MENTAL HEALTH CHALLENGES AND POSSIBLE SOLUTIONS WITH SPECIAL REFERENCE TO ANXIETY

Rout Bikram Keshari*,1, Rout Susanta Kumar2, Kar Durga Madhab3

1Department of Pharmacaceutics, Bhaskara Institute of Pharmaceutical sciences, Komattapalli, Bobbili,vizianagaram, Andhrapradesh, India
2Department of Pharmacology, School Of Pharmaceutical Sciences, SOA University, Kalinga Nagar, Bhubaneswar, India

*Email: bikram_mpharm@rediffmail.com

INTRODUCTION

World Health Organization data suggest that neurological and psychiatric disorders are an important and growing cause of morbidity (presently 450 million people)\(^1\). More than 25% of people are affected by mental and behavioural disorders at some point during their lives. In 2000, neuropsychiatric disorders accounted for 12% of the total disability-adjusted life years (DALYs) due to all diseases and injuries, and this is projected to increase to 15% by the year 2020 as per Selye's hypothesis\(^2\). Human anxiety is defined as a feeling of apprehension, uncertainty or tension stemming from the anticipation of imagined or unreal threat\(^3\). Anxiety disorders, along with mood disorders, are the disorders that contribute most to morbidity-mortality through the suffering that they generate and are the ones that have the biggest repercussions on national economies. Anxiety effects one-eighth population worldwide and has become an important research area in the field of psychopharmacology\(^4\). Mental disorders are universal and very common. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR), anxiety is characterized by a feeling of persistent worry that hinders an individual’s ability to relax\(^5\). The impact of the anxiety is not limited to consistent stress, which is associated with higher risk of cardiovascular and cerebrovascular disease\(^6\). Anxiety also has debilitating physical manifestations as headaches, uncontrolled trembling and sweating, muscle tension and aches, among others. To date, the biological explanations for many types of anxiety disorders remain inadequate. Postulations have implicated a dysregulation of specific neurotransmitters such as serotonin, dopamine and gamma-aminobutyric acid (GABA) as potential causes for both depression and anxiety disorders\(^7\). These hypotheses are based on the results of pharmacological treatments, but there are no definitive clinical trials that demonstrate the dysregulation of these neurotransmitters as causative factors of anxiety, potentially explaining why the treatment of anxiety with antidepressants is often ineffective. Thus far, cognitive behavioural therapy (CBT) has proven to be the most effective, long-term treatment for anxiety-related disorders\(^8\). No country can postpone service development until the finalization of national level epidemiological surveys. It should be noted also that such surveys are very costly and the quality of mental health research is low in most developing countries. Anxiety is the result of stressful life, poor pressure, work pressure and family issues. Cognitive, somatic, emotional and behavioural components combine to form a psychological and physiological state that is known as anxiety. The unpleasant feeling is often linked with uneasiness, fear or worry. Due to anxiety, people often experience nervousness, panic, constant sadness and depressed mood. Many anti-stress medicines and therapies have come up to deal with the ill effects of anxiety. However, most of them have certain side effects as well. Although very few drugs are currently approved by regulatory authorities for treating multi-factorial ailments and disorders of brain like anxiety, anxiety was treated with drugs in a class known as benzodiazepines. Neurontin is an anti seizure medication that has been found to be helpful in treating anxiety for some people, but little organized research has indicated whether or not it is effective in addressing anxiety disorders. Certain plant-derived agents, including, for example, Ashwagandha, Borage Juice, Bugleweed, California poppy, Ginkgo Biloba, Ginseng, St. John's Wort. These plants are used both in herbal and conventional medicine and offer benefits that pharmaceutical drugs lack. In the present article, an attempt has been made to review the most important medicinal plants, including the above which are widely used for their reputed effectiveness in CNS disorders. In this review, we present ethnobotanical information on plants with their mechanisms, used by the traditional healers in India to treat mental illnesses, specifically anxiety and debilitating mental disorders.

KEYWORDS: Mental disorders, Anxiety, conventional medicine, Herbal remedies, ethnobotanical

PREVALENCE

Recent epidemiological studies of anxiety disorders provided evidence of their high frequency in the general population worldwide\(^9\). In the United States of America, the recent National Co-morbidity Survey Replication (NCS-R) found a lifetime prevalence rate of 28.8% and a twelve-month prevalence of 18.1%\(^10\). These disorders are mostly chronic, and have a negative impact on the life of patients and they can impair severely the daily functioning of the people suffering from them. They also have a
Anxiety disorders are common in the daily life of patients in very
high co-morbidity between various anxiety disorders and with other
mental disorders: depression, alcohol/substance dependence and
abuse, suicide. On the other hand, anxiety disorders appear to be
more common in community populations than in clinical settings.

Anxiety Disorders affect about 40 million American adults age 18
years and older (about 18%) in a given year, causing them to be
filled with fearfulness and uncertainty. Unlike the relatively mild,
brief anxiety caused by a stressful event (such as speaking in public
or a first date), anxiety disorders last at least 6 months and can get
worse if they are not treated. Anxiety disorders commonly occur
along with other mental or physical illnesses, including alcohol or
substance abuse, which may mask anxiety symptoms or make them
worse. In some cases, these other illnesses need to be treated before
a person will respond to treatment for the anxiety disorder.

**SYMPTOMS**

Symptoms of anxiety can manifest both in the physical (changes in
normal physiological activity) and psychological level (changes in
mood, thinking and behavior). The most common somatic symptoms
of anxiety can include cardiovascular symptoms and signs such as
tachycardia, palpitations, chest tightness, breathing and sighs,
shortness of breath, hyperventilation, gastrointestinal and feeling of
lump in the throat or stomach, difficulty swallowing, nausea,
vomiting, diarrhea, constipation, urethral and urinary urgency,
premature ejaculation, as muscle tension or muscle pain, physical
weakness, back pain, feeling of weakness in the legs, neurological
conditions such as dizziness, vertigo, headache, unsteady gait,
tremor, numbness, and neurovegetative as dry mouth, sweating,
flushing, pallor or flushing. Regarding the possible types of psychic
manifestations of anxiety include restlessness, apprehension, vague
fears, irritability, or psychological stress. In more severe cases may
appear a sense of impending doom.

**CLASSIFICATIONS**

Anxiety disorders are one of the most frequent in psychiatric illness.
Its evolution over time is characterized by relatively early ages
initiated by the chronicity, to present periods of improvement and
recurrence and generating stages of disability in people who suffer.
Anxiety disorders are common in the daily life of patients in very
different ways. In order to sort and categorize these disorders
classifications have been developed, with agreed diagnostic criteria,
helping to detect and therefore to achieve a better prognosis and
treatment. The DSM-IV-TR (APA) Anxiety Disorders divided as
follows:

- Panic disorder with or without agoraphobia
- Agoraphobia without panic disorder
- Specific phobia
- Social Anxiety Disorder
- Obsessive-compulsive disorder
- PTSD
- Acute Stress Disorder
- Generalized Anxiety Disorder
- Anxiety disorder due to medical cause
- Anxiety disorder induced substance
- Anxiety disorder not otherwise specified

**CAUSE**

The actual causes of anxiety disorders are still unknown but there
are some very solid indications suggesting that they might be results
of interactions between different genetic, biological and some other
factors like social and economical status. Generally two major
groups of causes are distinguished of this disorder, first causes of
generalized anxiety disorder and other causes of the episodes
described as panic attacks or panic. In the case of generalized
anxiety disorder causes are not fully known but there are some
factors that predispose to its development. Outstanding in this
group, the individual’s genetic inheritance, brain neurotransmitters
and environmental factors. Recent research suggests that family
history predisposes and increases the chance of developing the
disorder, ie, generalized anxiety disorder may be partly hereditary.
No doubt environmental factors can cause and trigger in many cases
of generalized anxiety disorder. A bad experience, a trauma or
stressful events can trigger the onset of generalized anxiety disorder.

Periods of stress can worsen symptoms and other factors such as
consuming drugs such as alcohol, amphetamines and cocaine, or other
diseases such as hyperthyroidism.

**MANAGEMENT OF THE ANXIETY DISORDERS**

Most cases of anxiety are handled at least initially in the primary
care setting. In managing anxiety disorders the primary care
physicians faces several challenges to detect anxiety disorders in a
person complaining of physical elements, to differentiate an anxiety
disorder from a medical problem or substance use that could cause
or exacerbate the anxiety. Considering the frequency with which
patients with anxiety are seen in primary care setting, physician
should screen their patients for both anxiety and depressive
disorders.

**Common treatment for anxiety**

1. Medication – Use of anti-anxiety and anti-depressant requires
prescription from doctor, and only under guidance and monitor from
doctor or qualified psychiatrist, the patient will receive the correct
dosage, minimize the danger of side effects.

2. Herbal – This is considered an alternative treatment for anxiety.
However, the Chinese and native people had used them for
thousands of years to cure the problems, and studies find that they
are as effective as prescription medicine without the side effect, and
if you don’t want side effect or prescription medication doesn’t work
for you, you can try Herbal based medicine.

3. Relaxation Exercise – Taiji and QiGong are very good relaxation
eexercises, it can help to relax your mind and body, and restore them
to a healthier stat, balance up your body chemical and reduce your
mind anxiety and stop feeding anxious sense to the body.

4. Regular Exercise – 30 Minutes of regular exercise every day will
reduce the panic attack, and shorten the duration during panic
attacks, and eventually eliminate anxiety. When doing exercise, your
mind will be distracted from thinking something anxious, and your
body will be healthier, less symptoms of anxiety will occur. That’s
why exercise is vital in every treatment plan for anxiety.

5. Psychological Treatment for Anxiety – One of the most common
and effective anxiety treatments is Cognitive Behavioural Therapy
(CBT), and this method can be used with drugs or without drug.
However, herbal based anxiety relief medicine is highly
recommended. See Relora Review and Native Medicine Review for
more information.

6. Diaphragmatic or Deep Breathing Exercise – Using special deep
breathing technique to help relax the mind and body, increase the
oxygen level and reduce chemical imbalance in the body in the
body. This kind of techniques has proven itself to be effective for
most sufferers to reduce duration and frequency of panic attacks.

7. Complementary Therapies – These are not exactly treatment for
anxiety, but rather to restore health and strength of the body.
Namely, Messages, Shiatsu, Tuina (Chinese acupressure treatment),
Guasa, Acupuncture and Aromatherapy. Once or twice a week
would help to relax the body and mind, and should do it regularly to
see results.
Anxiety disorders are often treated with anxiolytic or antidepressant medications. In some patients combining drug and non-drug therapies produce superior results than either from the treatment alone. Several classes of drugs relieve the symptoms of anxiety. The benzodiazepines include diazepam, alprazolam and clonazepam. Benzodiazepines generally work quickly, and are used in the short term management of acute anxiety, panic disorder and GAD. However the side effects of the drugs particularly sedation, drowsiness and central nervous system depression. A physical dependence can also develop with the use of these agents and patients.

**MEDICATIONS USED TO TREAT ANXIETY**

**Anxiolytics**

Benzodiazepines- Diazepam, Alprazolam, clonazepam

Non-benzodiazepines- Buspirone

Antidepressants

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<table>
<thead>
<tr>
<th>Plant/Herbs</th>
<th>Family</th>
<th>Uses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abies Pindow Royle</td>
<td>Pinaceae</td>
<td>Ethanolic extract of leaves showed significant anxiolytic effects on all the paradigms of anxiety. Terpenoids, flavonoids, glycosides and steroids of the leaf were found to have mast cell stabilizing action. Terpenoids and flavonoids offered bronchoprotection against histamine challenge. The ulcer protective action of petroleum ether, benzene and chloroform fraction has been attributed to steroidal contents.</td>
</tr>
<tr>
<td>Achillea Millefolium linn</td>
<td>Asteraceae</td>
<td>It is generally used as Digestive aid, appetite stimulant, anti-inflammatory, liver tonic, wounds and bruises and anti- anxiety. Most frequently reported uses are Digestive aid, Appetite stimulant, Anti-inflammatory and liver tonic.</td>
</tr>
<tr>
<td>Alosya Polyachytra</td>
<td>Verbenaceae</td>
<td>The aerial parts of the plant is having sedative and anxiolytic like effects.</td>
</tr>
<tr>
<td>Albizia Lebebeck Benth</td>
<td>Mimosaceae</td>
<td>Lebbeck is an astringent, also used by some cultures to treat boils, cough, to treat the eye, flu, gingivitis, lings problems, pectoral problems, is used as a tonic, and is used to treat abdominal tumours. The bark is used medicinally to treat inflammation. The antianxiety activity of the plant might be due to effect on GABA or saponins present in the extract.</td>
</tr>
<tr>
<td>Althiaza Zulibrissin Durazz</td>
<td>Fabaceae</td>
<td>The aqueous extract of the plant having anxiolytic-like effect.</td>
</tr>
<tr>
<td>Angelica Sinensis Diels</td>
<td>Apiaceae</td>
<td>The anxiolytic activity of the plant is due to the presence of an essential oil contains lingustilide.</td>
</tr>
<tr>
<td>Aniba Riparia Mez</td>
<td>Lauraceae</td>
<td>The unripe fruits contains Riparian I and Riparian II that shows anxiolytic activity.</td>
</tr>
<tr>
<td>Apocynum Venetum Linn</td>
<td>Apocynaceae</td>
<td>The aqueous extract of the leaves of Apocynum venetum shows anxiolytic activity due to the presence of Kaempferol.</td>
</tr>
<tr>
<td>Annona Cherimola Mill</td>
<td>Annonaceae</td>
<td>The anxiolytic activity of 17 alkaloids isolated from A. cherimola [A. cherimola]stem bark was assessed. Most of the alkaloids were active against the Gram-positive bacteria Bacillus subtilis, Staphylococcus aureus and Mycobacterium phlei, but not against the Gram-negative bacteria. Annonaine was active against Klebsiella pneumoniae, poroshinunse was active against Pseudomonas aeruginosa, and anolone was active against Escherichia coli and Salmonella typhim-urium. The juice showed the highest antioxidant activity, while the flesh exhibited the lowest.</td>
</tr>
<tr>
<td>Asadricha Indica A.Juss</td>
<td>Meliaceae</td>
<td>The anxiolytic-like actions produced by interacting GABA_A receptor complex. Compounds such as β-carophyllene, β-selinene, δ-cubebene, and linalool that has been reported to show anxiolytic effects.</td>
</tr>
<tr>
<td>Bacopa Monnieri Penn</td>
<td>Scrophulariaceae</td>
<td>In Ayurveda it is used as nerve tonic and memory enhancer. It has been reported to possess anxiolytic activity in animals.</td>
</tr>
<tr>
<td>Castimorom Edulis Llave &amp; Lex</td>
<td>Rutaceae</td>
<td>The aqueous extract of the leaves shows anxiolytic activity. The aqueous extract of the seed shows aphrodisiac activity.</td>
</tr>
<tr>
<td>Cecropia Glazioui Sneth</td>
<td>Moraceae</td>
<td>It has been used in most Latin American countries as an antihypertensive cardiotonic, , and antiasthmatic folk medicine. The aqueous extract promotes anxiolytic like effect.</td>
</tr>
<tr>
<td>Centilla Asiatica Urban</td>
<td>Apioideae</td>
<td>It shows anxiolytic activity mainly due to the presence of asiaticoside.</td>
</tr>
<tr>
<td>Coriandrum Sativum Linn</td>
<td>Apioideae</td>
<td>The major constituents were 2E-decenol (15.9%), decanol (14.3%), 2E-decen-1-ol (14.2%) and decan-13 (16.3%). Other constituents present in fairly good amounts are 2E-tridecen-1-ol (6.75%), 2E-dodecenal (6.23%), dodecanol (4.36%), undecanol (3.37%), and undecanol (3.23%). The oil was screened for antimicrobial activity against both negative bacteria. The antianxiety activity of the plant might be due to effect on GABA or saponins present in the extract.</td>
</tr>
<tr>
<td>Capsis Chinesis Franch</td>
<td>Ranunculaceae</td>
<td>It contains alkaloids Berberine. The anxiolytic mechanism of Berberine might be related to the increase in turnover rates of monoamines in the brain stem and decreased serotonergic system activity. Moreover, BER decreased serotonergic system activity via activation of somatodendritic 5-HT1A autoreceptors and inhibition of postsynaptic 5-HT1A and 5-HT2 receptors.</td>
</tr>
<tr>
<td>Citrus Sinensis Osbeck</td>
<td>Rutaceae</td>
<td>The main constituent is limonene. Which have anti viral and antiagentic action. Along with this it is also used for Anxiety, Insomnia,Relaxation,Nervousness etc.</td>
</tr>
<tr>
<td>Crinum Giganteum Andrews</td>
<td>Amaryllidaceae</td>
<td>The aqueous extract of C. giganteum contains some biologically active principles with sedative activity.</td>
</tr>
<tr>
<td>Davilla Rugosa Post</td>
<td>Dilleniaceae</td>
<td>The Hydroalcoholic extract of the stems showed anxiolytic activity.</td>
</tr>
<tr>
<td>Eschscholzia California Cham</td>
<td>Papaveraceae</td>
<td>An aqueous alcohol extract of Eschscholzia californica has been evaluated for benzodiazepine, neuroleptic, antidepressant, antihistaminic and analgesic properties. It appeared to possess an affinity for the benzodiazepine GABA receptor.</td>
</tr>
<tr>
<td>Echium Amoenum Fisch</td>
<td>Boraginaceae</td>
<td>The ethanolic extract of flowers contained pyroxyloides and showed anxiolytic activity.</td>
</tr>
<tr>
<td>Erythrina Velutina Willd</td>
<td>Fabaceae</td>
<td>The stem bark having flavonoids and terpenes shows anxiolytic effect.</td>
</tr>
<tr>
<td>Erythrina Mulangae Mart,Ex Benth</td>
<td>Fabaceae</td>
<td>It contains alkaloids 16-hydroxyerytharin, erythrinane and 6-hydroxerysotrine. Which was found to be anxiolytic.</td>
</tr>
<tr>
<td>Euphoria Longana Lam</td>
<td>Sapindaceae</td>
<td>The extract of Longan Arillus was tested for its anxiolytic-like effect and that is mainly due to the presence of insinos.</td>
</tr>
</tbody>
</table>

MAOI- Phenalazine

TCAs- Clomipramine,Imipramine

SSRIs- Paroxetine,Sertaline,nefazodone,venlafaxine,mirtazapine

β-blockers- Propranolol, betaxolol

**Herbal remedies**

Herbal remedies for anxiety are used as alternative treatment for anxiety disorder. Though an herbal remedy for anxiety has been known to man for a long time, advances in medicine and the resulting commercialization of medical cure has obscured herbal remedies. The World Health Organization (WHO) has shown that, over 80% of the population in sub-Saharan Africa patronise traditional medical practitioners (TMP) – WHO, 1980. Medicinal plants have also been used in the development of new drugs and continue to play an invaluable role in the drug discovery process. Some of the natural remedies that are being explored for anxiety are-

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Rout Bikram Keshari et al. IRJP 2011, 2 (9), 37-42
**Euphorbia Hirta** **l**inn Euphorbiaceae The active principle. Adenosine produced the anti-conflict effect significantly at a dose of 30 mg/kg, s.c. Adenine, uridine, and 5-methyluridine did not exhibit the effect 56.

**Eurycoma Longifolia** Jack Simaroubaceae Eurycoma peptides and related compounds help to release more free testosterone from its binding proteins. Reports show an increase in energy levels and enhanced sex drive. Eurycoma longifolia has shown to lower fatigue, enhance energy, enhance mood, and provide a greater sense of well-being 53.

**Euphorbia Nerifolia** Linn Euphorbiaceae The neriolia leaf extract shows anti-anxiety, anti-psychotic and anti-convulsant activity 55.

**Gastrodia Elata** Blume Orchidaceae The plant contains phenolic compounds like 4-hydroxybenzylalcohol, 4-hydroxybenzaldehyde, which has been found to have anxiolytic effect by activating benzodiazepine, GABA-A and 5-HT3 receptors 55.

**Ginkgo Biloba** Linn Ginkgoaceae Ginkgo biloba is used as a natural anti-depressant that improves circulation to the brain and elevates mood. It improves circulation of blood within the body, when a person experiences anxiety attacks 56.

**Hypericum Perforatum** Linn Hypericaceae H. Perforatum total extract, and of some pure components such as protohypericin and a fraction containing hypericin and pseudohypericin having anxiolytic activity, former, by reducing the GABA-activated chloride currents, while later by inhibiting the activation of NMDA receptors 61.

**Magnolia** *Deaalbata* Zucc Magnoliaceae The extract decreases anxiety response, that may be due to magnolol 56.

**Pachyrhizus Erotes** Linn Fabaceae Scutellaria Baicalensis. It contain rotenoids, flavonoids and phenyl furanocoumarin derivatives. Which showed antianxiety activity 53.

**Paeonia Morean** Sims Paeoniaceae The root bark produced anxiolytic effect due to the presence of paeonol 56.

**Panax Ginseng** C.A.Mey Araliaceae The major components-ginsenosides, having antioxidiant activity. It induces neuroprotection mainly through activation of antioxidant enzymes 55.

**Passiflora Incarnate** Linn Passifloraceae It works by increasing levels of a chemical called gamma-aminobutyric acid (GABA) in the brain. GABA lowers the activity of some brain cells 56.

**Piper Methysticum** G.Forst Piperaceae It is well known for tranquilizing and anxiolytic effects. Dihydrokavain, a major kavalexolate is necessary to mediate anxiolytic effect 52.

**Salvia Elegant** Vahl Lamiaceae It is used for digestion, heartburn, balancing the nervous system and as a general tonic 53.

**Salvia Reutertana** Boss Lamiaceae The presence of wogonin, a major constituent elicited anxiolysis through positive allosteric modulation of the GABA(A) receptor complex via interaction at the BZD-57.

**Scutellaria** *Baicalensis* Georgi Lamiaceae It contains hirsutine, and antihypertensive indole alkaloids. In addition, the anxiolytic activity is related to the presence of flavonoids, phenylpropanoids or terpenoids 52.

**Scutellaria** *Lateriflora Linn* Lamiaceae It is commonly known as skullcap. Baicalin and its aglycone baicalein showed anxiolytic effect by binding to the benzodiazepine site of the GABA receptor 52.

**Sebania Grandiflora** Pers Fabaceae It is an effective stress reliever 58.

**Sphaeranthus Indicus** Linn Asteraceae The therapy has been showing some herbal oils and flavonoids, the saponins, which selectively binds with high affinity to the central benzodiazepine receptor, possesses important anxiolytic and antidepressive activities. The essential oil contains linalool that exerts sedative effects in humans 60.

**Salvia Oficinalis** Linn Lamiaceae Salvia officinalis contains rosmarinic acid, which acts as antioxidant by scavenging superoxide free radicals. It also contains triterpenoids, ursolic acid, uvaol, betulinic acid and betulin. Ursolic acid showed antimicrobial activity against Vancomycin-resistant enterococci (VRE) 53.

**Scutellaria Baileyensis** Georgi Lamiaceae The plant contains valerianol that exerts sedative effects in humans 56.

**Tugria Involucrata** Linn Euphorbiaceae It showed anxiolytic activity. Active constituent reported is JujubosideA 55.

**Turnera Aphrodisiaca** Ward Turneaceae The anxiolytic activity is related to the presence of flavonoids, phenylpropanoids or terpenoids 52.

**Uncaria Rhynchophylla** Jacks Rubiaceae It contains hirsutine, and antihypertensive indole alkaloids. In addition, the anxiolytic-like effects observed by blocking 5-HT receptor 58.

**Valeria Edulis** spp.procrea Mey Valerianaceae It showed a significant decrease in the severity of anxiety and as aphrodisiac. Antianxiety activity is due to the presence of 5,7-A'-trihydroxy flavone apigenin 57.

**Zingiber officinale** Rosc. Zingiberaceae It contains zingeriberene, phellandrene and gingerol. The extract of dried rhizomes of ginger, which contained anticonvulsant principal(s), was screened for anxiolytic and antiepileptic activity 50.

**Ziziphus Jujube** Mill. Rhamnaceae It showed anxiolytic activity. Active constituent reported is JujubosideA 52.

**CONCLUSION**

The purpose of this review is to identify the pharmacological and Phytochemical usage of herbs that show great advantage for the human body specially for anxiety. Mental illness is a worldwide problem with implications at the individual and national levels. In the light of expected increases in mental illness and its burden worldwide, Herbs and other natural remedies are becoming an increasingly popular alternative to prescription drugs for the treatment of anxiety. While anti-anxiety medications do work well, they can often be habit-forming or cause side effects, whereas herbal treatments for anxiety are considered safer and typically do not lead to dependence or addiction. But because the FDA does not thoroughly evaluate all natural treatments, most of the herbal treatments for anxiety on the market simply are not effective. The best natural treatments for anxiety are those containing proven ingredients in the proper doses and potencies so, research is absolutely needed to fill in those gaps and to advance the delivery of quality health care at the lowest possible cost.

**REFERENCES***


