Antimicrobial Essential Oils

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Microbial pathogens are the most prevalent cause of chronic infections and fatalities around the world. Antimicrobial agents including antibiotics have been frequently utilized in the treatment of infections due to their exceptional outcomes. However, their widespread use has resulted in the emergence of multidrug-resistant strains of bacteria, fungi, viruses, and parasites.

Keywords: essential oils ; nanoparticles ; antimicrobials

1. Introduction

Microorganism-caused infections are a source of concern for public health. Overuse or underuse of antimicrobials has resulted in the global rise of multidrug-resistance in microorganisms, including bacteria, fungi, viruses, parasites, and protozoans. Every year, more than two million people suffer from infections with antimicrobial resistance and by the year 2050, the annual global mortality rate of these infections is expected to reach 10 million ^[1]. Antimicrobial resistance develops and continues to transmit across different species of bacteria due to various factors such as conjugation, transformation, and transduction processes of the gene transfer cycle. Therefore, new and unique alternative antimicrobials are needed to combat multidrug resistance $^{[2][3][4]}$.

Essential oils are aromatic liquids produced through a series of complex metabolic pathways in plants with the goal of defending them from a wide range of pathogens and are commonly extracted by steam distillation ^{[4][5]}. Different factors influencing the chemical compositions of EOs include the species, climatic conditions, soil condition, fertilization, genotype, mode of production, harvest seasons, and extraction procedure. Two major groups of chemical compounds present in EOs are (i) aromatic and aliphatic compounds, and (ii) hydrocarbon terpenes (isoprenes) and terpenoids (isoprenoids). Terpenes are five-carbon isoprene units (C_5H_8) that constitute the largest class of chemical compounds present in essential oils. Terpenes are categorized as mono-, sesqui-, di-, ses-, tri-, and tetra-terpenes or alternate hemiterpenes based on the number of carbon atoms present in the structure. However, the monoterpenes and sesquiterpenes are composed of two isoprene units and exist in monocyclic, bicyclic, and acyclic forms, whereas sesquiterpenes are made up of three isoprene units and occur in acyclic, monocyclic, bicyclic, and tricyclic forms. Chemical modification of a terpene or sesquiterpene, through oxidation or structural rearrangement, produces different terpenoids. Thus, EOs with diverse chemical compositions exhibit a wide range of therapeutic effects ^{[G][Z][8]}.

1.1. Mechanism of Action and Bacterial Spectrum

Essential oils have been widely explored on a large scale as potential sources of novel antimicrobial agents, food preservatives, and alternative treatments for infectious diseases due to their antifungal, antiparasitic, antibacterial, and antiviral properties (**Table 1**) ^[4]. The antimicrobial mechanism of action varies with the type of EO or the strain of the microorganism used. Gram-negative bacteria have a thick lipopolysaccharide layer which reduces the susceptibility of microorganisms towards EOs but gram-positive bacteria will lack this lipopolysaccharide. Hence, EOs can enter gram-positive bacteria easily as compared to gram-negative bacteria. Due to the presence of lipoteichoic acid, the entry of EOs into gram-positive microbial cells is eased. Various research investigations have demonstrated that the bioactive components contained in EOs attach to the cell surface and penetrate the phospholipid bilayer of the cell membrane, followed by membrane damage, which causes negative impacts on cell metabolic activities and cell death. Alteration of the cell membrane integrity results in the loss of important intracellular components such as proteins, reducing sugars, ATP, and DNA, and also blocks ATP synthesis and associated enzymes, resulting in electrolyte leakage and cell death. At the minimum inhibitory concentration (MIC), it was found that the EOs damaged the bacterial cell membrane. However, at the minimum bactericidal concentration (MBC), the EOs destroyed the bacterial cells ^{[3][4]}.

Biological Source of Essential Oils	Part	Antimicrobial Activities	Major Chemical Components	Mechanism of Action	References
Bunium persicum	Seeds	L. monocytogenes, Listeria grayi andAspergillusflavus	γ-Terpinene, 1-phellandrene, γ-terpene, cuminaldehyde	Cell membrane disruption and cytolytic leakage Swelling and reduction in membrane function	<u>[9][10][11][12]</u>
Cananga odorata	Flower	Hepatitis B virus (HBV), Bacillus. subtilis, E. coli, S. typhi, Shigella shiga, Streptococcus-β- haemolyticus and A. flavus	Linalool, β-caryophyllene	Disruption of cell membrane integrity Induces apoptosis via nuclear condensation and fragmentation pathways including disruption of mitochondrial membrane potential	[<u>13][14][15][16]</u>
Carum copticum	Seeds	S. aureus, Staphylococcus epidermidis, Bacillus cereus, E. coli, S. typhimurium, Proteus vulgaris	Thymol, γ-Terpinene, ρ-cymene	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity and decrease intracellular ATP levels	[<u>17][18][19]</u>
Cinnamomum zeylanicum	Bark	Borrelia burgdorferi, E. coli., S. aureus, and P. aeruginosa	Carvacrol	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][20][21]
Citrus bergamia	Peel	Campylobacter jejuni, E. coli, L. monocytogenes, B. cereus, and S. aureus	Linalool, Citral, Linalyl acetate	Disruption of cell membrane integrity Induction of changes in ATP concentration, cell membrane hyperpolarization, and reduction in cytoplasmic pH	[22][23]
Citrus reticulata	Peel	S. aureus, E. coli, Penicillium italicum and Penicillium. digitatum	Limonene and y- Terpinene	Cell membrane disruption and cytolytic leakage	[<u>24]</u>
Cymbopogon citratus	Leaves	HSV-1, HSV-2, <i>S. aureus, E. coli</i> and Gaeumannomyces graminis	Citral	Induction of changes in ATP concentration, cell membrane hyperpolarization, and reduction in cytoplasmic pH	[25][26]
Eugenia caryophyllata	Flower buds	B. cereus, S. typhimurium and E. coli	Eugenol, β-caryophyllene	Cell membrane disruption and cytolytic leakage Induces apoptosis via nuclear condensation and fragmentation pathways including disruption of mitochondrial membrane potential	[<u>13][12][27]</u>
Eucalyptus globulus	Leaves	S. aureus and S. pyogenes	1,8-cineol α-pinene	Disruption of cell membrane integrity and cytolytic leakage	[28]
Foeniculum vulgare	Seeds and Leaves	S. aureus, E. coli, and A. flavus	Anethole	Disruption of cell membrane integrity	[29][30]

Biological Source of Essential Oils	Part	Antimicrobial Activities	Major Chemical Components	Mechanism of Action	References
Homalomena pineodora	Leaves	B. cereus, B. subtilis, S. aureus, MRSA, E. coli, Proteus mirabilis, Yersinia sp., K. pneumoniae, Shigella boydii, S. typhimurium, Acinetobacter anitratus, P. aeruginosa, Candida albicans and Candida utilis	2- octylcyclopentanone	Cell membrane disruption and cytolytic leakage	[31]
Lavandula angustifolia Sevastopolis	Whole plant	MRSA, S. aureus and E. coli	Linalool, Borneol, Camphor	Disruption of cell membrane integrity and cytolytic leakage	[32][33]
Lippia sidoides	Leaves	Stegomyia aegypti larvae	Thymol	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][34]
Matricaria chamomilla	Fresh or dried flower heads	Leishmania amazonensis,E. coli, P. aeruginosa, B. subtilis, S. aureus, S. pyogenes, Schizosaccharomyces pombe, C. albicans and Candida tropicalis	α-Bisabolol	Cell membrane disruption and cytolytic leakage	[35]
Melaleuca alternifolia	Leaves	S. aureus, E. coli, L. monocytogenes, C. albicans, P. aeruginosa and A. niger	Terpinen-4-ol	Cell membrane disruption and cytolytic leakage	[36][37]
Mentha piperita	Leaves	C. albicans, C. tropicalis, Pichia anomala andSaccharomycescerevisiae	Menthol, Menthone	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[38]
Nigella sativa	Seeds	S. aureus and Vibrio harveyii	Thymoquinone	Apoptosis by production of reactive oxygen species	[<u>39][40]</u>
Ocimum basilicum	Whole plant	C. albicans, S. aureus	Linalool	Disruption of cell membrane integrity and cytolytic leakage	[<u>16][23]</u>
Origanum vulgare	Leaves	Trichophyton tonsurans, Trichophyton violaceum, Trichophyton floccosum, T mentagrophytes	Carvacrol, Thymol	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][41]
Pistacia atlantica	Gum	S. aureus, S. enterica, E. coli and L. monocytogenes	α-Thujene, α-Pinene, Camphorene, Sabinene, β-Pinene, Δ3-Carene, Limonene	Disruption of cell membrane integrity and cytolytic leakage	[42][43]
Pistacia lentiscus	Resin	E. coli and B. subtilis	α-Pinene, β-Pinene, β-myrcene, Linalool, <i>tran</i> s-Caryophyllene and Camphene	Disruption of cell membrane integrity and cytolytic leakage	[43][44]
Psidium guajava	Leaves	S. aureus, Salmonella spp. and E. coli	β- caryophyllene	Induction of apoptosis via nuclear condensation and fragmentation pathways including disruption of mitochondrial membrane	[13][45]

Biological Source of Essential Oils	Part	Antimicrobial Activities	Major Chemical Components	Mechanism of Action	References
Punica granatum	Seeds	S. epidermidis	Punicalagin, punicalin	Cell membrane disruption and cytolytic leakage	[<u>46][47][48]</u>
Rosmarinus officinalis	Leaves	C. albicans, C. tropicalis	1,8-Cineole, camphor	Disruption of cell membrane integrity and cytolytic leakage	[<u>49][50]</u>
Satureja hortensis	Leaves	S. aureus, Corynebacterium glutamicum, P. aeruginosa and E. coli, and C. albicans	Carvacrol, Thymol	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][51]
Syzygium aromaticum	Floral bud	E. coli, S. aureus, S. typhi, P. aeruginosa, B. cereus, L. monocytogenes	Eugenol, eugenyl acetate	Cell membrane disruption and cytolytic leakage	[12][52]
Thymus vulgaris	Leaves	M. furfur, C. albican, C. tropicalis, Candida glabrata, Candida kefyr and Candida guillermondii, S. aureus, S. pyogenes and E. coli	Thymol, p-cymene, Carvacrol	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][53][54]
Zataria multiflora	Aerial parts	S. aureus, MRSA, S. epidermidis and P. aeruginosa	Carvacrol, Thymol, p-cymene	Depolarization of the cytoplasmic membrane and disruption of cell membrane integrity	[17][55]

The primary methods of action of antimicrobial drugs are categorised. Interference with cell wall biosynthesis (β -lactams and glycopeptides agents), inhibition of bacterial protein synthesis (macrolides and tetracyclines), interference with nucleic acid synthesis (fluroquinolones and rifampin), inhibition of a metabolic pathway (trimethoprim-sulfamethoxazole), and disruption of bacterial membrane structure (polymyxins and daptomycin) are all examples of these mechanisms ^[56]. The biosynthesis of cell walls, proteins, and nucleic acids are three of the principal targets for antibiotics. Bacteria have developed diverse resistances to antibiotics over the years in order to survive the flood of antibiotics. The processes differ, making the task of preventing resistance spread more difficult. As the threat of medication resistance grows, researchers are turning their attention to natural materials with antimicrobial capabilities, such as plants, as a potential supply of antimicrobial medicines in the future. Various mechanisms of the antimicrobial action of essential oils is depicted in **Figure 1**.



Figure 1. Mechanism of action of antimicrobial activity of essential oils.

Bunium persicum and *Homalomena pineodora* oil and its constituents such as γ-Terpinene, 1-phellandrene, γ-terpene, and cuminaldehyde exert antimicrobial action by cell membrane disruption, cytolytic leakage and swelling, and the reduction in membrane function ^[9]. *Cananga odorata, Citrus bergamia, Cymbopogon citratus, Citrus reticulata, Lavandula angustifolia Sevastopolis, Rosmarinus officinalis, and Ocimum basilicum* essential oils contain linalool, citral, borneol, camphor, and linalyl acetate that exhibit antimicrobial activity through the disruption of cell membrane integrity and induce changes in ATP concentration and cell membrane hyperpolarization, as well as reducing cytoplasmic pH ^[32]. *Carum copticum, Cinnamomum zeylanicum, Lippia sidoides, Mentha piperita, Origanum vulgare, Thymus vulgaris, and Zataria*

multiflora essential oils are reported to consist of thymol, carvacrol, p-cymene, menthol, and menthone, and display antimicrobial effects through depolarization of the cytoplasmic membrane and disruption of the cell membrane integrity as well as the decreasing of intracellular ATP levels ^[17]. *Eugenia caryophyllata, Eucalyptus globulus, Pistacia atlantica, Pistacia lentiscus*, and *Punica granatum* essential oil and their constituents such as β -caryophyllene, Eugenol, α -Pinene, β -Pinene, β -myrcene, and 1,8-cineole exhibit antimicrobial activity by apoptosis via nuclear condensation and fragmentation pathways, including the disruption of mitochondrial membrane potential ^[13].

Components of essential oils (mostly with phenolic structures) were able to display a broad spectrum of antibacterial activity, indicating that the chemical structures of the components have a significant impact on their effectiveness and manner of antibacterial action [56]. To understand the efficiency of EOs in comparison to antibiotics Gavanji et al. evaluated the antibacterial activity of Artemisia kermanensis, Lavandula officinalis, and Zataria multiflora Boiss essential oils against Staphylococcus aureus, Pseudomonas aeruginosa, and Klebsiella pneumoniae with ampicillin, penicillin, and tetracycline as positive control antibiotics. Different concentrations of essential oils (0.08-100 µg/disk) were used and the results showed that the concentration of 100 µg/disk of each of the three essential oils was more efficient compared with lower concentrations on the bacteria. A comparison between the three plant essential oils (at a concentration of 100 µg/disk) and positive control antibiotics (ampicillin, penicillin, and tetracycline of 10 µg, 10 µg and 30 µg) demonstrated that Z. multiflora Boiss essential oil (at 24 h, 48 h and 72 h) exhibited a stronger antibacterial effect (bigger inhibition zone) against S. aureus (27.80 ± 0.20, 28.67 ± 0.33, 28.67 ± 0.33), K. pneumonia (27.83 ± 0.12, 28.10 ± 0.21, 28.10 ± 0.21) and *P. aeruginosa* (19.90 \pm 0.27, 20.40 \pm 0.23, 20.53 \pm 0.18) respectively. Since bacteria are becoming increasingly resistant to antibiotics, employing these essential oils as natural and alternative antibacterial compounds may be beneficial. Some other examples of essential oils or plant extracts commonly used for their antimicrobial properties are tea tree oil, ylangylang, betel pepper, manuka, eucalyptus, arnica, lemon verbena, rosemary, green tea extract, and calendula. Although extensively practiced since ancient times, the use of natural extracts from plants as antimicrobial compounds declined after the development of synthetic antibiotics [57]. Duarte et al. demonstrated that EOs with MIC values of up to 0.5 mg/mL have strong antibacterial action, EOs with MIC values between 0.6 and 1.5 mg/mL have moderate antimicrobial activity, and EOs with MIC values over 1.6 mg/mL have weak antimicrobial activity [58]. Essential oils showed activity against Helicobacter pylori in the MIC range of 20-589 µg/mL and demonstrated activity against bacteria most frequently isolated from the respiratory tract including Streptococcus pneumoniae, Haemophilus influenzae, Moraxella catarrhalis, and Streptococcus pyogenes at the MIC range of 1.56–6.25 µg/mL. Monoterpene alcohols and aldehydes, as well as phenols and cinnamaldehyde, were the most active ingredients, with MIC-values of 160-300 µg/mL against both S. pneumoniae and H. influenzae. In vitro cytotoxicity studies of various EOs such as lavender oil, lemon oil, clove oil, thyme oil, and mentha oil on different cell lines such as HMEC-1 (microvascular endothelial cells), HNDF (dermal fibroblasts), 153BR (fibroblasts), and RC-37 demonstrated an effective concentration (cytotoxic to 50% of the tested cells) range of 5–1950 µg/mL [59].

The antimicrobial potential of EOs is determined by the spectrum of microbial targets it affects. Essential oils obtained from clove, cinnamon, oregano, pimento, rosemary, and thyme demonstrated strong antibacterial activity against *Staphylococcus aureus*, *Salmonella typhi*, and *Pseudomonas aeruginosa*.

- Clove essential oil demonstrated in vitro inhibitory and bactericidal activity at a concentration of 0.304 mg/mL against *S. aureus, Escherichia coli, Listeria monocytogenes*, and *Salmonella typhimurium* ^[60]. The antiviral activity of eugenol, the primary component of clove essential oil, was investigated in vitro against the Herpes simplex virus (HSV)-1 and HSV-2 viruses. The replication of these viruses was inhibited with IC₅₀ values of 25.6 µg/mL and 16.2 µg/mL against HSV-1 and HSV-2, respectively ^[59]. The MIC value of clove oil against *L. monocytogenes* was found to be 0.5 mg/mL ^[61].
- Lavender EO obtained from *L. angustifolia* Mill. has a strong antiseptic effect against antibiotic-resistant strains, e.g., *Staphylococcus aureus*, that are resistant to methicillin (MRSA) or vancomycin-resistant strains of *Enterococcus* sp. (VRE). The antimicrobial activity of Lavender EO was evaluated against *L. monocytogenes* (24 strains) and *Salmonella enterica* (10 food strains). MIC \geq 10.0 µL/mL inhibited *Salmonella*; MIC of 0.3 µL/mL inhibited *L. monocytogenes*, revealing noticeable activity, especially on clinical strains. This activity appears to be related to EOs composition. The highest antimicrobial activities were demonstrated in the specific constituents such as linalool (38.17 and 61.98%), camphor (8.97 and 10.30%), and 1,8-cineole (6.89 and 8.11%, respectively) ^[62].
- Thyme EO was found to have antiviral action against Herpes simplex virus (HSV1, DNA virus) with IC₅₀ values of 11 μg/mL ^[62]. Thyme EO was also tested for its ability to fight strains that cause acute bacterial pharyngitis and throat irritation. *β-haemolytic Streptococci* strains, such as *S. pyogenes*, cause this infection. *T. vulgaris* EO was found to be effective against *S. pyogenes* strains obtained from throat of patients ^[63]. At a concentration of 0.06%, thyme EO that

was rich in y-terpinene (68.415%) and p-thymol (24.721%) totally inhibited the growth of *Fusarium graminearum* Fg 06–17 [64].

- Essential Oil of *Cinnamomum zeylanicum* demonstrated 100% inhibition effect at 3.1 µL/mL concentration against influenza virus A1/Denver/1/57 (H1N1) with 30 min exposure. In both liquid and vapour phases, Eugenol, the main component of *Cinnamomum zeylanicum* EO, exhibited the most significant anti-influenza activity ^[65]. Cinnamon essential oil was recently used to improve zein film for food packaging, which now contains an extra 4% concentration of chitosan nanoparticles (CNP). The combined antibacterial capabilities of EO and nanoparticles not only inhibited the development of *Escherichia coli* (PTCC 1163) and *Staphylococcus aureus* (PTTC 25923), but also increased the tensile strength and decreased the elongation of the composite zein film ^[66].
- Tea tree EO has been used in products for oral hygiene and dermatological uses due to its antibacterial characteristics. *Porphyromonas gingivalis* (MIC and MBC = 0.007%) and *Porphyromonas endodontalis* (MIC = 0.007% and MBC = 0.5%) bacteria that cause halitosis are both inhibited by tea tree EO ^[67]. The antibacterial activities of tea tree essential oils (EOs) that are commercially accessible were examined. Five out of the ten EOs were active. Components identified in tea tree essential oil inhibited bacterium viability in *Pseudomonas aeruginosa* biofilm and caused oxidative damage in *Candida glabrata* ^[68]. Essential oil of *Melaleuca alternifolia*, on the other hand, displayed only minimal antifungal activity against *Aspergillus niger* (MIC = 625 µg/mL), which was attributed to the active components terpinen-4-ol and α-terpineol ^[69].

1.2. Stability and Bioavailability of Essential Oils

Essential Oils are susceptible to degradation due to external factors such as light, temperature, oxidation, or hydrolysis. The final composition of EOs depends on chemical composition of EOs, plant material processing and storage, distillation methods, and subsequent storage of EOs. The chemical constituents of EOs have a significant impact on its stability. Double bonds present in the constituents undergo autoxidation as hydrogen atom abstraction leads to resonancestabilized radicals. Conjugated double-bonds can stabilize radicals formed by polyunsaturated terpene hydrocarbons. Simultaneously, isomerization to tertiary radicals might occur, resulting in oxidative degradation. The presence of aerial oxygen triggers spontaneous free radical chain reactions, which result in the formation of unstable hydroperoxides that breakdown in the presence of light, heat, or rising acidity. Stable secondary oxidation products include monovalent to polyvalent alcohols, aldehydes, ketones, epoxides, peroxides, acids, or oxygen-bearing polymers. Some terpenoids transform into oxidized secondary products without the creation of hydroperoxides. Since headspace oxygen diffuses into the sample over time, the EOs should be maintained in completely filled containers or, if possible, treated with inert gas to remove any leftover air and prevent oxidative reactions. Light and temperature are the other two elements that are strongly linked to EO oxidative degradation. Light enhances autoxidation and the generation of alkyl radicals in monoterpenes, catalyzes intramolecular isomerization events or trans-cis conversions, and boosts monoterpene degradation. Heat speeds up chemical reactions and aids in the development of primary auto-oxidation products, such as hydroperoxides, which are then degraded when the temperature rises, yielding final oxidation products. At high temperatures, volatiles are thermolabile and vulnerable to rearrangement processes. Cleavage of double bonds, epoxidation, dehydrogenation into aromatic systems, and allylic oxidation into alcohols, ketones, and aldehydes are the four types of oxidative processes that occur during the thermal breakdown of terpenes. The production of alkyl or hydroxyl radicals is more apparent at higher temperatures because oxygen solubility is lower whereas storing EOs at low temperatures promotes oxygen solubility in liquids, resulting in the formation of peroxide. Compounds, primarily isoprenoids, easily oxidize in complex mixtures such as EOs, causing rearrangement and breakdown processes in more stable structures. In exchange, phenylpropanoids found in essential oils work as antioxidants, scavenging free radicals and protecting other molecules from degradation. Essential Oils are losing their quality as a result of the decomposition mechanisms detailed above. Changes in colour, consistency, and odour are the most visible indications of age, with the latter being particularly unpleasant and smelly. The biological activity of EOs is significantly influenced by their general physicochemical characteristics (complexity and interactions of individual compounds) and constituents (low molecular weight, presence of diverse functional groups in the molecule, reactivity, and hydrophobicity) ^[70].

The bioavailability and bioaccessibility of plant metabolites, including EOs and their individual terpene compounds, are analyzed using various in vivo and in vitro methods. Bioaccessibility is often estimated using in vitro digestive models. The majority of these approaches work by altering the pH and introducing certain digestive enzymes to simulate the conditions of gastrointestinal (GI) system. In vivo animal and clinical research have also been used to investigate bioavailability. Physiochemical, biochemical, and physiological interactions all have an impact on the bioavailability of EOs. It is considered that intravenous administration of EOs has the highest bioavailability (100%) and that other administration routes have lower bioavailability. However, as observed for 1,8-cineole, which has a bioavailability rate of 95.6%, the bioavailability of EO components administered orally may be very high. Nonetheless, recent studies show that most EOs

are readily absorbed when applied topically, orally, or through the lungs. Most EO compounds are known to penetrate from the surface of skin, through the stratum corneum, into the dermis, and finally into the bloodstream. The high percutaneous absorption rates of EOs should be included in systemic toxicity risk assessments due to their lipophilic properties. The beneficial effects of essential oils on the respiratory system when inhaled are well-known. For large systemic concentrations required for bioactivity in the colon, rectal suppositories are employed. However, due of the great sensitivity of the rectal mucosal membrane to EOs and the potential for irritation, dosages and concentrations should be carefully controlled ^[71].

2. Essential Oils in Combination with Antibiotics

Many approaches are investigated to resolve the antimicrobial resistance crisis. The creation of antibiotic alternatives, as well as the discovery or development of adjuvants, are among the potential options explored. The current state of knowledge on the modes of action of EO elements and their synergy with antibiotics is provided, as well as proposed pathways by which they interact (**Table 2**). To improve antibiotic efficacy, researchers must identify ways to improve drug diffusion through bacterial membranes and/or to inhibit efflux pumps, which are a common resistance mechanism in gramnegative bacteria. A proposed specific target for EO components is the inhibition of efflux pumps, responsible for antibiotic resistance. Hence, EOs can be used in combination with antibiotics. The checkerboard assay with Fractional Inhibitory Concentration Index (FICI) computation is the most commonly reported assay method ^[72].

Antibiotics	Essential Oils/Essential Oil Constituents	* FICI	Organisms	Interaction	Reference
Amoxicillin, Ciprofloxacin	Ajowan oil Thymol	0.36–1	P. aeruginosa, S. aureus and S. pneumoniae	Synergism—EO/thymol with amoxicillin against MRSA; EO with ciprofloxacin against <i>P.</i> <i>aeruginosa, S. aureus</i> and <i>S. pneumoniae;</i> Thymol with ciprofloxacin against <i>P.</i> <i>aeruginosa</i> and <i>S.</i> <i>pneumoniae</i>	[73]
Cefepime	Rosemary oil	-	P. aeruginosa	Synergism	[74]
Ciprofloxacin Fluconazole	Thymus atlanticus	0.25- 0.50	Bacillus subtilis, Micrococcus luteus, Staphylococcus aureus, Pseudomonas aeruginosa, Escherichia coli, K. pneumoniae and Candida parapsilosis, Candida albicans, Candida glabrata, Candida krusei	Synergism	[75]
Ciprofloxacin Fluconazole	Linaria ventricosa	0.26 to 0.50	E. coli, C. albicans and C. glabrata	Synergism	[76]
Doxycycline	Carvacrol, eugenol and cinnamaldehyde	0.7- 1.3	Acinetobacter baumannii K. pneumoniae E. coli P. aeruginosa	Additive or indifferent inhibitory activity Synergistic bactericidal activity	[77]
Fluconazole Amphotericin B	T. satureioides T. pallidus A. leucotrichus T. leptobotrys O. compactum A. herba alba	0.25- 0.31	C. albicans C. glabrata C. krusei C. parapsilosis	Synergism	[78]
Fluconazole Amphotericin B	Citrus aurantium	0.36 and 0.24	Candida albicans	Synergism	<u>[79]</u>

Table 2. Antibiotics in combination with Essential oils and their interactions.

Antibiotics	Essential Oils/Essential Oil Constituents	* FICI	Organisms	Interaction	Reference
Fluconazole, Ciprofloxacin Vancomycin	Laurus nobilis Prunus armeniaca	0.258– 0.75	M. luteus,S. aureus, B. subtilis, E. coli, P. aeruginosa, K. pneumoniae andC. parapsilosis,Candida albicans, Candida glabrata, Candida krusei	Synergism	[80]
Fluconazole, Econazole, Ketoconazole Itraconazole	Melaleuca leucadendra	0.35– 0.46	C. albicans	Synergism	[81]
Octenidine dihydrochloride	Lavender	0.11– 0.26	MRSA	Synergism	[82]
Oxacillin, Amoxicillin, Gentamicin, Ciprofloxacin, Tetracycline, Erythromycin, Clindamycin	coriander oil	0.25–1	MRSA S. epidermidis P. aeruginosa E. coli	Synergism—coriander oil with amoxicillin, gentamicin, oxacillin and tetracycline against MRSA; coriander oil with gentamicin against <i>P. aeruginosa;</i> coriander oil with erythromycin and tetracycline against <i>E. coli</i> Additive—coriander oil with amoxicillin and clindamycin against MRSA; coriander oil with gentamicin and ciprofloxacin against <i>E.</i> <i>coli</i>	[83]
Polymyxin B	Cinnamomum cassia	0.006	carbapenemase-producing Klebsiella pneumoniae and Serratia marcescens	Synergism	[84]
Sarafloxacin, Levofloxacin, Polymycin, Lincomycin, Amoxicillin, Ceftiofur, Ceftriaxone, Maquindox, Florfenicol, Doxycycline, Kanamycin	Oregano	0.375– 1.5	E. coli	Synergism—oregano oil with Sarafloxacin, Levofloxacin, Maquindox, Florfenicol, Doxycycline Additive—oregano oil with Polymycin, Lincomycin, Amoxicillin, Ceftiofur, Ceftriaxone Independent—oregano oil with Kanamycin	[85]
Streptomycin Ampicillin Chloramphenicol	Cinnamomum cassia	0.38- 0.125	E. coli, S. aureus, and P. aeruginosa	Synergism—EO with chloramphenicol against <i>E. coli</i> and <i>S.</i> <i>aureus</i> Additive—EO with Streptomycin and Ampicillin against <i>E.</i> <i>coli, S. aureus</i> and <i>P.</i> <i>aeruginosa</i>	[<u>86]</u>
β-lactam antibiotics (methicillin, penicillin G)	1,8-cineole, eugenol, carvacrol, linalool, linalyl acetate, <i>trans</i> - anethole, thymol, menthone, menthol, β-caryophyllene	0.2– 5.0	MSRA	Synergism—linalyl acetate with methicillin and 1,8-cineole with penicillin G Additive—linalyl acetate with penicillin G Antagonism— methicillin with thymol and methicillin with menthone	[87]

* Fractional Inhibitory Concentration Index.

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