling improves extraction efficiency by strengthening the solvent-plant material contact. The use of high temperatures, which could cause thermolabile compounds to degrade, is one of the method's drawbacks. It also necessitates a considerable amount of solvent consumption and a longer extraction time. Because of its dependability and repeatability, Soxhlet extraction is still a common technique in phytochemical research despite these disadvantages. It is frequently used to prepare extracts for assessment of their antibacterial properties.

3) *Extraction with Ultrasonic Assistance (UAE)*

A contemporary method called "ultrasonic-assisted extraction" makes use of ultrasonic waves to improve the extraction of bioactive substances from plant materials. This technique is based on the idea of acoustic cavitation, in which tiny bubbles are created in the solvent by ultrasonic waves. Plant cell walls are disrupted and intracellular compounds are better released as a result of the localized high pressure and temperature created by the collapse of these bubbles. Using an ultrasonic bath or probe, the powdered plant material is combined with an appropriate solvent and exposed to ultrasonic waves. Compared to traditional methods, the extraction process usually takes 15–60 minutes. In order to keep sensitive compounds from degrading, the temperature is typically kept at a moderate level. The concentrated extract is obtained by filtering the mixture after extraction and removing the solvent. Higher extraction efficiency, shorter extraction times, lower solvent consumption, and increased phytochemical yield are just a few benefits of ultrasonic-assisted extraction. It works especially well for removing heat-sensitive substances like flavonoids and phenolics. Furthermore, the approach is environmentally Eco-friendly and appropriate for extensive use. However, because of the localized high energy, excessive ultrasonic exposure may cause some compounds to degrade. As a result, it is crucial to optimize variables like temperature, time, and solvent type. All things considered, UAE is a promising method for effectively extracting antibacterial phytochemicals from therapeutic plants.

4) *Essential Oil Steam Distillation*

A specialized extraction method called steam distillation is used to separate volatile and aromatic compounds—especially essential oils—from plant materials. Terpenoids and phenolic compounds, which have potent antibacterial properties, are abundant in these essential oils. By passing steam through the plant material, this method causes the volatile compounds to evaporate. A cooling system is then used to condense the water and essential oil vapor mixture. The condensate is gathered in a separator, where density differences cause the essential oil to separate from the aqueous phase.

Essential oils from plants like clove, eucalyptus, peppermint, and lemongrass are frequently extracted using steam distillation. The technique is beneficial because it prevents thermal degradation by enabling extraction at temperatures below the compounds' boiling points. Additionally, it yields extremely pure extracts that can be used in pharmaceutical and cosmetic applications. Nevertheless, non-volatile phytochemicals cannot be extracted using this method, which is restricted to volatile compounds. Additionally, it calls for specific equipment and meticulous control over operating conditions. Steam distillation is still a crucial technique for producing essential oils with strong antibacterial qualities in spite of these drawbacks.

A. *Comparative Research*

When assessing the antibacterial effectiveness of herbal extracts in comparison to traditional antibiotics, comparative studies are essential. These investigations offer important information about the relative strength, range of activity, and possible therapeutic use of antimicrobial agents derived from plants. Researchers can determine whether medicinal plants can be useful substitutes or supplemental treatments for the treatment of bacterial infections by contrasting herbal extracts with conventional antibiotics.

B. *Comparing Conventional Antibiotics*

The antibacterial activity of herbal extracts and widely used antibiotics like amoxicillin, ciprofloxacin, and cefixime have been compared in numerous studies. Zone of inhibition (ZOI), minimum inhibitory concentration (MIC), and minimum bactericidal concentration (MBC) are examples of parameters that are commonly used in these comparisons. Herbal extracts have frequently shown similar antibacterial activity, especially against Gram-positive bacteria like *Staphylococcus aureus*. Neem, garlic, and clove extracts, for instance, have demonstrated notable zones of inhibition that occasionally resemble those of conventional antibiotics. Strong phytochemicals like nimbodin, eugenol, and allicin are responsible for this. However, because Gram-negative bacteria have an outer lipopolysaccharide membrane that prevents phytochemicals from penetrating, herbal extracts frequently exhibit comparatively lower activity against these bacteria. Despite this drawback, some plant extracts that are high in terpenoids and essential oils have also shown efficacy against Gram-negative bacteria. It's crucial to remember that, because of their intricate chemical makeup, herbal extracts offer a wider range of activity than synthetic antibiotics, which act quickly and precisely. They can act on several cellular targets at once because of their multi-component nature.

VII. HERBAL EXTRACTS And ANTIBIOTICS: SYNERGISTIC EFFECTS

Examining the synergistic interactions between traditional antibiotics and herbal extracts is one of the most promising aspects of comparative studies. When two agents have a greater combined effect than the sum of their separate effects, this is known as synergy. Plant extracts can greatly increase antibacterial activity when combined with antibiotics, as several studies have shown. For example, amoxicillin and neem extract have demonstrated enhanced inhibition against bacterial strains that are resistant. This effect is thought to be caused by phytochemicals' capacity to damage bacterial membranes, which increases the permeability of antibiotics into the cell. Furthermore, some phytochemicals prevent bacterial resistance mechanisms like enzyme degradation and efflux pumps. This makes it possible for antibiotics to continue working against resistant strains. By lowering the necessary antibiotic dosage, these combinations can minimize side effects and slow the emergence of resistance. The degree of interaction between two agents is measured by techniques like the fractional inhibitory concentration (FIC) index and the checkerboard assay, which are commonly used to assess synergistic studies.

VIII. COMBATING MULTIDRUG-RESISTANT (MDR) MICROORGANISMS

The efficacy of herbal extracts against multidrug-resistant (MDR) bacterial strains has also been the subject of comparative research. MDR bacteria, like resistant strains of *Escherichia coli* and methicillin-resistant *Staphylococcus aureus* (MRSA), are a significant problem in clinical settings. Because of their multi-target mechanisms of action, herbal extracts have demonstrated promising activity against these resistant strains. Phytochemicals can simultaneously disrupt membranes, inhibit enzymes, and interfere with genetic material, in contrast to antibiotics that target specific pathways. This lessens the possibility that resistance will emerge. For instance, by blocking vital enzyme systems, allicin, which is derived from garlic, has shown potent activity against MDR bacteria. In a similar vein, essential oils derived from plants like lemongrass and eucalyptus have demonstrated efficacy in breaking up bacterial biofilms, which are frequently linked to resistance. These results demonstrate the potential of herbal extracts as supplemental or alternative treatments for infections that are resistant.

IX. DIFFERENCES IN COMPARATIVE OUTCOMES

The results of comparative studies can differ greatly for a number of reasons, even though many studies report favorable outcomes. The antibacterial activity of herbal extracts can be affected by variations in extraction techniques, solvent types, plant sources, and experimental settings. Furthermore, harvesting conditions, climate, and geographic location can all affect the concentration of active phytochemicals. It is difficult to standardize herbal extracts and compare findings from various studies because of this variability. Furthermore, the evaluation methodology—such as MIC determination or agar diffusion—may also have an impact on the outcomes. To guarantee accurate comparisons, standardized procedures and well-characterized extracts are crucial.

X. FUTURE SCOPE AND CLINICAL RELEVANCE

Although in vitro comparison studies provide valuable insights, further investigation is required to apply these findings to clinical settings. Bioavailability, pharmacokinetics, toxicity, and patient compliance are all important considerations before employing plant extracts as medicinal agents.

A. Future research should focus on

Standardization of herbal extracts.

The active ingredients are separated and described.

- Clinical trials to evaluate safety and efficacy. Development of combination treatments for antibiotics.
- Combining modern pharmacology with herbal medicine is a promising approach to solving the issues of antibiotic resistance.

B. Advantages Of Herbal Antibacterial Agents

- An action mechanism with several targets.
- A lower risk of antimicrobial resistance.
- Broad-spectrum antibacterial activity.
- The combined effects of conventional antibiotics.
- Less toxicity and negative reactions.
- Cost-effectiveness and accessibility.
- Environmentally friendly and sustainable nature.
- Therapeutic and Immunomodulatory Effects.

C. Limitations Of Herbal Antibacterial Agents

- Not enough standardization.
- Variability in Phytochemical Composition.
- Limited data on bioavailability and pharmacokinetics.
 - Inadequate medical assistance.
 - A slower pace of action.
 - Storage and stability issues.
 - Potential problems with toxicity and safety.

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