## Original Paper Medicinal plants with popular names associated with manufactured drugs in Rio Grande do Sul state, Brazil



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#### Abstract

Medicinal plants used by the population in southern Brazil have been observed to be popularly referred to by the names of manufactured drugs. This study aimed to find a connection between the use of medicinal plant species with popular names associated with manufactured drugs and the actual biomedical system. A database regarding such medicinal plants was established based on thirty-four ethnobotanical studies undertaken in the state of Rio Grande do Sul, Brazil, and chemical and pharmacological information was collected from a scientific article database and crossed referenced to determine whether folk information was correlated. Thirty-one species with a total of twenty-five different popular names of manufactured drugs were found. The greatest number of popular names of manufactured drugs was for *Alternanthera brasiliana* with eight names, followed by *Achillea millefolium* with six. The therapeutic indication of the species used in the manufactured formulas was found to differ from the indications of popular use. However, the therapeutic indication of both were correlated for digestive disorders, as well as for popularly named phytotherapic species. Cultural adoption of popular names may be influenced by the biomedical system and the flow of knowledge arising from conventional medicine toward popular medicine.

Key words: commercial drug, digestive disorders, ethnobotany, phytotherapics.

#### Resumo

Observou-se que as plantas medicinais utilizadas pela população do sul do Brasil têm sido referidas popularmente pelos nomes dos medicamentos industrializados. Este estudo visou encontrar uma ligação entre o uso de espécies de plantas medicinais com os nomes populares associados a medicamentos industrializados e o sistema biomédico atual. Foi criada uma base de dados sobre estas plantas medicinais com base em 34 estudos etnobotânicos realizados no estado do Rio Grande do Sul, Brasil, e foram buscadas informações químicas e farmacológicas a partir de uma base de dados de artigos científicos, e cruzadas para determinar se as informações populares estavam correlacionadas. Foram encontradas 31 espécies com um total de 25 nomes populares de medicamentos industrializados diferentes. O maior número de nomes populares de medicamentos industrializados diferentes. O maior número de nomes populares de medicamentos industrializados diferentes. Verificou-se que a indicação terapêutica das espécies utilizadas nas fórmulas industrializadas era diferente das indicações de uso popular. No entanto, a indicação terapêutica de ambas foram correlacionadas para distúrbios digestivos, bem como para as espécies designadas popularmente por fitoterápicos. A adoção cultural de nomes populares pode ser influenciada pelo sistema biomédico e pelo fluxo de conhecimento decorrente da medicina convencional em direção à medicina popular.

Palavras-chave: medicamento comercial, problemas digestivos, etnobotânica, fitoterápicos.

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### Introduction

Interactions between biomedicine and local medical systems of different human groups have been an important focus of ethnobiological research (Mignone et al. 2007; Vandebroek 2013). Even though some studies have observed that the biomedical system affects local knowledge negatively, evidencing an incompatibility between the two types of knowledge (Ragupathy et al. 2008; Hoa et al. 2009), others have shown integration between the two systems, leading to what is known as "intermedicality" (Greene 1998), that is, people of a group use local and biomedical knowledge complementarily (see Soldati & Albuquerque 2012). It has often been revealed that natural resources and industrialized medicines are used that are not mutually exclusive and do not necessarily compete with one another (Giovannini et al. 2011).

In countries such as Cameroon. Kenva and Uganda, carriers of the human immunodeficiency virus (HIV) use both conventional medical treatments and medicinal plants (Noumi & Manga 2011). In other cases, plants serve as a substitute for conventional medicines, with this substitution providing carriers an easily accessible treatment with fewer side effects and less social exposure to stigmatization (Noumi & Manga 2011). An interesting example of the integration of biomedical and local medical systems is the use by some human groups of the names of manufactured medicines to designate medicinal plants, as observed by various studies in different regions of Brazil, such as in the South (Kubo 1997; Garlet & Irgang 2001; Marodin & Baptista 2001; Ritter et al. 2002; Trojan-Rodrigues et al. 2012; Battisti et al. 2013), Southeast (Martins et al. 2005; Pilla et al. 2006) and the Northeast (Soldati & Albuquerque 2012), as well as in the country in general (Siqueira et al. 2017). Indicating medicinal plants using the names of manufactured medicines represents an interesting case to observe the phenomenon of intermedicality of medical systems because it reveals a way that the integration of biomedicine and local systems can occur, evolve and structure local medical systems. Casagrande (2009) demonstrated the interconnection between scientific and traditional knowledge in a popular community in the metropolitan region of Porto Alegre, Brazil, recovering the use of plants such as Alternanthera brasiliana (L.) Kuntze (popularly called ampicillin, penicillin) and Sphagneticola trilobata (L.) Pruski (popularly called insulin), indicating the use of manufactured drug names for plants intended for the same symptoms and diseases.

We investigated the use of names of medicines of biomedical origin as names of medicinal plants by human communities in the state of Rio Grande do Sul, Brazil, to better understand some aspects of the integration of biomedicine and local systems. Specifically, we aimed to answer the following questions: (1) Which species of medicinal plants with a popular name associated with a manufactured drug are used in the state of Rio Grande do Sul? (2) Are plants of native or exotic (cultivated and naturalized) origin in Brazil more widely used? (3) Are species with a popular name associated with a manufactured phytotherapic medicine also found in the formulation of the medicine? (4) Is there correspondence between the use of plants with names from manufactured medicines and the use of the manufactured medicine by the biomedical system? These questions are important for determining the aspects of the medical system that have greater interaction between local and biomedical systems regarding medicinal plant nomenclature and if the use of medicine names for medicinal plants has a biomedical rational.

### **Materials and Methods**

Information was obtained from ethnobotanical studies on the use of medicinal plants, such those reported in articles, doctoral theses, master's theses and monographs, conducted in different regions of the state of Rio Grande do Sul, Brazil.

Studies were found through searches in databases, such as Google Scholar (2021), Portal CAPES (2021) and PUBMed (2021), using the following keywords: "ethnobotanical survey" and "medicinal plants" crossed with the word "Rio Grande do Sul". The criteria for selection were: accessibility, presence of a botanist in the research team, study focus about the knowledge and/or use of medicinal plants by local communities, and with methods characteristic of ethnobotanical research (mainly interviews). The following thirty-four ethnobotanical surveys were recovered (from 1997 to 2020) and assessed: Kubo (1997); Zucchetti et al. (1997); Froehlich (1998); Briani Neto (1999); Koch (2000); Possamai (2000); Fernandes (2001); Garlet & Irgang (2001); Marodin & Baptista (2001); Ritter et al. (2002); Hass (2003); Leitzke (2003); Martha (2003); Sebold (2003); Veiga (2003); Zanandrea (2003); Löwe (2004); Silveira (2004); Soares et al. (2004); Barbosa (2005); Vendruscolo & Mentz (2006); Barros et al. (2007); Schwambach (2007); Ramos (2008); Casagrande (2009); Ceolin (2009); Vanini (2010); Baptista et al. (2013); Battisti et al.

Medicinal plants associated with manufactured drugs

(2013); Löbler *et al.* (2014); Hentges (2015); Brião *et al.* (2016); Delfim (2019) and Bremm *et al.* (2020).

These surveys were used to construct a database of species that were popularly named by using a name of a manufactured drug or active substance, along with their therapeutic indications. World Flora Online (WFO) (2022) and Flora e Funga do Brasil 2022 (continuously updated) were used to confirm valid and current scientific names and their synonymies while the classification system used was that of APG IV (2016). Original popular names traditionally used in southern Brazil were used and Flora Digital do Rio Grande do Sul and Santa Catarina (2021) and Flora e Funga do Brasil 2022 (continuously updated) were used to categorize the origin of species as native to Brazil, cultivated exotics or naturalized exotics.

The therapeutic classes of the studied species were standardized using the therapeutic classes of the medicines (Brasil 1984) and manufactured drug package inserts. The medicinal species associated with drugs were determined by consulting package inserts and their therapeutic class was indicated and confirmed in ANVISA (Brasil 2021). (WHO 2020), as presented in Table 1. Our question about the correspondence between medicinal applications of plants with drug names and the use of the drug by the biomedical system was addressed by first recording the popular uses of each plant. This was then followed by checking for the occurrence of the popular uses in the indications that appeared in the package insert of the manufactured drug. Thus, it was possible to determine if the name adopted by popular medicine was related to the effects for which the manufactured drug is used.

Our question about whether species with names associated with a manufactured phytotherapic medicine are also used in the medicine was addressed by checking for the occurrence of the species in the formula of the medicine. The package insert was used as a source of information to verify whether the species are indeed the same.

Chemical data and pharmacological activities of the studied species were surveyed by consulting

Popular indications	Classification of diseases (ICD-11)	
Infection and parasitic diseases	Chapter I - Certain infectious and parasitic diseases	
Anaemia	Chapter III - Diseases of the blood and blood-forming organs	
Diabetes, thyroid and cholesterol	Chapter V - Endocrine, nutritional and metabolic diseases	
Migraine and nerves	Chapter VIII - Diseases of the nervous system	
Earache	Chapter X - Diseases of the ear or mastoid process	
Heart problems and circulation	Chapter XI - Diseases of the circulatory system	
Sinusitis, influenza, respiratory problems, cough, sore throat and chest ("pontada")	Chapter XII - Diseases of the respiratory system	
Liver, stomach, tooth and jaundice	Chapter XIII - Diseases of the digestive system	
Muscle aches	Chapter XV - Diseases of the musculoskeletal system and connective tissue	
Cystitis, urinary tract infection and female issues	Chapter XVI - Diseases of the genitourinary system	
Abortion	Chapter XVIII - Pregnancy, childbirth and the puerperium	
Headache, fever, pain and verruca	Chapter XXI - Symptoms, signs or clinical findings, not elsewhere classified	

**Table 1** – Classification of the popular therapeutic indications found in ethnobotanical surveys conducted in Rio Grande do Sul state, Brazil, according to ICD-11 (WHO 2020).

published articles using the valid scientific name or synonyms of the species found in searches of ISI Web of Knowledge (2021), Portal CAPES (2021) and PUBMed (2021) databases up to the year 2021. The articles selected were those that contained, in the title or in the abstract, the scientific binomial or a synonym of a studied species and its chemical characterization and pharmacological activity.

### **Results and Discussion**

Medicinal plant species

and their popular names

Thirty-four ethnobotanical studies were assessed, revealing thirty-one species with a total of twenty-five different popular names of manufactured drugs (Tab. 2). The studies were performed in municipalities located in different regions of the state of Rio Grande do Sul.

The species belong to the families Asteraceae (32.3%), Amaranthaceae (16.1%), Lamiaceae (16.1%) and 10 other families (35.5%). Asteraceae was the most representative family as it presents great morphological and geographic diversity among its species that is reflected in their ability to produce a range of secondary metabolites (Calabria *et al.* 2009). Asteraceae stands out with regard to medicinal use in other parts of the world, beyond Rio Grande do Sul (Saslis-Lagoudakis *et al.* 2011).

Among the species, 48.4% are native to Brazil, 38.7% are cultivated exotics and 12.9% are naturalized exotics. The species with the greatest number of popular names from manufactured drugs were *Alternanthera brasiliana* L. (Kuntze) (native) with eight, *Achillea millefolium* L. (cultivated exotic) with six and *Salvia microphylla* Kunth. (cultivated exotic) with four. Thus, manufactured drug names are attributed to both native and exotic species.

Asteraceae was the botanical family with the greatest representation in terms of species in this research, which may be due to it being the most diverse and prolific plant family in the world. According to Chadwick *et al.* (2013), the families Asteraceae and Euphorbiaceae produce secondary metabolites, such as sesquiterpene lactones, that are responsible for bitter taste. These phytochemicals represent a significant proportion of the dry weight (around 3%) of species of Asteraceae.

According to the Brazilian National Program of Medicinal Plants, folk medicinal plants, especially native ones, are valued because they are local and thus easily available to users (Brasil 2015). Moreover, locals tend to prefer native over exotic plants for medicinal application (Albuquerque 2006; Estomba *et al.* 2006). However, exotic plants were found to be preferred medicinal plants for digestive disorders, which is probably explained by the low specificity of the action of exotic plants. In other words, many substances might present similar effects, allowing for the replacement of native species with exotics (Estomba *et al.* 2006).

Table 3 lists the twenty-five names of drugs and/or active substances used as plant names found by the present study and their respective therapeutic medicinal classes. Analgesic and antipyretic are the most frequent therapeutic class, with nine manufactured drug names, followed by antispasmodic and digestive with five and antibiotic also with five. *Achillea millefolium* was the species with the highest number of therapeutic classes, that is, it had broader use.

The popular name Anador (analgesic and antipyretic) was mentioned for eight different species, Infalivina (digestive) for seven and Novalgina (analgesic and antipyretic) for four. There is one group of species whose names are of phytotherapics that are all related to digestive problems.

> The case of species popularly named for phytotherapics and digestive disorders

The therapeutic indications of the species used in manufactured formulas were generally found to differ from the indications of popular use. However, therapeutic indications for both popular use and manufactured formulas were correlated when it came to the therapeutic indication of digestive disorders. For example, the species Cynara scolymus L., called alcachofra, and Peumus boldus Molina, called boldo-do-chile, are plants contained in the formula of the phytotherapic Figatil<sup>®</sup>, while Gymnanthemum amygdalinum (Delile) Sch.Bip. ex Walp. (= Vernonia condensata Baker), also popularly called boldo (Lorenzi & Matos 2008), is the species indicated by the ethnobotanical studies as Figatil. Ten species in total were mentioned as having the folk names Figatil, Infalivina or Olina (Tab. 4).

According to Medeiros *et al.* (2015), traditional pharmacopoeias follow criteria for introducing plants for medicinal purposes. It is not a random process and may be determined by

 Table 2 – Species, family, popular names and popular name associated with manufactured drugs, obtained in ethnobotanical surveys in Rio Grande do Sul state, Brazil.

Species / family / popular names	Popular name associated to manufactured drugs
Achillea millefolium L.* / Asteraceae / Mil-em-ramas, aquiléa, milefólia	Anador <sup>21,24</sup> , Aspirina <sup>20,21,32</sup> , Atroveran <sup>24</sup> , Dipirona <sup>25</sup> , Infalivina <sup>2,6,19</sup> and Novalgina <sup>2,6,21,24</sup>
Acmella ciliata (Kunth) Cass. / Asteraceae / Jambú	Infalivina <sup>34</sup>
Alternanthera bettzickiana (Regel) G. Nicholson** / Amaranthaceae / Periquito, java	Anador <sup>34</sup>
Alternanthera brasiliana (L.) Kuntze / Amaranthaceae / Perpétua-branca, ervaço, pé-de-galinha	Ampicilina <sup>1,20,21,25,27,28</sup> , Anador <sup>19,25</sup> , Bactrin <sup>21</sup> , Cataflan <sup>20</sup> , Meracilina <sup>6</sup> , Novalgina <sup>17</sup> , Penicilina <sup>1,5,6,7,9,14,19,22,24,25,26,28,30,34</sup> and Terramicina <sup>1,21,22,24,27</sup>
Alternanthera paronychioides A. StHil. / Amaranthaceae / Pérpetua	Anador, Calmador and Doril <sup>5</sup>
Alternanthera reineckii Briq. / Amaranthaceae / not found	Anador <sup>2</sup>
<i>Alternanthera tenella</i> Colla (cited as <i>A. ficoidea</i> (L.) P.Beauv.) / Amaranthaceae / Perpétua, quebra-panela	Anador <sup>6, 19</sup> and Melhoral <sup>21</sup>
Artemisia absinthium L.* / Asteraceae / Losna	Infalivina <sup>21</sup>
Artemisia annua L* / Asteraceae / Canflor	Novalgina <sup>21</sup>
Artemisia verlotiorum Lamotte** / Asteraceae / Not found	Infalivina <sup>2,5,7,19,28,32</sup> and Novalgina <sup>2</sup>
Artemisia vulgaris L.* / Asteraceae / Artemigem	Anador <sup>24</sup> , Infalivina <sup>3,14,22,24,34</sup> and Olina <sup>3</sup>
<i>Aspilia montevidensis</i> (Spreng.) Kuntze / Asteraceae / Margarida-do-campo	Insulina <sup>5</sup>
Calea serrata Less. / Asteraceae / Quebra-tudo	Infalivina <sup>2</sup> and Olina <sup>5</sup>
Chelidonium majus L.** / Papaveraceae / Quelidônia	Iodo <sup>29</sup>
<i>Cissus verticillata</i> (L.) Nicolson & C.E.Jarvis / Vitaceae / Anil- trepador, cortina-japonesa	Insulina <sup>7,12,19,22</sup>
Croton gnaphalii Baill. / Euphorbiaceae / not found	Infalivina <sup>7</sup>
<i>Cymbopogon flexuosus</i> (Nees) Will.Watson * / Poaceae / Capim-cidró	Bromil <sup>34</sup>
Eucalyptus cinerea F. Muell. ex Benth.* / Myrtaceae / Eucalipto	Viqui and Viki <sup>12</sup>
<i>Gymnanthemum amygdalinum</i> (Delile) Sch.Bip. <i>ex</i> Walp.** / Asteraceae / Boldo, oró	Figatil <sup>28,29</sup>
Lepidium bonariense L. / Brassicaceae / not found	Olina <sup>14</sup>
Mentha arvensis L.* / Lamiaceae / Menta	Viqui and Viki <sup>24, 34</sup>
Mentha pulegium L.* / Lamiaceae / Poejo-das-hortas, poejo	Viqui and Viki <sup>24</sup>
<i>Pleroma urvilleanum</i> (DC.) P.J.F.Guim. & Michelang. (cited as <i>Tibouchina urvilleana</i> (DC.) Cogn.) / Melastomataceae / Tibuchina	Buscopan <sup>6</sup>
Polygala australis A.W.Benn. / Polygalaceae / not found	Gelol and Gelozinho <sup>13</sup>
Polygala paniculata L. / Polygalaceae / Barba-de-são-pedro	Gelol and Gelozinho <sup>6</sup>
<i>Salvia guaranitica</i> A.StHil. <i>ex</i> Benth. (cited as <i>Salvia coerulea</i> Benth.) / Lamiaceae / not found	Calmador <sup>13</sup>

Species / family / popular names	Popular name associated to manufactured drugs	
Salvia microphylla Kunth.* / Lamiaceae / Prontoalivio	Anador <sup>29</sup> , Aspirina <sup>19</sup> , Fontol <sup>24</sup> and Melhoral <sup>5,7,10,16,19,21,24,28</sup>	
Sedum dendroideum DC.* / Crassulaceae / Bálsamo	Ampicilina <sup>34</sup>	
Sphagneticola trilobata (L.) Pruski / Asteraceae / not found	Insulina <sup>6,13,16,19,21,22,20,26,27,29,31,33,34</sup>	
Stachys byzantina K.Koch* / Lamiaceae / Pulmonaria	Cataflan <sup>29</sup>	
<i>Tradescantia pallida</i> (Rose) D.R. Hunt * / Commelinaceae/ Trapoeraba-roxa, coração-roxo	Tetracilina <sup>32</sup>	

Ethnobotanical surveys (from 1997 to 2020): <sup>1</sup> = Zucchetti *et al.* (1997); <sup>2</sup> = Kubo (1997); <sup>3</sup> = Froehlich (1998); <sup>4</sup> = Briani Netto (1999); <sup>5</sup> = Garlet & Irgang (2001); <sup>6</sup> = Marodin & Baptista (2001); <sup>7</sup> = Possamai (2000); <sup>8</sup> = Fernandes (2001); <sup>9</sup> = Koch (2000); <sup>10</sup> = Ritter *et al.* (2002); <sup>11</sup> = Hass (2003); <sup>12</sup> = Leitzke (2003); <sup>13</sup> = Martha (2003); <sup>14</sup> = Sebold (2003); <sup>15</sup> = Veiga (2003); <sup>16</sup> = Zanandrea (2003); <sup>17</sup> = Löwe (2004); <sup>18</sup> = Silveira (2004); <sup>19</sup> = Soares *et al.* (2004); <sup>20</sup> = Barbosa (2005); <sup>21</sup> = Vendruscolo & Mentz (2006); <sup>22</sup> = Barros *et al.* (2007); <sup>23</sup> = Schwambach (2007); <sup>24</sup> = Ramos (2008); <sup>25</sup> = Casagrande (2009); <sup>26</sup> = Ceolin (2009); <sup>27</sup> = Vanini (2010); <sup>28</sup> = Baptista *et al.* (2013); <sup>39</sup> = Battisti *et al.* (2013); <sup>30</sup> = Löbler *et al.* (2014); <sup>31</sup> = Hentges (2015); <sup>32</sup> = Brião *et al.* (2016); <sup>33</sup> = Delfim (2019); <sup>34</sup> = Bremm *et al.* (2020). \* Cultivated; \*\* = Naturalized.

chemoreceptor system (flavor/odor) and/or cultural information (good or bad, useful or not useful, and values, symbolism, etc.). Taste might be a good principle, called an ethnopharmacophore descriptor (Gilca & Barbulescu 2015), for decision-making regarding the beneficial properties that specific medicinal plants provide for specific illnesses (Heinrich *et al.* 1992).

Following this concept, organoleptic properties could serve as cues for identifying the most efficient plants (Medeiros *et al.* 2015). Thusly, herbs can be classified according to their major constituents, taste and actions as bitter (amara), aromatic and aromatic-bitter (Kelber *et al.* 2018). Heinrich *et al.* (1992) found bitter, aromatic and aromatic-bitter plants to be particularly valued for the treatment of gastrointestinal cramps and pain. In addition, astringent drugs were valued to treat diarrhea and dysentery by an indigenous population in Mexico (Leonti *et al.* 2002).

Bitter substances stimulate gastric secretion and gastrointestinal motility (Kelber et al. 2018), promoting the flow of saliva, gastric juices and bile (Van Wyk & Wink 2004; Kelber et al. 2018) and thus enhance the function of the digestive system (Olivier & Van Wyk 2013). Evidence of a bitter taste was found for Gymnanthemum amydalinum (Kaur et al. 2019; Awwad et al. 2020) due to the presence of tannins and saponins (Kaur et al. 2019). Moreover, as stated earlier, this plant is popularly called boldo (Lorenzi & Matos 2008), and so it makes sense for it to be popularly called Figatil when compared with the commercialized phytotherapic Figatil®, which in turn contains the species Peumus boldus Molina, also popularly called boldo, however boldo-do-chile. Other species with bitter taste as a common feature were found, including *Calea serrata* Less., named 'bitter tea' (Ribeiro *et al.* 2008), and *Artemisia absinthium* L. (Awwad *et al.* 2020).

Aromatic plants are those that have significant essential oil content. For digestive disorders they present spasmolytic activity or stimulatory effects on peristalsis. Volatile oil and flavonoids are common chemicals of the genus Croton (Magalhães et al. 1998), many species of which are used in folk medicine for digestive treatments, such as C. eluteria Bennertt. and C. nepetaefolius Baill. The volatile oil of these species is composed mainly of monoterpenes (cineol, linalol), propanoids (eugenol, anetol) (Magalhães et al. 1998; Matos 2011) and sesquiterpenes (cariofileno) (Matos 2011), compounds that possess relaxant and antispasmodic activities (Magalhães et al. 1998). Volatile oils of some South American Croton species especially have antispasmodic and anti-diarrheic activities (Salantino et al. 2007). Evidence indicates that C. gnaphalii Baill., an endemic species of South America that is used by folk medicine for digestive disorders, has potential to be explored due to the history of genus for medicinal therapeutic use.

There are also bitter-aromatic plants, featured in this survey by *Achillea millefolium* and Artemisias (*Artemisia absinthium*, *A. verlotiorum* Lamotte and *A. vulgaris* L.), which have both bitter compounds and volatile oil in their composition. The species *A. absinthium*, for example, has sesquiterpene lactones, such as absinthin and artabsin, as bitter substances (Kelber *et al.* 2018), while saponins are the bitter compound of *A. vulgaris* (Kumar & Kumud 2010). In general, **Table 3** – Popular name associated with manufactured drugs of medicinal plants mentioned in ethnobotanical surveys in Rio Grande do Sul state, Brazil, with number of species cited for each name and the therapeutic classes associated with medicalized names.

Popular name associated with manufactured drugs of medicinal plants (number of species cited for each name)	Therapeutic classes	
Ampicilina (2 species)	Antibiotic	
Anador (8 species)	Analgesic and antipyretic	
Aspirina (2 species)	Analgesic, antipyretic and anti-inflammatory	
Atroveran (1 species)	Antispasmodic	
Bactrin (1 species)	Analgesic, antipyretic and anti-inflammatory	
Bromil (1 species)	Expectorant	
Buscopan (1 species)	Antispasmodic	
Calmador (2 species)	Analgesic and antipyretic	
Cataflan (3 species)	Anti-inflammatory	
Dipirona (1 species)	Analgesic and antipyretic	
Doril (1 species)	Analgesic and antipyretic	
Figatil* (1 species)	Digestive	
Fontol (1 species)	Analgesic and antipyretic	
Gelol (2 species)	Topical analgesic	
Infalivina* (7 species)	Digestive	
Insulina (3 species)	Antidiabetic	
Iodo (1 species)	Antiseptic	
Melhoral (2 species)	Analgesic, antipyretic and anti-inflammatory	
Meracilina (1 species)	Antibiotic	
Novalgina (4 species)	Analgesic and antipyretic	
Olina* (3 species)	Digestive	
Penicilina (1 species)	Antibiotic	
Terramicina (1 species)	Antibiotic	
Tetraciclina (1 species)	Antibiotic	
Viqui (3 species)	Expectorant	

\* = Phytotherapic

the genus Artemisia has flavonoids (Valant-Vetschera et al. 2003) and essential oil (Biondi et al. 2000; Bellomaria et al. 2001) as common phytochemicals, at least mostly at the species and subspecies level. All species of Artemisia in the present survey (A. absinthium, A. verlotiorum and A. vulgaris) contain the secondary metabolite flavonoid (see Tab. 1), with A. verlotiorum being an exception to having a bitter substance in its composition. Three important phytochemical components (bitter substances, essential oil and flavonoids) for digestive disorders are present in *A. absinthium* and *A. vulgaris; Achillea millefolium* also possesses those same three phytochemicals (Benedek *et al.* 2006; Lemmens-Gruber *et al.* 2006; Pires *et al.* 2009).

Commercial name of the phytotherapic	Species / family contained in the herbal formula marketed	Species / family indicated in the ethnobotanical surveys
Figatil®	Cynara scolymus L. (Asteraceae) Peumus boldus Molina (Monimiaceae)	<i>Gymnanthemum amygdalinum</i> (Delile) Sch. Bip. <i>ex</i> Walp. (Asteraceae)
Infalivina <sup>®</sup>	Solanum paniculatum L. (Solanaceae) Simarouba amara Aubl., Quassia amara L. (Simaroubaceae)	Achillea millefolium L., Artemisia absinthium L., Artemisia verlotiorum Lamotte, Artemisia vulgaris L., Calea serrata Less. (Asteraceae) Croton gnaphalii Baill. (Euphorbiaceae)
Olina®	<i>Gentiana lutea</i> L. (Gentianaceae) <i>Aloe ferox</i> Mill. (Asparagaceae)	Artemisia vulgaris L., Calea serrata Less. (Asteraceae) Lepidium bonariense L. (Brassicaceae)

**Table 4** – Commercial name of phytotherapics with species/family contained in the formulas and the species indicated in ethnobotanical surveys with the same name of the phytotherapic.

*Lepidium bonariensis* L. was the only species that could not be classified according to the three taste groups. This lack of information may be due to the fact that *Lepidium* is an endemic genus for which there has not been significant research, even at the genus level. Further studies are recommended for the genus.

From the phytochemical perspective applied to digestive disorders, bitterness is due to the presence of secondary substances such as saponins (Kaur *et al.* 2019), sesquiterpene lactones (Chadwick *et al.* 2013) and caffeine (Yamanishi 1995). Other substances related to digestive disorders include tannins, present in astringent plants (Heinrich *et al.* 1992; Leonti *et al.* 2002) and used to treat diarrhea and dysentery; flavonoids, which have a broad spectrum of relevant actions, such as spasmolytic, anti-inflammatory, and antioxidative properties; and essential oil, responsible for spasmolytic activity or stimulatory effects on peristalsis (Kelber *et al.* 2018).

# Chemical and pharmacological information

Seven species, among those representing the 25 denominated manufactured drug names, have been pharmacologically studied with regard to at least one of the eight therapeutic classes suggested by popular knowledge: digestive, antispasmodic, analgesic, antipyretic, antiinflammatory, expectorant, topical analgesic and antidiabetic (Tab. 5). The species *Achillea millefolium*, *Eucalyptus cinerea* F. Muell. *ex*  Benth. and *Sphagneticola trilobata* were studied by laboratory tests for 100% of the classes indicated by the popular name evaluated, while *Alternanthera brasiliana* was in 75% and *Artemisia absinthium, A. verlotiorum* and *A. vulgaris* in 50%.

The anti-inflammatory action popularly attributed to *Alternanthera brasiliana* and *Achillea millefolium* can be attributed to the presence of phenolic derivatives and flavonoids. Other species that have also presented this activity in pharmacological tests are: *Alternanthera ficoidea* (L.) P. Beauv. (Guerra *et al.* 2003; Biella *et al.* 2008), *Artemisia vulgaris* (flavonoids and terpenoids) (Kumar & Kumud 2010), *Gymnanthemum amygdalinum* (Valverde *et al.* 2001), *Mentha arvensis* L. (Verma *et al.* 2003) and *Sphagneticola trilobata* (Maldini *et al.* 2009).

The species Artemisia vulgaris, Alternanthera brasiliana and Achillea millefollium have been shown to present analgesic activity. Rutin (glycosylated flavonol) and caffeic acid derivatives with analgesic activity were identified in Achillea millefolium (Pires et al. 2009), as previously indicated by Gené et al. (1996) and Ficarra et al. (1995).

*Gymnanthemum amygdalinum* presented hypocholesterolemic (Arantes *et al.* 2016) and gastroprotective (Boeing *et al.* 2016) activities.

Diterpenes (caurenoic acid) were found in *Sphagneticola trilobata*, with hypoglycemic activity confirmed by laboratory tests (Bresciani *et al.* 2004).

Species	Therapeutic class indicated by popular names	Therapeutic class according to scientific studies	Chemical compound / Class
Achillea millefolium L.	Analgesic (Anador, Aspirina, Atroveran and Dipirona), anti-inflammatory (Aspirina), antipyretic (Anador, Aspirina and Dipirona), antiespasmodic (Atroveran), digestive and herbal medicine (Infalivina)	Analgesic (Pires <i>et al.</i> 2009), antiespasmodic (Benedek <i>et al.</i> 2006; Lemmens-Gruber <i>et al.</i> 2006; Moradi <i>et al.</i> 2013), anti-inflammatory and antipyretic (Lemmens-Gruber <i>et al.</i> 2006), choleretic activity (Benedek <i>et al.</i> 2006), digestive (Benedek <i>et al.</i> 2006; Lemmens-Gruber <i>et al.</i> 2006)	Flavonoid (Lemmens-Gruber <i>et al.</i> 2006), flavonoid (rutin) and caffeic acid derivatives (Pires <i>et al.</i> 2009), phenolic derivative - cafeoilquinic acid (Benedek <i>et al.</i> 2006)
Acmella ciliata (Kunth) Cass.	Digestive (Infalivina)	Not found	Quercetin-3-O-glycosides and caffeoylquinic acid derivatives (Jenett-Siems <i>et al.</i> 2008; Kasper <i>et al.</i> 2009)
Alternanthera bettzickiana (Regel) G. Nicholson	Analgesic and antipyretic (Anador)	Antiarthritic (Manan <i>et al.</i> 2020)	Gallic acid, catechin, chlorogenic acid, sinapic acid, quercetin, and $\gamma$ - and $\alpha$ -tocopherol (Manan <i>et</i> <i>al.</i> 2020)
Alternanthera brasiliana (L.) Kuntze	Analgesic (Anador and Novalgina), antibiotic (Ampicilina, Bactrin, Meracilina, Penicilina and Terramicina), anti- inflammatory (Cataflan), antipyretic (Anador and Novalgina)	Analgesic (Souza <i>et al.</i> 1998; Macedo <i>et al.</i> 2004), antibiotic (Caetano <i>et al.</i> 2002; Pereira <i>et al.</i> 2007; Trapp <i>et al.</i> 2015), anti- inflammatory (Brochado <i>et al.</i> 2003)	Terpenoid ( $\beta$ - sitoesterol) (Macedo <i>et al.</i> 2004), flavonoid (Brochado <i>et al.</i> 2003; Alencar Filho <i>et al.</i> 2020), hydrocarbons, diterpenes, monoterpenes, vitamin and carotenoid derivatives, phytosterols and triterpenes (Alencar Filho <i>et al.</i> 2020)
Alternanthera paronychioides A. StHil.	Analgesic and antipyretic (Anador, Calmador, Doril)	Not found	Polyphenolics (Wu et al. 2013)
Alternanthera reineckii Briq.	Analgesic and antipyretic (Anador)	Not found	Not found
Alternanthera tenella Colla (cited as A. ficoidea (L.) P.Beauv.)	Analgesic and antipyretic (Anador, Melhoral)	Anti-inflammatory (Biella <i>et al.</i> 2008)	Tannin and flavonoids (Biella <i>et al.</i> 2008), Steroids, saponins and flavonoids (aglycones and C-glycosides) (Salvador <i>et al.</i> 2009)
Artemisia absinthium L.	Herbal medicine and digestive (Infalivina)	Digestive (Amat <i>et al.</i> 2010; Gilani & Janbaz 1995), Hepatoprotective effect (Amat <i>et al.</i> 2010), Hepatobiliary diseases (Gilani & Janbaz 1995)	Ascorbic acid (Slepetys 1975), carotenoids (Sergeeva & Zakharova 1977), flavonoid (Hoffmann & Herrmann 1982), lignoids (Greger & Hofer 1980), tanins (Slepetys 1975)

 Table 5 – Phytochemical and pharmacological information for plant species with popular names associated with manufactured drugs used by popular medicine in southern Brazil.

Species	Therapeutic class indicated by popular names	Therapeutic class according to scientific studies	Chemical compound / Class
Artemisia annua L.	Analgesic and antipyretic (Novalgina)	Antitumor activity (Lang <i>et al</i> . 2019)	Chrysosplenol D, arteannuin B, and casticin (Lang <i>et al.</i> 2019)
Artemisia verlotiorum Lamotte	Analgesic and antipyretic (Novalgina), digestive (Infalivina)	Anticonvulsant and analgesic (partially) (Lima <i>et al.</i> 1993)	Essential oils (Bedini et al. 2019)
Artemisia vulgaris L.	Analgesic (Anador), antipyretic (Anador), herbal medicine and digestive (Infalivina and Olina)	Analgesic (Kumar & Kumud 2010), digestive and hepatoprotective effect (Gilani <i>et al.</i> 2005)	Flavonoids and saponins (Kumar & Kumud 2010)
Aspilia montevidensis (Spreng.) Kuntze	Antidiabetic (Insulina)	Not found	Steroidal saponin, 7-oxostigmasterol and saponinas (Bellini <i>et al.</i> 1999)
Calea serrata Less.	Digestive (Infalivina, Olina)	Acaricid (Ribeiro et al. 2011)	Chromene (Steinbeck <i>et al.</i> 1997), essential oils and precocene (Ribeiro <i>et al.</i> 2011)
Chelidonium majus L.	Antiseptic (Iodo)	Cytotoxic activities (Krizhanovska <i>et al.</i> 2021), anti-inflammatory activities (Huang <i>et al.</i> 2019)	Alkaloids and flavonoid (Krizhanovska <i>et al.</i> 2021), lignanamides and alkaloids (Huang <i>et al.</i> 2019)
<i>Cissus verticillata</i> (L.) Nicolson & C.E.Jarvis	Antidiabetic (Insulina)	Not found	Phenolic compounds (specifically tannin), lipids, essential oils (Oliveira <i>et al.</i> 2012)
<i>Croton gnaphalii</i> Baill.	Digestive (Infalivina)	Not found	Acylated glycoside (tilirosid) (Lencina <i>et al.</i> 2001)
<i>Cymbopogon flexuosus</i> (Nees) Will. Watson	Expectorant (Bromil)	Antimicrobial activity (Gao et al. 2020)	Essencial oils (Gao et al. 2020)
<i>Eucalyptus cinerea</i> F. Muell. <i>ex</i> Benth.	Expectorant (Viqui and Viki)	Expectorant (Oyedeji <i>et al.</i> 1999), respiratory tract diseases - antimicrobial (Oyedeji <i>et al.</i> 1999; Soliman <i>et al.</i> 2014; Sebei <i>et al.</i> 2015)	Essential oils (Sebei et al. 2015)
<i>Gymnanthemum amygdalinum</i> (Delile) Sch.Bip. <i>ex</i> Walp.	Digestive (Figatil)	Analgesic and anti- inflammatory ( <i>Vernonia</i> <i>condensata</i> Baker) (Valverde <i>et al.</i> 2001), anti- inflammatory ( <i>Vernonia</i> <i>condensata</i> Baker) (Silva <i>et</i> <i>al.</i> 2017)	Vernonioside B2 ( <i>Vernonia</i> condensata Baker) (Valverde et al. 2001), 1,5-dicaffeoylquinic acid, apigenin, luteolin, chlorogenic acid) ( <i>Vernonia</i> condensata Baker) (Silva et al. 2017)
<i>Lepidium bonariense</i> L.	Digestive (Olina)	Antimicrobial (Swart et al. 2002)	p-Methoxybenzylisothiocyanate (Swart et al. 2002)
<i>Mentha arvensis</i> L.	Expectorant (Viki ou Viqui)	Anti-inflammatory (Verma et al. 2003; Kim et al. 2021)	Essential oils (Kim et al. 2021)

Medicinal plants associated with manufactured drugs

Species	Therapeutic class indicated by popular names	Therapeutic class according to scientific studies	Chemical compound / Class
Mentha pulegium L.	Expectorant (Viki ou Viqui)	Antioxidant (Bektašević <i>et al.</i> 2021), antimicrobial (Luis & Domingues 2021)	Essential oils (Bektašević <i>et al.</i> 2021); pulegone (Luis & Domingues 2021)
Pleroma urvilleanum (DC.) P.J.F.Guim. & Michelang. (cited as <i>Tibouchina urvilleana</i> (DC.) Cogn.)	Antispasmodic (Buscopan)	Not found	Triterpenes, flavonoids and sterols ( <i>Tibouchina urvilleana</i> ) (Pérez-Castorena 2014)
Polygala nustralis A.W.Benn.	Topical analgesic (Gelol, Gelolzinho)	Not found	Not found
Polygala paniculata L.	Topical analgesic (Gelol, Gelolzinho)	Hypotensive and vasorelaxant effects (Lapa <i>et al.</i> 2011)	Coumarins (Hamburger <i>et al.</i> 1985), flavonoids (rutin) (Lapa <i>e</i> <i>al.</i> 2011)
Salvia guaranitica A.StHil. ex Benth. (cited as Salvia coerulea Benth.)	Analgesic and antipyretic (Calmador)	Sedative and hypnotic (Marder <i>et al.</i> 1996; Viola <i>et al.</i> 1997)	Essential oils (sesquiterpene hydrocarbons: germacrene D, $\beta$ -elemene, $\beta$ -caryophyllene, $\beta$ -bourbonene, monoterpenes) (Vallverdú <i>et al.</i> 2005); flavonoid (circiliol) (Marder <i>et al.</i> 1996; Viola <i>et al.</i> 1997) by <i>S.</i> <i>guaranitica</i>
Salvia microphylla Kunth	Analgesic and antipyretic (Anador, Aspirina, Fontol and Melhoral)	Antimicrobial activity (Aydoğmuş <i>et al.</i> 2006)	Phenolic ester 2-(p-hydroxyphenyl) ethyl eicosaheptanoic acid ester, hexacosylferulate, sesquiterpene beta-eudesmol, 8alpha-hydroxy- beta-eudesmol, diterpene carnosic acid 12-methyl ether (12-methoxycarnosic acid), triterpenes erithrodiol 3-acetate, oleanolic acid, lupeol and beta- sitosterol (Aydoğmlş <i>et al.</i> 2006)
Sedum dendroideum DC.	Antibiotic (Ampicilina)	Antioxidant and gastroprotective (Luz <i>et</i> <i>al.</i> 2019), decreases the proliferation of pterygium fibroblasts (López- Montemayor <i>et al.</i> 2021)	Flavonol glycosides (myricetin, quercetin, kaempferol) (Luz <i>et</i> <i>al.</i> 2019); phenolic compounds (López-Montemayor <i>et al.</i> 2021)
Sphagneticola trilobata (L.) Pruski	Antidiabetic (Insulina)	Antidiabetic (Bresciani <i>et al.</i> 2004), hypoglycemic (Bresciani <i>et al.</i> 2004)	Diterpenes - Kaurenoic acid derivative (ent-16-kauren-19-oic acid) (Bresciani <i>et al.</i> 2004)
Stachys byzantina S.Koch	Anti-inflammatory (Cataflan)	Antimicrobial activities (Jassbi <i>et al.</i> 2013)	Essential oils – sesquiterpenes (a-copaene, spathulenol and beta-caryophyllene (Khanavi <i>et</i> <i>al.</i> 2004)
<i>Tradescantia pallida</i> (Rose) D.R. Hunt	Antibiotic (Tetraciclina)	Not found	Not found

# Correspondence between popular uses and the biomedical system

The medicinal species popularly known as anador, doril, figatil and melhoral showed 100% agreement between the popular indications, which were compared with all the indications on the drug's package insert. It should be noted that this percentage does not consider the versatility of uses of the species and of the drug package insert and that those with 100% concordance of uses may only have one use and that this use is indicated by the insert of the manufactured drugs. Although all the popular indications were found in the package insert, some of the indications in the leaflet may not have been reported by the population.

This finding suggests that the use of the name of a drug for the name of a medicinal plant may be associated with the uses that are indicated by manufactured drugs, regardless of the origin of the species (native or exotic). This "hybridization" (see Ladio & Albuquerque 2014) involving biomedicine and the local medical system, in the context of this research, expresses a double movement with the decontextualization of the names of medicines and their recontextualization in the names of medicinal plants. This process is particularly important for the species of the present study since it is possible that these species have been named after manufactured drugs because their therapeutic effects may be compatible with the medicines. In fact, people name plants after medicines manufactured to treat the same symptoms and illnesses, while the use of the previous popular name gradually ceases. Such a new name is often only known regionally and used for different species.

Physical, psychic, and social aspects are considered important in the healing process in medical systems (Kleinman 1978). Thus, psychosocial needs (a group's idea about the feeling of "comfort") represented by the popular names based on medicines attributed to medicinal plants may be a symbolic representation, given by the 'status syndrome' (see Marmot 2004), recontextualizing the names of medicinal products from medicinal plants. Semantic analysis of the nomenclature employed can demonstrate links and implications that the dominant medical system (Western medicine) establishes (Kleinman 1978; Helman 2009). These vernacular assignments may induce safety or credibility in their efficacy by assigning to the available resource a nomenclature belonging to the current biomedical system, that is, a cultural legitimization of biomedical treatment with popular therapeutics. This process is a twoway street, because just as the biomedical system influences popular use, popular medicine, based on this initial recontextualization, can increase the process of experimentation by incorporating new therapeutic properties.

Regarding the symptoms that marketed phytotherapeutics and folk therapeutics are prescribed for, the main activities prescribed by the former were spasmodic, choleretic and carminative. These activities were correlated with the studied species: (1) the majority of the species of the present research have flavonoids in their composition (Tab. 3), which, as mentioned previously, have spasmolytic activity for digestive disorders (Kelber et al. 2018) acting as an antispasmodic agents they promote muscle (gastrointestinal and abdominal) relaxation, thereby reliving the discomfort associated with indigestion, diarrhea, etc., and decreasing the pain and spasms related to muscle contraction (Hicks 2007); (2) bitter plants have substances that stimulate gastric secretion and gastrointestinal motility (Kelber et al. 2018); (3) aromatic plants possess volatile oil that stimulates gastric secretions and antispasmodic activity (Magalhães et al. 1998); (4) aromatic-bitter plants, such as Achillea millefolium as representative of the group, have been shown by pharmacological studies to have choleretic (Benedek et al. 2006), antispasmodic (Lemmens-Gruber et al. 2006; Kelber et al. 2018) and carminative activities (Kelber et al. 2018). The last is related to Infalivina<sup>®</sup>, which is prescribed for intestinal gas reduction. Interestingly, the genus Achillea is popularly named as Infalivina and has the same therapeutic use, demonstrating that folk names have been influenced by the medical system.

The present ethnobotanical survey conducted in Rio Grande do Sul, southern Brazil, revealed an interaction between the biomedical system and popular medicine, namely the use of medicine names for medicinal plants. Two important observations were made: (1) this phenomenon is independent of plant origin (native or exotic) and (2) a correspondence exists between the therapeutic use of plants and that of the manufactured medicines for which they are named.

Species with popular names associated with commercialized phytotherapeutics were not given these names at random. The names were found to be correlated, with both being prescribed for digestive disorders. Findings here indicate that taste might be a criterion for folk plant selection, resulting in three groups: bitter, aromatic and aromatic-bitter plants. The phytochemical substances responsible for digestive treatment are saponins, caffeine, sesquiterpene lactones, tannins, flavonoids and essential oil, the main actions of which are spasmodic, choleretic and carminative activities.

The cultural aspects of this phenomenon, its origin and its meaning to the population still remain unclear, and so further and more extensive research at the sites where the present surveys were conducted are needed in order to better understand its significance and cultural dynamics. These future investigations can clarify aspects of the dynamics and evolution of local medical systems and generate implications for bioprospection, including the search for plants with potential to reveal new bioactive compounds of pharmacological interest.

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### Data availability statement

In accordance with Open Science communication practices, the authors inform that all data are available within the manuscript.

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14 of 19

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