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Historical Course of Neuropsychiatric Effects of Lemon Balm (Melissa officinalis L.) as a Medicinal Herb

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Abstract

Affective disorders have become prevalent and costly worldwide chronic conditions. Lemon Balm

(*Melissa Officinalis* L.) is a medicinal plant with beneficial effects on neuropsychiatric disorders.

Its potential to specifically treat conditions such as depression and anxiety has been investigated

for over 20 centuries. Given the lack of a historical overview of lemon balm in mood disorders,

the present review aimed to introduce the historical course of the neuro-psychiatric applications of

lemon balm across the centuries.

We investigated several viable medieval Arabic sources up to the 15th century, to distinguish the

neuropsychiatric applications, especially anxiolytic and anti-depressive effects of lemon balm. In

the early centuries, lemon balm was mainly prescribed to treat gastrointestinal disorders. Over

time, physicians identified the efficient use of lemon balm in sadness, sleep disorders, anxiety,

depression, epilepsy, ischemic stroke, amnesia, sciatalgia, and radicular neuropathy.

Importantly, it was established that the therapeutic effects of lemon balm in the field of neuro-

psychiatric diseases were emphasized by physicians during the Middle Ages. These findings have

since been validated in human clinical trials. Lemon balm has also demonstrated the ability to be

utilized in epilepsy, amnesia and ischemic stroke.

Based on the extensive history of lemon balm in neuropsychiatry, future investigations could use

this knowledge to extensively investigate the potential of lemon balm in neuropsychiatric disorders

such as depression and anxiety, and possibly develop an efficient neuropsychiatric remedy.

Key words: Melissa officinalis, Lemon Balm, Neuropsychiatric disorders, Herbal medicine

Introduction and methods

The incidence of chronic diseases, which includes an array of psychiatric conditions are

exponentially on the rise. Consequently, anxiety disorders have become the most prevalent

psychiatric disorders, while depression is the fourth most common and economically expensive

psychiatric disorder.^{1, 2} In recent decades, physicians have been interested in alternative and

complementary therapies, particularly medicinal herbs in the field of mental health.³⁻⁵ Alongside

a body of literature that points to the therapeutic effects of medicinal herbs, studies indicate that

herbs are generally well tolerated and easily accessible to patients.^{6,7}

Treatments involving herbal interventions have an enduring history, dating back to as early as the

existence of mankind.8 Lemon balm (Melissa Officinalis L.) is an herb that belongs to the

lamiaceae family. The lamiaceae species of flowering plants comprise white-colored flowers,

which release a lemony aroma. Lemon balm is a well-known and highly consumed medicinal herb

in central and southern Europe, the Mediterranean region, and west Asia. According to

manuscripts originating from Greece that were conceptualized 2000 years ago, lemon balm was

utilized as a medicinal plant and used as an exhilarator, anti-depressant, anxiolytic, hypnotic, and

sedative. 10, 11 In the last two decades, clinical trials have evaluated the effects of lemon balm on

various central nervous system functions, continuing to demonstrate anxiolytic and anti-depressive

properties, in addition to reducing insomnia, elevating neuroprotection, and enhancing cognitive

and memory function. 9, 11, 12

With medieval translation movements beginning in the 7th and 8th centuries, the scientific literature

relating to the lemon balm that followed these centuries was translated into Arabic, 13, 14 the

common language of the scientific literature in vast areas of Asia, Africa, and certain parts of

Europe during this time. 15, 16 By reviewing the Arabic literature till the 15th century, valuable

historical information regarding the neuropsychiatric applications of lemon balm can be derived.

(Figure 1) To the best of our knowledge, a comprehensive historical review has not been conducted

to focus attention on the effects of lemon balm on affective disorders such as depression and

anxiety. Therefore, in the present review, we examined the neuropsychiatric applications of lemon

balm using a number of viable sources including medical books, pharmacopoeia and publications,

available on well-known online databases. The aim of the present review was to provide a

historical overview of the efficacy of lemon balm in mood disorders, particularly anxiety and

depression.

Early Centuries

The book titled "De material Medica" (published by Dioscorides) is regarded as the first

pharmaceutical encyclopedia in the history of medicine. ¹⁷ However, lemon balm, which is referred

to as "Milissophullon", was not applied to psychiatric or central nervous system health within this

source. Instead, Galen (129-210 A.D) was the first to point out the efficacy of lemon balm in the

treatment of psychiatric and nervous system disorders.¹⁸

9th century

During the ninth century (800-900 AD), three main works called "al-Adwiya al-Murakabba"

(Aqrabadhin) by Shapur ibn Sahl, 19 "Firdous al-Hikmah" (Paradise of Wisdom) by Ali ibn Sahl

Rabban al-Tabari, 20, 21 and "al-dhakhīrah fī 'ilm al-tibb" (Treasure in Medicine) by Thābit ibn

Qurra,²² were published. These sources highlighted the potential of lemon balm to alleviate

Pharmaceutical Sciences (Indexed in ISI and Scopus) https://ps.tbzmed.ac.ir anxiety-induced palpitations, fear, despondency, feelings of faintness, melancholia, sadness, obsessive disorder symptoms, panic as well as the ability to enhance positive mood states.

10th century

Muhammad ibn Zakariya al-Razi (*Rhazes*), a prominent physician and clinician during the 10th century, emphasized the pharmacological effects of lemon balm, which included anti-depressive effects.²³ The importance of lemon balm in the treatment of psychiatric disorders, especially severe depression was also called to attention.²⁴ Additional findings (in a source known as "Abdal-al-Adwiya") further suggested the involvement of lemon balm as a mood enhancer and an intervention for improving depressive mood states.²⁵ *Rhazes*²³ also highlighted the capacity of lemon balm to treat neurological disorders such as epilepsy and amnesia.²⁶ Ali ibn al-Abbas al-Majusi (Latinized as *Haly Abbas*) was another well-known 10th century physician, who prescribed lemon balm as a memory enhancer, therapy for anxiety, amnesia, and headaches in neuropsychiatric disorders.²⁷

11th century

Husain Bin Abdullah Bin Sina (*Avicenna*), another well-known medical figure during the 11th century, described lemon balm as the ideal medicinal herb for mood (within the book "The Canon of Medicine" and in a paper on mood disorders "al-Adwiya al-Qalbiye").^{28, 29} It was further acknowledged that lemon balm plays a unique role in positive mood states, and offers a treatment for anxiety-induced palpitation, often being referred to as an "exhilarator of heartache", which may be attributed to its pharmacological properties. Additional neuropsychiatric effects of lemon balm proposed by *Avicenna* include improvements cerebral circulation, the reduction of anxiety-induced

palpitations, in addition to displaying of anxiolytic, anti-vasovagal syncope, anti-epileptic and antioxidant properties.²⁸ It has also been suggested that lemon balm acts as a tonic for all organs. During the 11th century, Abu Rayhan al-Biruni additionally described lemon balm as an exhilarator of heartaches in his book "al-saydala fi al-tibb (Pharmacopoeia of Medicine).³⁰

12 th century

During the 12th century, Abu Jaafar Ahmed bin Muhammad bin Said Al-Ghafiqi described lemon balm as a beneficial remedy for melancholic disease and recommended it for the treatment of ischemic stroke, sadness, mood enhancing and vasovagal syncope (Figure 2: book called "Fi al-Adwiya al-Mufrada").^{31, 32} Furthermore, Abu l-Khayr al-Ishbili described lemon balm as an anti-depressant and inhibitor of heartaches (as described in the book: "Umdat al-Tabib fi maarifat al-nabat li kuli labib").^{33, 34}

13 th century

Ibn al-Bayṭār, a comprehensive pharmacopoeia of the Middle Ages, has cited the knowledge of previous scientists relating to lemon balm. In addition, he has described his anecdotal observations following the application of lemon balm on neuropsychiatric symptoms. These observations included the inhibition of heartaches, elevation of positive mood states, reduced insomnia, anti-anxiety-induced palpitations, reduction of panic attacks and obsessive disorders, anti-vasovagal syncope, neuroprotection, and stimulation of positive self-talk.^{35, 36}

14th century

Al-Chaghmīnī argued that lemon balm has protective effects on the whole nervous system, alongside several applications relating to peripheral neuropathy, such as sciatalgia, radicular lower

back pain, and arthroplasty (in his book "Qānūnchah fi al-tibb"). Importantly, specific to

neuropsychiatric disorders, Al-Chaghmīnī recommended lemon balm for seizures, litharghous and

amnesia.37

Discussion

Throughout history, physicians have consistently believed that lemon balm can improve the

symptoms of mood disorders, particularly depression and anxiety. The neuropsychiatric effects of

lemon balm have been gradually discovered throughout history. Based on studies dating back to

before the 1th century, it can be inferred that lemon balm was initially prescribed predominantly

for gastrointestinal disorders.¹⁷ During the 2nd century, Galen was the first to propose and record

the neuropsychiatric potential of lemon balm. 18 Subsequently, the first manuscripts involving

lemon balm were written by Jundishapur physicians. 13, 14 For nearly two centuries, anxiety,

depression, and obsessive disorders were the most prevalent neuropsychiatric symptoms for which

lemon balm interventions were administered. In the 10th century, new neuropsychiatric

applications of lemon balm were implemented. During this stage, *Rhazes* suggested lemon balm

to have effects on epilepsy and amnesia.²⁶ This finding was further confirmed by Haly Abbas²⁷

and al-Chaghmīnī during the 13th century. 37 In line with the described physicians across the

centuries, lemon balm has been considered by clinicians as an herbal remedy for the treatment of

anxiety, depression, and insomnia. (Table 1)

Evidence from pre-clinical and clinical studies confirms the efficacy of lemon balm on affective

disorders. In animal trials, lemon balm has shown similar anti-depressive effects to imipramine in

mice.³⁸ Moreover, lemon balm has demonstrated anti-depressive effects that mimic fluoxetine in

rats,³⁹ and anti-depressive effects that coincide with serotonin-like mechanisms,⁴⁰ ultimately

initiating anti-depressive and anxiolytic effects in mice. 41, 42 In human randomized controlled trials

(RCTs), lemon balm has demonstrated the ability to alleviate a series of neuropsychiatric

symptoms, predominantly centered around depression and anxiety. Based on these trials, lemon

balm interventions exerted the ability to reduce anxiety, depression, ⁴³ insomnia, ⁴⁴⁻⁴⁷ postpartum

depression, 48 anxiety induced palpitations, 49 anxiety in cardiovascular disease patients, 50 and

healthy participants.⁵¹ (Table 2) Akhoundzadeh et al,⁵² inspired by the efficacy of lemon balm in

treating amnesia, evaluated its effectiveness in Alzheimer's disease and cognitive disorders,

revealing potential benefits.

Lemon balm has been ingested across several centuries in various forms, which include direct food

sources, decoction, or infusion.^{53, 54} Researchers have recently preferred to administer lemon balm

interventions in the form of aqueous extracts, 10, 50, 51 hydroalcoholic extracts, 39, 42 lyophilized

aqueous extract, 49 essence, 45 or purified bioactive substances. 55, 56

The recent evidence-based findings and lengthy history involving the application of lemon balm

in neuropsychiatry, have provided vital knowledge in the field of mental health. Future research

should aim to draw upon the findings derived across the centuries in addition to more recent

studies, to determine the mechanisms of lemon balm and its clinical application in psychiatric

medicine. These results could potentially lead to the development of an effective neuropsychiatric

remedy.

Conclusion

Historically, lemon balm has been a well-known medicinal herb. The therapeutic effects of lemon

balm in the field of neuropsychiatric diseases, specifically depression and anxiety, have been

accentuated by physicians throughout history and are further strengthened by recent studies. Based

on the reviewed history, it is anticipated that the long history of lemon balm will prompt future

researchers to thoroughly explore the potential of lemon balm in neuropsychiatric disorders.

Author's contribution to the paper

JGH, MT, AF, RM and MA-KH, contributed in conception and data collection of the review. JGH,

NT, RM and MA-KH, contributed in manuscript drafting. Manuscript edited by MA-KH, RM and

NT. SS-E and SH, contributed in data interpretation and revising of the review. The final version

has read, and was confirmed by all authors for submission.

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Declaration of competing interest

The authors declare no conflict of interest and no competing financial interests exist.

References

- 1. Bandelow B, Michaelis S. Epidemiology of anxiety disorders in the 21st century. *Dialogues Clin Neurosci.* 2015; 17(3): 327-35. doi:10.31887/DCNS.2015.17.3/bbandelow
- 2. WHO. Depression fact sheet. World Health Organization: World Health Organization; 2020`URL|. [|updated Last Update Date|; cited Accessed Year Access Date|]|; Edition:[Description].
- 3. Faridi P, Seradj H, Mohammadi-Samani S, Vossoughi M, Mohagheghzadeh A, Roozbeh J. Randomized and double-blinded clinical trial of the safety and calcium kidney stone dissolving efficacy of Lapis judaicus. *J Ethnopharmacol.* 2014; 156: 82-7. doi:10.1016/j.jep.2014.08.003
- 4. Rezaeizadeh H, Alizadeh M, Naseri M, Shams AM. The traditional Iranian medicine point of view on health and disease. *Iran J Public Health*. 2009. doi:Available: https://www.sid.ir/en/journal/ViewPaper.aspx?ID=161799
- 5. Sahoo S, S B. Pharmacogenomic assessment of herbal drugs in affective disorders. *Biomed Pharmacother*. 2019; 109: 1148-62. doi:10.1016/j.biopha.2018.10.135
- 6. Heshmati J, Morvaridzadeh M, Sepidarkish M, Fazelian S, Rahimlou M, Omidi A, *et al.* Effects of Melissa officinalis (Lemon Balm) on cardio-metabolic outcomes: A systematic review and meta-analysis. *Phytother Res.* 2020. doi:10.1002/ptr.6744
- 7. Liu L, Liu C, Wang Y, Wang P, Li Y, Li B. Herbal Medicine for Anxiety, Depression and Insomnia. *Curr Neuropharmacol*. 2015; 13(4): 481-93. doi:10.2174/1570159x1304150831122734
- 8. Beaubrun G, Gray GE. A review of herbal medicines for psychiatric disorders. *Psychiatr Serv.* 2000; 51(9): 1130-4. doi:10.1176/appi.ps.51.9.1130
- 9. Ulbricht C, Brendler T, Gruenwald J, Kligler B, Keifer D, Abrams TR, *et al.* Lemon balm (Melissa officinalis L.): an evidence-based systematic review by the Natural Standard Research Collaboration. *J Herb Pharmacother*. 2005; 5(4): 71-114.
- 10. Scholey A, Gibbs A, Neale C, Perry N, Ossoukhova A, Bilog V, *et al.* Anti-stress effects of lemon balm-containing foods. *Nutrients*. 2014; 6(11): 4805-21. doi:10.3390/nu6114805
- 11. Shakeri A, Sahebkar A, Javadi B. Melissa officinalis L. A review of its traditional uses, phytochemistry and pharmacology. *J Ethnopharmacol*. 2016; 188: 204-28. doi:10.1016/j.jep.2016.05.010
- 12. Lopez V, Martin S, Gomez-Serranillos MP, Carretero ME, Jager AK, Calvo MI. Neuroprotective and neurological properties of Melissa officinalis. *Neurochem Res.* 2009; 34(11): 1955-61. doi:10.1007/s11064-009-9981-0
- 13. Al-Khalili J. *Pathfinders: the golden age of Arabic science*: Penguin UK; 2010. p.
- 14. De Lacy OL. How Greek science passed to the Arabs: Ares publishers; 1949. p.
- 15. Chejne AG. *The Arabic language: Its role in history*: U of Minnesota Press; 1968. p.
- 16. Staff GD, Gutas D. Greek Thought, Arabic Culture: The Graeco-Arabic Translation Movement in Baghdad and Early'Abbasaid Society (2nd-4th/5th-10th C.): Routledge; 1998. p.

- 17. Hardy G, Totelin L. *Ancient botany*: Routledge; 2015. p.
- 18. Russo P, Frustaci A, Del Bufalo A, Fini M, Cesario A. From traditional European medicine to discovery of new drug candidates for the treatment of dementia and Alzheimer's disease: acetylcholinesterase inhibitors. *Curr Med Chem.* 2013; 20(8): 976-83. doi:PMID: 23210783
- 19. Sahl SI. The small dispensatory: Brill; 2003. p.
- 20. Schmucker W. *Die pflanzliche und mineralische Materia Medica im Firdous Al-Hikma des 'Ali Ibn Sahl Rabban 'At-Tabari*. https://books.google.com/: Rheinische Fr. W. Universität; 1969. p.
- 21. Meyerhof M. Alî at-Tabarî's``Paradise of Wisdom", one of the oldest Arabic Compendiums of Medicine. *Isis.* 1931; 16(1): 6-54. doi:10.1086/346582
- 22. Thābit ibn Qurrah. *Kitāb Al-dhakhīrah Fī 'ilm Al-tibb*. al-Qāhirah: al-Matḥa'ah al-Amīrīyah, available in https://library.soas.ac.uk/Record/221848; 1928. p.
- 23. Meyerhof M. Thirty-three clinical observations by Rhazes (circa 900 AD). *Isis.* 1935; 23(2): 321-72. doi:10.1086/346968
- 24. Razi ABMbZ. *Al-Hawi fi'l-tibb (Comprehensive book of medicine), Vol 3.* Haydarabad, India: Da'irat al-Ma`arif al-`Utmaniyya, ; 1955. p. 93-194
- 25. Razi A. Kitab al-Abdal. 1st (English translation by CCRUM) New Delhi: Central Council for Research in Unani Medicine, Dept of AYUSH, Ministry of H & FW, Govt of India. 1999; 10: 11-4.
- 26. Razi A. Kavass al-ashiya (Properties of objects). Qom, IRAN: Majmae Zakhaer Islami; 2009. p. 127
- 27. Majūsī 'ia-'. *Kāmil al-ṣinā 'ah al-ṭibbīyah*: Ma'had Tārīkh al-'Ulūm al-'Arabīyah wa-al-Islāmīyah, fī Iṭār Jāmi'at Frānkfūrt; 1877. p.
- 28. Avicenne. Al-Qanun Fi'l-tibb [by] Al-Shaikh Al-Ra'is Abu 'Ali Al-Husain Bin 'Abdullah Bin Sina (980-1037 A.D.): Book I. Critical Edition Prepared Under the Auspices of Institute of History of Medicine and Medical Research: Vikas Publishing House; 1982. p.
- 29. Faridi P, Zarshenas MM. Ibn Sina's book on drugs for cardiovascular diseases. *Int J Cardiol*. 2010; 145(2): 223. doi:10.1016/j.ijcard.2010.04.064
- 30. Biruni A. Kitab-al Saydana fi-Tibb. Academy of Persian Language and Literature. 2004.
- 31. Meyerhof M. Gregorius Abu'l-Farag. The Abridged Version of "The Book of Simple Drugs" by Aḥmad ibn Muḥammad al-Ghāfiqī. *Isis.* 1934; 20(2): 4. doi:https://www.jstor.org/stable/225263
- 32. Ghāfiqī AJAmiMa. *Al-Adwiya Al-Mufrada*. Osler 7508; Gacek, Adam. Arabic manuscripts in the libraries of McGill University, 1021165. p. iii, 284 leaves: illustrations doi:Available in: https://archive.org/details/McGillLibrary-osl_al-ghafiqi_MS7508-18872/page/n158/mode/2up
- 33. Bolens L. La révolution agricole andalouse du XIe siècle. *Studia islamica*. 1978: 121-41.
- 34. Al-Khattabi M. Abu al-Khayr al-Shajjar al-Ishbili, 'Umdat al-tabib fi ma 'rifat al-nabat (The physician's reliance on the knowledge of plants). *Akadimiyyat al-Mamlaka al-Maghribiyya*, *Rabat.* 1990.
- 35. Ibn Baitar A. Al Jami ul Mufradat ul Advia wal Aghzia. Beirut: Dar Al Kotob Ilmiyah; 1991.
- 36. Baitar I. Al Jamiul Mufradatul Advia wal Aghzia. New Delhi: Ministry of Health and Family Welfare, Govt of India. 1999: 177-78.
- 37. Chaghmini M. Qanunchi Fi Al-Tibb. *Tehran: Iran university of Medical science*. 2004: 87.

- 38. Emamghoreishi M, Talebianpour M. Antidepressant effect of Melissa officinalis in the forced swimming test. *Daru.* 2009; 17(1).
- 39. Taiwo AE, Leite FB, Lucena GM, Barros M, Silveira D, Silva MV, *et al.* Anxiolytic and antidepressant-like effects of Melissa officinalis (lemon balm) extract in rats: Influence of administration and gender. *Indian J Pharmacol.* 2012; 44(2): 189-92. doi:10.4103/0253-7613.93846
- 40. Lin SH, Chou ML, Chen WC, Lai YS, Lu KH, Hao CW, *et al.* A medicinal herb, Melissa officinalis L. ameliorates depressive-like behavior of rats in the forced swimming test via regulating the serotonergic neurotransmitter. *J Ethnopharmacol.* 2015; 175: 266-72. doi:10.1016/j.jep.2015.09.018
- 41. Ibarra A, Feuillere N, Roller M, Lesburgere E, Beracochea D. Effects of chronic administration of Melissa officinalis L. extract on anxiety-like reactivity and on circadian and exploratory activities in mice. *Phytomedicine*. 2010; 17(6): 397-403. doi:10.1016/j.phymed.2010.01.012
- 42. Ghazizadeh J, Hamedeyazdan S, Torbati M, Farajdokht F, Fakhari A, Mahmoudi J, *et al.* Melissa officinalis L. hydro-alcoholic extract inhibits anxiety and depression through prevention of central oxidative stress and apoptosis. *Exp Physiol.* 2020. doi:10.1113/ep088254
- 43. Araj-Khodaei M, Noorbala AA, Yarani R, Emadi F, Emaratkar E, Faghihzadeh S, *et al.* A double-blind, randomized pilot study for comparison of Melissa officinalis L. and Lavandula angustifolia Mill. with Fluoxetine for the treatment of depression. *BMC Complement Med Ther*. 2020; 20(1): 207. doi:10.1186/s12906-020-03003-5
- 44. Chehroudi S, Fatemi MJ, Saberi M, Salehi SH, Akbari H, Samimi R. Effects of Melissa officinalis L. on Reducing Stress, Alleviating Anxiety Disorders, Depression, and Insomnia, and Increasing Total Antioxidants in Burn Patients. *Trauma Monthly*. 2016; Inpress(Inpress): e33630. doi:10.5812/traumamon.33630
- 45. Heydari N, Dehghani M, Emamghoreishi M, Akbarzadeh M. Effect of Melissa officinalis capsule on the mental health of female adolescents with premenstrual syndrome: a clinical trial study (in press). *Int J Adolesc Med Health* [serial on the Internet]. 2018: Available from: http://cochranelibrary-wiley.com/o/cochrane/clcentral/articles/654/CN-01457654/frame.html.
- 46. Haybar H, Javid AZ, Haghighizadeh MH, Valizadeh E, Mohaghegh SM, Mohammadzadeh A. The effects of Melissa officinalis supplementation on depression, anxiety, stress, and sleep disorder in patients with chronic stable angina. *Clin Nutr ESPEN*. 2018; 26: 47-52. doi:10.1016/j.clnesp.2018.04.015
- 47. Soltanpour A, Alijaniha F, Naseri M, Kazemnejad A, Heidari MR. Effects of Melissa officinalis on anxiety and sleep quality in patients undergoing coronary artery bypass surgery: A double-blind randomized placebo controlled trial. *Eur J Integr Med.* 2019; 28: 27-32. doi:10.1016/j.eujim.2019.01.010
- 48. Beihaghi M, Yousefzade S, Mazloom SR, Modares Gharavi M, Hamedi SS. The Effect of Melissa Officinalis on Postpartum Blues in Women Undergoing Cesarean Section. *Journal of Midwifery and Reproductive Health.* 2019; 7(2): 1636-43.
- 49. Alijaniha F, Naseri M, Afsharypuor S, Fallahi F, Noorbala A, Mosaddegh M, *et al.* Heart palpitation relief with Melissa officinalis leaf extract: double blind, randomized, placebo controlled trial of efficacy and safety. *J Ethnopharmacol.* 2015; 164: 378-84. doi:10.1016/j.jep.2015.02.007

- 50. Lotfi A, Shiri H, Ilkhani R, Sefidkar R, Esmaeeli R. The Efficacy of Aromatherapy With Melissa officinalis in Reducing Anxiety in Cardiac Patients: A Randomized Clinical Trial. *Crescent Journal of Medical and Biological Sciences*. 2019; 6(3): 293-9.
- 51. Saeidi. J, Khansari. Z, Tozandejani. H. The effectiveness of Melissa officinalis and Lavandula angustifolia in Anxiety of Oil Company Employees. *Journal of Sabzevar University of Medical Sciences*. 2020; 26(6): 687-94.
- 52. Akhondzadeh S, Noroozian M, Mohammadi M, Ohadinia S, Jamshidi AH, Khani M. Melissa officinalis extract in the treatment of patients with mild to moderate Alzheimer's disease: a double blind, randomised, placebo controlled trial. *J Neurol Neurosurg Psychiatry*. 2003; 74(7): 863-6.
- 53. Barros L, Dueñas M, Dias MI, Sousa MJ, Santos-Buelga C, Ferreira IC. Phenolic profiles of cultivated, in vitro cultured and commercial samples of Melissa officinalis L. infusions. *Food Chem.* 2013; 136(1): 1-8. doi:10.1016/j.foodchem.2012.07.107
- 54. Carocho M, Barros L, Calhelha RC, Ćirić A, Soković M, Santos-Buelga C, *et al.* Melissa officinalis L. decoctions as functional beverages: a bioactive approach and chemical characterization. *Food Funct.* 2015; 6(7): 2240-8. doi:10.1039/c5fo00309a
- 55. Takeda H, Tsuji M, Inazu M, Egashira T, Matsumiya T. Rosmarinic acid and caffeic acid produce antidepressive-like effect in the forced swimming test in mice. *Eur J Pharmacol*. 2002; 449(3): 261-7. doi:https://doi.org/10.1016/S0014-2999(02)02037-X
- 56. Jin X, Liu P, Yang F, Zhang Y-h, Miao D. Rosmarinic acid ameliorates depressive-like behaviors in a rat model of CUS and Up-regulates BDNF levels in the hippocampus and hippocampal-derived astrocytes. *Neurochem Res.* 2013; 38(9): 1828-37. doi:10.1007/s11064-013-1088-y

Table 1: Indications and Functions/target symptoms in the use of lemon balm in neuropsychiatric disorders in a number of sourcebooks from the 9th to the 15th century.

Author	Literature	Year	Neuro-psychiatric indications	Functions/targ et symptoms
Dioscorides	De materia medica	۹۰ <u>-</u> ٤٠ A. D	Not specified	Gastrointestinal symptoms
Galen	-	129-210 A. D		Neuro- psychiatric symptoms
Shapur ibn Sahl	al-adwiya al-murakabba (Aqrabadhin)	Died: 869 A. D	Neuropsychiatric symptoms	Not specified
	Firdous al- hikmah	838-870 A. D	Anxiety-induced palpitation, fear, despondency, faint,	Exhilarator, courage booster
Thābit ibn Qurra	al-dhakhīrah fī 'ilm al-tibb	836-901 A. D	Melancholia, sadness, fear, obsessive, panic, low-spirit	Anti-obsessive, anti-psychotic, mood enhancer
Muhammad ibn Zakariya al- Razi (<i>Rhazes</i>)	 Al-hawi fi al-tibb Khavas al-ashia Abdal-al-adwiya 	865-925 A. D	Sadness, severe depression, epilepsy, amnesia, low-spirit	Anti-epileptic, Anti-amnestic
Ali ibn al-Abbas al-Majusi (Haly Abbas)	Kāmil aṣ- sināʿa aṭ- tibbiyya	Died between 982-994 A. D	Sadness, anxiety, low-accuracy, amnesia, headache	Accuracy enhancer, headache analgesic

Author	Literature	Year	Neuro-psychiatric indications	Functions/targ et symptoms
Avicenna	 Canon of medicine al-adwiya al-qalbiye 	980-1037 A. D	Ischemic stroke, despondency, anxiety-induced palpitation, anxiety, faint, panic, epilepsy,	•
Abu Rayhan al- Biruni	al-saydala fi al- tibb	973-1050 A. D	Despondency	Not specified
Abu Jaafar Ahmed bin Muhammad bin Said Al-Ghafiqi	fi al-adwiya al- mufrada	died 1165 A. D	Melancholic, ischemic stroke, low-spirit, faint, sadness	Not specified
Abu l-Khayr al- Ishbili	Umdat al-tabib fi ma'arifat al- nabat	1108-1179 A. D	Depression, despondency, sadness	Not specified
Ibn al-Bayṭār	al-jāmiʿ fi al- adwiya al- mufrada	1197-1248 A. D	Affective disorders, heartache, sadness, insomnia, panic, obsessive, faint, ischemic stroke, nightmare, self-talk, neurodegeneration, anxiety-induced palpitations,	Hypnotic, neuroprotective
al-Chaghmīnī	Qānūnchah fi al- tibb	Died 1344 A. D	Sciatalgia, radicular lower back pain, arthropathy, seizure, litharghous, amnesia	Peripheral neuropathy remedy

Table 2. Evidence of the effectiveness of Lemon Balm in neuro-psychiatric disorders in recent randomized clinical trials.

Author / year	Neuro-Psychiatric disorders	Lemon Balm efficacy	
Scholey et al.	Cognitive impairment and	Cognitive and mood performance was	
2014	Anxiety	improved.	
Alijaniha et al. 2015	Anxiety, Depression, Insomnia, Palpitation, Social- dysfunction, Somatization	The number of patients with anxiety and severe depression, was reduced.	
Chehroudi et al.	Depression, Anxiety,	Anxiety and depression were	
2016	Insomnia	significantly reduced in patients.	
Heydari et al.	Depression, Anxiety, Social	Sleep quality, anxiety disorders and	
2018	disorders, Sleeping-disorders,	depression were significantly	
	Somatoform-symptoms	improved.	
Haybar et al.	Anxiety, Depression, Stress,	Depression and anxiety scores	
2018	Sleep-disorders	decreased significantly.	
Beihaghi et al. 2019	Depression (Blues)	The intervention significantly reduced the incidence of postpartum depression in the treatment group.	
Lotfi et al.	Anxiety	Anxiety state was significantly	
2019	Anxiety	improved in the intervention group.	
Soltanpour et al. 2019	Anxiety, Sleep-quality	The levels of anxiety and sleep quality in participants improved by 49% and 54% respectively.	
Saeidi et al.	Anxiety	Anxiety symptoms were significantly	
2020	Ministry	reduced in the intervention groups.	
Araj-Khodaei et al. 2020	Depression	Lemon balm was able to improve mild to moderate depression, similar to fluoxetine.	

Figure 1: An example of the translation of medical books into Arabic during the translation movement. "Al-Adwiya al-Murakabba" (Aqrabadhin): The content of the book relates to how to make compound drugs. Which has been translated from Syriac into Arabic by Shapur bin Sahl, a 9th century Jundishapur



Figure 2: Description and applications of Lemon balm according to "Fi al-Adwiya al-mufrada" by Abu Jaafar Ahmed bin Muhammad bin Said Al-Ghafiqi. Available in: https://archive.org/details/McGillLibrary-osl_al-ghafiqi_MS7508-18872/page/n158/mode/2up