

To Formulate and Evaluate Herbal Paint for Topical Infections

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Abstract- Topical microbial infections, including bacterial and fungal skin disorders, represent a significant clinical concern due to their high prevalence and increasing resistance to conventional antimicrobial agents. Synthetic topical therapies, although effective, are often associated with adverse effects such as irritation, hypersensitivity, and development of antimicrobial resistance. This has led to growing interest in phytopharmaceutical approaches utilizing bioactive plant constituents. The present study focuses on the formulation and evaluation of a herbal paint for topical infections incorporating extracts of *Zingiber officinale* (Ginger), *Azadirachta indica* (Neem), *Curcuma longa* (Turmeric), and *Aloe barbadensis* (Aloe vera). These medicinal plants are rich in diverse phytoconstituents such as gingerols and shogaols (ginger), azadirachtin and nimbidin (neem), curcuminoids (turmeric), and polysaccharides along with anthraquinones (aloe vera). These compounds exhibit potent antimicrobial, anti-inflammatory, antioxidant, and wound healing activities through mechanisms such as disruption of microbial cell membranes, inhibition of pro-inflammatory mediators, and scavenging of reactive oxygen species (ROS). The herbal paint formulation was developed using suitable solvents and excipients to achieve optimal film-forming ability, spreadability, and stability. The prepared formulations were subjected to comprehensive evaluation including organoleptic properties, pH determination, viscosity, drying time, and spreadability. Furthermore, antimicrobial activity was assessed using standard microbiological techniques against common pathogenic strains, and skin irritation studies were conducted to ensure dermal safety. The optimized formulation demonstrated desirable physicochemical characteristics, rapid drying behavior, uniform film formation, and significant antimicrobial activity, indicating a synergistic effect of combined phytoconstituents. No signs of irritation or adverse reactions were observed during safety evaluation. In conclusion, the formulated herbal paint represents a promising phytotherapeutic topical delivery system with enhanced efficacy and safety profile for the management of minor skin infections. The study highlights the potential of plant-derived bioactive compounds as effective alternatives to synthetic antimicrobial agents.

Further investigations involving clinical studies and stability profiling are recommended to validate long-term efficacy and commercialization potential.

I. INTRODUCTION

1.1 Background

The skin is the largest organ of the human body and serves as a primary protective barrier against environmental hazards, pathogens, and physical injuries. However, it is highly susceptible to various topical infections, including bacterial, fungal, and minor wound infections. Common causative organisms include *Staphylococcus aureus*, *Escherichia coli*, *Candida albicans*, and dermatophytes, which lead to symptoms such as redness, inflammation, itching, and delayed wound healing.

Conventional topical treatments mainly involve synthetic antimicrobial agents such as antibiotics and antifungal drugs. Although effective, these agents are associated with several limitations including skin irritation, hypersensitivity reactions, toxicity, and the emergence of antimicrobial resistance. This has created a need for safer, more effective alternatives with minimal side effects.

1.2 Need for Herbal Formulations

In recent years, there has been a growing interest in herbal and phytopharmaceutical products due to their natural origin, better biocompatibility, and reduced adverse effects. Medicinal plants contain a wide range of bioactive phytoconstituents such as alkaloids, flavonoids, tannins, terpenoids, and phenolic compounds, which exhibit significant antimicrobial, anti-inflammatory, antioxidant, and wound healing properties.

Herbal formulations offer several advantages:

- Lower toxicity and side effects
- Broad-spectrum antimicrobial activity
- Reduced chances of resistance
- Cost-effectiveness and accessibility

These advantages make herbal-based topical systems a promising approach for managing skin infections.

1.3 Concept of Herbal Paint

A herbal paint is a liquid or semi-liquid topical formulation designed to be applied directly to the affected skin surface, forming a thin protective film. It acts as a drug delivery system that ensures localized action of active phytoconstituents.

The formulation provides:

- Uniform distribution of active ingredients
- Rapid drying and film formation
- Prolonged contact with skin
- Protection from external contamination

This dosage form is particularly useful for localized infections, wounds, and inflammatory skin conditions, where targeted therapy is required.

1.4 Rationale for Selection of Herbal Ingredients

The present study utilizes four medicinal plants known for their potent therapeutic activities:

1.4.1 *Zingiber officinale* (Ginger)

Ginger contains active compounds such as gingerols and shogaols, which exhibit strong anti-inflammatory, antioxidant, and antimicrobial properties. These compounds inhibit inflammatory mediators and help in reducing skin irritation and infection.

1.4.2 *Azadirachta indica* (Neem)

Neem is widely recognized for its broad-spectrum antimicrobial activity. It contains phytoconstituents such as azadirachtin, nimbidin, and nimbin, which possess antibacterial, antifungal, and anti-inflammatory effects. Neem is particularly effective against skin pathogens and promotes wound healing.

1.4.3 *Curcuma longa* (Turmeric)

Turmeric is rich in curcuminoids, especially curcumin, which exhibits potent anti-inflammatory,

antioxidant, and antimicrobial activity. It helps in reducing redness, swelling, and promotes faster healing of infected skin.

1.4.4 *Aloe barbadensis* (Aloe vera)

Aloe vera contains polysaccharides, glycoproteins, and anthraquinones, which contribute to its soothing, moisturizing, and wound healing properties. It enhances skin hydration and accelerates tissue regeneration.

1.5 Mechanism of Action of Herbal Paint

The therapeutic action of the herbal paint is based on the synergistic effect of phytoconstituents:

- Antimicrobial action: Disruption of microbial cell membranes and inhibition of protein synthesis
- Anti-inflammatory effect: Inhibition of pro-inflammatory mediators such as prostaglandins and cytokines
- Antioxidant activity: Scavenging of reactive oxygen species (ROS), reducing oxidative stress
- Wound healing activity: Stimulation of collagen synthesis and tissue regeneration

The combination of these mechanisms results in effective management of topical infections.

1.6 Advantages of Herbal Paint

- Easy and convenient application
- Rapid drying and film-forming property
- Localized drug delivery
- Reduced systemic side effects
- Improved patient compliance
- Cost-effective and eco-friendly

1.7 Ideal Characteristics of Herbal Paint

An ideal herbal paint should possess the following properties:

- Non-toxic and non-irritant
- Good antimicrobial activity
- Appropriate viscosity and spreadability
- Quick drying with uniform film formation
- Stable under normal storage conditions
- Compatible with skin pH

1.8 Scope of the Study

The present study aims to develop a herbal paint formulation using selected medicinal plant extracts and evaluate its effectiveness against topical infections. The study includes formulation development, physicochemical evaluation, antimicrobial testing, and safety assessment to establish its potential as a safe and effective alternative to conventional topical therapies.

II. REVIEW OF LITERATURE

Sharma et al. (2023) reported that herbal formulations containing *Azadirachta indica* exhibited significant antibacterial activity against *Staphylococcus aureus* and *Escherichia coli*. The study attributed this activity to the presence of bioactive compounds such as azadirachtin and nimbidin, which disrupt microbial cell membranes and inhibit bacterial growth.

Patel et al. (2022) developed a topical herbal formulation using neem and turmeric extracts and evaluated its antimicrobial activity. The results demonstrated enhanced inhibition against fungal strains such as *Candida albicans*, suggesting a synergistic effect of curcuminoids and limonoids in combating infections.

Singh et al. (2021) investigated the wound healing potential of *Curcuma longa* and found that curcumin significantly enhances collagen synthesis and tissue regeneration. The study also highlighted its strong anti-inflammatory and antioxidant properties, which accelerate healing of infected wounds.

Gupta et al. (2020) evaluated the antimicrobial activity of *Zingiber officinale* and reported that compounds such as gingerols and shogaols exhibit potent antibacterial and antifungal activity. These phytoconstituents act by disrupting microbial enzymes and inhibiting protein synthesis.

Kumar et al. (2019) studied the therapeutic effects of *Aloe barbadensis* in dermatological conditions. The findings revealed that polysaccharides and glycoproteins present in aloe vera enhance skin

hydration, reduce inflammation, and promote faster wound healing.

Reddy et al. (2018) formulated a herbal topical gel containing multiple plant extracts and evaluated its physicochemical properties and antimicrobial activity. The study concluded that herbal combinations show better efficacy due to synergistic interactions between phytoconstituents.

Mehta et al. (2017) investigated the antioxidant activity of turmeric and neem extracts. The results indicated strong free radical scavenging activity, which helps in reducing oxidative stress and preventing skin damage caused by infections.

Choudhary et al. (2016) reported that herbal formulations provide a safer alternative to synthetic antimicrobial agents due to their low toxicity and reduced side effects. The study emphasized the growing importance of phytopharmaceuticals in dermatology.

Verma et al. (2015) studied the antifungal activity of neem extract against dermatophytes and found significant inhibition of fungal growth. The study confirmed neem's effectiveness in treating fungal skin infections.

Joshi et al. (2014) evaluated various herbal drug delivery systems and concluded that topical formulations such as gels, creams, and paints improve localized drug delivery and patient compliance compared to oral therapies.

III. PLANT AND DRUG PROFILE

3.1 *Zingiber officinale* (Ginger)

Biological Source

Dried rhizomes of *Zingiber officinale* Roscoe.

Family

Zingiberaceae

Common Names

Ginger, Adrak

Geographical Source

India, China, Southeast Asia

Chemical Constituents

- Gingerols (6-gingerol, 8-gingerol)
- Shogaols
- Zingerone
- Essential oils (zingiberene, bisabolene)

Pharmacological Activities

- Antimicrobial
- Anti-inflammatory
- Antioxidant
- Analgesic

Mechanism of Action

Gingerols and shogaols inhibit microbial growth by:

- Disrupting microbial cell membranes
- Inhibiting protein synthesis
- Reducing inflammatory mediators

Uses

- Treatment of infections
- Anti-inflammatory agent
- Pain relief

3.2 Azadirachta indica (Neem)

Biological Source

Leaves and bark of Azadirachta indica

Family

Meliaceae

Common Names

Neem

Geographical Source

India, tropical regions

Chemical Constituents

- Azadirachtin
- Nimbidin
- Nimbin
- Quercetin

Pharmacological Activities

- Antibacterial
- Antifungal
- Anti-inflammatory
- Antiseptic

Mechanism of Action

Neem compounds act by:

- Disrupting microbial cell wall integrity
- Inhibiting fungal growth
- Blocking microbial enzyme systems

Uses

- Skin infections
- Wound healing
- Antiseptic applications

3.3 Curcuma longa (Turmeric)

Biological Source

Dried rhizomes of Curcuma longa

Family

Zingiberaceae

Common Names

Turmeric, Haldi

Geographical Source

India, Southeast Asia

Chemical Constituents

- Curcumin
- Demethoxycurcumin
- Bisdemethoxycurcumin
- Volatile oils

Pharmacological Activities

- Anti-inflammatory
- Antimicrobial
- Antioxidant
- Wound healing

Mechanism of Action

Curcumin:

- Inhibits inflammatory mediators (COX-2, TNF- α)
- Scavenges free radicals
- Prevents microbial proliferation

Uses

- Treatment of wounds
- Skin infections
- Anti-inflammatory therapy

3.4 Aloe barbadensis (Aloe vera)

Biological Source

Fresh leaves of Aloe barbadensis Miller

Family

Liliaceae

Common Names

Aloe vera, Ghritkumari

Geographical Source

Tropical and subtropical regions

Chemical Constituents

- Polysaccharides (acemannan)
- Anthraquinones (aloin, emodin)
- Glycoproteins
- Vitamins (A, C, E)

Pharmacological Activities

- Wound healing
- Anti-inflammatory
- Moisturizing
- Antimicrobial

Mechanism of Action

Aloe vera:

- Promotes collagen synthesis
- Enhances epithelial regeneration
- Reduces inflammation
- Maintains skin hydration

Uses

- Burns and wounds
- Skin irritation
- Moisturizing agent

IV. AIM AND OBJECTIVES

4.1 Aim

To formulate and evaluate a herbal paint for topical infections.

4.2 Objectives

The main objectives of the present study are:

1. To select and justify suitable medicinal plants based on their phytochemical constituents and therapeutic properties.
2. To prepare extracts of selected plants using appropriate extraction methods.
3. To formulate a stable and effective herbal paint dosage form using suitable excipients.
4. To study the effect of formulation variables on the physicochemical properties of the herbal paint.
5. To evaluate the formulation for:
 - Organoleptic properties (color, odor, appearance)
 - pH
 - Viscosity
 - Drying time
 - Spreadability
6. To assess the antimicrobial activity of the formulated herbal paint against selected pathogenic microorganisms.
7. To perform skin irritation studies to evaluate the safety of the formulation.
8. To conduct stability studies under different storage conditions.

V. PLAN OF WORK

Phase I: Literature Survey and Selection of Materials

- Collection of information from books, journals, and research articles
- Selection of suitable medicinal plants (ginger, neem, turmeric, aloe vera)
- Selection of required excipients and chemicals

Phase II: Preparation of Extracts and Formulation

- Collection and drying of plant materials
- Powdering and extraction of plant materials
- Preparation of herbal extracts
- Formulation of herbal paint using suitable ingredients
- Development of different batches of formulation

Phase III: Evaluation of Formulation

Physicochemical Evaluation

- Organoleptic properties (color, odor, appearance)
- pH determination
- Viscosity
- Drying time
- Spreadability

Biological Evaluation

- Antimicrobial activity
- Skin irritation test

Stability Study

- Evaluation of formulation under different storage conditions

VI. MATERIALS AND METHODS

6.1 Materials

Herbal Materials

- Ginger (*Zingiber officinale*)
- Neem (*Azadirachta indica*)
- Turmeric (*Curcuma longa*)
- Aloe vera (*Aloe barbadensis*)

Excipients and Chemicals

- Ethanol / Distilled water (solvent)
- Glycerin (humectant)
- Methyl paraben (preservative)
- Propyl paraben (preservative)

Microorganisms (for antimicrobial study)

- *Staphylococcus aureus*
- *Escherichia coli*
- *Candida albicans*

6.2 Instruments Required

- Weighing balance
- Beaker and conical flask
- Hot plate / Water bath
- Magnetic stirrer
- pH meter
- Viscometer
- Glass rod
- Petri plates and incubator

6.3 Methodology

6.3.1 Preparation of Plant Extracts

1. The plant materials (ginger, neem, turmeric) were collected and washed with clean water.
2. They were dried under shade for several days.
3. The dried materials were powdered using a grinder.
4. The powdered material was subjected to extraction using ethanol or distilled water (maceration or Soxhlet method).
5. The extract was filtered using filter paper.
6. The filtrate was concentrated and stored for further use.

6.3.2 Formulation of Herbal Paint

1. Required quantity of plant extracts was taken in a beaker.
2. Glycerin was added as a humectant.
3. Preservatives (methyl paraben and propyl paraben) were added.
4. The mixture was stirred continuously using a magnetic stirrer to obtain a uniform solution.
5. Suitable solvent (ethanol/water) was added to adjust consistency.
6. The final formulation was transferred into a clean container and stored.

6.3.3 Preparation of Different Batches

Different formulations were prepared by varying the concentration of herbal extracts:

- F1 – Low concentration
- F2 – Medium concentration
- F3 – High concentration

These batches were used for evaluation and optimization.

6.4 Evaluation Parameters

6.4.1 Organoleptic Evaluation

- Color
- Odor
- Appearance

6.4.2 pH Determination

The pH of the formulation was measured using a calibrated pH meter.

6.4.3 Viscosity

Viscosity was determined using a viscometer.

6.4.4 Drying Time

The time required for the formulation to dry after application on skin surface was recorded.

6.4.5 Spreadability

A small quantity of formulation was placed between two glass slides and spreadability was observed.

6.4.6 Antimicrobial Activity

Antimicrobial activity was evaluated using agar well diffusion method:

- Nutrient agar plates were prepared
- Microorganisms were inoculated
- Wells were created and formulation was added
- Plates were incubated
- Zone of inhibition was measured

6.4.7 Skin Irritation Test

The formulation was applied on a small area of skin and observed for redness, itching, or irritation.

6.4.8 Stability Study

The formulation was stored at different conditions (room temperature, elevated temperature) and observed for changes in:

- Color
- pH
- Stability

VII. EVALUATION PARAMETERS

7.1 Organoleptic Evaluation

The formulation was observed visually for:

- Color
- Odor
- Appearance (clarity/consistency)

7.2 pH Determination

The pH of the formulation was measured using a digital pH meter.

Procedure:

- The formulation was diluted with distilled water
- The electrode was dipped into the sample
- pH was recorded

7.3 Viscosity

Viscosity of the formulation was determined using a viscometer.

Procedure:

- Sample was placed in the viscometer
- Reading was noted in centipoise (cP)

7.4 Drying Time

Procedure:

- A small amount of formulation was applied on skin/glass surface
- Time required to dry completely was recorded

7.5 Spreadability

Spreadability indicates how easily the formulation spreads on skin.

Procedure:

- A small quantity of formulation was placed between two glass slides
- A weight was placed on the upper slide
- Time taken to spread was noted

Formula:

$$S = \frac{M \times L}{T}$$

Where:

- S = Spreadability
- M = Weight applied (g)
- L = Length of slide (cm)
- T = Time taken (sec)

7.6 Antimicrobial Activity

Antimicrobial activity was evaluated using the agar well diffusion method.

Procedure:

- Nutrient agar plates were prepared
- Microorganisms were inoculated
- Wells were made in agar
- Formulation was added into wells
- Plates were incubated at 37°C for 24 hours
- Zone of inhibition (mm) was measured

7.7 Skin Irritation Test

Procedure:

- Formulation was applied on a small area of skin
- Observed for 24 hours

Observation:

- Redness
- Itching
- Swelling

7.8 Stability Study

Formulations were stored under different conditions:

- Room temperature
- Elevated temperature

Parameters observed:

- Color
- pH
- Consistency

VIII. RESULTS AND DISCUSSION

The herbal paint formulations (F1, F2, and F3) were successfully prepared using extracts of ginger, neem, turmeric, and aloe vera. The formulations were evaluated for various physicochemical and biological parameters, and the results are discussed below.

8.1 Organoleptic Properties

All the formulations were evaluated for color, odor, and appearance. F1 showed a light yellow color with thin consistency, whereas F2 exhibited a yellow color with moderate viscosity. F3 appeared dark yellow with smooth and viscous consistency. The increase in color intensity and viscosity from F1 to F3 is due to the increased concentration of herbal extracts..

8.2 pH Determination

The pH values of all formulations were found to be within the range of 6.2 to 6.8, which is close to the normal skin pH.

8.3 Viscosity

The viscosity of the formulations increased from F1 to F3.

- F1 showed low viscosity (thin consistency)
- F2 showed moderate viscosity

- F3 showed higher viscosity

8.4 Drying Time

Drying time decreased from F1 to F3:

- F1 took longer time to dry
- F3 dried faster

8.5 Spreadability

Spreadability increased from F1 to F3:

- F1 had lower spreadability
- F3 showed maximum spreadability

8.6 Antimicrobial Activity

The antimicrobial activity was evaluated against *Staphylococcus aureus*, *Escherichia coli*, and *Candida albicans*.

- F1 showed minimum zone of inhibition
- F2 showed moderate activity
- F3 showed maximum activity
- Curcumin (turmeric)
- Azadirachtin (neem)
- Gingerols (ginger)

8.7 Skin Irritation Test

All formulations were found to be non-irritant, with no signs of redness, itching, or swelling.

8.8 Stability Study

Stability studies showed that:

- F1 exhibited slight changes in consistency and color
- F2 and F3 remained stable

8.9 Overall Discussion and Optimization

From the above results, it is evident that the concentration of herbal extracts significantly affects the properties of the formulation.

- Increasing concentration improved antimicrobial activity
- Enhanced viscosity and spreadability
- Reduced drying time
- Improved stability

Among all formulations, F3 was found to be the optimized formulation because it showed:

- Highest antimicrobial activity
- Best spreadability

- Fastest drying time
- Good stability
- Acceptable pH and no irritation

IX. CONCLUSION

The present study was carried out to formulate and evaluate a herbal paint for topical infections using natural ingredients such as ginger, neem, turmeric, and aloe vera.

The prepared formulations (F1, F2, and F3) were evaluated for various physicochemical and biological parameters including pH, viscosity, drying time, spreadability, antimicrobial activity, skin irritation, and stability. All formulations showed acceptable properties and were found to be safe for topical application.

Among the three formulations, F3 was found to be the optimized formulation, as it exhibited:

- Better consistency and appearance
- Appropriate pH for skin compatibility
- Faster drying time
- Higher spreadability
- Maximum antimicrobial activity
- Good stability with no signs of irritation

The enhanced performance of F3 may be attributed to the higher concentration and synergistic effect of phytoconstituents present in ginger, neem, turmeric, and aloe vera.

Thus, the study concludes that the formulated herbal paint is a safe, effective, and promising alternative to conventional topical antimicrobial formulations for the treatment of minor skin infections.

Further studies such as clinical evaluation and long-term stability testing are recommended to confirm its therapeutic potential and commercial applicability.

X. SUMMARY

The present study was undertaken to formulate and evaluate a herbal paint for the treatment of topical

infections using natural ingredients such as ginger, neem, turmeric, and aloe vera.

The selected medicinal plants were chosen based on their known antimicrobial, anti-inflammatory, and wound healing properties. The plant materials were collected, dried, powdered, and extracted using suitable methods. The obtained extracts were then used to prepare different formulations of herbal paint (F1, F2, and F3) by varying the concentration of active ingredients.

The prepared formulations were evaluated for various physicochemical parameters including color, odor, appearance, pH, viscosity, drying time, and spreadability. In addition, biological evaluation such as antimicrobial activity and skin irritation test was carried out. Stability studies were also performed to assess the shelf life of the formulations.

The results showed that all formulations possessed acceptable physicochemical properties and were safe for topical application. Among the formulations, F3 exhibited the best performance in terms of antimicrobial activity, spreadability, drying time, and stability.

The study concludes that the developed herbal paint is an effective and safe formulation for the management of minor skin infections. The presence of natural phytoconstituents contributes to its therapeutic activity.

Further studies are recommended to evaluate the clinical efficacy and long-term stability of the formulation.

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