

Hypericum perforatum: Nature's mood stabilizer

Vikas Kumar^{1,2}, P N Singh¹, A V Muruganandam² & S K Bhattacharya^{1*}

¹Pharmacology Laboratory, Department of Pharmaceutics, Institute of Technology,

²Neuropharmacology Laboratory, Department of Pharmacology, Institute of Medical Sciences,
Banaras Hindu University, Varanasi 221 005, India

Hypericum perforatum (HP), better known as St. John's Wort, has been used clinically for centuries. Modern usage is still quite diverse and includes kidney and lung ailments, insomnia and depression. Standardised extracts of HP are widely used in the treatment of psychovegetative disorders and especially for mild forms of depression. Several bioactive constituents of this plant may play important role in its well-known antidepressant activity, which are discussed in the present article. Furthermore, emphasis is also given on its botany, chemistry, pharmacology and clinical efficacy.

The name *Hypericum* is a derivation of two Greek words, *hyper* and *eikon* which translate "over" and "icon" as in "over an apparition," alluding to its use in ancient times for protecting against demonic possession and its reported ability to protect one from "evil spirits." The species name *perforatum* is based on the perforated appearance of the leaves due to their translucent leaf glands which can be observed when held up to light. *Hypericum perforatum* (HP) is also known as St. John's Wort because its flowers bloom around St. John's Day (June 24) and red pigments which are exuded when the buds and flowers are squeezed were associated with the blood of St. John the Baptist¹.

HP is a perennial plant belonging to the Guttiferae family. Some taxonomists classify the genus *Hypericum* in a separate family, the Hypericaceae. The genus *Hypericum* encompasses approximately 400 species, of which ten morphologically and chemically distinct species grow in central Europe². HP is distributed in Europe, Asia, North Africa and North America. Indian HP (IHp) is a rhizomatus perennial herb growing up to a height of 3 feet distributed in the western Himalayas at altitudes of 3000-10,500 feet.

Hypericum species were already known to ancient communities as useful medicinal plants. HP has been known since Greek and Roman times. Closer to our times, Mattioli also wrote of *Hypericum in Discorsi*³. The use of HP in particular, as a remedy was described and recommended throughout the Middle

Ages. The primary ancient medical herbalists, including Hippocrates, Pliny, Dioscorides, Theophrastus and Galen wrote about the medicinal properties of St. John's wort, noting its use as a vulnerary (wound healing) and for treatment of neuralgic conditions such as sciatica and hip pain. Mattioli wrote of its use as an emmenagogue, diuretic and antimalarial⁴. The most common use of *Hypericum* has been for the treatment of depression and various psychological and neuralgic disorders, as an anthelmintic for worms, a vulnerary for minor hemorrhages, for bedwetting in children, and as a diuretic⁵⁻⁸. Besides it has been also used as balm for wounds, burns, ulcers and bites⁹.

Botanical description

HP is glabrous throughout, green or sometimes glaucous; the stems are erect, branched at top and 30 to 100 cm long; the leaves are oval or elliptic, succubate, or rather narrow, oblong-linear, subobtusate, revolute-margined with numerous pellucid black glandular dots. The flowers are numerous, forming a broadly paniculate, almost corymbose inflorescence, 7-11cm long and 5-11 cm broad. The bracts are lanceolate, 0.5 cm long and acute. The calyx is deeply parted, 5 mm long and about two to three times shorter than corolla; sepals are lanceolate 4-5 mm long, 1 mm broad, as long as ovary, acute or acuminate, with black glandular mostly oval dots. The petals are oblong to oblong elliptic, in equilateral, 1.2 to 1.5 cm long, 0.5 to 0.6 cm broad, with numerous black glandular dots and lines on margin of upper part, surface with numerous yellow glandular dots. The stamens are numerous, in 3

* Correspondent author
E-mail: salil@banaras.ernet.in

bundles; the ovaries ovoid, 3-5 mm long; there are three styles. The seed is 1 mm long, cylindrical, brown, minutely pitted longitudinally.

Chemistry

Hypericum contains numerous compounds with documented biological activity. Most researchers consider its effects to be due to a variety of constituents rather than any single component. Constituents that have stimulated the most interest include the naphodianthrones hypericin and pseudohypericin, a broad range of flavonoids, including quercetin, quercitrin, amentoflavone and hyperin, the phloroglucinols hyperforin and adhyperforin, essential oils and xanthenes. Recently hyperforin has been considered as an important antidepressive constituent of HP^{10,11}. The following major groups of bioactive constituents will summarise the constituents of HP:

Naphodianthrones—The naphodianthrones present in HP include hypericin (1.8%), pseudohypericin (relative abundance 3.9%), isohypericin and emodin-anthrone (precursor of hypericins). Protohypericin and protopseudohypericin were also detected in fresh material, which on exposure to light yields hypericin and pseudohypericin, respectively. An oxidation product of pseudohypericin, cyclopseudohypericin was also cited^{12,13}.

Flavonoids—Flavonoids present in the HP include, flavonol glycosides, viz., rutin (0.3%), quercitrin (0.3-0.524%), isoquercitrin (0.3%)^{14,15}, hyperin/hyperoside (0.7-1.1%)¹⁶, and aglycones, viz., kaempferol, luteolin, myricetin and quercetin (2%).

Biflavones—The following biflavones: 3,8''-biapigenin (0.1-0.5%)^{16,17}, amentoflavone/ 3',8''-biapigenin (0.01-0.05% in flowers), were reported from the HP.

Proanthocyanidins—The proanthocyanidins, consisting of dimers, trimers, tetramers, and high polymers of catechin and epicatechin, represent approximately 12% of the dried weight of the aerial portion of the plant^{3,18}, the highest values were observed during the flowering stage.

Phenyl propanes—HP contain phenyl propanes in the form of esters of cinnamic acids, such as *p*-coumaric and caffeic acids (0.1%). Chlorogenic acids have been detected and found to less than 1%. Ferulic, isoferulic and gentisic acids alongwith leucocyanidin have also been described¹⁹⁻²¹.

Phloroglucinols—Two closely related phloroglucinol derivatives; hyperforin and adhyperforin, were reported from the HP²². The amount of hyperforin was found to be 2% in flowers and 4.5% in the unripe fruits while the amount of adhyperforin was found to be 0.2% (flowers) and 1.6% (unripe fruits)^{23,24}. These hyperforins were lipophilic, unstable toward heat and light either on storage or in solution. One of the products of degradation was 2-methyl-3-buten-2-ol, probably generated by oxidative cleavage of isoprenyl side chains of hyperforin and adhyperforin. Recently, an unusual compound with combined structure of cadinan sesquiterpene and hyperforin, hydroperoxy-cadiforin (0.0006%)²⁵, and furohyperforin (ca. 5% of hyperforin concentration)²⁶ were isolated and characterized from HP.

Xanthenes—A xanthanolignoid, kielkorin (0.01% in roots)²⁷, and 1,3,6,7-tetrahydroxy xanthone (in trace amounts in leaves and stems)²⁸ were reported in HP.

Essential oil—The essential oil consists mostly of monoterpenes (pinenes) and sesquiterpenes¹⁹. Of these, the primary compounds include the saturated hydrocarbons, 2-methyl-octane (16.4% and α -pinene (10.6%). Also present were traces of 2-methyl-decane, 2-methyl-butenol and undecane, β -pinene, α -tocopherol, geraniol, myricine, linolene, caryophyllene, humulene, C16 and C24 *n*-alkanes, and C24, C26 and C28 *n*-alkanols^{29,31}.

Additional compounds include choline, carotenoids (lutein, luteoxanthin, violaxanthin, cis-thorlloxanthin, throllichromone), β -sitosterol, pectin, phlobaphene and rhodan; isovalerianic, lauric, myristic, nicotinic (0.12% in leaves, palmitic and stearic acids, amino acids; including cysteine, GABA (0.7 mg/g), glutamine, leucine, lysine, ornithine, proline, threonine, scopoletin, umbelliferone, and vitamin C^{16,19,31-34}.

The pharmacological activity of various constituents are summarised in Table 1.

Biological properties

Hypericum perforatum has been widely researched for its antidepressant effects. Recent interest has focused on its potential as an antiviral agent. There is some data confirming its traditional wound-healing effects. *Hypericum* contains several compounds of biological interest, including the naphodianthrones, hypericin and pseudohypericin, and a broad spectrum

Table 1—Pharmacological activity of constituents of *Hypericum*

Constituent	Activity
Amentoflavone (13', 118-biapigenin)	Anti-inflammatory, anti-ulcerogenic ³⁵
GABA	Sedative ³¹
Hyperforin	Antibacterial against gram-positive bacteria, wound healing ^{22,23,36} ; neurotransmitter inhibitor ³¹ , potential anticarcinogenic ³⁷
Hypericin	Antiviral ³⁸⁻⁴⁰
13, 118-biapigenin	Probably sedative ³⁵
2-methyl-butenol	Sedative ³¹
Proanthocyanidins	Antioxidant, antimicrobial, antiviral, vasorelaxant ³¹
Pseudohypericin	Antiviral ³⁹
Quercitrin	<i>In vitro</i> MAO inhibiting activity ²⁸
Xanthones	Antidepressant, antimicrobial, antiviral, diuretic, cardiogenic, MAO _A inhibitor ^{28,31,41,42}

of flavonoids. Although investigations continue, these are considered to be primarily responsible for HP's activities.

Antidepressant activity

A commercial standardized extract of HP (Psychotonin[®]) was tested in several animal models predictive of psychotropic activity⁴³. These activities included two, used for antidepressants, increased activity in water wheel test in mice and reduced aggressiveness in isolated male mice. The pharmacological models most commonly used to demonstrate a potential antidepressant activity of *Hypericum* extracts are the examination of the behaviour of mice in an unknown environment⁴³, forced swim test⁴⁴, and the measurement of biogenic amines metabolites in urine⁴⁵. A correlation can be established between the excretion in urine of 3-methoxy-4-hydroxy phenyl glycol (MHPG), the main metabolite of noradrenaline, and the initiation of the therapeutic activity of HP as an antidepressant agent.

Butterweck *et al.*^{44,46} compared the *Hypericum* extract, LI 60, with bupropion, a synthetic antidepressant. Results indicated similar effects of both the drugs in the tail suspension test (mice) and

the forced swim test (rats). Since *Hypericum* treatment was antagonized by drugs known to reduce dopamine functional activity (haloperidol, sulpiride, α -methyltyrosine and γ -butyrolactone) the authors concluded that *Hypericum* exerted its activity via dopaminergic activation. *Hypericum* extract, LI 160, subchronic treatment (250 mg/kg for two weeks) resulted in a 15% down regulation of β -adrenergic receptors in the rat frontal cortex. In the same study, a 25% down regulation was observed after the imipramine treatment⁴⁷.

Many questions exist about the composition, pharmacology and mechanisms of action of HP. In fact the active constituent is still unclear. While previous studies report that hypericin inhibits MAO at concentrations of 50 μ g/mL⁴⁸, others have failed to confirm this effect⁴⁹⁻⁵¹. Some of the research work on the identification of the active antidepressant constituent has been performed using computer modelling. Out of the flavonoids, xanthones and hypericins compared best. Overlap was obtained with flavonoid derivatives and suggest flavonoids as the most likely MAO inhibitor fraction, due to structural similarity to tolaxone and brofaromine, two known inhibitors of MAO-A⁵². Bladt and Wagner⁴⁹ reported that the *Hypericum* fractions with the greatest MAO inhibition contains the highest concentration of flavonoids. In another study, the xanthone fraction was particularly strong inhibitor of MAO-A *in vitro*²⁸. However, the MAO inhibition shown by *Hypericum* may not be pharmacologically relevant since it has not been confirmed *in vivo*. Bladt and Wagner⁴⁹ reported that no MAO inhibition was seen *in vivo* after administration of 300 mg/kg *Hypericum* extracts to rats.

Other proposed mechanisms involve effects on serotonin. Muller and Rossol⁵³ reported that *Hypericum* extract inhibits serotonin receptor expression at 50 μ M (~ 25 μ g/mL) and Perovic and Muller⁵⁴ reported inhibition of serotonin uptake (IC_{50} = 6.2 μ g/ml). The concentration required for the former effect could never be achieved in the whole animal and even the latter concentrations seem unlikely. As a reference comparison, Muller *et al.*⁴⁷ reported an IC_{50} for the synthetic antidepressant, clomipramine, of 0.9 nM (~0.3 ng/ml) for serotonin uptake inhibition. In addition, an inhibition of both synaptosomal GABA uptake (IC_{50} = 1 μ g/ml, LI 160) and GABA_A-receptor binding (IC_{50} = 3 μ g/mL) was noted.

Through an National Institute of Mental Health (NIMH, USA) screening contract (Novascreen, Baltimore, Maryland) a commercially available crude extract from the fresh flowers and buds of HP was subjected to *in vitro* assays in a battery of 39 receptor types and two enzyme systems. The receptor assays showing 50% displacement of radioligand (or 50% inhibition of MAO) were considered "hits". Concentration-response curves (IC_{50}) were then performed for the hits. The crude extract of HP had significant receptor affinity for adenosine, GABA_A, GABA_B, serotonin, benzodiazepine, inositol triphosphate (IP₃), and MAO_{A,B}⁵⁵. The inhibition of MAO by crude *Hypericum* extracts is consistent with previous reports^{48,49,51}. Unlike the crude extract, synthetic hypericin (95%) lacked significant MAO_A or MAO_B inhibition at concentrations up to 10 μ M. Hypericin had affinity only for NMDA receptors ($K_i \sim 1 \mu$ M) and this may play a role in its reported antiviral activity since NMDA antagonists prevent gp 120-induced neurotoxicity⁵⁶. These data are consistent with the recent pharmacological evidence suggesting that other constituents of this plant may be more important for the reported psychotherapeutic activity.

More recently, hyperforin, a prenylated phloroglucinol present in this plant, has been focused as primarily responsible for the antidepressant activity of the HP^{10,11,57-60}. Many of the experimental and clinical studies⁶⁰ have confirmed the antidepressant activity of hyperforin. Hyperforin was shown to inhibit uptake of serotonin (5-HT), dopamine (DA), noradrenaline (NA), GABA and L-glutamate with IC_{50} values of about 0.05 - 0.10 μ g/ml (5-HT, NA, DA, GABA) and about 0.5 μ g/ml (L-glutamate) in synaptosomal preparation¹¹. Recently, Indian *Hypericum perforatum* (IHp) extract standardised for hyperforin lacked MAO A and B inhibitory activity⁶¹. Additionally, IHp showed antidepressant⁶², anxiolytic⁶³ and nootropic^{64,65} activities.

Another novel proposal is that *Hypericum* extract reduces cytokine expression (interleukin-6)⁶⁶. The hypothesis is that interleukins can induce depression in susceptible individuals⁶⁷. The link between depression and the immune system is well established⁶⁷. In addition to the antidepressant effects, *Hypericum* has historically been used for a wide variety of neurological conditions, including anxiety, insomnia due to restlessness, irritability, neuralgia,

trigeminal neuralgia, neuroses, migraine headaches, fibrosis, dyspepsia (oil), and sciatica^{69-71,74}.

Wound healing properties

Hypericum has historically been one of the most relied upon botanicals for the treatment of wounds. Part of this activity is due to *Hypericum*'s antimicrobial activity, which is attributed to the essential oil, phloroglucinols and flavonoids. The essential oil and the water-soluble fraction of an alcoholic extract exhibit minor antifungal and significant antibacterial activity. A resin fraction of the alcoholic extract has also been shown to be effective against gram-positive organisms⁷². The tannins and flavonoids were reported to inactivate *Escherichia coli* at dilution of 1:400 or 1:200^{73,74}. Hyperforin and adhyperforin have been reported to possess a chemotherapeutic effect greater than that of sulfanilamide⁷⁵.

An ointment prepared by extracting the fresh flowers (5 g) with olive oil (100 g) (for 10 days at 20°C) was used in the treatment of 1st, 2nd, and 3rd degree burns. First degree burns healed in 48 hours. Second and third degree burns healed at least three times faster than burns treated with conventional methods and keloid formation was inhibited⁷⁶. A commercial preparation containing 0.412% quercitrin (Novoimamin) was found to be effective against *Staphylococcus aureus* infection⁷⁵ and its effects have been reported to be greater than conventional treatment with sulfanilamide⁷⁷. A tincture (1:10) of *Hypericum* was studied for its wound healing properties and compared with calendula, another widely used wound healing herb. The effect of orally administered tincture of *Hypericum* was more pronounced than topical application of Calendula tincture in the healing of incision, excision and dead space wounds, as evidenced by an increase in epithelisation and wound-breaking strength⁷.

Antiviral activity

Hypericin is currently in early clinical trial in the USA as an antiviral agent^{4,39}. In an open pilot study, 18 patients with acquired immune deficiency syndrome (AIDS classifications; 3 with CDC II, 8 with CDC IVB and 3 with CDC IVCI) were treated with an i.v. *Hypericum perforatum* preparation (Hyperforat; 2x2ml weekly) plus additional *Hypericum* tablets of undefined dosage. Sixteen out of 18 patients with good study compliance showed

increasing counts of absolute CD4 values over a 40-month period. Also observed were improvements in CD4/CD8 ratios in the majority of patients. In addition only 2 of the 16 patients experienced an opportunistic infection during the 40-month observation period. The other 14 of the 16 patients remained clinically stable⁷⁸.

Studies have shown that two of HP's primary components, hypericin and pseudohypericin, inhibit a variety of encapsulated viruses, including herpes simplex types 1 and 2^{40,79} and the human immunodeficiency virus type 1 (HIV-1) virus associated with AIDS^{39,80,81}. While the later researchers have concluded that hypericin and pseudohypericin display a unique and effective antiviral activity, Weber *et al.*⁴⁰ suggest that it may be due to non-specific association with cellular and viral membranes. *In vitro* antiviral activity has also been reported against murine cytomegalovirus, parainfluenza 3 virus, Sindbis virus⁸¹, vesicular stomatitis virus⁷⁹, and equine infectious anemia virus⁸².

The antiviral activity appears to involve a photoactivation process⁸¹⁻⁸⁵ which forms singlet oxygen and inactivates viral fusion and syncytia formation⁸⁶⁻⁸⁸. While hypericin does show antiviral activity *in vivo* (mice), these photodynamic properties may limit its potential usefulness as an antiretroviral agent⁸⁹. However, besides singlet oxygen production, hypericin can photoreduce oxygen to superoxide radicals and can form semiquinone radicals in the absence of light³⁸. These authors speculate that this ability to form semiquinones might account for the antiviral activity.

Protein kinase C inhibition

Hypericin has been reported inhibit the growth of glioma cell lines *in vitro* and to be a potent inducer of glioma cell death due to inhibition of protein kinase C (PKC) as measured by [³H] thymidine uptake⁹⁰. The anti-PKC activity doses are reported to be below those associated with clinical hypericium⁹⁰.

Other researchers report a PKC-inhibiting activity with both hypericin and pseudohypericin (IC₅₀ of 1.7 µg/ml and 15 µg/ml, respectively)⁹¹. Receptor tyrosine kinase activity of epidermal growth factor has also been reported to be inhibited hypericin⁹². These effects have been linked to both the antiviral and antineoplastic activities^{38,93}. In addition, the PKC inhibition may also contribute to the anti-inflammatory effects historically associated with

Hypericum as hypericin has been found to inhibit the release of arachidonic acid and leukotriene B₄⁹³.

Other effects

Hypericum has been reported to have number of additional effects. In one study the procyanidin fraction of *Hypericum* was tested in an isolated guinea pig heart preparation⁹⁴ and found to enhance coronary flow in the same way as the procyanidin from *Crataegus* (Hawthorn). The procyanidins fractions also antagonized histamine or prostaglandin F_{2α}-induced atrial contractions in porcine isolated coronary arteries⁹⁵.

In another study, a significant increase in the production of nocturnal melatonin was observed after administration of 90 drops of the commercial preparation, Hyperforat. These effects were observed after a three week period⁹⁶. Other researchers report that *Hypericum* may be useful in the treatment of chronic tension headaches⁹⁷, while a hepatoprotective activity of a water/alcohol extract has also been reported in animals⁹⁸. Pain and inflammation of nerve origin may also respond to *Hypericum* which can be administered both topically and orally⁹⁹⁻¹⁰¹. Recent study with IHP in our lab confirms its anti-inflammatory and analgesic activity¹⁰².

Clinical studies

Hypericum has become increasingly popular in Germany, where physicians routinely prescribe herbal medicines. In 1994, 66 million daily doses of HP were prescribed there for use in the treatment of depression¹⁰³. This phytomedicine has been tested in more than 3,000 patients against placebo and various active medications¹⁰⁴⁻¹⁰⁹. German researchers recently published a meta-analysis of 23 randomized trials of *Hypericum* with a total of 1,757 outpatients with mild to moderately severe depressive disorders. They concluded that the herb was significantly superior to placebo and appeared comparably effective to standard antidepressants (maprotiline, imipramine and amitriptyline) while producing fewer side effects⁶.

Pharmacokinetic studies

Detailed pharmacokinetic studies have been performed with the standardized *Hypericum* extract, LI 160 (Jarson® 300), one of several officially recognized formulations (containing 300 mg of the dried extract of HP, yielding 0.24-0.32% total

hypericin) in Germany for the treatment of mild to moderate depression. Oral administration of this preparation was given to twelve healthy male subjects¹⁰. Hypericin and pseudohypericin were determined in plasma using an HPLC technique (limit of detection 0.2 ng/ml) after oral administration of single doses of 300, 900 and 1800 mg total extract. Blood levels were measured for up to three days after a single dose. Peak plasma concentrations were seen with hypericin after 2.0 to 6.0 hours and with pseudohypericin between 0.4 to 0.6 hours. Peak concentrations of hypericin were 1.5, 7.5 and 14.2 ng/ml, respectively, for the three doses of the extract. Pseudohypericin attained concentrations of 2.7, 11.7 and 30.6 ng/ml, respectively. The elimination half-life of hypericin was between 24.8 and 26.5 hours. The elimination half-life of pseudohypericin ranged from 16.3 to 22.8 hours.

Repeated doses over 14 days (3×300 mg/day) resulted in steady state (level at which the constituents accumulate to reach a steady concentration) after four days. The peak concentration of hypericin was 8.5 ng/ml and 5.8 ng/ml for pseudohypericin. Trough concentrations (14 hours after the last dose) were between 5.3 and 3.7 ng/ml for both compounds¹⁰.

Earlier pharmacokinetic data on mice report that maximum plasma concentrations of hypericin and pseudohypericin were reached at 6.0 hours and maintained for at least 8.0 hours. The aqueous-ethanolic extract used contained 1.0 mg of hypericin. The same researchers also tested the concentration of hypericin in one human test subject after a single dose of the same extract. The concentrations found in human serum were comparable to those found in the mice¹¹.

Pharmacokinetic studies of *Hypericum* extracts containing hyperforin revealed the half-life and clearance values as 6 hour and 70 ml/min/kg respectively. After oral administration of 300 mg/kg *Hypericum* extract (WS 5572, containing 5% hyperforin) to rats maximum plasma levels of approximately 370 ng/ml (approx. 690 nM) were reached after 3 h, as quantified by HPLC and UV detection method.

Conclusion

Hypericum is a clearly one of the leading psychotherapeutic phytomedicines for the treatment of mild to moderate depression. The shortcomings of

the current controlled clinical trials of *Hypericum* have been pointed out in the review by Linde *et al.*⁶ and by Ernst¹². They include lack of well-characterised severely depressed patients populations, heterogeneity of diagnoses, lack of intent-to-treat analyses, lack of long term studies, lack of control over compliance, and low dosages of comparison medications.

Despite the extensive use of this plant extract as an antidepressant, the chemical nature of its bioactive principles still remains unclear. Earlier, *in vitro* studies with hypericin and pseudohypericin as MAO inhibitory agents suggested that hypericin may be responsible for the antidepressant activity of this plant. Consequently, the pharmaceutical preparations were standardized on the basis of their hypericin contents. However, in later studies, these earlier results could not be confirmed. Flavonoids present in the HP were also shown to inhibit MAO-A, but a therapeutic efficacy of this class of compounds appeared doubtful due to their low plasma levels after oral administration¹³. Recently, hyperforin, a prenylated phloroglucinol present in this plant, has been focused as the major component responsible for the antidepressant activity of HP. The lack of viable pharmacological mechanism or the assurance of which components within the plant are critical for therapeutic effect (necessary in order to standardise formulations) will continue to create skepticism among psychopharmacologists and regulatory authorities. However, continued research is needed to identify the constituents most responsible for *Hypericum's* activity so that preparations can be optimally standardised. While determining the pharmacological profile of all major components of *Hypericum* will be a difficult task, it will surely add to the body of knowledge regarding the biochemistry of depression. The presence of significant anxiolytic activity of HP extract⁶³, suggest that co-existence of anxiolytic-antidepressant activity may help in its clinical profile since anxiety and depression often co-exist.

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