

GINGER, FROM THE DINING TABLE STRAIGHT TO THE PHARMACY

MICHAL JURÁŠEK and PAVEL DRAŠAR

*Department of Chemistry of Natural Substances, University of Chemistry and Technology, Technická 5, 166 28 Prague 6
drasarp@vscht.cz*

Keywords: ginger, gingerols, shogaols, biological activity

● <https://doi.org/10.54779/chl20220519>



Obr. 1. *Zingiber officinale*

Ginger (*Zingiber officinale* Roscoe) is a perennial tropical plant (Fig.1, ref¹), grown in the Orient under various names, namely ada, adrak, aradraka, adu, ale, allamu, gyin, halia bara, ingiver, inchi, inji, sonthi. In Czech zázvor, in German Ingwer. It is from the family Zingiberaceae together with turmeric, cardamom or galangal. Its rhizome is used, as a food and a medicinal drug, whether fresh, pickled, candied, or ground dried, or as oil and resin (oleoresin) obtained from it, the latter two with the attribute GRAS (Generally Recognized As Safe)². It is necessary to distinguish it from ginger-grass (*Cymbopogon martini*) or black ginger (*Kaempferia parviflora*).

It has been grown in the world since time immemorial, producing more than 4 million tons per year, mostly in India. Productivity is around 3.5 t/ha (ref.³), whereas its production is known to be increasingly threatened by fungal infestation⁴. They mention it as a useful medicinal plant 4,000 years ago also the Vedas⁵, TCM⁶, Dioscorides⁷ a Matthioli⁸. The chemical literature shows a growing interest in this drug, when in 2021 the Chemical Abstracts Service registered 351 citations, as shown in the graph in Fig. 2.

Ginger is one of the most commonly consumed herbal drugs with significant pharmacological and physiological activities. It is widely used in folk medicine, for various diseases, including chronic diseases such as diabetes in general^{10,11}, diabetic nephropathy¹², diabetic retinopathy¹³, type 2 diabetes (ref¹⁴), many types of tumours^{15–19}, ulcers^{20,21}, Alzheimer disease^{22,23}, cardiovascular disease^{24,25}, pulmonary fibrosis²⁶, arthritic pain, poisoning⁶, viroses²⁷, a depressions²⁸. The beneficial effect of ginger in these diseases lies primarily in its antioxidant^{29,30}, antimicrobial³¹, fungicidal³² and anti-inflammatory properties³³ and, among other things, it reduces the problems of ketosis³⁴, migraine³⁵, lowers lipid levels³⁶, mild nausea and vomit-

ing, a property of which is used e.g. even when administering chemotherapeutics³⁷, mild cramps and sore throat³⁸, and promotes digestion³⁹. Its use as an aphrodisiac is known⁴⁰, according to the Qur'an, it will be used by the orthodox in paradise⁴¹. It is a natural product with as powerful biological properties as those we are trying to describe in this journal, e.g.^{42–44}, in a series of articles we launched 15 years ago⁴⁵.

The sharp aroma and taste of fresh ginger rhizome are due to the mixture of bioactive volatile oils⁴⁶ or lipophilic extract⁴⁷ (e.g. gingerols, shogaols, paradol and zingerone), which account for about 1-3% of its weight. [6]-Gingerol ((5S)-5-hydroxy-1-(4-hydroxy-3-methoxyphenyl)decan-3-on) is considered the main pungent and main bioactive compound in fresh ginger⁴⁸. [4]-, [8]-, [10]-, and [12]-gingerols are present in smaller quantities⁴⁹. In addition, ginger also contains mono and sesquiterpenes⁵⁰, several important antioxidant compounds such as vitamin C, vitamin E, niacin, β-carotene, pantothenic acid, lutein, lycopene, quercetin, genistein and tannin^{15,51}. In addition, ginger contains essential elements such as potassium, magnesium, phosphorus, calcium, manganese, copper, selenium and zinc^{15,51}. In addition, ginger has been found to contain small amounts of toxic elements such as cadmium, lead and nickel⁵².

The PubChem database states that [6]-gingerol has been associated in the literature with a number of diseases, such as neoplasms, cancers, metastases, hyperplasia, complications associated with diabetes, glucose intolerance, keratosis, diarrhoea, bleeding, prostate diseases, teratozoospermia, testicular diseases, pathological weight changes⁵³,

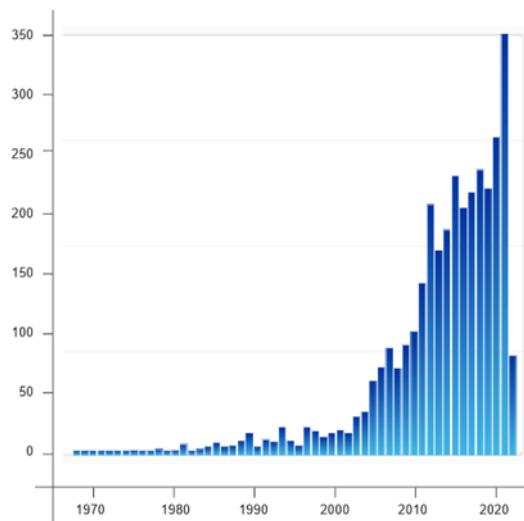
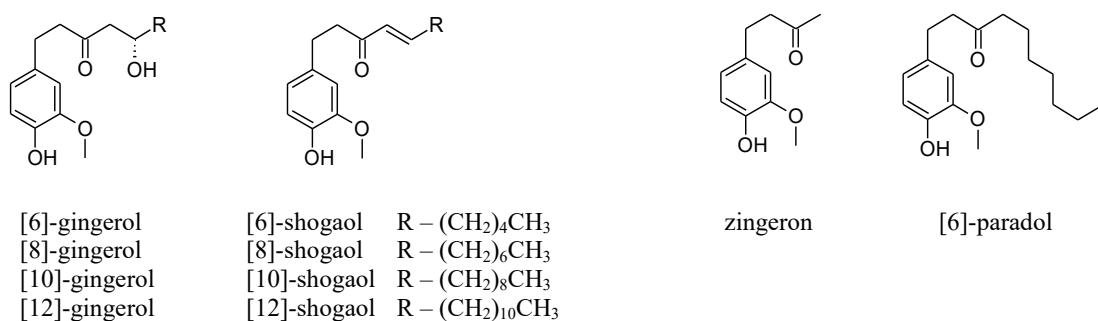


Fig. 2. The growing trend in the number of publications on ginger (1969–2022)⁹



The number in square brackets indicates the number of carbons in the side chain after the α -carbon next to the carbonyl carbon.

the same database states that it is irritating and toxic ($LD_{50}/mice/p.o.$ 250 mg/kg, ref.⁵⁴). Unlike the previous one, the GRAS status for the products it contains and e.g. also a study stating that the metabolism of gingerols and shogaols was studied in healthy volunteers¹⁵ with doses *p.o.* up to 2 g. [6]-Gingerol can be dissolved 80 mg in a litre of water⁵⁵ but its solubility can be increased by complexation with β -cyclodextrin⁵⁶ min. 4×.

Gingerols and shogaols are metabolised to glucuronides and sulphates after ingestion and are thus easily eliminated¹⁵.

When researching the biological properties of ginger and its components, we encounter difficulty. Gingerols, the main compounds in fresh ginger, are prone to dehydration and conversion to shogaols, the main compounds in dried ginger, due to the instability of β -hydroxy ketone when exposed to the mild heat and/or acidic conditions⁵⁷. The heat treatment of ginger transforms gingerol into zingerone, which is less pungent and has a spicy-sweet aroma, by reversing the aldol reaction.

Department of Complementary and Alternative Medicine, John A. Burns School of Medicine, University of Hawai'i, USA, after evaluating the available studies, divides the results into 'suggestive' (eg short-term use of ginger for safe relief of pregnancy-related nausea and vomiting), 'mixed' (eg use for travel sickness, nausea after chemotherapy or surgery) and 'unclear' (e.g. treatment of rheumatoid arthritis, osteoarthritis or joint and muscle pain)⁵⁸.

We bring this paper again as a textbook describing various interesting aspects of the chemistry of natural substances (cf.^{59,60}), also because we want to respond in this way to the number of ideas, half-truths and nonsense that are spread around natural compounds today. We are pleased to find a natural substance that, moreover, has negligible toxicity, almost zero contraindications and which has been used by mankind for thousands of years.

REFERENCES

- Köhler F. E.: *Köhler's Medizinal-Pflanzen - The Internet Archive List of Koehler Images*, Public Domain,

<https://commons.wikimedia.org/w/index.php?curid=5111564>, downloaded 5. 4. 2022.

- FDA: CFR – Code of Federal Regulations Title 21, díl 3, kap. I/B, část 182/A; <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=182.20>, downloaded 5. 4. 2022.
- Gupta R. K.: *Vegetos* 21, 1 (2008).
- Ravindran P., Kozhamburath A., Jeevalatha A., Bhat A. I., Krishnamurthy K. S.: *Australas. Plant Pathol.* in press (2022); DOI10.1007/s13313-022-00862-z.
- Afzal M., Al-Hadidi D., Menon M., Pesek J., Dhami M. S.: *Drug Metab. Drug Interact.* 18, 159 (2001).
- Menon V., Elgarhib M., El-awady R., Saleh E.: *Food Biosci.* 41, 100934 (2021).
- Dioscorides P.: *De materia medica* (Διοσκουρίδης Π.: Περὶ ὕλης ἰατρικῆς), Kilikie between years 50 and 75 AD; English commented translation Osbaldeston T. A., Ibis Press, Johannesburg, South Africa 2000; https://ia802907.us.archive.org/16/items/de-materia-medica/scribd-download.com_dioscorides-de-materia-medica.pdf, downloaded 5. 4. 2022.
- Mathioli P. O., in book: *Commentarrii in sex libros Pedacii Dioscoridis*, Praha 1562; Czech translation *Herbář neboť Bylinář*, p. 411. Levné knihy, Praha 2003.
- CAS: <https://scifinder-n.cas.org/>, downloaded 10. 4. 2022.
- Al Hroob A. M., Abukhalil M. H., Alghonmeen R. D., Mahmoud A. M.: *Biomed. Pharmacother.* 106, 381 (2018).
- Zhu J., Chen H., Song Z., Wang X., Sun Z.: *Evid. Based Complement. Altern. Med.* 2018, 5692962.
- Rafieian-Kopaei M., Nasri H.: *J. Renal Inj. Prev.* 2, 9 (2013).
- Ma H., Li J.: *J. Food Biochem.* 2022, e14084.
- Ebrahimzadeh A., Ebrahimzadeh A., Mirghazanfari S. M., Hazrati E., Hadi S., Milajerdi A.: *Complement. Ther. Med.* 65, 102802 (2022).
- Zick S. M., Djuric Z., Ruffin M. T., Litzinger A. J., Normolle D. P., Feng M. R., Brenne D. E.: *Cancer Epidemiol. Biomarkers Prev.* 17, 1930 (2008).
- De Lima R. M. T. and 16 co-authors: *Phytother. Res.*

- 32, 1885 (2018).
17. Saha A., Blando J., Silver E., Beltran L., Sessler J., DiGiovanni J.: *Cancer Prev. Res. (Phila)* **7**, 627 (2014).
 18. Salafzoon S., Mahmoodzadeh Hosseini H., Halabian R.: *J. Complement. Integr. Med.* **15**, 20170071 (2018).
 19. Chen S. Y., Lee Y. R., Hsieh M. C., Omar H. A., Teng Y. N., Lin C. Y., Hung J. H.: *Front. Pharmacol.* **9**, 2018.00780 (2018).
 20. Wang Z., Hasegawa J., Wang X., Matsuda A., Tokuda T., Miura N., Watanabe T.: *Yonago Acta Med.* **54**, 11 (2011).
 21. Liu D., Guo M., Hu Y., Liu T., Yan J., Luo Y., Yun M., Yang M., Zhang J., Guo L.: *J. Tradit. Chin. Med.* **35**, 273 (2015).
 22. Noori T., Dehpour A. R., Sureda A., Sobarzo-Sanchez E., Shirooie S.: *Eur. J. Pharmacol.* **898**, 173974 (2021).
 23. Cuya T., Baptista L., Celmar Costa Franca T.: *J. Biomol. Struct. Dyn.* **36**, 3843 (2018).
 24. Liu Q., Liu J., Guo H., Sun S., Wang S., Zhang Y., Li S., Qiao Y.: *Planta Med.* **79**, 322 (2013).
 25. Nicoll R., Henein M. Y.: *Int. J. Cardiol.* **131**, 408 (2009).
 26. Liu L., Yu N., Leng W., Lu Y., Xia X., Yuan H.: *Allergol. Immunopathol.* **50**, 104 (2022).
 27. Hayati R. F., Better C. D., Denis D., Komarudin A. G., Bowolaksono A., Yohan B., Sasmono R. T.: *BioMed Res. Int.* **2021**, 6623400.
 28. Kukula-Koch W., Koch W., Czernicka L., Glowniak K., Asakawa Y., Umeyama A., Marzec Z., Kuzuhara T.: *Molecules* **23**, 301 (2018).
 29. Masuda Y., Kikuzaki H., Hisamoto M., Nakatani N.: *Biofactors* **21**, 293 (2004).
 30. Danwilai K., Konmun J., Sripanidkulchai B., Subongkot S.: *Cancer Manag. Res.* **9**, 11 (2017).
 31. Park M., Bae J., Lee D. S.: *Phytother. Res.* **22**, 1446 (2008).
 32. Ficker C., Smith M. L., Akpagana K., Gbeassor M., Zhang J., Durst T., Assabgui R., Arnason J. T.: *Phytother. Res.* **17**, 897 (2003).
 33. Jeena K., Liju V. B., Kuttan R.: *Indian J. Physiol. Pharmacol.* **57**, 51 (2013).
 34. Ernst E., Pittler M. H.: *Br. J. Anaesth.* **84**, 367 (2000).
 35. Mustafa T., Srivastava K. C.: *J. Ethnopharmacol.* **29**, 267 (1990).
 36. Kausar T., Anwar S., Hanan E., Yaseen M., Abelnaga S. M. H., Azad Z. R. A. A.: *J. Pharm. Res. Intern.* **33**, JPRI.67538 (2021).
 37. Dai Y., Zhao Y., Nie K.: *Evid. Based Complement. Altern. Med.* **2022**, 1753430.
 38. Kumari I., Madhusudan S., Walia B., Chaudhary G.: *Int. J. Curr. Res.* **13**, 16583 (2021).
 39. Micklefield G. H., Redeker Y., Meister V., Jung O., Greving I., May B.: *Int. J. Clin. Pharmacol. Ther.* **37**, 341 (1999).
 40. Wolf A., Hrubý S., Hájek M., in book: *Elixíry života*, p. 190. Pragma, Praha 1997.
 41. Quran, surah 76, *Al-Insaan|Ad-Dahr* ("The Man"), verse 17–18, translation to Czech Ivan Hrbek, Odeon Praha 1972, p.173.
 42. Kodr D., Rumlová M., Zimmermann T., Džubák P., Jurášek M.: *Chem. Listy* **114**, 658 (2020).
 43. Jurášek M., Opletal L., Drašar P.: *Chem. Listy* **115**, 458 (2021).
 44. Jurášek M., Opletal L., Harmatha J., Sláma K., Drašar P.: *Chem. Listy* **115**, 595 (2021).
 45. Lapčík O., Čopíková J., Uher M., Moravcová J., Drašar P.: *Chem. Listy* **101**, 44 (2007).
 46. An K., Zhao D., Wang Z., Wu J., Xu Y., Xiao G.: *Food Chem.* **197 Pt B**, 1292 (2016).
 47. Jesudoss V. A. S., Santiago S. V. A., Venkatachalam K., Subramanian P., in book: *Gastrointestinal Tissue*, Chapter 21 – *Zingerone (Ginger Extract): Antioxidant Potential for Efficacy in Gastrointestinal and Liver Disease* (Gracia-Sancho J., Salvadó J., ed.), p. 289. Academic Press, London 2017.
 48. He L., Qin Z., Li M., Chen Z., Zeng C., Yao Z., Yu Y., Dai Y., Yao X.: *J. Agric. Food Chem.* **66**, 9010 (2018).
 49. Shah Ismail and 10 co-authors: *Recent Advances in Natural Products Analysis* Chapter 6 – *Analysis of other phenolics (capsaicin, gingerol, and alkylresorcinols)* (Silva A. S., Nabavi S. F., Saeedi M., Nabavi S. M., ed.), p. 255. Elsevier, Amsterdam 2020.
 50. Kiyama R.: *J. Nutr. Biochem.* **86**, 108486 (2020).
 51. Dhanik J., Neelam A., Viveka N.: *J. Pharmacogn. Phytochem.* **6**, 174 (2017).
 52. Koch W., Kukula-Koch W., Marzec Z., Kasperek E., Wyszogrodzka-Koma L., Szwerc W., Asakawa Y.: *Int. J. Mol. Sci.* **18**, 452 (2017).
 53. <https://pubchem.ncbi.nlm.nih.gov/compound/Gingerol#section=Associated-Disorders-and-Diseases>, downloaded 10. 4. 2022.
 54. <https://pubchem.ncbi.nlm.nih.gov/compound/Gingerol#section=Toxicity>, downloaded 10. 4. 2022.
 55. <https://foodb.ca/compounds/FDB001108>, downloaded 10. 4. 2022.
 56. da Silva J. A., Sampaio P. A., Dulcey L. J. L., Cominetti M. R., Rabello M. M., Rolim L. A.: *J. Drug Delivery Sci. Technol.* **61**, 102103 (2021).
 57. Sang S. M., Snook H. D., Tareq F. S., Fasina Y.: *J. Agric. Food Chem.* **68**, 8517 (2020).
 58. Hoffman T.: *Hawaii Med. J.* **66**, 326 (2007).
 59. Čopíková J., Lapčík O., Uher M., Moravcová J., Drašar P.: *Chem. Listy* **100**, 778 (2006).
 60. Jurášek M., Opletal L., Kmoníčková E., Drašar P.: *Chem. Listy* **115**, 363 (2021).

Abstract

Common food and spice, ginger contains a plethora of biologically active compounds that may serve as a basis for pharmaceutical exploitation.

- Jurášek M., Drašar P.: *Chem. Listy* **116**, 519–521 (2022).
- <https://doi.org/10.54779/chl20220519>