## Medicinal plants with disinfectant effects

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Different types of disases, either infectious and non-infectious or acute and chronic, at any age are constantly associated with suffering and economic and social burden [1-3]. Infectious agents cause many disorders and diseases by involving various systems of the body [4]. These diseases have a high economic burden and require pharmacotherapy [5-9]. We now see drug resistance in infectious diseases [10,11]. The history of treating diseases with medicinal plants dates back to the history of human life on the planet. Human beings have treated themselves with the help of medicinal plants during their lives with reference to their own experiences, knowledge, and thought according to their requirements during their lives on the planet and have used them to treat their diseases [12,13]. In fact, various mechanisms are involved in various diseases [14-17]; and plants are able to affect many of these pathways and improve the disease due to the presence of active compounds. Over time, humans have managed to discover some of the properties and compounds of these medicinal plants by trial and error as well as many unsuccessful experiments [18,19]. Considering the rise of resistance to chemical drugs, the use of natural and vegetative resources is essential. Garlic (Allium sativum), chamomile (Matricaria chamomilla), ginger (Zingiber officinale), oregano (Origanum vulgare), mallow (Malva sylvestris), hyssop (Hyssopus officinalis), alfalfa (Medicago sativa), sage (Salvia officinalis), lemon balm (Melissa officinalis), Eucalyptus camaldulensis, burdock (Arctium lappa), green tea (Camellia sinensis), fig (Ficus carica), primrose (Primula vulgaris), savory (Satureja hortensis), violet (Viola odorata), almond (Prunus dulcis), red pepper (Capsicum annum), and soybean (Glycine max) are among the most important medicinal plants that affect infections. The phytochemicals and bioactive compounds in each plant serve to affect the treatment of infectious and noninfectious diseases [20, 21].

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