Global Journal of Pharmacology 9 (3): 260-266, 2015 ISSN 1992-0075 © IDOSI Publications, 2015 DOI: 10.5829/idosi.gjp.2015.9.3.94246

## The Application of Thymus vulgaris in Traditional and Modern Medicine: A Review

<sup>1</sup>Saleh Hosseinzadeh, <sup>2</sup>Azizollah Jafari Kukhdan, <sup>3</sup>Ahmadreza Hosseini and <sup>4</sup>Raham Armand

<sup>1</sup>Department of Biochemistry, Medical Sciences University of Yasuj, Iran
<sup>2</sup>Department of biology, Faculty of Sciences, University of Yasuj, Iran
<sup>3</sup>Ph.D student, Department of Marine Biotechnology, Xiamen university, China
<sup>4</sup>Department of biology, Faculty of Sciences, University of Behbahan, Iran

**Abstract:** Medicinal plants have played an essential role in the development of human culture. Medicinal plants are a source of traditional medicine. This study illustrates the importance of traditional and modern medicine in the treatment and management of human diseases and ailments. It has been confirmed by WHO that herbal medicines serve the health needs of about 80percent of the world's population; especially for millions of people in the vast rural areas of developing countries. Meanwhile, consumers in developed countries are becoming disillusioned with modern healthcare and are seekingalternatives. *Thymus* is a flowering plant in the mint family Lamiaceae. Thymus is a widely used medicinal plant in food and pharmaceutical industries. Among different species of Thymus, *Thymus vulgaris* is used more than other species in therapeutic dosage forms. In Traditional medicine *T. vulgaris* is cultivated in many countries by most people especially in rural areas depend on herbal medicines to treat many diseases including inflammation-related ailments such as rheumatism, muscle swelling, insect bites, pains, etc.Also the modern medicine in essential oilof thyme has demonstrated the compounds have shown anti-inflammatory, immunomodulatory, antioxidant, antibacterial and antifungal properties. In this review the objectiveis to consider the past and present value of medicinal plants such as *Thymus vulgaris* used in traditional and modern medical practices as bioactive natural compounds.

Key words: Medicinal Plants • Traditional and Modern Medicine • Thymus vulgaris • Bioactive Compounds

### **INTRODUCTION**

Traditional medicine has remained as the most affordable and easily accessible source of treatment in the primary healthcare of. People have a long history oftraditional plant usage for medicinal purposes. The medicinal use of plants is very old. The writings indicate that therapeutic use of plants is as old as 4000-5000 B.C. and Chinese used first the natural herbal preparations as medicines. In India, however, earliest references of use of plants as medicine appear in Rig-Veda, which is said to be written between 1600-3500 B.C. Later the properties and therapeutic uses of medicinal plants were studied in detail and recorded empirically by the ancient physicians in Ayurveda (an indigenous system of medicine) which is a basic foundation of ancient medical science in India[1]. Medicinal plant is an important lement of indigenous medical systems all over the world. The ethnobotany and ubiquitousplants provide a rich resource for natural drug

researchand development[2]. Medicinal plants are resources of new drugs and many of the modern medicines are produced indirectly from plants. It is estimated there are more than 250,000 flower plant species.Traditional use of herbal medicines implies substantial historical use, and this is certainly true for many products that are available as 'traditional herbal medicines.In many developing countries, a large proportion of the population relies on traditional practitioners and their armamentarium of medicinal plants in order to meet healthcare needs. Although modern medicine mayexist side-by-side with such traditionalpractice, herbal medicines have often maintained their popularity for historical andcultural reasons[3]. Natural products have played animportant role throughout the world intreating and preventing human diseases.Natural products from various sources includingterrestrial plants, microorganisms, marine organisms and terrestrial vertebrates and invertebrates and

Corresponding Author: Saleh Hosseinzadeh, Department of Biochemistry, Medical Sciences University of Yasuj, Iran

its importance in modern medicinehas been discussed in different reviewsand reports [4,5]. In recent years, the research work on natural Products chemistry received great interest [6] due to chemical structure andbiological activities of naturallyoccurring secondary metabolites Health Organization (WHO) [7].TheWorld has alsorecognized the importance of traditionalmedicine and has created strategies, guidelines and standards for botanicalmedicines. Proven agro-industrialtechnologies need to be applied to thecultivation and processing of medicinalplants and the manufacture of herbalmedicines[8]. Studying medicinal plants helps to understand plant toxicity and protect human and animals from natural poisons. In this review the objective is to consider the past and present value of medicinal plants such as Thymus vulgaris used in traditional and modern medical practices as bioactive natural compounds.

### Plant Geographical Distribution and its Description:

Thymus vulgaris is cultivated in most of the European countries, together with France, Svizzera and nowadays it is cultivated worldwide. Thymus vulgaris (thyme) is an aromatic plant used for medicinal and spice purposes almost everywhere in the world. Thymus vulgaris is a flowering plant in the mint family Lamiaceae. It is growing upto 15-30 cm tall by 40 cm wide [9]. Thyme is a tiny perennial shrub, with a semi-evergreen groundcover that seldom grows quite 40 cm tall it's each horizontal and upright habits. The stems become woody with age. Thyme leaves are terribly little, usually 2.5 to 5 mm long and vary significantly in form and hair covering, depending on the variety, with every species having a rather completely different scent. T. vulgaris leaves are oval to rectangular in form and somewhat fleshy aerial components are used for volatile oil production, principally by steam distillation. The contemporary and dried herb market uses it for cookery functions (Figure 1).



Fig. 1: Thymus vulgaris

Thyme grows well during a temperate to heat, dry, sunny climate and wherever the plants don't seem to be shaded. It desires full sun to grow to its best potential. Thyme doesn't like excessive wet otherwise it will get rot disease. Thyme prefers lightweight, welldrained soils with a pH of 5.0 to 8.0. Thyme species do best in coarse, rough soils that may be unsuitable for several alternative plants [10].

# Background and History of Traditional Herbal Medicine:

The use of plants as medicine goes back to earlyman. Fossil records date human use of plants asmedicine at least to the Middle Paleolithicage. Evidences of this early association have been found in the grave of a Neanderthal man buried 60 000 yearsago.Pollen analysis indicated that the numerous plantsburied with the corpse were all of medicinal value. Theearliest known medical document is a 4000-year-oldSumerian clay tablet that recorded plant remedies forvarious illnesses. By the time of the ancient Egyptiancivilization, a great wealth of information already existed n medicinal plants. Among the many prescribed remedieswere mandrake for pain relief and garlic forthe of heart treatment and circulatory disorders. Thisinformation, along with hundreds of other remedies, was preserved in the Ebers papyrus about 3500 yearsago. Ancient China is also a source of information about he early medicinal uses of plants [11]. Although animal and mineral materials have been used, the primary source of remediesis botanical. Of the more than 12 000 items used by traditional healers, about 500 arecommonlyused. Botanical products are used only after some kind of processing, which may include, for example, stir-frying or soaking in vinegar or wine. In clinicalpractice, traditional diagnosis may be followed by the prescription of a complex andoften individualized remedy.Traditional Chinese medicine is still in common use in China. More than half thepopulation regularly uses traditional remedies, with the highest prevalence of use in ruralareas. About 5000 traditional remedies are available in China; they account for approximatelyone fifth of the entire Chinese pharmaceutical market [12]. Many herbal remedies found their way from China into the Japanese systems oftraditional healing. Herbs native to Japan were classified in the first pharmacopoeia ofJapanese traditional medicine in the ninth century [13]. In India, herbal medicinedates back several thousand years to the Rig-Veda, the collection of Hindu sacred verses. This has led to asystem of health care known as Ayurveda medicine.One useful plant from this body of knowledge issnakeroot, used for centuries forits sedative effects.

The number of higher plant species on thisplanet is estimated at 250,000, with alower level at 215,000 [14] and an upper levelas high as 500,000. Of these, only about6% have been screened for biologic activity and a reported 15% have been evaluated phytochemically. With high methods throughputscreening becoming more advancedand available, these numbers will change, butthe primary discriminator in evaluating oneplant species versus another is the matter of approach to finding leads. There are somebroad starting points to selecting and obtainingplant material of potential therapeuticinterest. However, the goals of such anendeavor are straightforward.Plants have an advantage in this areabased on their long-term use by humans(often hundreds or thousands of years)[15].

Herbal Medicines in Developed Countries: Plants and their metabolites constituents have a long history of use inmodern 'western' medicine and in certain systems of traditional medicine and are thesources of important drugs such as atropine, codeine, digoxin, morphine, quinine andvincristine.Use of herbal medicines in developed countries has expanded sharply in the latterhalf of the twentieth century.In recent years, the use of traditionalmedicine information on plant research has again received considerable interest. While the western use ofsuch information have also come under increasing scrutinyand the national and indigenous rights on these resourceshave become acknowledged by most academicand industrial researchers.Meanwhile, the need forbasic scientific investigations on medicinal plants usingindigenous medical systems becomes imminent [16]. The desire to capture the wisdom of traditional healing systems has led to a resurgence of interest in herbal medicines particularly in Europe [17], and NorthAmerica, where herbal products have been incorporated into so-called alternative, complementary, holistic or integrative medical systems. Monographs on selected herbs are available from a number of sources, including the European Scientific Cooperative on Phytotherapy[18], German Commission E [19] and the World Health Organization[20]. The WHO monographs, for example, describe the herb itself by anumber of criteria (including synonyms and vernacular names) and the herb partcommonly used, its geographical distribution, tests used to identify and characterize theherb (including macroscopic and microscopic examination and purity testing), the active principles (when known), dosage forms and dosing, medicinal uses, pharmacology,contraindications and adverse reactions.During the latter part of the twentieth century, increasing interest in self-care resultedin an enormous growth in popularity of traditional healing modalities, including the useof herbal remedies; this has been particularly true in the USA[21].In the European market there are a lot of products derived from natural plants, which are recognized to posses different biological properties, such as antioxidant, antiseptic, diuretic, stimulating the central nervous system, sedative, expectorant, digestive, etc. Some of these plants have been used in traditional medicine since ancient times and are available on market as infusions, tablets and/or extracts. Consumers have reportedpositive attitudes towards these products, in large part because they believe them to be of natural' rather than 'synthetic' origin, they believe that such products are more likely tobe safe than are drugs, they are considered part of a healthy lifestyle and they can helpto avoid unnecessary contact with conventional 'western' medicine.[22].

**Modernand Traditional Prescriptionof Herbal Drugs** (Thymus vulgaris): The pharmacological treatment of disease began long ago with the use of herbs. Although herbalism waned in the eighteenth andnineteenth centuries, many of the remedies employedby the herbalists provided effective treatment. Someof these became useful prescriptions as physicians begane xperimenting with therapeutic agents. William was the first in the medical field to scientifically investigate a folk remedy. His studies (1775-1785) of foxglove as a treatment for dropsy (congestive heartfailure) set the standard for pharmaceutical chemistry.In the nineteenth century, purifying scientists began the active extracts frommedicinal plants. One breakthroughin pharmaceutical chemistry came when Friedrich isolated morphine from the opiumpoppy (Papaversomniferum) in 1806. Continuing thisprogress, Justus von Lie -beg, a German scientist becamea leader in pioneering the field of pharmacology.With increased knowledge of active chemical ingredients, the first purely synthetic drugs based on natural products were formulated in the middle of the nineteenthcentury[22].In plants, these compounds are mostly secondary metabolites under title bioactive compounds such as alkaloids, steroids, tannins and phenol compounds, flavonoids which are capable of producing definite physiological action on body[23]. The medicinal plants are rich in secondary metabolites and essential oils of therapeutic importance. The important advantages claimed for therapeutic uses of medicinal plants in different ailments are their safety besides being economical, effective and their easy availability.

Because of these advantages the medicinal plants have been widely used by the traditional medical practitioners in their day-to-day practice. Among all plant secondary metabolites which act as antioxidants phenolic compounds form a large and varied group. Phenolic compounds contribute significantly to the antioxidant potential of several plant species[24].Among different Thymus species, T. vulgaris is cultivated in many countries by most people especially in rural areas depend on herbal medicines to treat many diseases including inflammation-related ailments such as rheumatism, muscle swelling, insect bites, pains and so on[25]. T. vulgaris is used more in pharmaceutical dosage forms because it contains more essential oil than other species with highamount of thymol which exhibits considerable antitussive and expectorant effects [26]. Considering the fact that Thymus vulgaris is more expensive, some herbal industries tend to use other species of Thymus with different components. So it is crucial to develop a suitable and reliableidentification method to confirm the quality of extracts and herbal drugs. Separation and detection of different constituents in plants have been always complicated. Thymus has approved expectorant, antitussive and spasmolyticactivities. Its antiseptic property is estimated to be 25 times more effective than phenol, with less toxicity [27]. Different species of Thymus are different in content and type of components. Generally they contain thymol, carvacrol, flavonoids and phenolic compounds such as rosmarinic acid which may have anti-edemic and macrophage-inhibiting effects [28]. Thymus vulgarisshows a polymorphic variation in monoterpene presence production. the of intraspecificchemotype variation being common in the genus Thymus. Each of the six chemotypes, geraniol (G),  $\alpha$ -terpineol (A), thuyanol-4 (U), linalool (L), carvacrol (C) and thymol (T), isnamed after its dominant monoterpene [27]. Many pharmacological in vitro experiments carried out during the last decadesrevealed well defined pharmacological activities of both, the thyme essential oil and the plantextracts. The non-medicinal use of thyme is worthy of attention, because thyme is used in thefood and aroma industries; it is widely used as culinary ingredient and it serves as apreservative for foods especially because of its antioxidant effect. Thyme essential oilconstitutes raw material in perfumery and cosmetics due to a special and characteristic aroma. Thymus vulgaris oil is a combination of monoterpenes and those will acts as anti-oxidative, antimicrobial, medicinal drug, antitussive, antispasmodic and antibacterial activities [29].

Chemical Composition of the Essential Oil of *Thymus vulgaris*: The essential oil from *T. vulgaris* showed a high content of oxygenated monoterpenes (56.53%) and low contents of monoterpenehydrocarbons (28.69%), sesquiterpene hydrocarbons (5.04%) and oxygenated sesquiterpenes (1.84%). The predominant compoundamong the essential oil components was thymol (51.34%) while theamount of all other components of the oil was less than 19%[30].

Medicinal Applications: Thyme has been thought of to be antiseptic, antimicrobial, medication, astringent, anthelmintic, medicinal drug, carminative, disinfectant, medicinal drug and tonic. Thyme is incredibly useful incases of assorted intestinal infections and infestations, like hookworms, ascarids, gram-positive and gramnegative bacterium, fungi and yeastsas well as Candida albicans. Its active constituent, thymol, is activeagainst enterobacteria and coccid bacteria. Thyme may also improveliver functioning and act as an appetite stimulant. It will be used intreatment of cartilaginous tube, bronchial and urinary infections[31]. Thyme is helpful in treatment of laryngitis and inflammation. the main component of the volatile oil of thyme, thymol, is active against enterobacteria and coccid bacteria.It is used for skin issues like oily skin, sciatica, acne, dermatitis, skincondition and bug bites. In aromatherapy, the distinct types, thymol, red thyme oil', linalool kind for its terribly light soft action and thuyanolfor antiviral properties are used. A corrected product, 'white thymeoil' is also used and it's milder on the skin. Applied to the skin, thymerelieves bites and stings and relieves neuralgia and rheumatic aches andpains [32].

Antioxidant Properties: An antioxidant is a molecule that inhibits the oxidation of differentmolecules. Oxidation is a chemical process that transfers electrons orhydrogen from a substance to an oxidizing agent. Oxidation reactions will produce free radicals. In turn, these radicals will begin chainreactions. Once the chain reaction happens in a cell, it will caused amage or death to the cell. Anti-oxidants stop these chain reactionsby removing free radical intermediates inhibit different and oxidationreactions. The leafy parts of thyme and its oil are utilized in foods for the flavor, aroma and preservation and additionally in folk medicines. El-Nekeetyconducted an experiment to work out the elements of Thymus vulgaris oil and to evaluate the protecting effects of this oil against aflatoxininduceoxidative stress in rats. The results indicated that the oil containsCarvarcrol (45 mg/g), Thymol (24.7 mg/g), β-Phellandrene (9.7 mg/g), essential oil (4.1 mg/g), Humuline (3.1 mg/g),  $\alpha$ -Phellandrene (2.3 mg/g) and Myrcene (2.1 mg/g) [9]. However,  $\alpha$  and  $\beta$ pinene, Myrcene, a-thyjone, Tricyclene, 1, 8-cineole and β-sabinene were found invery lower concentrations. Treatment with aflatoxins alone disturbslipid profile in blood serum. decreases total antioxidant capability, increase creatinine, uric acid and nitric oxide in blood serum andlipid peroxidation in liver and excretory organ attended with a severhistological changes within the liver tissues. The oil alone at the 2 testeddoses didn't induce any important changes within the biochemicalparameters or the histological image. The combined treatment showedimportant enhancements altogether tested parameters and histologicalfootage within the liver tissues. Moreover, this improvement wasadditional pronounced within the cluster received the high dose of theoil [33].

Anti Bacterial Activity: The essential oils obtained from Thymus vulgaris harvested at4 biological process stages were evaluated for their biologicalchemical components. The thyme volatile oils were analyzedfortheir inhibition effects against 9 strains of gram-negative bacteria and6 strains of gram-positive bacteria. The bio-impedance methodologywas chosen for finding out the antibacterial activity of the essentialoils and also the parameter chosen for outlining and quantifying theantibacterial activity of the thyme oils was the detection time. Theplate counting technique was used for studying the inhibitory effect bydirect exposure. All the thyme essential oils have a significantbacteriostatic activity against the tested microorganisms. This activitywas additional marked against the gram-positive bacteria. The oil fromthyme flower was the foremost effective at stopping the growth of the examined microorganism species. The oils tested showed to possess smart antibacterial activity by direct contact thatgave the impression to bemarked against the gram-negativemicroorganism. some number of the species were capable of recovering a minimum of 50% of their metabolic function once contactwith the inhibitor, whereas most of the strains were shown to have beeninactivated almost completely [34].

Anti-Viral Property: Silkeet al. conducted an experiment with aqueousextracts from species of the Lamiaceae family were examined for theirantiviral activity against Herpes simplex virus (HSV). Extracts fromthyme (Thymus vulgaris) has shown inhibitory activity against Herpessimplex virus type 1 (HSV-1), type 2 (HSV-2) and an acyclovir-resistantstrain of HSV-1 was tested in vitro on RC-37 cells in a plaque reductionassay [35].

Anti-Inflammatory Property: Thymus vulgaris oil is a combination of monoterpenes. Themost compounds of this oil are the natural terpenoidthymol and itsphenol chemical compound carvacrol [33] that hasmedicinal drug, anti-oxidative, antimicrobial, antitussive, antispasmodic andantibacterial effects [30]. Terpenoids, flavonoid aglycones, flavonoidsglycosides and synthetic resin acids were additionally found in Thymusspp.

**Insecticidal Activity:** The insecticidal activity of thyme volatile oil, thymol and carvacrolwas evaluated in laboratory against completely different larval stagesof lesser mealworm. The sooner and later larval stages were reared ondiets containing one or two acetone solutions of tested compounds.Insecticidal activity of thyme volatile oil and pure monoterpenesagainst A. diaperinus larvae relied on the dose and age of larvae. Thegrowth of younger larvae was considerably affected, whereas those ofolder larval stage were less influenced and only by pure oil components.In young larvae the application 1% thyme oil, thymol and carvacrol,caused mortality of 50.0, 86.67 and 85%, respectively [36].

#### CONCLUSION

The outset of the new millennium the World Health Organization (WHO) estimated that the majority of the populations of most countries were still relying primarily upon indigenous or traditional forms of medicine for meeting everyday health care needs. It has been estimated that in developed countries such as United States, plant drugs constitute as much as 25% of the total drugs, while in fast developing countries such as China and India, the contribution is as much as 80%. Consumers have reportedpositive attitudes towards these products, in large part because they believe them to be of natural' rather than 'synthetic' origin, they believe that such products are more likely tobe safe than are drugs, they are considered part of a healthy lifestyle and they can helpto avoid unnecessary contact with conventional 'western' medicine.Although modern medicine may exist side-byside with such traditional practice, herbal medicines have often maintained their popularity for historical andcultural reasons.

### REFERENCES

- Prakash, P. and G. Neelu, 2005. Therapeutic uses of ocimum sanctum linn (tulsi) with a note on eugenol and its pharmacological actions: areview. Indian J. Physiol Pharmacol., 49(2): 125-131.
- Farnsworth, N.R., 1990. The role of ethnopharmacology in drug development. Ciba Foundation Symposium 154. Bioactive compounds fromplants. BaffinsLane, Chichester (England): John Wiley & Sons; pp: 2-21.
- Bhat, K.K.P., 1995. Medicinal plant information databases. In: Non-Wood Forest Products. 11.Medicinal Plants for Conservation and Health Care, Rome, Food and AgricultureOrganization
- Newman, D.J., G.M. Cragg and K.M. Snader, 2000. The influence of natural products upon drug discovery. Nat. Prod Rep., 17: 215-234.
- Jones, W.P., Y.W. Chin and A.D. Kinghorn, 2006. The role of pharmacognosy in modern medicine and pharmacy. CurrDrug Targets., 7: 247-264.
- Newman, D.J. and G.M. Cragg, 2007. Natural products as sources of new drugs over the last 25 years. J Nat Prod., 70: 461-477.
- Clark, A.M., 1996. Natural products as asource for New Drugs. Pharmaceutical Research, 13(8): 1133-1141.
- 8. WHO, 1993. Research Guidelines for Evaluating the Safety and Efficacy of Herbal Medicines, Manila
- Christopher Brickell, 2008. RHS A-Z encyclopedia of garden plants. Dorling Kindersley, United Kingdom.
- 10. http://bioweb.uwlax.edu/bio203/s2012/disrud\_sama /classification.htm
- Xiao P, editor. A pictorial encyclopaedia of Chinese medicine. v1-10. Hong Kong: Commercial Press, pp: 1988-90.
- Li, L., 2000. [Opportunity and challenge of traditional Chinese medicine in face of the entrance to WTO (World Trade Organization)]. Chin. Inform. trad. Chin. Med., 7: 7-8. (in Chinese).
- Saito, H., 2000. Regulation of herbal medicines in Japan. Pharmacol. Regul., 41: 515-519.
- Arash, R., P. Koshy and M. Sekaran, 2010. Antioxidant potential and phenolic content of ethanolic extract of selected Malaysian plants. Research Journal of Biotechnology; 5(1): 16-19
- 15. Tippo, O. and W.L. Stern, 1977. Humanistic Botany. New York: W.W. Norton.

- Taylor, L., 2000. Plant based drugs and medicines.; Available at: http://rain-tree.com/ plantdrugs.htm (2001 Oct 15)
- Tyler, V.E., 1999. Phytomedicines: back to the future. J Nat Prod., 62: 1589-92.
- ESCOP (European Scientific Cooperative on Phytotherapy),1999. ESCOP Monographs on theMedicinal Uses of Plant Drugs, Exeter, UK
- Blumenthal, M., W.R. Busse, A. Goldberg, J. Gruenwald, T. Hall, C.W. Riggins and R.S. Rister, eds, 1998. The Complete German Commission E Monographs: Therapeutic Guide to Herbal Medicines, Austin, TX/Boston, MA, American Botanical Council/Integrative Medicine Communications.
- WHO, 1999. WHO Monographs on Selected Medicinal Plants, Vol. 1, Geneva
- Food and Drug Administration,2002. Good Manufacturing Practices (GMP)/Quality System(QS) Regulation [http://www.fda.gov/cdrh/dsma/ cgmphome.html]
- Schulz, V., R. Hänsel and V.E. Tyler, 2001. Rational Phytotherapy. A Physician's Guide to Herbal Medicine, 4th Ed., Berlin, Springer-Verlag
- Donald, P. and Briskin, 1988. Medicinal Plants and Phytomedicines. Linking Plant Biochemistry and Physiology to Human Health. Plant Physiology 2000, 124: 507-514.
- 24. Cronquist, A. The Evolution and Classification of Flowering Plants. Bronx, NY:New York Botanical Garden.
- Namsa, N.D., H. Tag, M. Mandal, P. Kalita and A.K. Das, 2009. An ethnobotanical study of traditional anti-inflammatory plants used by the Lohit community of Arunachal Pradesh. India J Ethnopharmacol; 125(2): 234-45.
- Verpoorte, R., 2000. Pharmacognosy in the new millennium: leadfinding and biotechnology. J Pharm Pharmacol., 52: 253-262.
- Thompson, J., J. Chalcha, A. Michet, Y. Linhart and B. Ehlers, 2003. Qualitative and quantitative variation in monoterpene co-occurrence and composition in the essential oil of Thymus vulgaris chemotypes., J. Chem Ecol., 29(4): 859-80.
- Zarzuelo, A. and E. Crespo, 2002. Medicinal and Aromatic Plants – Industrial Profiles, vol. 24-Thyme, E. Stahl-Biskup and F. Saez, eds., Taylor&Francis, pp: 278.

- Marculescu, A., L. Vlase, D. Hanganu, C. Dragulescu, I. Antonie and O. Neli-Kinga, 2007. Polyphenols analyses from Thymus species, Proc. Rom. Acad., Series B, 3: 117-121.
- Maher Ali Ahmed Al.Maqtari, Saeed Mohammed Alghalibi, EbtesamHasanAlhamzy,2011. Chemical composition and antimicrobial activity of essential oilof Thymus vulgaris from Yemen. Turk J Biochem 36: 342-349.
- Hompson, J., J. Chalcha, A. Michet, Y. Linhart and B. Ehlers, 2003. Qualitative and quantitative variation in monoterpene co-occurrence and composition in the essential oil of Thymus vulgaris chemotypes., J. Chem Ecol., 29(4): 859-80.
- 32. ESCOP, 2007. ESCOP Monographs: The Scientific Foundation for Herbal Medicinal Products. The European Scientific Cooperative on Phytotherapy in collaboration with Georg Thieme.

- Nickavar, B., F. Mojab and R. Dolat-Abadi, 2005. Analysis of the essential oils of two Thymus species from Iran. Food Chemistry, 90: 609-611.
- Marino, M. and C. Bersani, 1999. Antimicrobial Activity of the Essential Oils of Thymus vulgaris L. Measured Using a Bioimpedometric Method. J Food Prot., 62: 1017-23.
- 35. Silke Nolkemper, Jürgen Reichling, Florian C. Stintzing, Reinhold Carle and Paul Schnitzler, 2006. Antiviral Effect of Aqueous Extracts from Species of theLamiaceae Family against Herpes simplex Virus Type 1 and Type 2 in vitro. Planta Med., 72: 1378-1382.
- 36. Szczepanik, M., B. Zawitowska and A. Szumny, 2012. Insecticidal activities of Thymus vulgaris essential oil and its components (thymol and carvacrol)against larvae of lesser mealworm, Alphitobiusdiaperinus Panzer (Coleoptera:Tenebrionidae). Allelopathy Journal 30: 129.