

Tropical Journal of Natural Product Research





Available online at https://www.tjnpr.org

Original Research Article

Analysis of herbal poultices for knee pain relief in hospitals in the Office of the Permanent Secretary, Ministry of Public Health, Thailand

Aumpol Bunpean^{1*}, Noppcha Singweratham²

¹Faculty of Public Health and Allied Health Sciences, Praboromarajchanok Institute, Ministry of Public Health, Nonthaburi 11000, Thailand.
²Faculty of public health, Chiang Mai University, Chiang Mai 50200, Thailand

ARTICLE INFO

Article history:
Received 22 December 2024
Revised 19 January 2025
Accepted 26 January 2025
Published online 01 March 2025

Copyright: © 2025 Aumpol . This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

ABSTRACT

This qualitative research aimed to collect and analyze herbal poultices used for relieving knee pain in hospitals in the Office of the Permanent Secretary of the Ministry of Public Health, Thailand. The study was conducted through interviews with Thai traditional medicine doctors at 33 hospitals, using purposive sampling from the prototype areas designated by the Department of Thai Traditional Medicine Development. The gathered information was then analyzed and compiled to provide insights into traditional Thai medicine and the science of herbs used in these recipes. The results revealed 39 medicinal formulas consisting of 61 species from 34 families, with Zingiber montanum being the most common (24 formulas, 61.54%). The plant part most commonly used was the leaf (22 species), and the predominant flavor was bitter (36.67%). Two groups of formulas were identified: hot formulas, with the main component being carminative, the secondary component being muscle relaxant, and assembled component being antiinflammatory; and cold formulas, with the main component being anti-inflammatory, the secondary component being muscle relaxant, and assembled component being carminative. These findings highlight that the components of the herbal remedies used in most knee poultice formulas in hospitals are largely consistent with previous studies, which have demonstrated antiinflammatory properties and pain relief effects. Further in-depth studies should be conducted to investigate their effectiveness in relieving knee pain.

Keywords: Formula, Herbal poultice, Knee pain, Hospital

Introduction

Currently, various drugs are used to treat knee pain and inflammation, including acetaminophen and non-steroidal anti-inflammatory drugs (NSAIDs). Narcotic pain relievers, including intra-knee administration, are also utilized. Additionally, the use of analgesics targeting specific pathways in osteoarthritis has been studied and is increasing. Examples of these drugs include glucosamine sulfate, chondroitin sulfate, and diacerein. Surgery is considered when medication is ineffective or unable to adequately treat the condition. This may be due to persistent pain, significant joint damage or deformity, or complications such as bone collapse. Several surgical treatments are available, each with specific indications. These include arthroscopic procedures to remove foreign bodies and improve joint condition, bone trimming and realignment to correct deformities, and joint replacement surgery.1 The problem with modern medical treatments is that patients often experience side effects, such as ulcers in the gastrointestinal tract from taking anti-inflammatory drugs, gastrointestinal bleeding, addiction to antidepressants, and overuse of medications.² In response to this issue, the concept of integrative medicine has been introduced to provide patient care, aiming to minimize the introduction of chemicals into the body while upholding the principles of holistic care. ³

*Corresponding author. E mail: <u>aumpol@kmpht.ac.th</u>

Tel: +660903648886

Citation Bunpean A, Singweratham N. Analysis of herbal poultices for knee pain relief in hospitals in the Office of the Permanent Secretary, Ministry of Public Health, Thailand. Trop J Nat Prod Res. 2025; 9(2): 776 – 781 https://doi.org/10.26538/tjnpr/v9i2.46

Official Journal of Natural Product Research Group, Faculty of Pharmacy, University of Benin, Benin City, Nigeria

Thai traditional medicine has also begun to address issues for patients with osteoarthritis, focusing on pain reduction and empowering patients to take part in their own care. This approach helps alleviate the burden on caregivers and reduce costs associated with medication and surgery. Various traditional Thai medical methods are available for managing osteoarthritis, including massage, compresses, and poultices.4 many studies confirm the effectiveness of knee wraps. A study on the efficacy of knee poultices for pain relief in patients with osteoarthritis, using a 15-minute herbal poultice in 36 patients, found that knee pain levels, stiffness, and walking time were significantly reduced compared to before the trial. Additionally, knee joint operability showed a statistically significant improvement at 0.001.5 The effectiveness of herbal poultices for osteoarthritis pain was also examined in a study involving 37 patients. The results showed that a 20-minute herbal poultice significantly reduced osteoarthritis pain in elderly patients, with statistical significance at 0.001.6 Based on this information, the researcher recognized the importance of studying herbal knee poultices used in hospitals in the Ministry of Public Health as a basis for further investigation. This qualitative research aimed to collect and analyze data on herbal poultices for knee pain relief in hospitals in the Office of the Permanent Secretary of the Ministry of Public Health, Thailand. The research contributes to the growing body of knowledge on traditional medicine by providing insights into the practical applications of herbal poultices within Thailand's healthcare system. The novelty of this study lies in its qualitative approach to understanding the integration of traditional therapies in hospital settings, addressing gaps in existing literature.

Materials and Methods

Research design

This qualitative research aimed to collect and analyze herbal poultices for knee pain relief in hospitals in the Office of the Permanent Secretary

of the Ministry of Public Health. This protocol was approved by the institutional review boards of Kanchanabhisek Institute of Medical and Public Health Technology, Faculty of Public Health and Allied Health Sciences Praboromarajchanok Institute. The license number is KMPHT-65010011.

Population and Sample group

The sample consisted of 33 Thai traditional medicine doctors affiliated with hospitals in the Office of the Permanent Secretary of the Ministry of Public Health, Thailand. They were selected through purposive sampling from prototype areas of the Department of Thai Traditional and Alternative Medicine and agreed to provide information during the interview.

Research Instrument

This survey involves interviews and consists of the following questions: 1. Pharmacopoeial formulations; 2. the method of substance extraction, including the extraction process and extract obtained; and 3. the method of utilization

Validity

Content validity was assessed by 3 experts:

- 1. Assistant Professor Dr. Benjawan Poonthananiwatkul, Pharmacist, affiliated with the Kanchanabhishek Institute of Medical and Public Health Technology
- 2. Assistant Professor Dr. Kittiporn Nawsuwan, Public Health Specialist, affiliated with the Boromarajonani College of Nursing, Songkhla.
- 3. Miss Patama Chantarapon, Traditional Thai Medicine Practitioner, affiliated with the Songkhla Provincial Public Health Office.

The results were analyzed, and an index of Item-Objective Congruence (IOC) value of 0.69 was obtained.

Research methods and Data Collection

The study defined and coordinated secondary facilities for knee joint treatment using herbal poultices and conducted interviews on Thai Traditional Medicine recipes, focusing on extraction methods and applications. The study also verified the accuracy and completeness of the collected data. It identified and documented the scientific names, family names, and flavours of the herbal medicines.

Data Analysis

- 1. Analyzed the components of the formulation, including the medicinal plant family, parts of plants used, taste of herbal medicine, and frequency of herbs used in recipes. ⁷
- 2. Classified the formulations into hot and cold groups based on their pharmacological actions 8
- 3. Categorized drug groups according to traditional pharmaceutical principles by identifying primary drugs, secondary drugs, and accompanying drugs.⁹

Results and Discussion

Ingredients in the Pharmacopoeia

According to a survey of 33 hospitals, 39 formulations were provided to patients, comprising 83 types of herbal knee poultice formulations. These formulations were classified into three categories: herbs, starches, and liquids used in mixing/extraction. Among these, 68 types of herbs were identified, consisting of 61 plant species (73.50%), 1 animal material (1.20%), 6 mineral elements (7.23%), and 5 types of flour, namely rice flour, betel nut flour, wheat flour, and brown rice powder (6.02%). Additionally, there were 11 types of liquids, including alcohol, liquor, red lime, Plai oil, ginger oil, sesame oil, chili oil, coconut oil, and Vaseline (13.25%). The poultice is effective when the medication is in contact with the skin for a period of time, so a binding agent is used to make the medication adhere to the skin more effectively. This aligns with a study by Aumpol Bunpean, who developed a knee poultice slime for patients with knee pain at Ratchaphiphat Hospital, Bang Khae District, Bangkok. The formulation includes a slime, infused with oil to extract the essence, and a mixture of clear water glue and rice flour to form the slime for better adherence to the skin. 10

Family of medicinal plants

From the 61 medicinal plants, a total of 34 families were identified. The top three most common families are Zingiberaceae, with 9 species (15.00%), followed by Euphorbiaceae and Acanthaceae, each with 6 species (8.33%), indicating that Zingiberaceae is a readily available plant in Thailand, mostly used as spices or herbs, thus promoting widespread adoption. This finding is consistent with the study conducted by Korkanok. A survey of medicinal plants used by the Karen people at Huay Nak Village and Nong Ta Dang Dog House, Tanao Si Subdistrict, Suan Phueng District, Ratchaburi Province, revealed that the most frequently used herb belongs to the Zingiberaceae family.

Parts of medicinal plants used

The various parts of the 61 medicinal plants were utilized in different ways, with 9 components being identified. The most commonly used were leaf parts, found in 22 species (36.07%), followed by rhizome tubers in 12 species (19.67%) and the whole plant in 10 species (16.39%). Leaves typically absorb water and minerals from the soil, transferring them to various parts of the plant, while roots serve as a reservoir of nutrients. This finding is consistent with research by Suntree Chintham et al., who studied the diversity of medicinal plants and local wisdom through community participation in the Ban Dong Bang area of Dongchileik Muang District, Prachinburi Province. Their research revealed that the most common medicinal uses from herbs were derived from leaves and shoots. 12 In line with Oratai Neamsuvan's research, Patcharawalai et al. surveyed medicinal plants used for nourishment from the Ban Thung Sung Community Forest, Ao Luek District, Krabi Province, and found that the most commonly used part is the underground portion.¹³ When considering the botanical families of medicinal plants, the Zingiberaceae family was the most prevalent. Hendrikus Julung's study on this family indicated that rhizomes were the most commonly used plant part, particularly among ginger species.

${\it Flavor\ of\ herbal\ medicine}$

When classified according to the 10 medicinal flavors, the three most common flavors are bitter, found in 22 species (36.07%), followed by spicy, present in 19 species (31.15%), and tasteless, identified in 9 species (14.75%). It is explained that the bitter taste in traditional Thai medicine stimulates more phlegm and reduces the functioning of the pitta system, thereby reducing inflammation from knee pain. The hot taste helps to effectively calm the wind, making it ideal for stimulating blood circulation around the knee joint. This finding is consistent with the research of Thanatchaporn Nutmakul, who conducted a study on the taste of drugs affecting the classification of medicines. The classification analysis revealed that in the corrective drug group, the highest proportion of drugs had a bitter taste, followed by tasteless and spicy drugs. Regarding challenging recipes, the group of fragrant medicines and carminative drugs has the largest proportion of spicy medicines, followed by bitter ones. ¹⁵

Frequency of use of herbs in recipes

Among the 39 pharmacopoeial formulations, Plai was the most frequently used ingredient, appearing in 24 recipes (61.54%), followed by ginger and Climbing Lily, each found in 14 recipes (38.89%). Borneol was also commonly used, appearing in 10 recipes (25.64%), while duck eggs were used in only one recipe (2.56%). Regarding the starches, rice flour was the most frequently used, included in 12 recipes (30.77%), followed by betel nut flour, which was found in 9 recipes (25.08%). For the liquids used in mixing or extraction, alcohol was the most prevalent, included in 20 recipes (51.28%), followed by lime water in 14 recipes (35.90%) and Plai oil in 10 recipes (25.64%). Plai is known to contain (E)-4-(3,4-dimethoxyphenyl) but-3-en-1-ol, which exhibits anti-inflammatory effects. ¹⁶ Ginger contains Zingerone, which has anti-inflammatory effects and helps prevent cartilage breakdown. ¹⁷ and Climbing Lily

Table 1: Family names, scientific names/name, parts used, medicinal flavors and number of recipes used in herbal knee poultice formulation ingredients

	family names	scientific name/name	parts used	medicinal flavors	number o recipes
	Acanthaceae	Acanthus ebracteatus Vahl	leaf	salty	1
	Acanthaceae	Andrographis paniculata (Burm.f.) Nees	leaf	bitter	5
	Acanthaceae	Clinacanthus nutans (burm.f.) Lindau	leaf	Insipid	2
	Acanthaceae	Barleria lupuina Lindl.	leaf Insipid		1
	Acanthaceae	Gendarussa vulgaris Nees.	leaf Insipid		2
	Acanthaceae	Justicia gendarussa Linn	leaf	Insipid	1
	Acoraceae	Acorus calamus L.	tuber-	acrimonious	1
	Acoraceae	Acorus caiamus L.	rhizome	acrimonious	1
	Amaryllidaceae	arvllidaceae Crinum asiaticum L.		drunken herbs	6
			leaf	bitter	1
	Apocynaceae- Periplocoideae	Cryptolepis dubia (burm.f.) M.R.Almeida	vine	onter	1
)	Asphodelaceae (Liliaceae)	Aloe vera (L.) Burm.f.	sap	bitter	1
1	Asteraceae	Blumea balsamifera (L.) DC.	leaf	Cool scent	1
2	Asteraceae	Elephantopus scaber L.	Whole tree	Insipid	1
3			Whole tree	Insipid	1
	Boraginaceae	Heliotropium indicum L.		•	
4	Capparaceae	Capparis micracantha DC.	root	bitter	3
5	Cleomaceae	Cleome viscosa L.	leaf	. hot	6
6 Colchicaceae (Liliaceae)		Gloriosa superba L.	tuber- rhizome	acrimonious	14
7	Costagos	Contro speciosus (Voca) Su		Incinid	2
7	Costaceae	Costus speciosus (Koen.) Sm.	tuber-	Insipid	2
0	G. I'i		rhizome	T	_
8	Cucurbitaceae	Coccinia grandis (L.) Voigt	leaf	Insipid	1
9		Gymnopetalum scabrum (Lour.) W.J. de Wilde & Duyfges	vine	bitter	1
0	Euphorbiaceace	Bridelia ovata Decne.	leaf	bitter	1
1	Euphorbiaceace	Putranjiva roxburghii Wall.	leaf	bitter	1
2	Euphorbiaceace	Euphorbia hirta L.	Whole tree	bitter	1
3	Euphorbiaceace	Phyllanthus amarus Schumach & Thonn.	Trunk and	bitter	1
.3	_		root	ontei	1
4	Euphorbiaceace	Phyllanthus urinaria L.	Whole tree	bitter	1
5	Labiatae	Clerodendrum petasites (Lour.) S. Moore	root	bitter	3
6	Leguminosae- Caesalpinioideae	Acacia concinna (Willd.) DC.	leaf	sour	4
.7	Leguminosae- Caesalpinioideae	Senna siamea (Lam.) H.S. Irwin & Barneby	leaf	bitter	1
8	Leguminosae- Caesalpinioideae	Tamarindus indica L.	leaf	sour	3
9	Leguminosae- Papilionoideae	Sophora tomentosa L.	Fruit	bitter	1
0	Malvaceae	Sida acuta Burm.f.	Whole tree	Cool scent	1
1	Meliaceae	Azadirachta indica A. Juss. var. siamensis Valeton	leaf	bitter	1
2	Menispermaceae	Tiliacora triandra (Colebr.) Diels	leaf	bitter	4
3	Menispermaceae	Tinospora crispa (L.) Miers ex Hook.f. & Thomson	vine	bitter	2
1	Moringaceae	Moringa oleifera Lam.	leaf	bitter	1
5	Moraceae	Ficus racemose L.	root	bitter	3
					1
5	Myrtaceae	Syzygium aromaticum (L.) Merr.&L.M.Perry	blossom	acrimonious	
7	Meliaceae	Azadirachta indica A. Juss. var. siamensis Valeton	leaf	bitter	1
8	Pandanaceae	Pandanus amaryllifolius Roxb.	leaf	Cool scent	1
)	Papilionaceae	Derris scandens (Roxb.) Benth.	vine	drunken herbs	1
)	Piperaceae	Piper retrofractum Vahl	blossom	acrimonious	6
l	Piperaceae	Piper nigrum L.	Fruit	acrimonious	4
2	Piperaceae	Piper betle L.	leaf	acrimonious	2
3	Plumbaginaceae	Plumbago indica L.	root	acrimonious	3
1	Poaceae	Cymbopogon citratus (DC.) Stapf.	leaf, stem	acrimonious	2
5	Poaceae	Cynodon dactylon (L.) Pers.	Whole tree	bitter	1
5	Polygonceae	Muchlenbeckia platyclada Meissn	Whole tree	drunken herbs	1
	Rubiaceae	Gardenia jasminoides Ellis	Fruit	Sweet	2
/					
	Rutaceae	Citrus y aurantiifolia (Christm) Swingla	leaf	COUR	1
7 8 9	Rutaceae Rutaceae	Citrus x aurantiifolia (Christm.) Swingle Citrus hystrix DC.	leaf Skin of fruit	sour acrimonious	1 7

Table 1: Family names, scientific names/name, parts used, medicinal flavors and number of recipes used in herbal knee poultice formulation ingredients (Cont.)

	family names	mily names scientific name/name		medicinal flavors	number of recipes
51	Solanaceae	Solanum nigrum L.	Whole tree	bitter	1
52	Umbelliferae	Centella asiatica (L.) Urb.	Whole tree	bitter	4
53	Vitaceae	Ampelocissus martini Planch.	Whole tree	sour	1
54	Zingiberaceae	Alpinia galanga (L.) Willd.	tuber- rhizome	acrimonious	6
55	Zingiberaceae	Curcuma aromatica Salisb.	tuber- rhizome	acrimonious	3
56	Zingiberaceae	Curcuma longa L.	tuber- rhizome	acrimonious	8
57	Zingiberaceae	Curcuma sp.	tuber- rhizome	acrimonious	2
58	Zingiberaceae			acrimonious	4
59	Zingiberaceae	Zingiber montanum (J.Konig) Link ex A. Dietr tuber-acrimonious rhizome		acrimonious	24
60	Zingiberaceae	Zingiber officinale Roscoe	Zingiber officinale Roscoe tuber-acrimonious rhizome		14
61	Zingiberaceae	Zingiber ottensii Valeton	tuber- rhizome	acrimonious	1
62	Zingiberaceae	Zingiber zerumbet (L.) Sm.	tuber- rhizome	acrimonious	3
63	-	Marly limestone	-	-	13
64	-	Borneol camphor	-	-	10
65	-	Camphor	-	-	17
66	-	Menthol	-	-	6
67	-	Sea salt, Rock salt	-	=	1
68	-	Clay soil	-	=	1
69	-	Anas platyrhynchos	Egg	=	1
70	-	Rice flour	-	=	12
71	-	Glutinous rice flour	-	-	9
72	-	Wheat flour	_	_	1
73	-	Polished rice powder	_	_	1
74	-	Alcohol 70%	_	_	20
75	-	water	_	_	2
76	_	Clear lime solution	_	_	14
77	_	Plai oil	-	-	10
78	-	Ginger oil	-	_	5
79	-	Pepper oil	-	_	5
80	-	Sesame oil	_	-	1
81	-	Coconut oil	_	-	1
82	_	Petrolatum	_	_	1

contains the substance Colchicine, which also has an anti-inflammatory effect. ¹⁸ These findings align with traditional Thai medicine, where Plai is used in as many as 267 formulations. ¹⁹

2. Classification of herbal medicines

Considering the composition of herbs in each recipe, it has been found that the pharmacopoeia can be divided into 2 main groups: 31 hot formulations and 8 cold formulations. This classification takes into account the main drug, secondary drug, and accompanying drug according to Thai traditional pharmaceutical principles.

The application of hot knee poultices may involve the use of herbs that are considered to be hot and possessing carminative properties, which aid in the movement of wind in the knee joint (e.g., Zingiber montanum (J.Konig) Link ex A. Dietr, Camphor, Zingiber officinale Roscoe,

Gloriosa superba L., Curcuma longa L., Borneol camphor, Piper retrofractum Vahl, Alpinia galanga (L.) Willd., Menthol, etc.) and medicines that help reduce muscle stiffness (e.g., Citrus hystrix DC., Citrus x aurantiifolia (Christm.) Swingle, Acacia concinna (Willd.) DC., Tamarindus indica L., Cryptolepis dubia (burm.f.) M.R.Almeida, Derris scandens (Roxb.) Benth., etc.) The accompanying drugs, known for their bitter and cold taste, possess properties that can reduce inflammation, such as Cleome viscosa L., Crinum asiaticum L., Andrographis paniculata (Burm.f.) Nees, Tinospora crispa (L.) Miers ex Hook.f. & Thomson, Centella asiatica (L.) Urb., Tiliacora triandra (Colebr.) Diels, Cynodon dactylon (L.) Pers. and Clinacanthus nutans (burm.f.) Lindauy, etc. These herbs are typically extracted using alcohol or other reagents and then mixed with substances to adhere to rice flour. Consideration should be given to choosing ingredients that are locally available or easily accessible (Table 2).

Table 2 Classification of medicines in hot medicine formulas

^{1.} From a collection of 39 pharmacopoeia formulations, there are 61 types of medicinal plants. These plants can be used to identify a total of 34 families (Table 1).

Category	Properties	Herbal (number of recipes)
Direct medicine	Carminative	Zingiber montanum (J.Konig) Link ex A. Dietr (22), Camphor (17), Zingiber officinale Roscoe (14), Gloriosa superba L. (14), Borneol camphor (8), Curcuma longa L. (7), Piper retrofractum Vahl (6), Alpinia galanga (6), Menthol (6), Piper nigrum L. (4), Curcuma sp. (3), Curcuma aromatica (3), Plumbago indica L. (3), Zingiber zerumbet (L.) Sm. (3), Curcuma sp. (2), Cymbopogon citratus (DC.) Stapf. (2), Piper betle L. (1), Acorus calamus L. (1), Syzygium aromaticum (L.) Merr.& L.M.Perry (1), Zingiber ottensii Valeton (1), Gendarussa vulgaris Nees. (1)
Medicine helps	reduce muscle stiffness	Citrus hystrix DC. (6), Acacia concinna (Willd.) DC. (3), Tamarindus indica L. (2), Citrus x aurantiifolia (Christm.) Swingle (1), Cryptolepis dubia (burm.f.) M.R.Almeida (1), Derris scandens (Roxb.) Benth. (1), Acanthus ebracteatus Vahl (1), Elephantopus scaber L. (1), Sida acuta Burm.f. (1), Salt (1)
Compound medicine	anti-inflammation	Cleome viscosa L. (5), Crinum asiaticum L. (5), Andrographis paniculata (Burm.f.) Nees (2), Tinospora crispa (L.) Miers ex Hook.f. & Thomson (2), Centella asiatica (L.) Urb. (2), Tiliacora triandra (Colebr.) Diels (2), Cynodon dactylon (L.) Pers. (1), Barleria lupuina Lindl. (1), Clinacanthus nutans (burm.f.) Lindau (1), Heliotropium indicum L. (1), Costus speciosus (Koen.) Sm. (1), Bridelia ovata Decne. (1), Putranjiva roxburghii Wall. (1), Sophora tomentosa L. (1), Aloe vera (L.) Burm.f. (1), Pandanus amaryllifolius Roxb. (1), Azadirachta indica A. Juss. var. siamensis Valeton (1), Gardenia jasminoides Ellis (1), Senna siamea (Lam.) H.S. Irwin & Barneby (1), Anas platyrhynchos (egg) (1)
Substances used for extraction		Alcohol 70% (14), Clear lime solution (13), Plai oil (10), Ginger oil (6), Sesame oil (5), Pepper oil (1), Coconut oil (1), water (1)
Adhesion aids		Rice flour (12), Glutinous rice flour (9), Marly limestone (8), Petrolatum (1), Clay soil (1)

Table 3 Classification of medicines in cold medicine formulas

Category	Properties	Herbal (number of recipes)
Direct medicine	anti-inflammation	Tiliacora triandra (Colebr.) Diels (4), Harrisonia perforate (Blanco) Merr. (3), Clerodendrum petasites (Lour.) S. Moore (3), Ficus racemose L. (3), Capparis micracantha DC. (3), Andrographis paniculata (Burm.f.) Nees (3), Centella asiatica (L.) Urb. (2), Crinum asiaticum L. (1), Clinacanthus nutans (burm.f.) Lindau (1), Costus speciosus (Koen.) Sm. (1), Gymnopetalum scabrum (Lour.) W.J. de Wilde & Duyfges (1), Solanum nigrum L. (1), Coccinia grandis (L.) Voigt (1), Gardenia jasminoides Ellis (1), Cleome viscosa L. (1), Phyllanthus amarus Schumach & Thonn. (1), Muchlenbeckia platyclada Meissn (1), Euphorbia hirta L. (1), Phyllanthus urinaria L. (1),
Medicine helps	reduce muscle stiffness	Citrus hystrix DC. (1), Tamarindus indica L. (1), Acacia concinna (Willd.) DC. (1)
Compound medicine	Carminative	Zingiber montanum (J.Konig) Link ex A. Dietr (2), Borneol camphor (2), Curcuma sp. (1), Piper betle L. (1), Justicia gendarussa Linn (1), Gendarussa vulgaris Nees. (1), Curcuma longa L. (1), Blumea balsamifera (L.) DC. (1), Moringa oleifera Lam. (1)
Substances used for extraction		Alcohol 70% (6), Water (1), Clear lime solution (1),
Adhesion aids		Marly limestone (5), Rice flour (1), Polished rice powder (1), Wheat flour (1)

These herbs are typically extracted using alcohol. To prepare the poultice, these extracts are mixed with substances like marly limestone, rice flour, polished rice powder, or wheat flour which aid adhesion (Table 3).

Knee poultices with very hot taste are not suitable for patients with knee pain who have inflammatory conditions. However, for patients with chronic knee pain, a hot-tasting knee poultice is needed to stimulate blood circulation in the knee joint. This aligns with the principles of Thai traditional medicine, which distinguish knee pain diseases as knee pain syndrome, characterized by severe pain, swelling, redness, and heat in the knee, and dry knee syndrome, characterized by knee pain, slight swelling, a little redness, and rustling knees. ²⁰ This finding supports the study by Papada Nadee, Achida Jaruchotikamol, and Benjamart Cushnie, which reported that Tiliacora triandra (Colebr.) Diels contains a high concentration of phenolic compounds with strong antioxidant properties, effectively alleviating inflammatory processes.²¹

The study identified 61 plant species used in 39 formulations, with Zingiberaceae being the most common. Hot and cold knee poultices effectively treat pain by stimulating circulation or reducing inflammation. Alcohol was the primary extraction medium, improving adhesion and efficacy.

Conflict-of-Interest Disclosure

The authors declare no conflict of interest.

Authors' Declaration

The authors hereby declare that the work presented in this article is original and that any liability for claims relating to the content of this article will be borne by them.

Acknowledgments

Conclusions

Acknowledgments: The authors would like to acknowledge Michael Jan Everts, from the Clinical Research. Center, Faculty of Medicine, Thammasat University, for English editorial assistance.

References

- Kolasinski SL, Neogi T, Hochberg MC, Oatis C, Guyatt G, Block J, Callahan L, Copenhaver C, Dodge C, Felson D, Gellar K, Harvey WF, Hawker G, Herzig E, Kwoh CK, Nelson AE, Samuels J, Scanzello C, White D, Wise B, Altman RD, DiRenzo D, Fontanarosa J, Giradi G, Ishimori M, Misra D, Shah AA, Shmagel AK, Thoma LM, Turgunbaev M, Turner A.S, Reston J. 2019 American College of Rheumatology/Arthritis Foundation Guideline for the Management of Osteoarthritis of the Hand, Hip, and Knee. Arthritis Rheumatol. 2020; 72(2):220-233.
- Teerachitkul J, Naka KH, Boonphadh P. Management of muscle aches and pains of older adults with latex tapping professions. J Thai Nurse midwife Counc. 2012; 27(2):134-147.
- Nicharojana L.O, Srisangworn S, Piaseu N. Effects of massage and herbal compresses as an adjunct treatment on migraine headaches and muscle tightness in migraine sufferers. J Phrapokklao Nurs Coll Chanthaburi. 2015; 26(1):39-52.
- Karaket S, Suyarach N, Jaidee P, Kasmek S, Prompao S, Prawang P. A study comparing pain levels before and after cold herbal mud treatment combined with Thai massage in older adults with knee pain. Chiang Rai Med J. 2017; 9(2):115-124.
- Poonsuk PH, Songphasuk S, Jantha M, Nimpitakpong N, Jiraratsatit K. Effectiveness of herbal poultice for knee pain relief in patients with osteoarthritis of knee. J. Thammasat Univ. Med. Sch. 2018; 18(1):104-111.
- Napakhunwichai CH. The effectiveness of herbal poultices on the pain of osteoarthritis Takha Health Promoting Hospital, Bang Pla Ma District, Suphan Buri Province. Paper presented at: 3rd National Research Presentation Conference; November 15, 2019; Suan Sunandha Rajabhat University, Bangkok.
- Faculty of Pharmaceutical Sciences, Ubon Ratchathani University. Thai crude drug. Ubon Ratchathani: Faculty of Pharmaceutical Sciences, Ubon Ratchathani University; 1999.
- Department of Thai Traditional and Alternative Medicine. Handbook on the Use of Thai Medicine and the National List of Essential Medicines (1st ed.). Bangkok: Thammasat University Press; 2015. 66-68 p.
- Division of Occupational Arts, Office of the Permanent Secretary, Ministry of Health. Textbook of General Traditional Medicine in the field of Pharmaceuticals. Bangkok: Division of Occupational Arts; (n.p.).
- Bunpean A, Chantarapon P, Hongsamat P, Jaiyai K, Thatwisai K, Klongcherngsan CH, Singhat J. Developing of Slime wrap knee for patients of Osteoarthritis in Ratchaphiphat hospital, Bang Khae district, Bangkok. Adv Sci J. 2020; 20(2):101-118.
- Tangjitman K. Survey of medicinal plants utilized by Karen people at Huai Nam and Nong Ta Dang villages. Tanao Si Subdistrict, Suan Phueng District, Ratchaburi Province. Paper presented at: 5th National Academic Conference; March 1, 2017; Muban Chombueng Rajabhat University, Ratchaburi.
- Jeentham S, Thakolpakdee P, Atthisinwet J. The study of herbal medicine diversity and local wisdom by parcipatory process in Dongbang community, Tambol Dongbang, Amphoe Mueang, Changwat Prachin Buri. J Thai Interdiscip Res. 2015; 10(3):1-8.
- Neamsuvan O, Jaisamut P, Maneenoon K, Subhateerasakul S. A Survey of Medicinal Plants for Tonic from Ban Toong Soong Community Forest, Auluk District, Krabi Province. Burapha Sci J. 2012; 17(2):160-166.
- Julung H, I. M.S, Ege B, Zubaidah S, Mahanal S. (2024). Zingiberaceae Rhizome as Traditional Medicine Based on Dayak Linoh, Malay, and Javanese Local Wisdom. Trop J Nat Prod Res. 2024; 8(5):7232-7243.
- Nutmakul TH. Tastes of herbal medicine affecting on principal tastes (Ya Rot Prathan) classification: A discriminant analysis. J Thai Trad Alt Med. 2020; 18(1):135-146.

- Temsiririrkkul R. Knowledge from research on 10 types of Thai herbs: Kaempferol, Pueraria Kaew, Turmeric, Ginger, Gotu Kola, Pepper, Plai, Andrographis, Amla, Bitter Melon. Bangkok: 21 Century Co., Ltd.; 2007. 135-150 p.
- 17. Amorndoljai P. The Use of Ginger (*Zingiber officinale Roscoe*) in Treatment and Relieves Symptom of Osteoarthritis. J Health & Health Manage. 2016; 3(2):13-22.
- Panphadung T, Pariyawatee S, Koonnoot S, Boonrasri N. Quality study of Dried Dong-Dueng Tuber (*Gloriosa superba Linn*.). Bull. Med. Sci. 2016; 58(4):270-282.
- Sitthisradoo P, Wongkaew K, Kham-ai M. Study of plai using in Thai traditional medicinal formulas for treatment of musculoskeletal disorders. J MCU Nakhondhat. 2022; 9(5):462-475
- Foundation for the Rehabilitation and Promotion of Traditional Thai Medicine Ayurveda School. Thai traditional medicine (Royal Massage). Bangkok: Pickanes printing centre; 2005. 124-125 p.
- Nadee P, Jaruchotikamol A, Cushnie B. (2024). Antioxidant Capacity and Phytochemical Analysis of the Traditional Thai Remedy Benchalokawichian, Trop J Nat Prod Res. 2024; 8(8):8054 - 8060.