Anti-inflammatory activity of the topical preparation of *Valeriana* wallichii and Achyranthes aspera leaves

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Abstract: *In vivo* and *in vitro* screening of anti inflammatory activity of *Valeriana wallichii* and *Achyranthes aspera* leaves crude extract was performed, using standardized procedures. Methanolic crude extract topical formulation (cream) of *Valeriana wallichii* and *Achyranthes aspera* leaves (Family *Valerianaceae* and *Amaranthaceae* respectively), were screened for their anti-inflammatory activity, through "Carrageenan induced hind paw edema" test, for their effect on the acute and chronic phase inflammation models in male Wistar rats. Methanolic extract and its fractions were also evaluated for their *in vitro* anti-inflammatory activity using lipoxygenase inhibition assay. Leaves of *Valeriana wallichii* showed significant (p<0.001), dose dependant anti inflammatory activity, comparable with that of the standard, in animal model. The ethyl acetate fraction of *Valeriana wallichii* also showed considerable (IC 50=73±0.36) *in vitro* anti-inflammatory activity. However, its activity was comparable with that of standard at 10% concentration after 5 hrs of carrageenan injection. This activity was present in ethyl acetate fraction during *in vitro* screening (IC 50=76±0.14) as compared to that of standard (IC 50=6.11±0.02). The combined *in vitro* and *in vivo* Anti-inflammatory screening shows that the ethyl acetate fraction of the crude extract of *Valeriana wallichii* and *Achyranthes aspera* can be used for the isolation of new Anti-inflammatory lead compounds.

Keywords: Anti-inflammatory activity, Valeriana wallichii and Achyranthes aspera.

INTRODUCTION

Inflammation is a 'protective response of vascularized tissues to injuries that leads to the local accumulation of pus and other dead cells' (Sosa *et al.*, 2002). Primarily it is a defensive mechanism, but it can also induce and maintain many diseases because it involves complex events and various mediators (Yonathan *et al.*, 2006; Hajhashemi *et al.*, 2010). Therefore, the use of anti-inflammatory agents is helpful in the treatment of such disease. For this reason medicinal plants are widely used in folk medicine to treat various inflammatory conditions especially skin inflammatory conditions are much common but are usually transitory and less harmful.

However, some of them are chronic and can cause damage to patient's life. Conditions like atopic dermatitis, psoriasis and eczema are very harmful and affect around 2% of the world population (Gomig *et al.*, 2008). Drugs are available for the treatment of these diseases either topically or systemically. Systemic therapeutics are usually aggressive and has many side effects as compared to topical preparations (Maldini *et al.*, 2009; Ouedraogo *et al.*, 2011). In traditional Chinese medicine *V. wallichii* and *A. aspera* extract are used for different skin infections (Khuda *et al.*, 2012; Sharma, 2003; Gilani *et al.*, 2005).Therefore the purpose of the present study was to validate the anti-inflammatory potentials of topically formulated *V. wallichii* and *A. aspera* leaf extracts. The data obtained can help in developing a new plant based anti-inflammatory topical formulation.

MATERIAL AND METHODS

Plant material

Leaves of *V. wallichii* and *A. aspera* were collected from Bara Gali (Hazara Division), and Charsadda (Peshawar Division), Khyber Pakhtunkhwa, Pakistan in August 2009, and were authenticated by Prof. Dr. Muhammad Ibrar of the Department of Botany, University of Peshawar, Pakistan. A voucher specimen with catalogue No: 9526 (BOT) and 8708-1 (BOT) were deposited in the herbarium of Botany Department.

Plant extraction and fractionation

Air dried, powdered leaves were extracted using methanol at room temperature for three days. After filtration the dark green extract was concentrated to dryness under vacuum at low temperature (40°C) using rotary evaporator (10), until 25 g of the crude extract was obtained. The extract was then dissolved in distilled water and sequentially partitioned with various solvents to obtain n-hexane, Chloroform, ethyl acetate, n-butanol and aqueous fractions (Khan and Gul, 2007).

Formulation of topical preparation

Cream was prepared by the following procedure (table 1).

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Span 80 and propyl paraben were dissolved in liquid paraffin, whereas tween 80 and methyl paraben were dissolved in water. Both the oily and aqueous phases were heated separately to 75°C and mixed thoroughly (290 rev. /min) for 30 min., using double blade mixer. The mixture was neutralized by Sodium Hydroxide (pH 6.2) and then mixed (290 rev./min) for 30 min.. The preparation was stirred until congealed at room temperature. Cream base was partitioned in to two samples, one of which represents the control and the other was functionalized with crude extract (2.5, 5 and 10% crude extract of each plant), in propylene glycol and then added to the cream base after neutralization (Calvo, 2006).

Animals

Male Wistar rats (120 -170 g each) maintained at standard environmental conditions and fed with standard food and water ad libitum, were used. All animal experiments were approved by the Institutional Animal Care and Use Committee (IACUC) at the HEJ Research Institute, University of Karachi, Pakistan and conducted according to IACUC guidelines. The sample size of 6 animals for each test group was used in this study.

Carrageenan induced hind paw edema in rats

'Male Wistar rats' (120 - 170 g) kept at the laboratory Animal house of the HEJ Research Institute, University of Karachi, Pakistan were used. Standard environmental conditions and free access to standard diet and water were provided to the animals. Carrageenan induced rat paw oedema test was used to determine the Anti- inflammatory activity. Cream (0.2 g) of strength 2.5%, 5% & 10% of crude methanolic extract were applied with the index finger smoothly rubbing 50 times to the plantar surface of the hind paw. The control group received only cream base. Piroxicam gel (0.5%) was used as reference. Preparation containing plant extract under test were applied an hour before the carrageenan injection. Linear paw circumference was measured by water plethysmometer (model 7150, Ugo Basile, Italy) before, and 60, 180 and 300 min after the injection of carrageenan in to the plantar region of the right hind paw. Anti-inflammatory activity was determined as percent inhibition in edema level in comparison with reference drug (Piroxicam gel 0.5%), relative to control (Niemegeer et al., 1964).

In vitro anti-inflammatory activity (in vitro lipoxygenase inhibition assay)

The following assay was performed for investigation of *in vitro* anti-inflammatory activity. A mixture of sodium phosphate buffer (160 μ l, 0.1 mM, pH 7.0), lipoxygenase solution (20 μ l) and sample extract (10 ml) were incubated at 25°C for 5 min. linoleic acid (10 μ l) substrate solution was used to initiate the reaction. The absorption changes were monitored with the formation of (9Z, 11E)-13S)-13-hydroperoxyoctadeca-9,11-dienoate. The test sample (extract) and the control (Baicalein) were

dissolved in ethanol (5%) and experiment was performed in triplicate. For lipoxygenase inhibition baicalein was used as positive control. Using the EZ-Fit Enzyme Kinetics program the IC_{50} values were calculated (Lapchak *et al.*, 2007).

STATISTICAL ANALYSIS

Results are expressed as Mean \pm S.E.M. Statistical significance of the data was analyzed by one way analysis of variance (Anova). P<0.001 was considered as significant.

RESULTS

Valeriana wallichii and *Achyranthes aspera* Antiinflammatory activity were screened by *in vitro* Lipoxygenase enzyme inhibition assay. Various fractions of the crude extract of both plants were compared for Anti-inflammatory activity with standard (Baicalein). Ethyl acetate fraction showed comparable Antiinflammatory activity (69% and 70% inhibition for *V. wallichii* and *A. aspera*, respectively) with that of the standard (83%) (table 2).

In vivo screening for Anti-inflammatory activity of topical cream of crude extract of *V. wallichii* and *A. aspera* were also performed by comparing its activity with that of standard (Piroxicam gel) and cream base at 1, 3 and 5 hrs after the injection of carrageenan in the plantar surface of the right hind paw of rate. The activity of 2.5%, 5%, and 10% cream of *V. wallichii* was significantly different (p <0.001) from that of cream base, while it was comparable (p >0.05) with that of standard at 10% concentration after 3 and 5 hrs (Table 3).

Thus it can be concluded that the leaves of *V. wallichii* posses sustained dose dependent Anti-inflammatory activity. The activity of 2.5%, 5%, and 10% cream of *A. aspera* was significantly different (p<0.001) from that of cream base, while it was also significantly different from that of the standard (p<0.001); and comparable (p>0.05) with that of the standard at 10% concentration after 5 hrs only (table 4).

DISCUSSION

The Inflammatory reactions are biphasic in nature. The initial phase occurs within 2 h of the Injection of pathologic substance. It has been reported that during first phase serotonin and histamine are released while bradykinin is released 2 h after the carrageenan injection (Patil *et al.*, 2011). In about 3 h the edema volume reaches its maximum and then begins to decline. Over production of prostaglandins are involved in the late phase and may continue until 5 h post carrageenan injection. The secondary phase response is reportedly affected by most

Formulation	Oily phase					Aqueous phase		Plant Extract
	Cetylstearyl	Spap 80	Propyl	Liquid	Propylene	Tween	Methyl	V. wallichii and
(70)	alcohol	Span 80	paraben	paraffin	glycol	80	paraben	A. aspera
2.5	7	0.9	0.1	12.0	8.0	2.1	0.1	2.5
5	7	0.9	0.1	12.0	8.0	2.1	0.1	5.0
10	7	0.9	0.1	12.0	8.0	2.1	0.1	10

Table 1: Composition of cream (g/100g)

Table 2: Lipoxygenase inhibition activities (%) of crude extract and various fractions of Valeriana wallichii and Achyranthes aspera

Lipoxygenase Inhibition (%), $IC_{50} \pm SEM (\mu g/ml)$				
Drug / Fractions	Valeriana wallichii	Achyranthes aspera		
Crude extract	$69 \pm 0.41 \ (67)^{a}$	129 ± 0.24 (41)		
Chloroform	127 ± 0.26 (41)	105 ± 0.16 (48)		
n-Hexane	93 ± 0.31 (54)	89 ± 0.11 (60)		
n-Butanol	69 ± 0.17 (66)	141 ± 0.27 (33)		
Ethyl acetate	73 ± 0.36 (69)	76 ± 0.14 (70)		
Aqueous	114 ± 0.72 (39)	194 ± 0.26 (21)		
Baicalein	6.11 ± 0.02 (83)	6.11 ± 0.02 (83)		

Baicalein: Standard inhibitor of α-glucosidase, ^aEach value in parentheses indicates the percentage inhibition rate

 Table 3: Effect of topical administration of crude methanolic extract formulation (cream) of Valeriana wallichii on carrageenan induced paw edema in rats

Extract/Compound	Dose (%)	Edema rate (%) after injection			
Extract/Compound		1h	3h	5h	
Base	-	1.65 ± 0.02	1.78 ± 0.04	1.89 ± 0.03	
Cream	2.5	$0.98 \pm 0.03^{\rm a} (40.61)^{\rm b}$	$0.78\pm 0.05^{a}(48.32)$	$0.74 \pm 0.02^{a}(53.44)$	
	5	$0.84 \pm 0.02^{\rm a}(49.10)$	$0.67\pm0.01^{\rm a}(56.18)$	$0.60 \pm 0.05^{\rm a}(60.85)$	
	10	$0.76 \pm 0.03^{a}(53.94)$	$0.37\pm 0.04^{a}(62.36)$	$0.40 \pm 0.04^{a}(68.26)$	
Piroxicam gel	0.5	$0.48 \pm 0.01^{a}(70.91)$	$0.37 \pm 0.04^{a}(79.22)$	$0.40 \pm 0.04^{a}(78.84)$	

Values are Mean \pm SEM (n = 6), ^aP ≤ 0.001 , ^bEach value in parentheses indicates the percentage inhibition rate

 Table 4: Effect of topical administration of crude methanolic extract formulation (cream) of Achyranthes aspera on carrageenan-induced paw edema in rats

Extract/Compound	Dose (%)	Edema rate (%) after injection				
Extract/Compound		1h	3h	5h		
Base	-	1.65 ± 0.02	1.78 ± 0.04	1.89 ± 0.03		
Cream	2.5	$1.10 \pm 0.01^{a}(33.34)^{b}$	$1.01 \pm 0.03^{a}(43.26)$	$0.81 \pm 0.02^{a}(51.33)$		
	5	$0.98 \pm 0.03^{\rm a}(40.61)$	$0.89 \pm 0.05^{\rm a}(50.00)$	$0.66 \pm 0.05^{\rm a}(57.15)$		
	10	$0.84\pm 0.02^{a}(49.10)$	$0.72 \pm 0.01^{a}(59.56)$	$0.40\pm 0.04^{a}(65.08)$		
Piroxicam gel	0.5	$0.48 \pm 0.01^{a}(70.91)$	$0.37 \pm 0.04^{a}(79.22)$	$0.40 \pm 0.04^{a}(78.84)$		

Values are mean \pm SEM (n = 6), ^aP < 0.001, ^bEach value in parentheses indicates the percentage inhibition rate

of the currently available anti-inflammatory drugs (Dharmasiri *et al.*, 2003; Chattopadhyay *et al.*, 2002). The crude methanolic leaf extract of *V. wallichii* and *A. aspera* showed significant anti-inflammatory effect in late stage of inflammation as compared with the standard NSAID. Regarding the *in vitro* anti-inflammatory data, ethyl acetate fraction showed considerable inhibitory activity when compared with the standard drug (Baicalein).

CONCLUSION

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It can be concluded from the present data, that the leaves

of *V. wallichii and A. aspera* posses weak Antiinflammatory activity as compared to standard at initial stages, however it shows comparable effect with that of standard at later stages of inflammation. It indicates that certain species may be there that posses specific inhibitory effect on certain late stage mediators of inflammation. However, the specific compound and its mechanism of action is yet to be determined to have some fruitful results.

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