

**Original article:**

**Extract Ethanol of Poguntano in Alloxan Induced Diabetic Rats**

Widjaja SS<sup>1</sup>, Rusdiana<sup>2</sup>

**Abstract**

**Back Ground:** Diabetes mellitus is a group of metabolic disease with high blood glucose level above 150 mg/dL over a prolonged period. The elevated of blood glucose, free fatty acid and insulin resistance will cause the endothelial dysfunction, hemostasis disturbances that lead to micro and macrovascular complications. Poguntano (*Picria fel-terrae* Merr) from family Scrophulariaceae found in most part of Indonesia, has been used as traditional plant for treatment of diabetes. **Objective:** The purpose of this study was to investigate the effect of extract ethanol of Poguntano in alloxan induced diabetic rats. **Method:** Fifteen male Wistar rats with body weight of 150-200 gr were given intra peritoneal injection of 150 mg/kg Alloxan to induce diabetes. These were divided into three groups (control diabetic, group given insulin and group given Extract ethanol of Poguntano 200 mg/Kg body weight) and one control normal control. The duration of study was 4 weeks; blood glucose and Endothelin-1 were measured for all groups. **Results :** Extract ethanol of Poguntano 200 mg showed significant results ( $p < 0.001$ ) in lowering blood glucose in Alloxan induced diabetic rats compared to control diabetic, but did not show superior to insulin group ( $p = 0.892$ ). Endothelin-1 showed statistical significant between group with normal rats and diabetic control rats. ( $p = 0.009$ ) but did not in the other groups. Levels of Endothelin-1 was higher in the diabetic control group with the median 1.95 (1,78-3.1). **Conclusion:** In our study we found that extract ethanol of Poguntano showed significant hypoglycemic activity and lowering the Endothelin-1 level in alloxan induced diabetic rats.

**Keywords:** blood glucose; anti-diabetic; poguntano; diabetic rats; endothelin-1.

Bangladesh Journal of Medical Science Vol. 17 No. 02 April'18. Page : 251-254  
DOI: <http://dx.doi.org/10.3329/bjms.v17i2.35879>

**Introduction**

Diabetes Mellitus is a group of chronic metabolic disease resulting from the defect in insulin secretion or resistance with high blood glucose above 150 mg/dL.<sup>1,2</sup> The elevated of blood glucose, free fatty acid and insulin resistance will cause the endothelial dysfunction, hemostasis disturbances and later thrombosis<sup>3</sup>. Diabetic complications developed due to prolonged hyperglycemia, dyslipidemia and genetic susceptibility,<sup>4</sup> and these can increased the mortality and morbidity rate of the diabetes.<sup>3</sup> Complications as cerebro and cardiovascular incidences, are major cause of death in diabetic patients.<sup>1</sup> Endothelial dysfunction is a prominent feature of cardiovascular diseases and also plays an important role in both micro and macrovascular complications of diabetes.<sup>5,6</sup> Strong vasodilator Nitric Oxide was decreased and endothelin-1 ( vasoconstrictor ) was increased

in early stage of diabetes, this will impaired the vasorelaxation<sup>7</sup> as the disease progress the activation of this endothelial system will leads to structural alteration, thrombosis and developed plaque in the vessel wall, fibrosis and inflammation<sup>7,8,9</sup> The activation of Endothelin-1 also stimulate the proliferation of vascular smooth muscle cell.<sup>9</sup> These all suggested ET-1 might play a major role in diabetic vascular complications.<sup>7,10</sup> The mainstay treatments of diabetes are control diets, exercise and medicine<sup>11,12,13</sup> A variety of traditional medicine has been used empirically to treat diabetes and Indonesia is a country rich of plenty medicinal plants.<sup>14,15</sup> Poguntano (*Picria fel-terrae* Merr) from family Scrophulariaceae, one of the medicinal plants found in North Sumatera has been used to treat diabetes, fever, malaria and cancer, the anti hyperglycemic effect has been proved empirically.<sup>16,17,18,19,20</sup>

1. Sry Suryani Widjaja, Biochemistry Department, Faculty of Medicine, USU, Medan, Indonesia, email:srysuryani@gmail.com
2. Rusdiana, University of Sumatera Utara Medical School, Biochemistry Department

**Correspondence to:** Sry Suryani Widjaja, Biochemistry Department, Faculty of Medicine , USU, Medan, Indonesia, email:srysuryani@gmail.com

The purpose of this study was to investigate the hypoglycemic and endothelial cell dysfunction of extract ethanol of Poguntano in alloxan induced diabetic rats.

**Methods**

This is an experiment study using male Wistar rats 4-8 weeks, weight 150-250 gr, under ethical approval from committee ethics University of Sumatera Utara.

**Preparation of Plants Extract**

Identification of *Picria fel-terrae* Lour. leaves was performed in Bogoriense Herbarium, LIPI, Jakarta, Indonesia. Extraction was done using maceration technique with ethanol 96%.<sup>21</sup>

**Animals and Treatment**

In this study fifteen wistar male rats with body weight of 150-250 gr were given intra peritoneal injection of 150 mg/kg Alloxan monohydrate (Sigma Chemical Company) to induce diabetes.<sup>22,23</sup> Alloxan (2, 4, 5, 6-tetraoxypyrimidine; 2, 4, 5, 6- pyrimidinetetrone) an oxygenated pyrimidin derivative when administered to rodents will destroys cell Beta selectively in pancreas causing insulin dependent diabetes also known as alloxan diabetes.<sup>24</sup> The alloxan diabetes was confirmed when blood sugar concentration above 200mg/dL.

Twenty wistar male rats were divided into four groups:

- Group I normal control rats with no treatment
- Group 2 diabetic control rats with no treatment
- Group 3 diabetic rats received 1 unit of lantus Insulin
- Group 4 diabetic rats received oral extract ethanol Poguntano 200 mg/kg

The duration of study was 4 weeks; blood glucose and Endothelin-1 were measured for all groups.

**Statistical Analysis**

The data were analyzed using Analysis of variance (ANOVA),SPSS (Statistical Product and Service Solutions) 17.0.

**Results**

**Table 1.** Blood glucose levels of alloxan-induced diabetic rats

| Treatment Group  | T0 (mg/dL) | T1w (mg/dL) | T4w (mg/dL) |
|------------------|------------|-------------|-------------|
| Control          | 102        | 93          | 95          |
| Diabetic control | 374        | 271         | 312         |
| Group Insulin    | 583        | 430         | 197         |
| Poguntano 200 mg | 435        | 209         | 133         |

In the group giving Extract ethanol Poguntano 200

mg, blood glucose started to come down after first week of treatment, and is better seen after four weeks of treatment.

**Table 2 . Analysis one way anova of blood glucose at week four after treatment**

| Variabel         |  | n | Mean ± SD      | p       |
|------------------|--|---|----------------|---------|
| Control          |  | 3 | 95.00 ± 3.00   | < 0.001 |
| Diabetic Control |  | 3 | 312.67 ± 60.01 |         |
| Insulin          |  | 3 | 107.67 ± 49.66 |         |
| Poguntano 200 mg |  | 3 | 127.33± 15.04  |         |

*one way anova. post-hoc* LSD: control vs control diabetes p<0.001; control vs insulin p=0.710; control vs poguntano 200 mg p=0.352; control diabetes vs insulin p<0.001; control diabetes vs poguntano 200 mg p<0.001; insulin vs poguntano 200 mg p=0.566 Extract ethanol of Poguntano 200 mg showed significant results (p<0.001) in lowering blood glucose in Alloxan induced diabetic rats at four week after treatment compared to control diabetic group without treatment, but did not show superior to insulin group (p=0.892).

**Table 3.** Analysis Kruskal Wallis for Endothelin-1

| Variabel         |  | n | Median (Minimum-maksimum) | p     |
|------------------|--|---|---------------------------|-------|
| Control          |  | 5 | 0.05 (0.00-0.22)          | 0.015 |
| Control diabetes |  | 5 | 1.95 (1.78-3.10)          |       |
| Insulin          |  | 5 | 0.35 (0.14-1.06)          |       |
| Poguntano 200 mg |  | 5 | 0.55(0.00-1.27)           |       |

*Kruskal-Wallis. post-hoc Mann-Whitney test* : Control vs control diabetes p=0.009; Control vs insulin p=0.0161; Control vs poguntano 200 mg p=0.072; control diabetes vs insulin p=0.009; control diabetes vs poguntano 200 mg p=0.009; insulin vs poguntano 200 mg, p=0.917

Endothelin-1 showed statistical significant between group with normal rats and diabetic control rats. (p=0.009) but did not showed significant results in the other groups. Levels of Endothelin-1 were higher in the diabetic control group with the median 1.95 (1.78-3.1) than the other groups.

**Discussion**

The main stay treatment of diabetes is diet, exercise and drugs. Drugs including insulin has been studied and used worldwide. A variety of traditional medicine has been proved empirically in lowering the blood glucose. This study showed the effect of lowering blood glucose in diabetic rats with extract ethanol

Poguntano 200 mg at 4 weeks after induction, this has also been done by Urip et al, by using extract hexane of Poguntano in diabetic rats.<sup>16</sup> Endothelin-1 was higher in the group with diabetic without any treatment this has been proved also by Krasimir Kostov et al, they showed the elevated of serum endothelin-1 in diabetes type 2 patients.<sup>25</sup> In our study the extract ethanol of Poguntano also lowering the level of Endothelin-1 in alloxan induced diabetic rats, this showed a promising study to prevent endothelial

dysfunction in alloxan induced diabetic rats

### **Conclusion**

In our study we have found that extract ethanol of Poguntano showed significant hypoglycemic activity and lowering the Endothelin-1 level in alloxan induced diabetic rats.

**Conflict of interest:** None

### **Acknowledgments**

There is no conflict of interest. This study was supported under research grant BP-PTN USU.



**References:**

1. American Diabetes Association. Diagnosis and Classification of Diabetes Mellitus. *Diabetes Care* 2009; 32 (suppl 1):S62-67. <http://doi:10.2337/dc09-S062>
2. Definition, Diagnosis and Classification of Diabetes Mellitus and its Complications. Part 1: Diagnosis and Classification of Diabetes Mellitus (WHO/NCD/NCS/99.2). Geneva: World Health Organization 1999. <http://www.who.int/iris/handle/10665/66040>
3. Francesco P, Joshua A, Beckman, Mark A, Creager, Francesco C. Diabetes and Vascular Disease Pathophysiology, Clinical Consequences, and Medical Therapy: Part I. *Circulation* 2003; 108: 1527-32. <http://doi:10.1161/01.CIR.0000091257.27563.32>
1. De Fronzo RA, Ferrannini E, Insulin resistance, A multifaceted syndrome responsible for NIDDM, obesity, hypertension, dyslipidemia, and atherosclerotic cardiovascular disease. *Diabetes Care* 1991; 14:173-94. <http://doi:10.2337/diacare.14.3.173>
4. Versari D, Daghini E, Virdis A, Ghiadoni L, Taddei S. Endothelial dysfunction as a target for prevention of cardiovascular disease. *Diabetes Care* 2009;32(Suppl. 2):S314–21. <http://doi:10.2337/dc09-S330>
5. Jansson PA. Endothelial dysfunction in insulin resistance and type 2 diabetes. *J Int Med* 2007;262:173–83. <http://doi:10.1111/j.1365-2796.2007.01830.x>
6. Kalani M. The importance of endothelin-1 for microvascular dysfunction in diabetes. *Vasc Health Risk Manag* 2008;4:1061–8. <http://doi.org/10.2147/VHRM>.
7. Lam HC. Role of endothelin in diabetic vascular complications. *Endocrine* 2001;14:277–84. <http://doi:10.1385/ENDO:14:3:277>
8. Schiffrin EL. Vascular endothelin in hypertension. *Vascul Pharmacol* 2005;43:19–29. <http://doi:10.1016/j.vph.2005.03.004>
9. Advive Ergul. Endothelin-1 and diabetic complications: Focus on the vasculature. *Pharmacological Research* 2011; 63:477-82. <http://doi:10.1016/j.phrs.2011.01.012>
10. Joshua A, Beckman I, Francesco P, Francesco C, Mark A, Crager. Diabetes and vascular disease: pathophysiology clinical consequences, and medical therapy: part II. *European Heart Journal Advance Access* 2013. <http://doi:10.1093/eurheartj/eh149>
11. Ley SH, Hamdy, Mohan V, Hu FB. Prevention and management of type 2 diabetes: dietary components and nutritional strategies. *Lancet* 2014; 383(9933):1999–2007. [http://doi:10.1016/S0140-6736\(14\)60613-9](http://doi:10.1016/S0140-6736(14)60613-9).
2. Nishida C, Uauy R, Kumanyika S, Shetty P. The joint WHO/FAO expert consultation on diet, nutrition and the prevention of chronic diseases: process, product and policy implications. *Public Health Nutr* 2004; 7(1A):245-50. <http://doi:10.1079/PHN2003592>
3. Ministry of Health Indonesia about Traditional Medicine Number 381/MENKES/SK III/2007 Jakarta.
4. Fabrican DS, and Farsworth N.R, The Value of Plants Used in Traditional Medicine for Drug Discovery, *Environmental Health Perspectives* 2001; 109, 69-75. <http://ehpnet1.niehs.nih.gov/docs/2000/suppl-1/69-75/fabricant/abstract.html>
5. Sitorus P, Urip H, Pandapotan M, Barus T. Isolation of  $\beta$ -sitosterol from n-hexane Extract of *Picris fel-terrae* Lour. Leave and Study of Its Antidiabetic effect in Alloxan induced Diabetic Mice. *International Journal of PharmTech research* 2014; Vol 6(1):137-41. [http://Int.J.PharmTech Res.2014,6\(1\),pp 137-141](http://Int.J.PharmTech Res.2014,6(1),pp 137-141)
6. Huang, Y., Cimanga, Kanyanga, Lasure, A., Poel, Van, B., Pieters, Luc, Berghe, Vanden, Dirk, Vlietinck, and Arnold., Biological activities of *Picria fel-terrae* Lour. *Pharmacy World and Science: Supplement*, 1994, 16(6): 18. <http://doi:10.1007/BF01871235>
7. Harahap U dkk., Profil Fitokimia Ekstrak Etanol Daun Poguntano yang Berpotensi sebagai Anti Asma. *Seminar Sains & Teknologi V Lembaga Penelitian Universitas Lampung* 2013.
8. Jaya Kumari S, Sangeetha M, Pavithra R. A Retrospective Review on Indian Traditional Herbs and its Biocompounds in Diabetes, *International Journal of PharmTech Research*, 2016 ; 9 (5): 444-60. [http://International Journal of PharmTech Research, 2016,9\(5\),pp 444-460](http://International Journal of PharmTech Research, 2016,9(5),pp 444-460).
9. Mainal Furqan., Sumadio Hadisahputra., Rosidah., Effects of Inhibition Cell Cycle and Apoptosis of Poguntano leaves Ethylacetate Extract (*Picria fel-terrae* Lour.) on Breast Cancer Cells, *International Journal of PharmTech Research* 2014;6 (3): 1096-99. [http://Int.J. PharmTech Res.2014,6\(3\),pp 1096-1099](http://Int.J. PharmTech Res.2014,6(3),pp 1096-1099)
10. Food and Drug Administration Indonesia. Standarization extract of traditional plants. *Info POM* 2005 vol 6 no 4.
11. Chougale DA, Shrimant N, Pradep. M.G, Akalpita, AU. Optimization of Alloxan Dose is Essential to Induce Stable Diabetes for Prolonged Period. *Asian Journal of Biochemistry.*, 2007 ; 2(6): 402-408.<http://doi:ajb.2007.402.408>
12. Gupta V, Jadhav JK, Masirkar VJ., Deshmukh VN. Antihyperglycemic effect of *Diospyros melanoxylon* (Roxb.) bark against Alloxan induced diabetic rats, *International Journal of PharmTech Research* 2009; 1 (2): 196-200. [http://Int.J.PharmTech Res.2009,1\(2\)](http://Int.J.PharmTech Res.2009,1(2))
13. Lenzen S. The mechanisms of alloxan and streptozotocin induced diabetes. *Diabetologica* 2008; 51: 216-226. <http://doi:10.1007/s00125-007-0886-7>
14. Krasimir K, Alexander B, Anelia D, Milena A. Serum Concentrations of Endothelin-1 and Matrix Metalloproteinases-2, -9 in Pre-Hypertensive and Hypertensive Patients with Type 2 Diabetes. *International Journal of Molecular Science* 2016 ;17(8):1182. <http://doi:10.3390/ijms17081182>