

FROM PRECLINICAL TO CLINICAL EVIDENCE: EXPLORING THE MULTIPLE PERSPECTIVES AND HEALING POWER OF *BOSWELLIA SERRATA* ROXB. EX COLEBR

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SUMMARY

Boswellia serrata Roxb. ex Colebr. is a species belonging to the *Burseraceae* family, typical of dry environments of the Indian region. The oil-gum-resin, obtained from the trunk and thick branches, is known in phytotherapy for the volatile fraction which contains up to 70% terpenes. The most important and characteristic constituents are represented by pentacyclic triterpenes, named boswellic acids. *B. serrata* is known for multiple beneficial effects, mainly correlated to anti-inflammatory activity. This review aims to provide a comprehensive overview on the activities and potential applications of *B. serrata* based on clinical and preclinical evidence.

An up-to-date literature review of preclinical and clinical studies related to the applications of *B. serrata* preparations in different pathological conditions was conducted using the main databases of scientific literature.

A body of evidence point out the role of *B. serrata* extracts and its active constituents in the treatment of several inflammatory diseases. In particular, clinical trials revealed its use as a topical remedy of skin diseases, such as eczema and psoriasis, and internally in the treatment of asthma, intestinal and osteoarticular inflammatory diseases. Preclinical findings highlighted the positive effects of *B. serrata* extracts in cardiovascular and neurodegenerative diseases, and in cancer. Finally, *B. serrata* finds application as a feed additive in veterinary use.

Although some limitations must be overcome, such as poor bioavailability, evidence supports that *B. serrata* is a promising medicinal plant. Furthermore, the use of *B. serrata* appears to have a favorable toxicological profile, but caution may be necessary regarding potential botanical-drug interactions.

Key words

Boswellia serrata; boswellic acids; natural compounds; inflammation; degenerative diseases.

List of abbreviations

5-LOX: 5-lipoxygenase; ABAs: acetyl boswellic acids (acetyl α - and β -boswellic acid); AD: Alzheimer's Disease; AKBA: 3-O-acetyl-11-keto- β -boswellic acid; ALS: amyotrophic lateral sclerosis; A β : amyloid beta peptide; BA: boswellic acids (α - and β -boswellic acid); CD: Crohn's Disease; cGMP: cyclic guanosin-3',5'-monophosphate; COX-1, COX-2, Type 1- and 2- cyclooxygenase; EMA: European Medicines Agency; eNOS: endothelial nitric oxide synthase; GIIA: Group II secreted phospholipase A2; IC50 value: inhibitory concentration (50%); iNOS: inducible nitric oxide synthase; KBA: 11-keto- β -boswellic acid; LD50: lethal dose (50%); MS: multiple sclerosis; OA: osteoarthritis; PFC: Prefrontal cortex; ROS: reactive oxygen species; UC: Ulcerative Colitis; VAS: Visual Analog Scale; WO-MAC: Western Ontario and McMaster Universities Osteoarthritis Index.

INTRODUCING BOSWELLIA: BOTANICAL DESCRIPTION, PHYTOCHEMISTRY AND REGULATORY ASPECTS

Boswellia serrata Roxb. ex Colebr. is a species belonging to the *Burseraceae* family, commonly found growing in dry environments and at the margin of forests in the Indian region, from Punjab to Bengal in the north to peninsular India in the south (1). The resin, more precisely the oil-gum-resin naturally obtained from the trunk and thick branches is known in phytotherapy as Indian frankincense, in pharmacopoeias and official texts as *Gummi Boswellii* (2) or as *Olibanum indicum* (3). Former botanical synonyms of *B. serrata* are *B. glabra* Roxb. and *B. thurifera* (Colebr.) Roxb.

A distinct species of *Boswellia* genus known in folk medicine and taken into consideration as a source of ceremonial incense is generically referred as frankincense (properly African frankincense), and thus confused in this context with *B. serrata*, is *Boswellia sacra* Flueck. (syn. *Boswellia carteri* Birdw.), native in the Arabian Peninsula and the Horn of Africa (4).

B. serrata is a deciduous tree, up to 18 m in height and up to 2.4 m wide in trunk diameter. Leaves are imparipinnate, up to 37 cm long and have ovate or ovate-lanceolate leaflets with serrate margins. Flowers are small, white, grouped in axillary racemes or panicles with 5 hairy petals and sepals and stamen, directed inwards. The fruit, 3-4 in number, is a drupe 9-14 mm long, trigonous, scarlet when unripe and white at maturity. The bark is grey, thick, and aromatic. The resin exudes from natural

or artificial incision and solidifies to open air into an irregular mass (5). It is reddish-orange brown to greenish yellow, or light yellow. It occurs in small, ovoid, fragrant tears, sometimes agglomerated; the surface is waxy and translucent. *Gummi boswellii* burns readily and emanates an aromatic, characteristic balsamiferous odor; the taste is agreeable (2).

B. serrata gum-resin contains a volatile fraction, a triterpenic part, and gum; this latter is a complex mixture that is not clearly identifiable, mainly based on carbohydrates (6). According to the Monograph on Selected Medicinal Plants issued by the World Health Organization (WHO), the volatile fraction (up to 9%) consists in α -thujene (50-61% of the fraction), sabinene (5%), α -pinene (8%), phellandrene (2%), and minor monoterpenes. The triterpenic fraction of boswellia gum-resin is characteristic of the species and the phytochemical signature of pentacyclic triterpenes may be considered as the chemical marker of this herbal product. Specifically, boswellia gum-resin contains triterpenes in large quantities, up to 70% of total terpenes. The most important and characteristic constituents are pentacyclic triterpenes, called boswellic acids (BAs), based on 3-hydroxyurs-12-ene-23-oic acid skeleton. The major BAs found in boswellia gum-resin are: α - and β -boswellic acid (up to 25%, mainly β -boswellic acid), acetylated α - and β -boswellic acid (ABAs, up to 8%), 11-keto- β -boswellic acid (KBA, 0.5-7.5%) and 3-O-acetyl-11-keto- β -boswellic acid (AKBA, 0.1-3%) (7-9). KBA and AKBA (minimum 1% of each, dry basis) are the two markers considered

for the quality of *Olibanum indicum* according to the European Pharmacopoeia 11th ed.

B. serrata gum-resin is an herbal material registered as medicine and it is enlisted in the previously mentioned European Pharmacopoeia 11th ed., as well as in several Asian pharmacopoeias. In the European Union (EU) it is an orphan drug used in the treatment of peritumoral edema derived from brain tumors as a powdered drug (9) (see section 9.2).

Boswellia gum-resin is also widely used as food supplement in the EU and in many other countries. In Italy, one of the most important markets for food supplements and where health claims are linked to specific botanicals (10), boswellia is claimed to maintain osteoarticular functionality, to counteract states of tension, and to support gastrointestinal health (11). *B. sacra* is also used in the EU as food supplement, with the same health claims referred to *B. serrata* (11).

In the sector of food supplements, boswellia gum-resin is mainly used as a dry extract, standardized in total BAs. Depending on the method of quantification, BAs in boswellia extracts may vary between 3% to up to 43% by using HPLC method (12), even if many products are still analyzed by means of UV methods and they are labelled to contain up to 65-70% of total BAs (13).

While boswellia preparations and isolated compounds have been tested *in vitro* and *in vivo* models, only powdered drugs and extracts containing the whole boswellia phyto-complex have been considered in clinical trials.

MULTI-TARGET EFFECTS OF BOSWELIC ACIDS

The multiple beneficial effects described for *B. serrata* preparations are primarily associated with anti-inflammatory action; indeed, BAs have been shown to regulate several mechanisms of the inflammatory pathway, including inhibition of leukotrienes, prostaglandin synthesis, inhibition of the complement system, and decreased production of pro-inflammato-

ry mediators (14). AKBA inhibits 5-lipoxygenase (5-LOX) by a selective, enzyme-directed, non-redox, non-competitive mechanism, with IC_{50} from 1.5 μ M to 8.0 μ M (15). Furthermore, an *in silico* drug-likeness prediction and molecular docking identified high binding affinity of AKBA towards COX-2, iNOS, and TNF- α (16). Elemolic acid, another triterpenoid of *B. serrata*, was shown to irreversibly bind to Group II secreted phospholipase A2 (GIIA) with IC_{50} value of 5.70 ± 0.02 μ M (17). The anti-inflammatory action of BAs or other constituents of *B. serrata* extract are also linked to the inhibition of NF- κ B. Mechanistically, AKBA inhibited NF- κ B activation through the suppression of Akt, resulting in downregulated I κ B α ubiquitination and degradation and subsequent reduction in p65 phosphorylation, nuclear translocation and NF- κ B mediated gene expression (18). Besides anti-inflammatory activities, *B. serrata* extract could also directly quench intracellular reactive oxygen species (ROS) in macrophages, modulating oxidative stress and ROS-activated signaling pathways. Additionally, BAs protect against oxidative stress-induced damage, via upregulation of Nrf2 and HO-1 (19).

Collectively, the anti-inflammatory and antioxidant activities of BAs may also contribute to an anti-diabetic effect with studies demonstrating a glucose-lowering activity together with the regulation of autoimmunity in pancreatic islets. Furthermore, the anti-diabetic effects of BAs and KBA have been associated with inhibition of the enzyme dipeptidyl-peptidase 4 (DPP-4) with IC_{50} values of 3.06 ± 0.85 and 1.65 ± 0.065 μ M, respectively (20).

In the brain, other mechanisms underlying the beneficial effects of BAs include a decreased glial cell activation and upregulation of antioxidant proteins, resulting in neuroprotection (21). In a rotenone-induced model of Parkinson's disease, *B. serrata* extract increased AMPK phosphorylation, reducing p-mTOR and α -synuclein (22). In a streptozotocin-induced model of Alzheimer's disease BAs significantly reduced phosphorylated tau and enhanced reelin expression (23).

B. serrata extract exhibits strong antibacterial effects, often ascribed to the presence of phenolic acids (24). Additionally, the ability to inhibit the formation of bacterial biofilm is attributed to the high concentration of terpenes in *B. serrata* extracts (25). A target-based screening of 664 natural compounds identified three BAs as inhibitors against MurA *Escherichia coli*, with an IC₅₀ 7–11 μM (26). KBA has been tested *in vitro* against malaria, where it was found to inhibit heme detoxification pathways leading to an increase in ROS, detrimental to *Plasmodium falciparum* (27). Worthy of mention, several studies have recently investigated the effects of BAs on the SARS-CoV-2 virus. Caliebe *et al.* reported that BAs bind to three functional proteins of the virus, responsible for adhesion and replication, with micromolar binding affinity (28). In **figure 1** the major constituents of *B. serrata* and putative mechanisms of action are displayed.

METHODOLOGY

The literature research was conducted by researchers with diverse backgrounds and expertise in the fields of neuroscience, cancer,

dermatology, cardiovascular, veterinary, phytochemistry, and molecular biology. Clinical and preclinical studies were searched on scientific literature databases including PubMed, Google Scholar, Embase, Web of Science, Cochrane Library, Medline, by using the following keywords: boswellia, boswellia serrata, boswellic acids, olibanum, frankincense.

The inclusion criteria set by authors for the initial selection of papers were:

- availability of full texts in English language;
- papers published from 1980 until March 2023.

More than 1200 papers were retrieved from databases.

A subsequent manual screening was set in order to filter only clinical trials: 72 papers were found eligible for accurate analysis.

Authors set to account for only topics where at least one clinical trial with adequate methodology and published in a high rank journal was found and if pre-clinical data was found to support the specific indication. The following topics were selected: asthma, intestinal inflammation, osteoarticular inflammation, cardiovascular disease, cancer, cognitive decline, skin disorders.

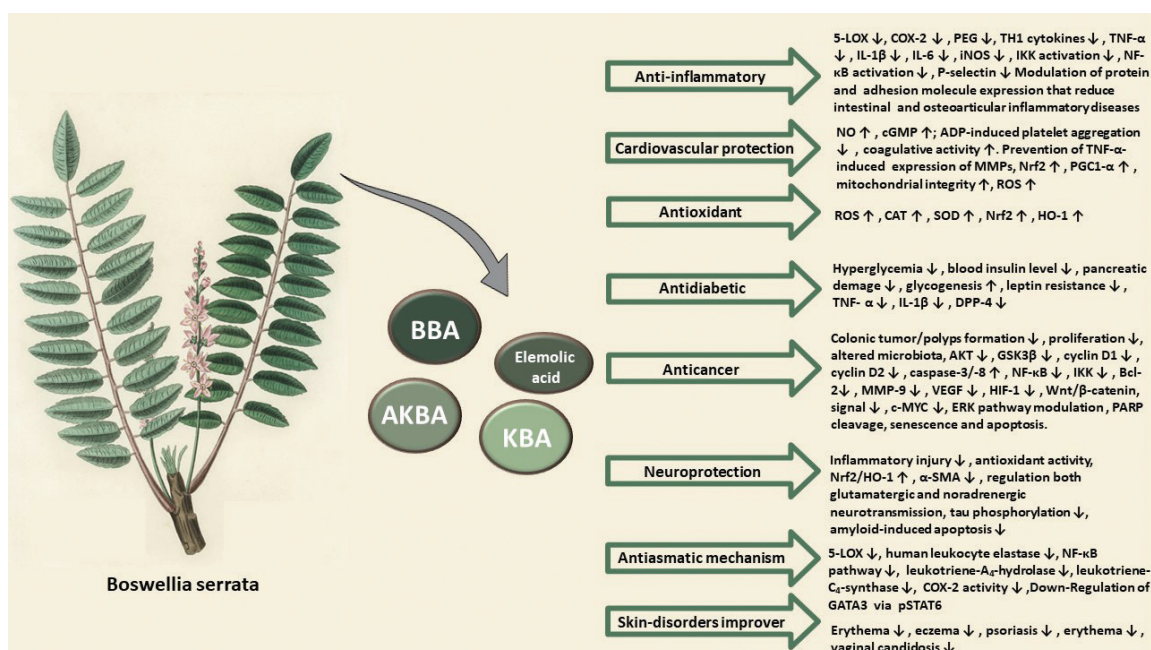


Figure 1. Main secondary metabolites present in *B. serrata* and their beneficial effects.

Authors chose to complete this review by adding a specific section on the veterinary use of boswellia and a discussion on safety.

BOSWELLIA IN ASTHMA

Extracts from the *B. serrata* gum-resin and some of its constituents, like KBA and AKBA, have shown promise as candidates for treating asthma since they act on the immune system in different ways.

Preclinical evidence

Interestingly, accumulating evidence indicates that 5-LOX strongly influences the onset and progression of airway inflammation, as 5-LOX and its products (leukotriene B₄ and cysteinyl leukotrienes) are important smooth muscle constrictors of airways and the microvasculature (29). Specifically, *B. serrata* can prevent cytokine production and release by inhibiting 5-LOX, as well as human leukocyte elastase and the NF- κ B pathway, leading to downregulation of TNF- α , IL-1, IL-2, IL-4, IL-6, and IFN- γ (30-32). A recent study investigated the structural changes and molecular mechanism of 5-LOX inhibition by AKBA, demonstrating that this molecule inhibited the formation of 5-LOX products through allosteric modulation and induced a switch from pro-inflammatory leukotriene production to anti-inflammatory selective modulators (33). Similarly, the purified fraction of *B. serrata* ethanolic extract reduced leukotriene-A₄-hydrolase, leukotriene-C₄-synthase, and COX-2 activity in HL-60 cell lines. These results were confirmed by an *in vivo* investigation on BALB/c mice, in which the intragastric administration of *B. serrata* significantly reduced lung inflammation (34). Furthermore, it was demonstrated that *B. serrata* effectively reduced asthmatic inflammation by downregulating GATA3 via pSTAT6 (35-36).

Clinical evidence

Treatment with *B. serrata* was demonstrated to be effective in bronchial asthma management (37-39), reducing the need for the standard therapeutic approaches of long-acting β_2 -ago-

nist and corticosteroid inhalation (40). Indeed, the use of non-specific β_2 -agonists may result in cardiovascular and neurological side effects (41), and the use of corticosteroids in children has been associated with the suppression of growth (42); hence new and safer therapeutic approaches are demanded. Additionally, the combination of *B. serrata* gum-resin with *Aegle marmelos* (L.) Corrêa fruit extract (AlvioLife[®]) significantly normalized Th1/Th2 cytokine balance and granulocyte infiltration in bronchoalveolar lavage fluid of Sprague Dawley rats. These results were confirmed in a placebo-controlled double-blind clinical trial in which administration of AlvioLife[®] was found to be effective in managing mild to moderate asthma (43).

BOSWELLIA IN INFLAMMATORY BOWEL DISEASE

Crohn's Disease (CD) and Ulcerative Colitis (UC), both autoimmune inflammatory bowel diseases (IBD), have been researched to be treated with *B. serrata* and BAs (44-45).

Preclinical evidence

The activity of *B. serrata* is attributable to the modulation of the expression of proteins and adhesion molecules involved in the main inflammatory pathways, as demonstrated by numerous *in vitro* studies (45-47). *B. serrata* extract and AKBA were shown to prevent inflammation- or ROS-induced loss of intestinal barrier function in Caco-2 cell monolayers. Both *B. serrata* and AKBA attenuated NF- κ B signaling and prevented the loss of tight junction proteins occludin and ZO-1, both of which are dysregulated in IBD (47). Notably, the anti-inflammatory activity of *B. serrata* is not only regarded for its role in altering IBD pathogenesis, but also in improving the quality of life of patients with IBD and irritable bowel syndrome through the management of gastrointestinal pain (48-49).

Clinical evidence

Casperome[®], a phytosomal formulation of *B. serrata* enriched in AKBA, was tested in pa-

tients in the minimally symptomatic remission phase of UC. Casperome® supplementation in 22 patients for 4 weeks resulted in a significant improvement in bloody stools, anemia, and abdominal pain, leading to a reduction in the need for medical attention or standard drug therapy for the management of UC (50). Casperome® supplementation also resulted in a significant reduction in fecal calprotectin, a biomarker of neutrophilic inflammation in the gastrointestinal tract. In a randomized double-blind study, a boswellia extract was compared with the standard anti-inflammatory medication mesalazine in terms of efficacy in the treatment of CD. Crohn's Disease Activity Index (CDAI) was assessed for 44 patients treated with *B. serrata* extract and 39 treated with mesalazine. It was determined that the clinical effects of *B. serrata* and mesalazine were similarly beneficial, however with an improved risk-to-benefit ratio for *B. serrata* treatment due to its favorable safety profile (51). In CD, another study compared boswellia to placebo, confirming excellent pharmacological tolerability of the extract and minimal adverse effects (52).

BOSWELLIA IN OSTEOARTICULAR INFLAMMATORY DISEASES

Numerous randomized controlled studies researched the safety and efficacy of *B. serrata* extract in the treatment of osteoarthritis (OA) (53-60).

Clinical evidence

Aflapin®, an extract of *B. serrata* gum-resin standardized to 30% AKBA was administered for 30 days to 35 participants in a randomized controlled trial. Subjects were evaluated in terms of pain and physical functions, using Visual Analog Scale (VAS) and Western Ontario and WOMAC scale (Western Ontario and McMaster Universities Osteoarthritis Index). Subjects receiving 100 mg of daily Aflapin® displayed significant improvement in pain score within five days of treatment. Aflapin® supplementation downregulated expression of circu-

lating inflammatory factors and reduced pain, stiffness, and total WOMAC scores (57).

Another standardized extract of *B. serrata*, 5-Loxin® (enriched in AKBA 30%) was tested at the doses of 100 and 250 mg in a 90-day double-blind, randomized placebo-controlled study, to evaluate its effect in the treatment of knee OA. Both doses reduced pain and improved physical functioning in OA patients (58). 5-Loxin® was compared with Aflapin® in the treatment of OA of the knee in a 90-day randomized placebo-controlled trial. Here, 60 subjects were treated with a dosage of 100 mg for both compounds. This study highlighted the potential efficacy of both formulations in OA patients; in particular, Aflapin® significantly improved joint function and reduced clinical pain scores as early as after 1 week of treatment (59). Notably, however, both formulations displayed significant efficacy over the placebo-treated group.

Boswellin®, another *B. serrata* extract containing AKBA and β -BA, was tested to demonstrate the efficacy of its supplementation. A total of 48 patients with OA of the knee were randomized and allocated to the *B. serrata* extract or placebo group for a period of 120 days. Results revealed that *B. serrata* extract treatment improved the physical function of the patients, reducing pain and stiffness compared with placebo. In particular, the radiographic analysis showed an improved knee joint gap. Moreover, *B. serrata* extract reduced the serum level of highly sensitive C-reactive protein and no adverse events were reported (60).

BOSWELLIA IN CARDIOVASCULAR DISEASES

Despite a wide pharmaceutical armamentarium, cardiovascular diseases are among the most frequent causes of death in the world and great efforts are spent to develop new chemical entities or explore the efficacy of natural compounds and their mechanisms of action (61). In this context, *B. serrata* has shown positive effects on the cardiovascular system.

Preclinical evidence

In an animal model of blood stasis, β -BA ameliorated plasma coagulation parameters, protected endothelium, and prevented blood stasis. Moreover, β -BA significantly increased nitric oxide (NO) and cyclic guanosin-3',5'-monophosphate (cGMP) levels in the carotid artery of blood stasis rats. Conversely, the knockdown of eNOS abolished the protective effects of BA in rats, as well as in HUVEC cells under oxygen and glucose deprivation, suggesting that the NO pathway is a crucial way through which BAs may produce vasodilation and play antiaggregant effects (62). Furthermore, *B. serrata* gum-resin containing high levels of AKBA and other BAs, but also a significant quantity of phenolic compounds, almost completely inhibited ADP-induced platelet aggregation and prolonged coagulative activity (63). Beyond the improvement of NO bioavailability, *B. serrata* is well-known for its anti-inflammatory profile and it might be another mechanism responsible for the protection of endothelial vasculature. Indeed, a *B. serrata* extract prevented the TNF α -induced expression of matrix metalloproteinases (MMPs) in human microvasculature endothelial cells (64). Accordingly, in primary culture of porcine aortic endothelial cells a hydroenzymatic extract of *B. serrata* improved cell viability following lipopolysaccharide (LPS) challenge in a concentration-dependent manner and did not show any toxic effect. On the other hand, it had no effect on cell migratory capacity (64-65). Moreover, AKBA was demonstrated to alleviate damage in H9c2 cells subjected to LPS-induced inflammation and cytotoxicity. A clear reduction of inflammatory markers (IL-6, TNF- α , IL-1 β , and COX2) was found, together with a concentration-dependent enhancement of cell viability (66).

Of note, AKBA showed cardiac protection in *in vitro* and *in vivo* ischemic-like models; in particular, in isoproterenol-induced myocardial infarction AKBA alleviated mitochondria-dependent oxidative stress through the enhanced expression of PGC-1 α and Nrf2; moreover, in

H9c2 cells AKBA improved mitochondrial integrity and inhibited ROS production (67).

Taken together this evidence leads to suppose that *B. serrata* may be considered an interesting remedy for the prevention of cardiovascular diseases and reduction of the atherogenic risk.

Clinical evidence

Findings from clinical trials are sparse. Interestingly, Baram et al. published a report in 2019 that demonstrated that treatment with BAs improved clinical outcomes in the early phases in 80 ischemic stroke patients. Following 7 days of treatment with BAs, the levels of plasma inflammatory markers TNF- α , IL-1 β , IL-6, IL-8, and PGE2 were significantly decreased (68).

BOSWELLIA IN CANCER

Evidence suggests that *B. serrata* and its constituents have been found to have significant effects on various tumor types, particularly on tumor growth and metastasis.

Preclinical evidence

BAs demonstrated *in vitro* cytotoxic activity against several cancer cell lines, such as breast, brain, cervical, bladder, lung, melanoma, prostate, or hematopoietic tumors (69-70). KBA and AKBA induced programmed cell death in triple-negative breast cancer cells by upregulating the PERK-mediated ER-stress unfolded protein response (UPR) pathway. (71-72) The *B. serrata* gum-resin demonstrated apoptotic and cytostatic activity against glioma cells, in association with AKBA inhibiting the ERK signal transduction pathway (73-74). *B. serrata* derivatives caused PARP cleavage leading to cell cycle arrest and DNA fragmentation in cervical cancer cell models (75). Furthermore, the anti-proliferative effect of boswellia extended to liver and lung cancer cell lines, whereby BAs induced apoptosis and cell cycle arrest (76-78).

Indeed, several studies have shown the anti-proliferative effects of *Boswellia* spp. ex-

tracts and their phytoconstituents in liver, colon, gastric, and pancreatic cancer cells (79-80). However, AKBA is the most investigated compound. Particularly, in liver cancer, AKBA has been reported to induce both senescence and caspase-dependent apoptosis (79, 81). A pro-apoptotic effect was also observed in colorectal, pancreatic, and gastric cancer cells due to the modulation of several pathways involved in proliferation and metastasis, including Akt/mTOR, NF- κ B, and PTEN/Akt/COX-2 (79, 82-83). AKBA also chemosensitized cancer cells toward cisplatin and gemcitabine treatment (79, 82). Compounds other than AKBA have been investigated, but their anti-proliferative properties have been studied at higher concentrations, making them less effective (79, 84-85).

Boswellia extracts and isolated components, especially AKBA, are also able to inhibit tumor growth *in vivo* (79). This activity is principally reported in glioblastoma, but experimental data indicate promising effects for cancers. Indeed, AKBA significantly inhibited the growth of tumors generated in xenograft or homograft models from glioblastoma (86), prostate (87), ovarian (88), or colorectal cancer cells (89), or orthotopically implanted tumors (90), at doses ranging from 20 to 200 mg/kg *i.p.*, alone or in combination with curcumin (89) or radiation (86). *Per os*, AKBA (50 mg/kg) effectively reduced the incidence of polyps in APCMin/+ mice (91) and *B. serrata* extract (0.25 or 0.5%) reduced inflammation-associated colon carcinogenesis induced by azoxymethane/dextran sulfate sodium (92).

Clinical evidence

Clinical trials on the anticancer effects of *B. serrata* are still in their early stages. The ClinicalTrials.gov registry contains four clinical studies investigating the influence of boswellia on breast, brain, and central nervous system tumors (as of March 2023). Three of them test dietary supplements comprising boswellia extracts and one aims to determine whether oral administration of *B. serrata* (800 mg, three times a day) causes changes related to

angiogenesis, apoptosis, and cell proliferation in breast cancer patients before surgical resection (registration number NCT03149081).

BOSWELLIA IN COGNITIVE DECLINE

The polypharmacology displayed by *B. serrata* phytoconstituents against cognitive disorders has been extensively demonstrated, mainly with a focus on their anti-inflammatory activity.

Preclinical evidence

It is well known that LPS-induced neuroinflammation increases pro-inflammatory cytokines such as TNF- α , IL-1, IL-2, IL-6, IFN- γ , ICAM-1, and complement system factors. AKBA treatment suppressed LPS-induced neuroinflammation via regulation of NF- κ B signaling resulting in improved synaptic plasticity, behavior, and cognition *in vivo* (93-97). In addition, *B. serrata* extract was found to improve cognitive deficit in Alzheimer's Disease (AD). Both chemical-induced and transgenic models of AD were positively improved with BAs treatment (23, 98-100). The proposed mechanisms include the reduction of ROS, pro-inflammatory cytokines, tau phosphorylation, amyloid- β -induced apoptosis, and the antagonism of acetylcholinesterase (98, 100-103). Interestingly, depressive symptoms associated with AD could also be regulated by AKBA. This effect is related, among others, to neurotransmitter regulation affecting both glutamatergic and noradrenergic neurotransmission (104). AKBA prevented the depressive behaviors induced by intracerebroventricular injection of soluble A β by reducing heightened glutamate and kynurenine levels in prefrontal cortex and hippocampus as well as downregulating the expression of GFAP and NF- κ B (105). Excess glutamate release is also modulated by AKBA or by *B. serrata* extract activity against excitotoxicity induced apoptosis (106, 107).

Notably, the neuroprotective effects of boswellia have also been documented in Parkinson's disease (PD) animal models in which boswellia extracts can alleviate experimental dopaminergic

gic neuronal loss, modulate autophagy, reduce oxidative stress and inflammation and reduce α -synuclein accumulation (108, 109).

Multiple sclerosis (MS) and amyotrophic lateral sclerosis (ALS) are among the neurodegenerative diseases studied to be positively impacted by *B. serrata* constituents. AKBA produced neuroprotective effects in animal models of MS as demonstrated by an increase in motor and memory scores (110). Indeed, in an ethidium bromide-induced model of experimental MS, AKBA promoted neuroprotection through the induction of the Nrf2/HO-1 antioxidant signaling pathway (110). Similarly, AKBA was described to promote a neuroprotective effect in a methylmercury-induced model of ALS. In ALS, AKBA also activated the Nrf2 pathway thereby promoting antioxidant, anti-inflammatory, and detoxifying effects (111).

Furthermore, several researchers described the promnesic activity of boswellia extracts and BAs in both adult and aged rodents. Various mechanisms have been reported from BDNF regulation to the promotion of axonal outgrowth and branching (96, 112-116).

Cognitive functions are also regulated by neurotransmitter signaling, and many neuropsychiatric and neurodegenerative disorders result from imbalances in neurotransmitters. Adake *et al.*, reported the role of *B. serrata* in various psychiatric disorders, such as depression and anxiety in animal models, by modulating multiple neurotransmitter levels in the brain (117). Accordingly, AKBA showed anxiolytic activity in mouse models (118), and by reducing astrocyte activation and NF- κ B activation, AKBA was able to revert an *in vivo* A β -associated depressive-like phenotype (119).

Clinical evidence

Data pertaining to the effects of boswellia in improving cognitive function was identified in clinical studies. Meshkata *et al.* observed, in a pilot clinical trial, the positive effects of *B. serrata* extract in ameliorating cognitive functions in individuals who experienced traumatic brain injury (120). Results were confirmed by a pilot clinical

study where *B. serrata* promoted neurological recovery following diffuse axonal injury (121).

Moreover, cognitive assessment in MS patients revealed that the oral administration of a closely related botanical preparation of *B. papyrifera* significantly improved visuo-spatial memory but had no effect on verbal memory and information processing speed (122).

B. serrata extract showed positive effects in age-associated memory impairment: a randomized controlled study highlighted that supplementation of *B. serrata* combined with *Melissa officinalis* supplementation in older adults significantly increased auditory immediate and immediate memory compared to placebo (123).

Worthy of consideration is the application of *B. serrata* in the treatment of cerebral edema in patients undergoing radiation therapy for brain tumors, often associated with cognitive dysfunction (124). In 2002, *B. serrata* resin extract was classified by the European Medicines Agency (EMA) as an "orphan drug" for the treatment of brain edema resulting from brain tumors, based on pharmacopoeia requirements (125, 126). Although the product was withdrawn in 2007, recent clinical studies report encouraging results on the beneficial effect of BAs-enriched extract supplements in reducing radiochemotherapy-induced cerebral edema in patients affected by primary or secondary malignant cerebral tumors (127-128). This positive role can be attributed to the anti-inflammatory activity of AKBA.

BOSWELLIA IN SKIN DISORDERS

Thanks to its multitarget effect, boswellia has also found application in the treatment of skin diseases characterized by an immune response. Although there is currently little evidence, some results are encouraging in the application of boswellia to alleviate symptoms typical of inflammatory skin disorders.

Clinical evidence

Clinical studies evaluating the use of topical *B. serrata* are limited and heterogeneous. One study evaluated the application of a cream con-

taining 0.5% of BAs from a commercial preparation (5-Loxin®) on the photodamaged face of 15 women. In this randomized, double-blind, placebo-controlled, split-face study, the formulation was applied once a day for 30 days. The cream was well tolerated and improved scores (Dover score) of photodamaged skin, by reducing fine wrinkles and roughness and by increasing thickness. Improvements remained stable at follow-up after 2 months (129). Another randomized, placebo-controlled, double-blind clinical study evaluated the efficacy of a topical cream containing 2% of Bosexil®, a phytosomal formulation of *B. serrata*, in eczematous and psoriatic lesions. A total of 10 patients with psoriatic lesions and 9 patients with dermatitis were evaluated in comparison with their respective controls (10 patients in placebo, for both conditions). Boswellia treatment, twice a day for 30 days, improved both psoriatic and eczematous lesions in 60% of patients, versus no improvement in the respective placebo groups (130). The same preparation was evaluated in radio-damaged skin. A total of 55 patients treated with radiotherapy for breast cancer (50 Gy dose) applied the cream twice a day (30 days) in comparison to 59 patients in the placebo group. The boswellia-containing cream reduced the intense form of erythema compared to the control group (22% vs. 49%) and decreased the use of topical cortisone in patients (25% vs. 63%) (131). Finally, a gel containing 2% of powdered *B. serrata* was evaluated in 95 women affected by vaginal candidiasis in an open clinical study. The patients applied the gel for 7 consecutive nights and the treatment decreased different symptoms compared to the previous baseline such as pain, itching, and secretion (<6% vs. >60% on average for all parameters). The effects were also confirmed by the measurement of oxidant and proapoptotic markers in vaginal discharge (132).

BOSWELLIA IN VETERINARY USE

B. serrata gum-resin and extracts are currently used as feed additives for cats and dogs (133-134), and as ingredients of dietary supplements

for the maintenance and support of joint health and flexibility (135). Recently, a *B. serrata* extract, characterized by over 65% of BAs, max. 0.009% of methyleugenol and max. 0.028% of estragole, has been approved as a sensory additive in complete feed for horses and dogs (136). To evaluate the benefits arising from a diet supplementation with *B. serrata* products for joint health, different veterinary clinical trials in dogs and horses have been carried out, as detailed in Table 1. Among the nine trials highlighted in the literature search, seven were conducted in dogs (137-142) and two in horses (143-144). *B. serrata* products were usually administered with the meal and in multi-ingredient dietary supplements, containing other botanicals, such as *Curcuma longa* L., *Camellia sinensis* (L.) O. Kuntze, *Ribes nigrum* L., *Harpagophytum procumbens* DC, *Zingiber officinale* (L.) Rosc and *Ananas comosus* (L.) Merr., as well as other products such as glucosamine, chondroitin sulfate, fish oil, or cannabidiol, which are commonly exploited to support joint health and to relieve inflammation and pain (145-150). Although most studies (138-144) demonstrated favorable tolerability and overall benefits of the tested supplements in pain relief and reduction of clinical signs of osteoarthritis and joint inflammation (e.g., lameness, mobility, and joint swelling), the presence of multiple components does not allow to clarify the true contribution of the *B. serrata* extracts, which were often not defined or standardized (138, 140, 141, 143, 145). Only one veterinary clinical trial by Reichling et al. (136) evaluated the benefits of dietary supplementation with a standardized extract from *B. serrata* resin (extract BSB108, product of Bogar AG, Zürich), containing ≥50% of triterpenic acids, in dogs with inflammatory joint and spinal disease. The supplement, administered at 400 mg/10 kg body weight with the meal once daily for 6 weeks, led to overall benefits on joint function, with a reduction of lameness, local pain, and stiff gait starting from 2 weeks of treatment. The authors concluded that using a standardized extract in dietary supplementation of dogs may improve joint function and symptoms of osteoarthritis (136).

Table 1. Veterinary clinical trials on the effects of *Boswellia serrata* Roxb. ex Colebr. extracts in inflammatory diseases in dogs and horses.

Authors, year [Ref.]	Study Design	Species (years)/ n. (sex)/ disease	Treatment (Dosage) Duration	Product/ composition	Endpoints/ efficacy score	Outcomes	Adverse events
Reichling et al. 2004 (136)	OM, VCT	Dogs (2-16)/ 29 (males and females)/ inflammatory joint and spinal disease	BS resin extract (400 mg/ 10 kg body weight) once daily for 6 weeks with meal	BSB108 standardized extract from BS (Bogar AG, Zürich)/ >50% triterpenic acids	Severity of clinical signs, i.e. lameness, local pain and stiff gait (T0 and after 2, 4, and 6 weeks)/ 4 scale: very good, good, moderate or insufficient	Statistically significant overall efficacy starting from 2 weeks of treatment (score good or very good)	Reversible episodes of diarrhea and flatulence (suspected relationship with BSB108 in one case)
Martello et al. 2018 (137)	PO, VCT	Medium to large dogs (18 months to 10 years)/ 13 (males and females)/ osteoarthritis	Dietary supplement containing BS extract in association/ (2.0 gr of tablet, containing 31.5 mg BS, daily) once daily for 60 days	Dietary supplement (Candioli Pharma S.p.A, Italy)/ FLEXIDE® (<i>Camellia sinensis</i> (L.) O. Kuntze. BS olibanum, Copper complexes of chlorophylls E141), glucosamine (99% purity), chondroitin sulfate (low molecular weight, purity 100%), hyaluronic acid, collagen type II-not hydrolysed	Clinical general examinations, orthopedic exam (lameness), blood test, pain (T0 and after 30 and 60 days)/ pain scale: 1 (mild) to 4 (severe); lameness scale: successful (no longer lame), improved (from T0 to T2), failure (unchanged or worsened)	Chronic orthopedic pain relief and reduction of clinical signs (84% improved lameness)	Lacking side effects and episodes of diarrhea or vomiting
Martello et al. 2019 (138)	Pilot study, VCT	Large dogs (5-14 years)/ 10 (males and females)/ osteoarthritis	Dietary supplement containing BS extract in association/ (2.0 gr of tablet, containing 31.5 mg BS, daily) once daily for 30 days	Dietary supplement (Candioli Pharma S.p.A, Italy)/ Cannabidiol (CBD), Casperome® (BS: >25% terpenic acids; Indena, Italy), industrial hemp oil and powdered melon fruit pulp and juice (<i>Cucumis melo</i> L.) extract	Veterinary evaluations and questionnaires of owners on chronic pain and palatability (T0 and after 15 and 30 days)	Significant improvement in pain management and mobility	Well tolerability and palatability; lacking episodes of vomiting or diarrheal
Musco et al. 2019 (139)	DB, VCT	Large dogs (5-14 years)/ 20 (males and females)/ osteoarthritis	Nutritional supplement containing BS extract in association/ 0.5 ml kg ⁻¹ , corresponding to about 2.1% BS extract, once daily for 90 days	Dinamic™ (Dynamopet srl, Verone, Italy)/ Glucosamine sulphate 10%, Krill oil 3%, Chondroitine sulphate 1.25%, <i>Ribes nigrum</i> , Krill flour 1%, <i>Lentinus edodes</i> , <i>Equisetum arvense</i> , <i>Curcuma longa</i> L., BS extract, and <i>Harpagophytum procumbens</i> DC extracts	Blood analyses and a clinical examination for lameness, pain on manipulation and palpation, range of motion and joint swelling (T0 and after 30, 60 and 90 days)/ scale grade: 0 (none), 1 (slight), 2 (moderate) and 3 (severe)	Significant improvement of clinical signs (lameness, pain on manipulation and palpation, range of motion and joint swelling)	Well tolerability; lacking side effects
Caterino et al. 2021 (140)	R, PC, VCT	Dogs (>1 year)/ 20 (males and females)/ dysplasia and signs of osteoarthritis	Nutraceutical containing BS extract in association/ 1 tablet/ 10 kg of bodyweight for 90 days	Nutraceutical (Aurora Biofarma Milan, Italy)/ Glucosamine (GS), chondroitin sulfate, fish-oil (containing 80% of omega 3-fatty acid), vitamin C and E, saccharomyces Cerevisiae, boswellic acid and Curcuvet®	Orthopaedic (joint effusion, pain during manipulation, lameness) and neurologic examination and force plate gait analysis (T0 and after 45 and 90 days of treatment and after 60 days post-treatment)	Increasing values of ground reaction forces likely associated with pain reduction	Nr

Authors, year [Ref.]	Study Design	Species (years)/ n. (sex)/ disease	Treatment (Dosage) Duration	Product/ composition	Endpoints/ efficacy score	Outcomes	Adverse events
Gabriele <i>et al.</i> , 2022 (141)	R, PC, DB, VCT	Dogs (8-15 years)/20 (males and females)/ osteoarthritis	Food supplement containing 9.6% BS extract in association/ one tablet (2 gr)/10 kg of body weight, once daily for 150 days	Food supplement (Candioli Pharma Srl) <i>Carnabis sativa</i> oil, BS phospholipid (Indena SpA), <i>Zingiber officinale</i> extract, Vitamin C, appetite stimulants and technological additives, alfa-tocopherol	Serum inflammatory and oxidative stress biomarkers (T0 and after 20, 40, 60 and 80 days, and after 110, 140, and 170 days)	Significant reduction of inflammation and oxidative stress	Nr
Martello <i>et al.</i> , 2022 (142)	R, PC, DB, VCT	Dogs (>6 months)/ 40 (males and females)/ osteoarthritis	one tablet (2 gr)/10 kg of body weight, once daily for six weeks	Food supplement (Confis Ultra, Candioli s.r.l., Italy)/ FLEXIDE® (Camellia sinensis (L.) O. Kuntze, BS olibanum, Copper complexes of chlorophylls E141), glucosamine (99% purity), chondroitin sulfate (low molecular weight, purity 100%), hyaluronic acid, collagen type II-not hydrolysed, appetite stimulants	Clinical signs of OA progression, lameness and pain (T0 and after 40 and 60 days)	Significant improvement of clinical signs and pain lowering	Lacking adverse effects
Van de Water <i>et al.</i> , 2016 (143)	R, B, VCT	Standardbred horses/24 (female)/healthy animals with experimentally induced synovitis by LPS injection	Multingredient supplement containing BS extract/ 45 mL twice per day for 28 days prior to articular challenge and during the 3-day test period	Cavalor Artitec Liquid Supplement (Nutriquine NV, Drogen, Belgium)/ glucosamine sulphate 2KCL, shark chondroitin sulphate sodium, MSM, boswellic acid dry extract 65%, <i>Ananasus comosus</i> extract 2500 GDU, L-glutamine, feverfew dry extract PE 4:1, hyaluronic acid	Clinical examinations for synovitis and lameness	Significant lowering of proinflammatory biomarkers in synovial fluid	Lacking side effects
Andrews <i>et al.</i> , 2022 (144)	R, Crossover	Thoroughbred horses (3-20 years)/10 (geldings and mares)/ osteoarthritis	Multingredient supplement containing BS extract/ supplement mixed with grain administered each morning (56.7 g/daily)	BLP (Absorbine® Buteless® Performance pellets, W.F. Young Inc.)/ Longvida® optimised curcumin extract (Verdure Sciences), Omolene 100, Purina Mills LLC, <i>yucca schidigera</i> , vitamin B12, BS extract, methylsulfonylmethane, alfalfa and flaxseed meal, wheat middlings, lignin sulfonate, cold-pressed soybean oil and sodium propionate	Lameness examination, range of motion, pain on palpation and force platform data; serum biochemistry and gastric lesions	Improved weight bearing and force platform; lacking improvement in lameness scores and blood parameters alterations	Lacking gastric lesions

OM: open multi-centre; VCT: veterinary clinical trial; R: Randomized; B: Blinded; PO: prospective observational; BS: *Boswellia serrata* Roxb. ex Colebr.; t0: beginning of the study; DB: Double-Blind; PC: Placebo-Controlled. Nr: not report.

SAFETY OF *B. SERRATA*

Further toxicological reports on *B. serrata* are required to determine a comprehensive safety profile. Preclinical studies have shown that the acidic and non-acidic fractions of *B. serrata* gum resin extracts are non-irritating to the skin and eyes and, when consumed orally, did not induce mutagenesis, did not cause toxicity in the liver, kidneys, and stomach (151). When used as a flavoring agent, in complete feed for dogs and horses, they result safe at 330mg/kg and 100mg/kg, respectively. No conclusion can be yet drawn on its potential to be a respiratory sensitizer (152). The LD₅₀ of BAs is >2 g/kg in rats and mice when administered orally or intraperitoneally. Subacute toxicity studies (3 months) in rabbits and chronic toxicity studies (over six months) in rats and monkeys have found no toxic effects of BAs at high doses (153). These data could support the safety of the human oral ingestion of *B. serrata* when consumed at a dose not greater than 167 mg per kg body weight (151).

In clinical practice, oral doses of 200-400 mg are often standardized to contain 37.5% of BAs per dose, while some commercial sources may contain up to 65% of BAs (153). Boswellia appears to be safe in humans and no significant adverse effects were observed in the majority of clinical trials (154). In general, side effects are mild and transient and affect the gastrointestinal tract (nausea, hyperacidity with reflux, and epigastric pain) (153).

The safety of boswellia in children or during pregnancy and breastfeeding cannot be recommended, because it has not been specifically studied. Notably, boswellia seems to have emmenagogue properties and may mask asthma in pediatric care (153).

Herb-drug or herb-nutrient interactions should also be considered with boswellia. Boswellia may be responsible for pharmacodynamic interactions, as it potentiates the effects of anti-neoplastic agents (as it inhibits cell proliferation), the activity of warfarin (because it inhibits lipooxygenase and interacts with COX-1), and the activity of pharmaceutical leukotriene

inhibitors (as AKBA inhibits 5-LOX) (153, 155). Moreover, boswellia may impair the absorption of lipid-soluble medications and could lead to pharmacokinetic interactions as the potential inhibition of CYP3A4, CYP2C9, CYP2C19, and glycoprotein P as evidenced by *in vitro* studies (155). Finally, although it is not reported in the literature, it is plausible that after BAs administration, a bile acid sequestering activity may occur to some extent, leading to liver fatigue, especially in combination with herbal products and/or drugs with a choloretic or cholagogue effect. An example could be represented by the association of boswellia and turmeric in multi-component products (153, 156). In this context, boswellia has been implicated in liver injury, when included in multi-ingredient dietary supplements, but a specific contribution of boswellia to the hepatic toxicity could not be established (157).

In conclusion, *B. serrata* appears to be safe in and of itself, but in association with other plants or drugs could be responsible for serious adverse interactions that can endanger the health of users.

CONCLUSIONS

Taken together, the clinical and preclinical evidence suggest that boswellia is a medicinal plant endowed with pleiotropic beneficial effects, especially in the application of treatment for inflammatory diseases. These effects are largely attributed to the pharmacology of BAs. There are a plethora of clinical studies examining the use of boswellia in the treatment of asthma, skin, intestinal, and osteoarticular inflammatory diseases. On the other hand, mainly preclinical studies are available for the use of boswellia in cardiovascular and neurodegenerative diseases, and in cancer. For these conditions, further studies are warranted. Moreover, given their pharmacological importance, an accurate quantification of BAs within the extracts used in future studies is also recommended. Besides medicinal use, an interesting application is represented by the production of

animal food with *B. serrata* as an additive. Despite these interesting and healthy properties, the pharmacokinetic profile may represent the major limit, having a low permeability through biological membranes with consequent poor bioavailability. This problem represents a limiting factor that affects the clinical effectiveness of treatment with boswellia extracts. In this regard, the increase in the permeability of AKBA through biological membranes is the objective of various studies currently underway, and the main line of upgrade is the study of innovative formulation technologies using cyclodextrin and poloxamer solid dispersion systems (158). Indeed, the cyclodextrins in these formulations allow increasing the permeability of intestinal cells to absorb BAs, while the poloxamer promotes better solubility of AKBA, leading to enhanced absorption. In this context, we previously cited Casperome®, a BAs formulation composed of a lecithin-based delivery system for the treatment of UC. Ongoing research on innovative formulation technologies holds promise for improving the bioavailability and clinical efficacy of BAs, and future studies may explore additional applications of this versatile natural remedy.

In conclusion, while further human clinical studies are needed to strengthen the preclinical evidence, *B. serrata* undoubtedly appears to be a promising medicinal plant, useful as a remedy for a plethora of inflammatory conditions. Furthermore, its toxicological profile is favorable, particularly when used alone and not in multi-ingredient products or in combination with other therapies.

ETHICS

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The authors declare that they have no conflict of interests.

Authors' contributions

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