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The use of the *Ginkgo Biloba* plant and its interaction with other drugs

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Abstract:

The use of phytotherapic medicines is widely used, mainly as a complementary medication for patients with chronic diseases. Studies on *Ginkgo biloba* extract shows relevant pharmacological activities to the treatment on Alzheimer's disease, memory deficit, depression, and promising effects on cognitive functions in clinical studies. As a result, research about the interaction of *Ginkgo biloba* with other medicinal products has been increasing, as this may interfere with the pharmacokinetics and pharmacodynamics of several drugs, and may have serious consequences for the patient. **Objective:** The objective of this study is to show interactions of *Ginkgo biloba* with other drugs and their influence on their physiological action. **Methodology:** This abstract is a review that aims to collect and combine information about the interactions of *Ginkgo biloba* with other drugs, using bibliographic data. **Results and Discussion:** Studies show that administration of *Ginkgo biloba* combined with anticonvulsants tends to decrease the action of these drugs. Combined with antidepressants (as monoamine oxidase inhibitors) it intensifies the pharmacological action of the drug and also the side effect, such as headache, tremors and maniac outbreak. When using *Ginkgo biloba* with Sertraline it is reported that it may cause increased heart rate, excessive sweating, hyperthermia, muscle stiffness and

agitation. The use of *Ginkgo biloba* with Omeprazole lower the plasma concentration of this drug, and consequently, its therapeutic effect. **Conclusion:** Proper use of some herbal supplements is perfectly safe and can cause benefits, but their indiscriminate or excessive use can be dangerous. With all of the above being said, the concomitant use of phytotherapic medicines such as *Ginkgo biloba* based combined with other drugs should be appropriately monitored.

Keywords: Ginkgo biloba; Pharmacological Interaction; Herbal Remedy.

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1. Introduction

Ginkgo biloba (GB) is a tree native to China, Korea and Japan, an ancient plant that was considered by Charles Darwin to be a "living fossil" (FILHO; FAKOURY; FERRY, 2009). It is one of the best-selling medicinal herbs in the United States and Europe, used in the treatment of central nervous system and cardiovascular diseases (SILVA et al., 2010).

Latter has been shown to be effective in patients with mild Alzheimer's disease, since it promotes vasodilation and lowers blood viscosity and protects neurons against oxidative stress. These justifications reiterate the success of this medication when administered at the beginning of the pathology (FORLENZA, 2005; NICOLETTI, et al. 2007).

2. Results and Discussion

Concerning the use of the *Gingko biloba* extract and other medicines, the use of 80mg of this plant twice daily with Trazodone 20mg twice a day too may cause coma on the third day. To reverse the case, intravenous injection of Flumazenil should be used. This happens because the flavonoids present in GB may increase gabaergic activity, and studies have shown that it can interfere with the action of oral and antiplatelet anticoagulants and with drugs metabolized by the P450-CYP3A4 system (DEFEUDIS, 1998; ALEXANDRE; BAGATANI; SIMÕES, 2008; SILVA et al.,

3. Materials and Methods

A search was made to collect information about the possible interactions of *Ginkgo biloba* with several drugs, without date and language restrictions. We used the databases PUBMED, Often, a single drug is not enough to recover health, combining two or more drugs and, therefore, it is indispensable to know the possible drug interactions, since they can occur with several classes of medicines (allopathic, phytotherapic), causing to the user (NICOLETTI, et al., 2007; VENTURINI et al., 2014). In this way, the objective of this work is to show possible interactions between the *Ginkgo biloba* plant and other drugs and that interfere in the pharmacological action of this plant.

2010). According to Silva et al. (2010), when administered the GB associated with thiazide diuretics (hydrochlorothiazide) can cause, after a week, the increase of the patient's blood pressure.

Nicoletti et al. (2007) reinforce that preliminary studies demonstrate that GB can affect insulin levels, which demands additional care for the users of these drugs. It has also been observed that high doses of Ginkgo biloba may raise blood pressure when administered with foods that have high levels of protein or in preserves that have tyramine (FILHO; FAKOURY; FERRY, 2009).

SCIELO and NCBI, with a survey of clinical studies of articles using as descriptors: "Ginkgo biloba", "Pharmacological Interaction", "Phytotherapics".

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4. Conclusions

The facts presented are insufficient for the wisdom of the harm or benefits of Ginkgo biloba, since the number of case reports is still small since there is no common sense among physicians to relate the adverse effects of the drugs to plants or herbal medicines. Further research is needed to understand the effects and mechanism of action of Ginkgo biloba.

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Conflicts of Interest

The authors declare no conflict of interest.

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