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Anti-oxidant and Anti-inflammatory Activity of Cassia auriculata (Flowers)

N. Muruganantham^{1*}, S. Solomon² and M. M. Senthamilselvi³

¹Department of Chemistry, Roever Engineering College, Anna University, Perambalur, Tamil Nadu, India. ²Department of Chemistry, Periyar E.V.R. College (Autonomous), Bharathidasan University, Trichy, Tamil Nadu, India. ³Department of Chemistry, Principal, Government Arts College, Bharathidasan University, Kulithalai, Tamil Nadu, India.

Authors' contributions

This work was carried out in collaboration between all authors. All authors read and approved the final manuscript.

Article Information

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Original Research Article

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ABSTRACT

Aim: To analyze the antioxidants and anti-inflammatory potential of ethanolic crude extract of *Cassia auriculata* flowers.

Study Design: 2 kg of fresh flowers were soaked with 90% ethanol at room temperature (25°C-30°C). After 72 hrs the ethanolic extract was filtered. This extract was distilled and finally the crude was obtained. This ethanolic crude to get required concentrations and were used for screening antioxidants and anti-inflammatory activities.

Place and Duration of Study: PG & Research Department of Chemistry, Periyar E.V.R. College (Autonomous), Trichy, Tamilnadu, India. During the month of August and September 2014. **Methodology:** Fresh flowers of *Cassia auriculata* were extracted with ethanol and evaluated for

*Corresponding author: Email: nmuruganchem@india.com;

antioxidant activities by 2,2-Diphenyl 1-picryl hydrazyl solution (DPPH), 2,2'-azino-bis(3ethylbenzthiazoline-6-sul- phonic acid (ABTS) assay and anti inflammatory activites by humen blood cell (HRBC) membrane stabilization method and Inhibition of albumin denaturation method. **Results:** The results obtained showed that the ethanolic crude extract of *Cassia auriculata* flowers can be considered as good sources of anti-oxidants, anti-inflammatory and can be incorporated into the drug formulations. **Conclusion:** This study justifies the anti-oxidants, anti-inflammatory activity of ethanolic crude extract of *Cassia auriculata* Flowers. Further detailed analysis of this sample is required to identify the presence of bioactive compounds responsible for anti-oxidants, anti-inflammatory activities. Studies are highly needed for future drug development.

Keywords: Cassia auriculata; anti-oxidant activity; anti-inflammatory activity; albumin denaturation; DPPH(2,2-Diphenyl 1-picryl hydrazyl); ABTS(2,2'-azino-bis(3-ethylbenzthiazoline-6-sulphonic acid)assay; total antioxidant activity etc.

1. INTRODUCTION

The search of new agents having various pharmacological activities, obtained by screening the natural sources like different plant extracts has led to the discovery of many clinically useful drugs which are immensely useful in the treatment of various human diseases [1]. Herbal drugs can therefore be considered as a better alternative to synthetic anti-inflammatory drugs [2]. *Cassia auriculata*, Linn (Caesalpiniaceae) commonly known as Tanners Cassia [Avaram] is a shrub with large bright yellow flowers, growing wild in Central Provinces and Western peninsula parts of India [3].

Cassia auriculata is an evergreen shrub that grows in many parts of India and in other parts of Asia. The flowers, leaves, stem, root and unripe fruit are used for treatment, especially in Ayurvedic medicine. People use C. auriculata for diabetes, eye infections (conjunctivitis) joint and constipation, muscle pain (rheumatism), jaundice, liver disease and urinary tract disorders. The plant has been reported to hepatoprotective, possess antipyretic, antidiabetic. antiperoxidative and antihyperglyceamic activity [4]. The flowers are used to treat urinary discharges, nocturnal emissions, diabetes and throat irritation [5]. Inflammation is the reaction of living tissues to injury, infection or irritation. Lysosomal enzymes released during inflammation produce a variety of disorders which leads to the tissue injury by damaging the macromolecules and lipid peroxidation of membranes which are assumed to be responsible for certain pathological conditions as heart attacks, septic shocks and rheumatoid arthritis etc.

The extracellular activity of these enzymes is said to be related to acute or chronic inflammation. Stabilization of lysosomal membrane is important in limiting the inflammatory response by inhibiting the release of lysosomal constituents of activated neutrophil such as bacterial enzymes and proteases which cause further tissue inflammation and damage upon extra cellular release or by stabilizing the lysosomal membrane [6]. Previous studies has proved that the chemical constituents such as flavonoids, alkaloids, tannins and terpenoids are promising agents in treatment of inflammation [7,8,9,10]. Flavonoids such as hesperidin, apigenin, luteolin and quercetin are found to be a potent anti-inflammatory constituent [11]. High content of flavonoids in methanolic extract of C. auriculata flowers is reported for its antiinflammatory activity.

The present study involves the fresh flowers of *Cassia auriculata* were extracted with ethanol and evaluated for antioxidant activities by 2,2-Diphenyl 1-picryl hydrazyl solution (DPPH), 2,2'-azino-bis(3-ethylbenzthiazoline-6-sul- phonic acid (ABTS) assay and anti inflammatory activites by humen blood cell (HRBC) membrane stabilization method and Inhibition of albumin denaturation method.

2. MATERIALS AND METHODS

2.1 Collection of Plant Materials

Fresh flowers of *Cassia auriculata* were collected from O.Koothur Village, Ariyalur district, TamilNadu, India, during the month of November and identified by Head, PG & Research Department of Botany, Periyar E.V.R.College, Trichy, Tamil Nadu.

2.2 Flower Extraction

2 kg of fresh flowers were soaked with 90% ethanol at room temperature (25°-30°C). After 72 hrs the ethanolic extract was filtered. This extract was concentrated in vacuum and the dry powder obtained was dissolved in DMSO (Dimethyl sulfoxide) to get required concentrations and were used for screening anti-oxidant and antiinflammatory activities.

3. INVITRO ANTIOXIDANT ACTIVITY

3.1 DPPH (2,2-Diphenyl 1-picryl hydrazyl) Assay Method

The DPPH free radical is reduced to a corresponding hydrazine when it reacts with hydrogen donors. The DPPH radical is purple in colour and upon reaction with hydrogen donor changes to yellow colour. It is a decoloration assay, which is evaluated by the addition of the antioxidant to a DPPH solution in ethanol or methanol and the decrease in absorbance was measured at 490 nm [12].

3.2 Reagents

<u>3.2.1 2,2-Diphenyl 1-picryl hydrazyl solution</u> (DPPH, 100µM):

22 mg of DPPH was accurately weighed and dissolved in 100 ml of methanol. From this stock solution, 18 ml was taken and diluted to 100 ml using methanol to obtain 100 μ M DPPH solution.

3.2.2 Preparation of test solutions

21 mg of the solid obtained from ethanolic extract was dissolved in distilled Dimethyl sulfoxide (DMSO) to obtain a solution of 21 mg/ml concentration. This solution was serially diluted to obtain lower concentrations.

3.2.3 Preparation of standard solutions

10 mg each of ascorbic acid and rutin were weighed separately and dissolved in 1 ml of Dimethyl sulfoxide (DMSO) to get 10 mg/ml concentrations. These solutions were serially diluted with DMSO to get lower concentrations.

3.2.4 Procedure

The assay was carried out in a 96 well microtitre plate. To 200 μl of DPPH solution, 10 μl of each of the test sample or the standard solution was

added separately in wells of the microtitre plate. The final concentration of the test and standard solutions used were 1000, 500, 125 and 31.25 μ g/ml. The plates were incubated at 37°C for 30 min and the absorbance of each solution was measured at 490 nm, using a micro plate reader.

3.3 Evaluation of Total Antioxidant Capacity of the Extract

The total antioxidant capacity was determined by phosphormolybdenum method and is based on the reduction of Mo (VI) to Mo (V) by the antioxidant compounds and the formation of a green Mo (V) complex which has the maximal absorption at 695 nm.

3.3.1 Preparation of test and standard solutions

Weighed accurately 55 mg of the sample and the standard, ascorbic acid and dissolved in 5 ml of DMSO. The lower dilutions were made serially with Dimethyl sulfoxide(DMSO).

3.3.2 Procedure

An aliquot of 0.1 ml of the sample solution containing a reducing species in Dimethyl sulfoxide(DMSO) was combined in an Eppendorff tube with 1 ml of reagent solution (0.6 mM Sulphuric acid. 28 mM sodium phosphate. and 4 mM ammonium molvbdate). The tubes were capped and incubated in water bath at 95°C for 90min. The samples were cooled to room temperature, and the absorbance of each solution was measured at 695 nm. The total antioxidant capacity was expressed as mM equivalent of ascorbic acid (Mojca et al., 2005).

Total antioxidant activity = 372.1 µg/ml

3.3.3 ABTS (2,2'-azinobis (3-ethylbenzthi azoline -6-sul-phonic acid) radical scavenging activity

ABTS radical scavenging activity was performed as described by Re et al. (1999) with a slight modification. 7.0 mM ABTS in 14.7 mM ammonium peroxo-disulphate was prepared in 5.0 ml distilled water. The mixture was allowed to stand at room temperature for 24 hours. The resulting blue green ABTS radical solution was further diluted such that its absorbance is 0.70 ± 0.020 at 734 nm. Various concentrations of the sample solution dissolved in ethanol (20.0 µl) were added to 980.0 µl of ABTS radical solution and the mixture was incubated in darkness for 10 min. The decrease in absorbance was read at 734 nm. A test tube containing 20.0 µl of ethanol and processed as described above was served as the control tube. Different concentrations of ascorbic acid were used as reference compound.

4. Anti- inflammatory Activity

4.1 The Human Red Blood Cell (HRBC) Membrane Stabilization Method

The method as prescribed by Gopalkrishnan et al., 2009; Sakat et al. [13] was adopted with some modifications. The blood was collected from healthy human volunteer who had not taken any NSAIDS for 2 weeks prior to the experiment and mixed with equal volume of Alsever solution (2% dextrose, 0.8% sodium citrate, 0.5% citric acid and 0.42% NaCl) and centrifuged at 3,000 rpm. The packed cells were washed with isosaline and a 10% suspension was made. Various concentrations of extracts were prepared in mg/ml using distilled water and to each concentration, 1 ml of phosphate buffer, 2 ml hypo saline and 0.5 ml of HRBC suspension were added. It was incubated at 37°C for 30 minutes and centrifuged at 3,000 rpm for 20 minutes and the hemoglobin content of the solution estimated supernatant was spectrophotometrically at 560 nm. Diclofenac (100 Jg/ml) was used as reference standard and a control was prepared by omitting the extracts. The experiments were performed in triplicates and mean values of the three were considered. The percentage (%) of HRBC membrane stabilization or protection calculated using the following formula [14,15,16,13,17,18,19].

Percentage of Protection (%) = (100- OD of drug treated sample/OD of Control) X 100

4.2 Albumin Denaturation Method

The method as prescribed by Sakat et al. [13] was followed with modifications. The reaction mixture was consisting of test extracts and 1% solution of bovine albumin fraction. pH of the reaction mixture was adjusted using small amount of HCI. The sample extracts were incubated at 37°C for 20 minutes and then heated to 51°C for 20 minutes. After cooling the the turbidity was measured samples spectrophotometrically at 660 nm. Diclofenac sodium was taken as a standard drug. The experiment was performed in triplicates and the mean value of the three was considered. Percent inhibition of protein denaturation was calculated as follows [14,15,16,13,17,18,19].

Percentage of inhibition (%) = (OD of Control-OD of Sample/ OD of Control) X 100.

5. RESULTS

5.1 Anti-oxidant Activity

In the present study, ethanolic crude extract of Cassia auriculata flowers exhibited significant anti-oxidant activity when compared with DPPH assay. It is evident from the data presented in Table 1 that the sample possesses DPPH assay activity. The result showed the Percentage of cytotoxicity for 1000 µg/ml as 61.15%, 500 µg/ml as 59.03% for 125 µg/ml as 48.31%, and for 31.25 µg/ml as 29.12%, respectively when compared with ABTS assay activity. It is evident from the data presented in Table 2 that the sample possesses ABTS assay activity. The result showed the Percentage of cytotoxicity for 1000 µg/ml as 72.81 %, 500 µg/ml as 59.58% for 125 µg/ml as 46.53%, and for 31.25 µg/ml as 23.12%. Total antioxidant activity of the plant is 372.1 µg/ml.

5.2 Anti-inflammatory Activity

Ethanolic crude extract of Cassia auriculata flowers exhibited significant anti-inflammatory activity of the human red blood cell (HRBC) membrane stabilization exhibited data presented in Table 3. The result showed the Percentage of Inhibition in Membrane Stabilization for 100 µg/ml as 29.15±1.75%, for 200 µg/ml as 49.09±1.72%, for 400 µg/ml as 62.47±1.49%, for 600 µg/ml as 79.05±1.09% and for 800 µg/ml as 86.42±1.94%. Respectively when the Inhibition of Albumin denaturation activity exhibited data presented in Table 4. The result showed the Percentage of Inhibition in membrane Stabilization for 100 µg/ml as 29.15±1.75%, for 200 µg/ml as 49.18±1.87%, for 400 µg/ml as 58.26±1.58%, for 600 µg/ml as 85.16±0.49 and for 800 µg/ml as 89.24±1.70%.

6. DISCUSSION

The anti-inflammatory activity of various extracts of C. auriculata leaves was carried out using carrageenan induced rat paw edema. Carrageenan induced inflammation represents a classical model of edema formation and hyperalgesia, which has been extensively used for evaluation of anti-edemal effect of drugs [20]. The sub-planter administration of carrageenan in rat is responsible for the typical biphasic edema [21] in which the first phase observed around 0-2 hours is attributed to the release of histamine and serotonin. The second phase of swelling which last for 2-6 hours is due to release of prostaglandin- like substances [22,23]. In the present study, ethanolic crude extract of C. auriculata flowers showed potent antiinflammatory activity compared to leaves of ethyl acetate extracts. As the anti-inflammatory effect was more significant during later phase of inflammation, In accordance with previous studies steroids, flavonoids, alkaloids, terpenoids and tannins have been shown to possess of antiinflammatory activity [24]. Thus the antiinflammatory effect of ethanolic crude extract may be due to presence of of active constituent flavonoids. Based on the results described, it may be concluded that the ethanolic crude extract shown above the result may be due to the absence of Flavonoids. The results strongly suggest anti-inflammatory effect and anti-oxidant effects by percentage of inhibitions, which are explained in the Tables 1, 2, 3, 4 The medical use of *Cassia auriculata* as a useful remedy in various disorders could possibly be because of its excellent anti-inflammatory and antioxidant potential. However, chemical constituents and mechanism responsible for the pharmacological activities remain to be investigated.

Table 1. DPPH assay activity of ethanolic extract of flowers of Cassia auriculata

S. no	Concentration (µg/ml)	% CTC₅₀ cytotoxicity	CTC ₅₀
1	1000	61.15	201.5
2	500	59.03	µg/ml
3	125	48.31	
4	31.25	29.12	

 Table 2. ABTS assay activity of ethanolic extract of flowers of Cassia auriculata

S. no	Concentration (µg/ml)	% CTC ₅₀ Cytotoxicity (μg/ml)	CTC ₅₀
1	1000	72.81	483.12 (µg/ml)
2	500	59.58	
3	125	46.53	
4	31.25	23.12	

 Table 3. The human red blood cell (HRBC) membrane stabilization activity of ethanolic extract of flowers of Cassia auriculata

S. no	Concentration (µg/ml)	% of Inhibition
		Membrane stabilization Mean±S.E.M(S-I)
1	100	28.17±1.59
2	200	49.09±1.72
3	400	62.47±1.49
4	600	79.05±1.09
5	800	86.42±1.94



Fig. 1. Graphical representation of DPPH activity of ethanolic extract of flowers of Cassia auriculata

S. no	Concentration (µg/ml)	% of Inhibition
		Membrane Stabilization Mean±S.E.M(S-I)
1	100	29.15±1.75
2	200	49.18±1.87
3	400	58.26±1.58
4	600	85.16±0.49
5	800	89.24±1.70

 Table 4. The Inhibition of Albumin denaturation activity of ethanolic extract of flowers of

 Cassia auriculata



Fig. 2. Graphical representation of ABTS radical scavenging activity of ethanolic extract of *Cassia auriculata*



Fig. 3. Graphical representation of human red blood cell (HRBC) membrane stabilization activity of ethanolic extract of flowers of *Cassia auriculata*

Muruganantham et al.; BJPR, 8(1): 1-9, 2015; Article no.BJPR.18059



Fig. 4. Graphical representation of Inhibition of Albumin denaturation activity of ethanolic extract of flowers of *Cassia auriculata*

7. CONCLUSION

In conclusion, the present study has confirmed that DPPH assay, total anti-oxidant capacity and ABTS have showed a strong antioxidant activity and also the human red blood cell (HRBC) membrane stabilization, Inhibition of albumin denaturation indicated the anti-inflammatory activity.

In recent years, the search for phytochemicals possessing antioxidant, and anti inflammatory properties have been on the rise due to their likely use in the therapy of various chronic and communicable diseases. Epidemiology and investigational studies have implicated oxidative cellular damage arising from an imbalance between free radical generating and scavenging systems as the primary cause of cardiovascular, diseases, cancer, aging etc. [12]. Due to risk of adverse effects encountered with the use of synthetic antibiotics. In addition, a number of antibiotics have lost their effectiveness due to the development of resistant strains, mostly through the expression of resistance genes [25].

The present investigations have demonstrated a strong association between the anti-inflammatory and antioxidant activities of *Cassia auriculata* flowers. The prevention of oxidative damage to tissue could therefore be one of the mechanisms responsible for the anti-inflammatory effect shown by this plant. The medical use of *Cassia*

auriculata as a useful remedy in arthritic disorders could possibly be because of its excellent anti-inflammatory and antioxidant potential. The isolation, purification and mechanism of action of phenolic and flavonoidal components and other components of *Cassia auriculata* flowers are of interest for further examination and shall be carried out in future studies.

These findings provide scientific evidence to support traditional medicinal uses and indicate a promising potential for the development of an antioxidant and anti-inflammatory agent from *Cassia auriculata* flowers. This medicinal plant by *in vitro* results appear as interesting and promising and may be effective as potential sources of novel antioxidant and antiinflammatory drugs.

CONSENT

It is not applicable.

ETHICAL APPROVAL

It is not applicable.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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Muruganantham et al.; BJPR, 8(1): 1-9, 2015; Article no.BJPR.18059

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