Bulletin of Environment, Pharmacology and Life Sciences Bull. Env. Pharmacol. Life Sci., Vol 12 [7] June 2023: 133-137 ©2023 Academy for Environment and Life Sciences, India Online ISSN 2277-1808 Journal's URL:http://www.bepls.com CODEN: BEPLAD ORIGINAL ARTICLE



Hepatoprotective activity of *Pedilanthus tithymaloides* in Carbon tetrachloride treated rats

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ABSTRACT

The present investigation was aimed to evaluate the hepatoprotective effects of ethanolic extract of Pedilanthus tithymaloides (PT) leaves on carbon tetrachloride (CCl₄) induced liver toxicity. PT extract was administered orally in the dose of 200 mg/kg and 400 mg/kg body weight for 7 days and liver toxicity was induced by administration of CCl₄(1ml/kg) subcutaneously on alternative day for a week. Silymarin (25 mg/kg body weight) was used as a standard drug. Serum biochemical markers were determined along with antioxidants enzymes in liver homogenates. The PTtreated groups show significantly decrease in biochemical markers (SGOT, SGPT, ALP and total bilirubin) in dose dependent manner which were increased significantly in toxic control group (CCl4treated). Whereas total proteins level was increased significantly. Pre-treated groups with PTalso produced significant reversal in levels of liver homogenates (LPO, SOD, CAT, GSH, GST and GPx). The present study shows that ethanolic extract of PT possesses hepatoprotective action against CCl₄induced hepatotoxicity.

Keywords: Pedilanthus tithymaloides, carbon tetrachloride, hepatoprotective, subcutaneously.

Received 25.03.2023

Revised 18.05.2023

Accepted 17.06.2023

INTRODUCTION

The liver also plays crucial role in altering of one chemical form to another and its clearance from body. When definite therapeutic agents are administered in overdoses and sometime while administered inside the therapeutic limits may also damage organs. Additional chemicals like those utilized in laboratories, industries, herbal chemicals and natural drugs can leads to liver harm are known as hepatotoxins [1]. Exposure to hepatotoxins includes accidental exposure to phosphorous [2], carbon tetrachloride [3], toxic or over doses of drugs such as paracetamol, isoniazid, augmentin, trimethoprim, sulfamethoxazole, phenytoin etc. [4] or ferrous sulphate [5] causes liver injury. The present treatment for liver diseases with Western medicine are often limited in efficacy carry the risk of adverse effects and are often too costly, especially for the developing world [6,7]. Therefore, treating liver diseases with plant derived compounds which are accessible and do not require laborious pharmaceutical synthesis seems highly attractive. Furthermore, in spite of the advances in conventional medicine in the last decades, professionals and the lay public of developed countries pay increasing attention to phytomedicine[8].

MATERIAL AND METHODS

Plant material

The fresh leaves of *Pedilanthus tithymaloides* were collectedlocally and authenticated by Dr.Y. S. Sarangdevot, Professor,B.N. College of Pharmacy, Udaipur Rajasthan. The air-dried leaves of *Pedilanthus tithymaloides* were ground into course powder. About500g of powder wastransferred in glass jar containing 600ml of ethanol, kept at room temperature for 7 days with shaking 3-4 times in a day. The extract was filtered through Whatman No. 1 filter paper. The extract was concentrated by rotary evaporator (RE-2 Aditya Scientific, India) and allow to air dry for complete evaporation of solvent. The dried ethanolic extract was transferred to air tight container and kept in desiccators for further uses [9,10].

Animals

The Albino Wistar rats (male and female) of weighing between 170 to 200g were used for the experiments. They were housed in the cages under the standard laboratory condition at a temperature of 23±2°C, humidity 60-70% and 12 hr light/dark cycles. The animals were feed with standard pellet diet and water was given *ad libitum*. The animals were maintained as per the CPCSEA regulations and the

study protocol was approved by the Institutional Animal Ethical Committee at Bhupal Nobles' College of Pharmacy, Udaipur.

Study design and experimental protocol

Animals were randomly divided into 5 groups of 6 rats each. Animal of Group I served as a control group, received subcutaneously administration of liquid paraffin at a dose of 1 ml/kg on alternate days, for a week. The animals of Group IIwere served as a toxic control and received CCl₄ subcutaneously, in a suspension ofliquid paraffin (1:2 v/v) at a dose of 1 ml/kg onalternate day for a week. Group III animals served as a standard group were given silymarin orally daily at a dose of 25 mg/kg and CCl₄ in a suspensionof liquid paraffin (1:2 v/v) subcutaneously at a dose of 1 ml/kg body weighton alternate day for a week. Group IV and Group Vwere received extract orally daily at a dose of 200 and 400 mg/kg respectively and CCl₄ in a suspensionof liquid paraffin (1:2 v/v) subcutaneously at a dose of 1 ml/kg body weighton alternate day weighton alternate day for a week [11,12].

Liver weight

After sacrificing the animals and processing of isolation, livers were placed on filter paper to remove excess moisture and then were finally weighed on electronic weighing balance[13].

Estimation of biochemical parameters

The biochemical parameters like serum glutamate oxaloacetate transaminase (SGOT),serum glutamate pyruvate transaminase (SGPT),alkaline phosphatase (ALP), total proteinand total bilirubin were estimated by using procedure described in assay kit (Lab Care Diagnostics India, Pvt. Ltd).The oxidative stress parameters like lipid peroxidation (LPO), catalase (CAT) superoxide dismutase (SOD), glutathione (GSH), glutathione peroxidase (GPx) and Glutathione S-transferase (GPx) were alsoestimated in liver homogenates [14,15,16].

Statistical analysis

The data were expressed as mean \pm S.E.M. Statistical differences at P < 0.05 between the groups were analyzed by one-way ANOVA followed by Dunnett's multiple comparison test using Graphpad Prism software.

RESULTS AND DISCUSSION

Effect of *Pedilanthus tithymaloides* on liver weight

The liver weightwas increase significantly in group II carbon tetrachloride treated animals as compared to the untreated normal control groupI. The weight of liver decreases significantly in group III (CCl₄ silymarin 25mg/kg) and groupV (CCL₄+ PT 400mg/kg) when compared to Group-II (CCL₄ treated)as given in Table1.

Effect of *Pedilanthus tithymaloides*onserum biochemical markers

The levels of biochemical markers, viz. SGOT, SGPT, ALP and total bilirubin were significantly increased in group II CCl₄ treated animals, as compared to the control untreated group I animals. Whereas the level of total proteins was significantly decrease in CCl₄ treated group II. The groups III and V, treated with silymarin 25 mg/kg and *Pedilanthus tithymaloides* dose of 400 mg/kg respectively followed by CCl₄, showed significant decrease in the level of serum biochemical marker, as compared with the carbon tetrachloride treated group II as given in Table 2. The level of total proteins was also significantly increased in both groups III and V. Whereas, group IV treated with *Pedilanthus tithymaloides* dose of 200 mg/kg showed significant decrease in the levels of SGPT, SGOT and ALP and did not show any significant changes in the levels of total proteins.

Liver weight (gm/100 body weight)
3.17 ± 0.14
4.91 ± 0.70^{a}
3.49 ± 0.26^{b}
4.25 ± 0.32 ^{NS}
4.02 ± 0.60^{d}

Table 1: Effect of Pedilanthus tithymaloideson liver weight

All values represent mean \pm SEM (n = 6)

P Value: a p<0.001 significantly different groups when comparing with control.

b P < 0.001, c P < 0.01, d P < 0.05 significantly different groups when comparing with Group-II (CCl₄ treated). NS indicates non-significant groups when comparing with Group-II (CCl₄ treated).

Tuble 2. Effect of Feanancia's they matorizes on set and biochemical markers									
Group/Treatment	SGOT (IU/L)	SGPT (IU/L)	ALP (IU/L)	Total Bilirubin (mg/dl)	Total Protein (mg/dl)				
Control I with LP	69.36 ± 7.77	80.52 ± 10.78	51.60 ± 3.62	0.66 ± 0.09	7.01 ±0.26				
Group II LP + CCl ₄	168.69±19.38 ^a	223.12 ± 24.55 ^a	117.55 ± 12.33 ^a	1.37 ± 0.24^{a}	4.83 ± 0.95^{a}				
Group III LP + CCl ₄ +Silymarin (25 mg/kg)	106.55±8.19 ^b	$117.81 \pm 7.48_{b}$	62.50 ± 5.64^{b}	0.87 ± 0.09°	6.73 ± 0.35°				
Group IV LP + CCl ₄ + PT (200 mg/kg)	143.55 ±13.46 ^d	193.06 ± 13.54 ^d	98.60 ± 8.39 ^d	1.25 ± 0.16^{NS}	5.84 ± 1.02 ^{NS}				
Group V LP + CCl ₄ + PT (400 mg/kg)	134.75 ± 11.78°	177.09 ± 14.36°	95.30 ± 10.53 ^d	1.03 ± 0.11^{d}	6.20 ± 0.54^{d}				

Table 2: Effect of Pedilanthus tithymaloides on serum biochemical markers

All values represent mean ± SEM (n = 6)

P Value: a p<0.001 significantly different groups when comparing with control.

bP <0.001, cP <0.01, d P <0.05 significantly different groups when comparing with Group-II (CCl₄ treated).

NS indicates non-significant groups when comparing with Group-II (CCl₄ treated).

Effect of Pedilanthus tithymaloides on liver homogenates

The changes in the level of biochemicals parameters of liver homogenates in different groups of animals are given in Table 3. The levels of liver antioxidants enzymes (SOD, CAT, GSH, GPx and GST) reduced significantly in Group-II (CCl₄ treated) as compared with untreated group I. Whereas the level of LPO increased significantly in Group II (CCl₄ treated). The groups III and IV, treated with silymarin 25mg/kg and *Pedilanthus tithymaloides* dose of 400 mg/kg followed by CCl₄ showed significantly increase in the level of these antioxidants enzymes, as compared with the CCl₄ treatedgroup II. Whereas, significantly decrease in level of LPO. The group IV treated with *Pedilanthus tithymaloides* dose of 200 mg/kg showed significant increase in the levels of CAT and GST as compared with the CCl₄ treated group II.

Group/Treatment	LPO (nmol/mg protein)	SOD (U/mg protein)	CAT (U/mg protein)	GSH (U/mg protein)	GPX (U/mg protein)	GST (nmol/mg protein)
Control I with LP	0.49 ± 0.08	92.86 ± 6.72	30.67 ± 2.78	3.69 ± 0.29	4.26 ± 0.28	1.28 ± 0.12
Group II LP + CCl ₄	1.75 ± 0.42^{a}	54.25 ± 9.10ª	13.32 ± 4.04ª	2.19 ± 0.61^{a}	2.30 ± 0.55^{a}	0.47 ± 0.29^{a}
Group III LP + CCl ₄ +Silymarin (25 mg/kg)	0.78 ± 0.17^{b}	86.28 ± 6.28 ^b	23.25 ± 2.47°	3.51 ± 0.18°	3.95 ± 0.36 ^b	1.32 ± 0.14^{b}
Group IV LP + CCl ₄ + PT(200 mg/kg)	1.45 ± 0.19 ^{NS}	67.01 ± 6.37 ^{NS}	20.31 ± 2.48 ^d	2.62 ± 0.32 ^{NS}	3.13 ±0.63 ^{NS}	0.82 ± 0.10^{d}
Group V LP + CCl ₄ + PT(400 mg/kg)	1.31 ± 0.13 ^d	72.55 ± 8.11 ^d	22.13 ± 3.11°	2.65 ± 0.46 ^{NS}	3.29 ± 0.48^{d}	0.93 ± 0.13°

Table 3: Effect of *Pedilanthus tithymaloides* on liver homogenates

All values represent mean \pm SEM (n = 6)

P Value: a p<0.001 significantly different groups when comparing with control.

b P < 0.001, c P < 0.01, d P < 0.05 significantly different groups when comparing with Group-II (CCl₄ treated). NS indicates non-significant groups when comparing with Group-II (CCl₄ treated).

Carbon tetrachloride (CCl₄) is widely used as a solvent for dissolving non-polar compounds such as fats and oils. The acute toxicity of CCl₄ is well established from many animal studies. Most hepatotoxic effects of CCl₄, was attributed to its metabolism by cytochrome P450, especially by P450 2E1, to yield toxic trichloromethyl radicals (CCl₃•) and peroxide radical (•OOCCL₃) which are highly reactive. These radicals bind to the macromolecule and induce peroxidative degradation of membrane phospholipids of endoplasmic reticulum rich in polyunsaturated fatty acids. This in turn leads to the formation of lipid peroxide which ultimately produces toxic aldehyde inducing liver damage[17].Serum biochemical markers are the commonly usedmarkers in the assessment of liver damage because these are cytoplasmic in location and are released in to the circulation after cellular damage [18,19].

Whereas, lipid peroxidation (LPO) is a destructive process in liver injury after administration with CCl₄. Increase in LPO leading to liver damage and failure of antioxidant defense mechanisms to prevent formation of free radicals [20]. SOD and CAT constitute a team of mutually supportive antioxidant enzymes which provide defense against reactive oxygen species. SOD provide the protection from oxidative stress by dismutation of highly reactive and potentially toxic superoxide radical to H_2O [21]. Glutathione is an important naturally occurring antioxidant and it prevents the hydrogen of methylene

moiety of unsaturated fatty acids to be abstracted. The binding of acetaldehyde, a metabolite of ethanol with glutathione may contribute to reduction of levels of glutathione [22]. The metabolites of CCl₄, directly reduce the levels of glutathione. GPx is very important enzyme which provide protect against chemically induced oxidative destruction process of lipid and proteins [23]. The GST is multifunctional enzyme which involved in the metabolism of a broad variety of xenobiotics and endogenous compounds and provides protection against toxic compound by metabolised them [24].

In the present investigation, treatment withtwo different dosages of the ethanolic extract of *Pedilanthus tithymaloides* (200 and 400 mg/kg p. o.) significantly reversed these elevated levels of biochemical markers, viz. - SGOT, SGPT, ALP and total bilirubin, whereas significantly increases in total proteins level. The results obtained were comparable withthose of the silymarin 25 mg/kg treated group. In our present study, 400mg/kg p. o. dose of *Pedilanthus tithymaloides* was more effective, as compared to 200 mg/kg dose. It is thus concluded that the ethanolic extract of *Pedilanthus tithymaloides* an oraldose 400mg/kg/day, is effective against the hepatotoxicity induced by CCl₄.

CONCLUSION

The results of this present study have demonstrated that ethanolic extract of *Pedilanthus tithymaloides* leaves can be effective treatment against hepatic injury. Further studies are needed to establish the therapeutic potential, safety, mechanism and active compounds of the drug involved in the treatment of hepatotoxicity.

ACKNOWLEDGMENT

The authors are thankful to Dean, Faculty of Pharmacy, Bhupal Nobles' University, Udaipur, Rajasthan for providing all necessary facilities to carry out research work.

REFERENCES

- 1. David, S. & Hamilton, J.P. (2010). Drug-induced liver injury. US Gastroenterol Hepatol Rev., 6:73-80.
- 2. Eapen C.E., Venkataraman J. (2021). Rodenticide (Yellow phosphorus poison)-Induced hepatotoxicity in India: Constraints during management, *Journal of Clinical and Experimental Hepatology.*;11(4): 414-417. https://doi.org/10.1016/j.jceh.2021.04.011.
- 3. Toriumi K., Horikoshi K., Osamura R.Y., Yamamoto Y., Nakamura N., Takekoshi S. (2013). Carbon tetrachlorideinduced hepatic injury through formation of oxidized diacylglycerol and activation of the PKC/NF-κB pathway, *Lab Invest*.93(2):218-229.doi:https://doi.org/10.1038/labinvest.2012.145.
- 4. Chang C.Y., Schiano T.D. (2007). Review article: Drug hepatotoxicity, *Alimentary Pharmacology & Therapeutics*. 25(10):1135-1151. doi:https://doi.org/10.1111/j.1365-2036.2007.03307.x.
- 5. Sharma N., Hall A., Holden A. (2011). Overdose of ferrous sulphate, Co-dydramol and non-steroidal antiinflammatory drugs, leading to fatal hepatotoxicity, *Journal of the Intensive Care Society*. 12(3): 234-237. doi:https://doi.org/10.1177/175114371101200311.
- 6. Ghosh N., Ghosh R., Mandal V., Mandal S.C. (2011). Recent advances in herbal medicine for treatment of liver diseases, *Pharmaceutical Biology*. 49(9): 970-988. doi:https://doi.org/10.3109/13880209.2011.558515.
- 7. Dhiman, R.K., Chawla, Y.K. (2005). Herbal medicines for liver diseases, *Digestive Diseases and Sciences*. 50(10): 1807-1812. doi:https://doi.org/10.1007/s10620-005-2942-9.
- 8. Grajales C.S. (2015). Antioxidants in liver health, *World Journal of Gastrointestinal Pharmacology and Therapeutics*, 6(3): 59-72. doi:https://doi.org/10.4292/wjgpt.v6.i3.59.
- 9. Jahan N., Parvin M.S., Das N., Islam M.S., Islam M.E. (2014). Studies on the antioxidant activity of ethanol extract and itsfractions from *Pterygotaalata* leaves, *Journal of Acute Medicine*. 4(3):103-108.doi:https://doi.org/ 10.1016/j.jacme.2014.05.001.
- 10. Dey, T.K., Emran, T.B., Saha, T.D., Rahman, A.M., Hosen, S.M.Z. & Chowdhury N. (2012). Antioxidant activity of ethanol extract of *Cassia hirsuta*(L.) leaves. Bulletin of Pharmaceutical Research,2(2):78-82.
- 11. Sisodia S.S., Bhatnagar M. (2009). Hepatoprotective activity of *Eugenia jambolana* Lam. in carbon tetrachloride treated rats, *Indian Journal of Pharmacology*. 2009;41(1): 23-27.doi:https://doi.org/10.4103/0253-7613.48888.
- 12. Singhal K.G., Gupta G.D. (2012). Hepatoprotective and antioxidant activity of methanolic extract of flowers of *Nerium oleander* against CCl4-induced liver injury in rats, *Asian Pacific Journal of Tropical Medicine*, 2012;5(9):677-685. doi:https://doi.org/10.1016/s1995-7645(12)60106-0.
- Wahid A., Hamed A.N., Eltahir H.M., Abouzied M.M. (2016). Hepatoprotective activity of ethanolic extract of *Salix* subserrata against CCl₄-induced chronic hepatotoxicity in rats. *Complementary and Alternative Medicine*, 2016;16(1):1-10. doi:https://doi.org/10.1186/s12906-016-1238-2.
- 14. Karwani, G. & Sisodia, S.S. (2015). Hepatoprotective activity of *Tagetes erecta*Linn. in ethanol induced hepatotoxicity. Sch. Acad. J. Pharm., 4(3):181-189.
- 15. Henry R.J., Cannon D.C., Winkelman J.W. (1975). Clinical chemistry: Principles and technics, *ClinicaChimica Acta*.;65:249-250. doi:https://doi.org/10.1016/0009-8981(75)90116-3.
- 16. Spitz D.R., Oberley L.W. (1989). An assay for superoxide dismutase activity in mammalian tissue homogenates, *Analytical Biochemistry*. 1989;179(1):8-18. doi:https://doi.org/10.1016/0003-2697(89)90192-9.

- 17. Babu P.S., Krishna V., Maruthi K., Shankarmurthy K., Babu R. (2011). Evaluation of acute toxicity and hepatoprotective activity of the methanolic extract of *Dichrostachys cinerea* (Wight and Arn.) leaves, *Pharmacognosy Research*. 2011;3(1):40-43. doi:https://doi.org/10.4103/0974-8490.79114.
- 18. Ouassou H., Bouhrim M., Daoudi N.E., Mekhfi H., Ziyyat A., Legssyer A., et al. (2021). Evaluation of hepatoprotective activity of *Caralluma europaea* stem extract against CCl₄-induced hepatic damage in Wistar rats, *Adv Pharmacol Pharm Sci.* 2021;1-8. doi:https://doi.org/10.1155/2021/8883040.
- 19. Ho W.Y., Yeap S.K., Ho C.L., Rahim A.R., Alitheen, N.B. (2012). Hepatoprotective activity of *Elephantopusscaberon* alcohol-induced liver damage in mice, *Evidence-Based Complementary and Alternative Medicine*. 2012;1-8. doi:https://doi.org/10.1155/2012/417953.
- 20. Hegde, K. & Joshi,A.B. (2009). Hepatoprotective effect of *Carissa carandas* Linn root extract against CCl₄ and paracetamol induced hepatic oxidative stress. Indian Journal of Experimental Biology, 47:60-67.
- 21. Hashem M.M., Salama M.M., Mohammed F.F., Tohamy A.F., Deeb K.S.E. (2019). Metabolic profile and hepatoprotective effect of *Aeschynomeneela phroxylon* (Guill. & Perr.), *PLOS ONE*. 2019;14(1):1-24. https://doi.org/10.1371/journal.pone.0210576
- 22. Kurutas E. B. (2016). The importance of antioxidants which play the role in cellular response against oxidative/nitrosative stress: Current state, *Nutrition Journal*. 2016;15(71): 1-22. doi:https://doi.org /10.1186/s12937-016-0186-5.
- 23. Sivakumar V., Sadiq A.M., Bharathi S.D. (2018). Hepatoprotective activity of *Centella asiatica* Linn. against paracetamol induced liver damage in experimental animals, *Emergent Life Sciences Research*. 2018;4(1):19-26. doi:https://doi.org/10.31783/elsr.2018.411926.
- 24. Parmar, S.R., Vashrambhai, P.H. & Kalia, K. (2010). Hepatoprotective activity of some plants extract against paracetamol induced hepatotoxicity in rats. Journal of Herbal Medicine and Toxicology, 4(2):101-106.

CITATION OF THIS ARTICLE

Gunjan Rani, S.S. Sisodia. Hepatoprotective activity of *Pedilanthus tithymaloides* in Carbon tetrachloride treated rats. Bull. Env. Pharmacol. Life Sci., Vol 12[6] June 2023: 133-137