

Evaluation of *In-vitro* & *In-vivo* Hepatoprotective Potential of *Ficus benjamina* Linn. against CCl₄ Induced Toxicity

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Abstract: The present study evaluated the *Ficus benjamina* /pukar plant (Moraceae) for its possible hepatoprotective potential. Powdered crude drug 100 g were successively extracted in a soxhlet apparatus with petroleum ether (60-80°C), chloroform and methanol. After successive solvents extraction chloroform and the methanolic extract was used for testing of hepatoprotective potential using carbon tetrachloride (CCl₄) induced liver injury in mice. Phytochemical analysis showed the presence of glycosides, alkaloids flavonoids, triterpenoids, saponins and Phenolic compounds in a high level. Silymarin was used as a standard reference and exhibited significant hepatoprotective activity against carbon tetrachloride-induced hepatotoxicity in rats. Treatment of mice with methanolic extract of leaves of *Ficus benjamina* Linn at a dose of 400mg/kg body weight, exhibited a significant reduction in CCl₄ induced elevation of SGPT (150.0±1.61U/L), SGOT (126.5±1.37U/L), ALT (63.86±1.58U/L), ALP (389.0±1.543U/L) and Total Bilirubin (0.53±0.02mg/dl). Thus it can be concluded that the leaves of *Ficus benjamina* L contain significant hepatoprotective properties, which is possibly due to the presence of flavonoids or phenolic compounds.

Keywords: *Ficus benjamina* Linn. Pukar, Hepatoprotective activity, Carbon tetrachloride.

INTRODUCTION

The liver regulates various important metabolic functions. It plays a major role in the detoxification and excretion of many endogenous and exogenous compounds and injury to it or impairment of its functions may lead to many implications on one health. The liver filters harmful substances from the blood and regulates hormones, vitamins, and sugar¹.

Ficus benjamina is an annual herb in the family of Moraceae. The plant is known locally as "bringing, waringin and jejawi"². The leaves, roots, bark, and fruits of *Ficus* are said to be widely used in folk medicine³. It is traditionally used as a stomachic, hypotensive and anti-dysentery agent. Figs were traditionally used to treat constipation and bronchitis⁴. Traditionally, *Ficus benjamina* is used for bronchitis, wound healing, and analgesic and in liver diseases. (materia) The literature revealed that plants containing flavonoids and Phenolic compounds were responsible for the hepatoprotective activity and the selected plant (*Ficus benjamina*) also had these constituents so it was hypothesized that it may also be able to protect the liver⁵. However, there is no scientific basis or reports in the modern literature regarding its usefulness as a hepatoprotective agent. Thus, the present study was conducted to evaluate the hepatoprotective activity of the methanolic extract of the FB by using CCl₄-induced hepatic injury in mice. So, I worked on the hepatoprotective activity of *Ficus benjamina*⁶.

MATERIALS AND METHODS

Animals

The animal study was performed in VNS institute of pharmacy Bhopal. Adult mice (50-80 g) of either sex used in the experiment were allowed to acclimatize to the laboratory conditions for 7 days in plastic bottom hygiene cages prior to the commencement of the experiment at a temperature of $30\pm 2^{\circ}$ C the animals were maintained with a balanced diet and water *ad libitum*.

Drugs and chemicals

Silymarin used was a triturated tablet (siliban-70) available in the open market. CCl_4 was purchased from Central Drug House (P) Ltd, New Delhi. Diagnostic kits used for the estimation of SGOT, SGPT and total bilirubin were obtained from Star diagnostics. All chemicals used for the experiments were of analytical grade.

Procurement of diagnostic kit and chemicals

Diagnostic kits used for the estimation of SGOT, SGPT, AST, ALP and total bilirubin were obtained from Star diagnostics. All chemicals used for the experiments were of analytical grade.

Plant Material

The fresh leaves of *Ficus benjamina* Linn were collected in November 2019 from the Paryavaas Bhavan, Bhopal (M.P.). The plant material were authenticated by professor Dr. (Mr.) Zia-ulHussen, Assistant Professor, Department of Botany, Saifia College of Science, Peer Gate, and Bhopal (M.P.). Voucher specimen No.: 132/Bot/Safia/2019.

Preparation of extracts

The shade-dried, coarse-powdered plants were successively extracted in a Soxhlet apparatus with petroleum ether, chloroform, and methanol. (Harborne)⁷. The extracts were concentrated to dryness in a vacuum or rotary evaporator to give petroleum ether extract (yield: 2.28), chloroform extract (yield: 4.37) and methanol extract (yield: 12.33).

Phytochemical studies

Freshly prepared extracts were subjected to a phytochemical screening test for the detection of various constituents using the conventional protocol.⁸

EXPERIMENTAL DESIGN

Hepatoprotective activity

Preparation of Extract

The dosage form was made in 0.3% carboxy methyl cellulose. 1gm of, chloroform and methanolic extracts were taken in the mortar and pestle and triturated with 10 ml of 0.3% CMC solution continuously to get homogenous suspensions being a concentration of 100 mg/ml of drug in each case. Suspensions were stored in airtight bottles in a cool place. Silymarin suspension (**Silybon**) was also take-up for study⁹.

1.1 Animals

The animal study was performed in VNS institute of pharmacy Bhopal. Adult mice (50-80 g) of either sex used in the experiment were allowed to acclimatize to the laboratory conditions for 7 days in plastic bottom hygiene cages prior to the commencement of the experiment at a temperature of $30\pm 2^{\circ}$ C the animals were maintained with a balanced diet and water *ad libitum*. Animals were divided into 5 groups of six rats each and all the testing drugs were administered intraperitoneally at the calculated dose¹⁰. The procedures were reviewed and approved by the Institutional Animal Ethics Committee (Registration No.778/03/c/CPCSEA).

Animals were divided into 5 groups of six rats each and all the testing drugs were administered intraperitoneally at the calculated dose. Group, I served as normal control and received 0.3% Carboxy methyl cellulose (1ml/kg p.o.) once daily for 7 days. Group II served as the treated negative control group receiving CCl_4 and olive oil (50% v/v, 0.5ml/kg) once daily for 7 days. Group III served as standard reference and received a mixture of CCl_4 and olive oil and the standard drug Silymarin (200mg/kg p.o.)

simultaneously for 7 days. Group IV received a mixture of CCl₄ and olive oil and Chloroform extract of *Ficusbenjamina* (400mg/kg)¹¹. Group V received a mixture of CCl₄ and olive oil and methanolic extract of *Ficus benjamina* (400mg/kg) simultaneously for 7 days. On the 8th day blood was collected directly from the cardiac puncture of all mice and serum was separated by centrifugation at 3000 rpm at 30^oC for 15 min. and analyzed for different biochemical analysis¹².

Statistical Analysis

The activities of serum hepatic marker enzymes namely alanine aminotransferase (ALT), Serum Glutamic Pyruvate Transaminase(SGPT), and Serum Glutamic Oxaloacetic Transaminase (SGOT) were assayed in serum using a standard kit. The results were expressed as units/liter (U/L).[Friedman]Results of biochemical parameters are reported as mean ±S.E.M. Statistical significance was determined by one-way analysis of variance followed by Student’s t-test¹³

RESULTS

CCl₄ damaged the hepatocytes too much, which results in necrosis. In CCl₄ control (group II) showed a significant (*P <0.001) increase in liver enzyme parameters as compared to control animals (group I, normal)(Table1). Serum Glutamic Pyruvate Transaminase (SGPT) (399.2±1.75U/L), Serum Glutamic Oxaloacetic Transaminase (SGOT) (391.2±1.14 U/L), Alanine aminotransferase (ALT) (254.0±1.68 U/L), ALP (941.4±1.116) and Total Bilirubin (2.017±0.015mg/dl) concentration as compared to the normal control group (110.1±0.964, 96.29±1.33U/L, 57.90±1.097 U/L, 389.8±2.04 U/L, 0.44±0.015mg/dl respectably). Treatment of mice with chloroform and methanolic extracts of leaves of *Ficusbenjamina* Linn at a dose of 400mg/kg body weight, exhibited a significant reduction in CCl₄-induced elevation of SGPT (171.9±1.39U/L, 150.0±1.61U/L), SGOT (211.3±1.67U/L, 126.5±1.37U/L), ALT (55.69±2.05U/L, 63.86±1.58U/L),ALP (408.5±1.74U/L, 389.0±1.543U/L) and Total Bilirubin (0.61±0.28mg/dl, 0.53±0.02mg/dl) (Table 2).Administration of silymarin suspension, methanolic and aqueous extracts of leaves of *Ficusbenjamina* at the respective dose remarkably prevented CCl₄-induced elevation of serum SGOT, SGPT, ALP, ALT and T. Bilirubin levels(Fig 1-4). The aqueous portion was shown to possess good hepatoprotective activity. Reduction in levels of serum SGOT, SGPT, ALP, ALT and T. Bilirubin close to normal value is an indication of stabilization of plasma membrane as well as repair of hepatic tissue damage caused by CCl₄. Lowering of all enzyme level i.e. SGPT, SGOT, Bilirubin and ALP confirm the hepatoprotective activity of *Ficusbenjamina*(Fig 1-4). In histopathological changes of CCl₄ control (group II) reflects the areas of hydropic changes and degeneration of hepatocytes and congestion of the sinusoids, necrosis and central veins are present (Fig.7) when compared with control group (I) (reveals normal liver structure with normal central vein, sinusoids are normal, the hepatocytes are healthy, shown regular under surface without any evidence of hemorrhage and necrosis). (Fig. 6)

In histopathological changes of Silymarin and CCl₄ group (III) showed recovery of hepatocytes, lesser necrosis, and well-identified nucleus also as compared to control (group I) (Fig. 8).In histopathological studies of methanolic extract, the hepatocytes are radially arranged. The vacuolation is present but is very much similar to that of normal(Fig. 9).. The hepatocytes are mostly normal but have few vacuoles and some damaged cells, but the extent of the area of necrotic cells located in this region was considerably reduced. There seems to be an appreciable recovery. (Fig.10)

Table: 1 Effect of methanolic Extract of FB on Liver Enzyme Parameters (On 8th Day)

Groups/ Parameter	Control(I)	CCl ₄ (0.5ml/ kg wt.)(II)	Silymarin+ CCl ₄ (III)	methanol extract+ CCl ₄ (400mg) (IV)
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SGOT (U/L)	96.29±1.33	391.2±1.14*	124.6±2.07**	126.5±1.37**
SGPT (U/L)	110.1±0.964	399.2±1.75*	146.0±1.89**	150.0±1.61**
ALP (U/L)	389.8±2.04	941.4±1.116*	293.1±2.43**	389.0±1.543**
ALT (U/L)	57.90±1.097	254.0±1.68*	65.37±1.99**	63.86±1.58**
Total Bilirubin	0.44±0.015	2.017±0.015	0.513±0.17	0.53±0.02

N = 6 albino rats per group, tabular value represents mean ±SEM, *p<0.001,

*p<0.001, (Comparison of group I with II)

**p<0.001, (Comparison of group II with Group III and IV)

Table: 2 Effect of chloroform Extract of FB on Liver Enzyme Parameters (On 8th Day)

Groups/ Parameters	Control(I)	CCl₄ (0.5ml/ kg body wt.)(II)	Silymarin+ CCl₄ (III)	Chloroform extract+ CCl₄ (400mg) V
U/L)	96.29±1.33	391.2±1.14*	124.6±2.07**	211.3±1.67**
U/L)	110.1±0.964	399.2±1.75*	146.0±1.89**	171.9±1.39**
/L)	389.8±2.04	941.4±1.116*	293.1±2.43**	408.5±1.74**
ALT (U/L)	57.90±1.097	254.0±1.68*	65.37±1.99**	55.69±2.05
Total Bilirubin	0.44±0.015	2.017±0.015	0.513±0.17	0.61±0.28

N = 6 albino rats per group, tabular value represents mean ±SEM, *p<0.001,

*p<0.001, (Comparison of group I with II);

**p<0.001, (Comparison of group II with Group III and V)

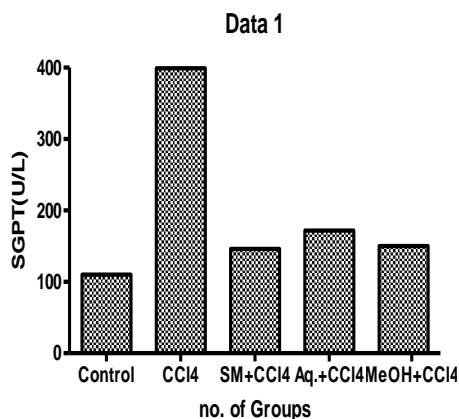


Fig.1 In-vivo studies for SGPT

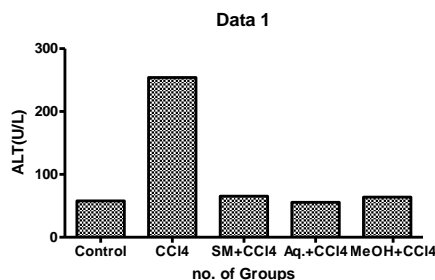


Fig.2 In-vivo studies for ALT

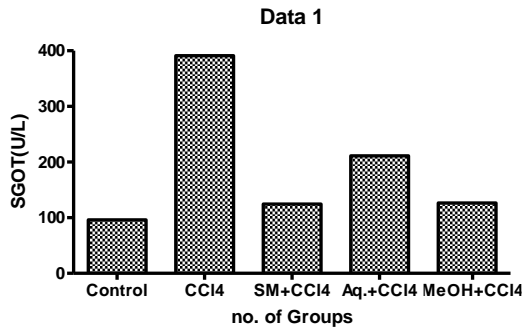


Fig.3 *In-vivo* studies for SGOT

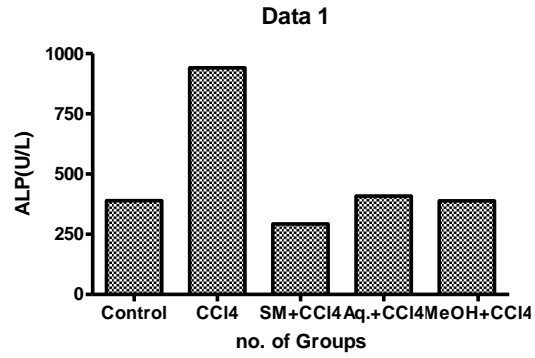


Fig.4 *In-vivo* studies for ALP

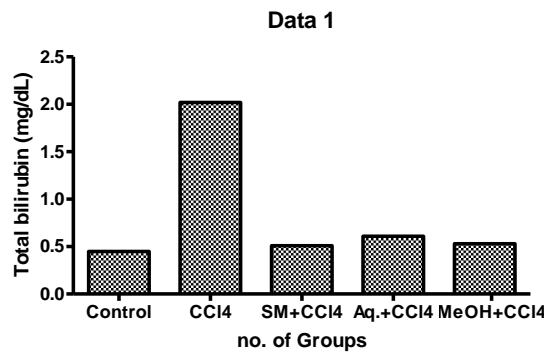


Fig.5 *In-vivo* studies for Total Bilirubin

Histopathological studies:

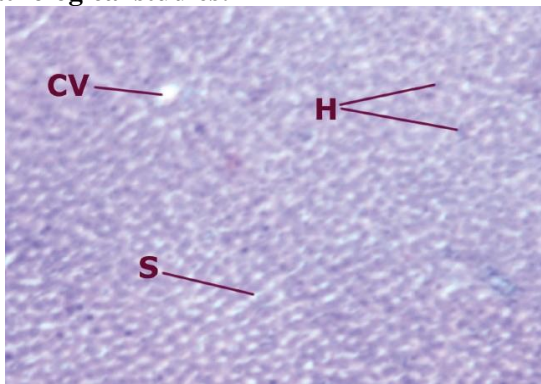


Fig.6 Control (Without any drug treatment)

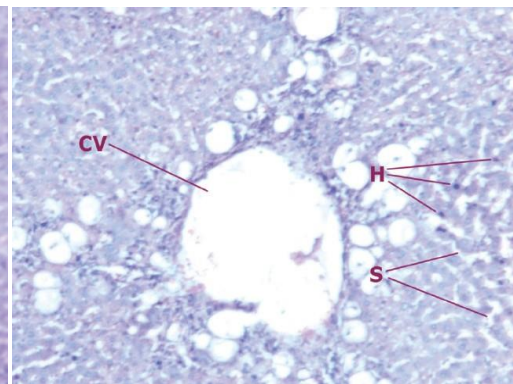


Fig.7 Carbon Tetrachloride control (CCl4)

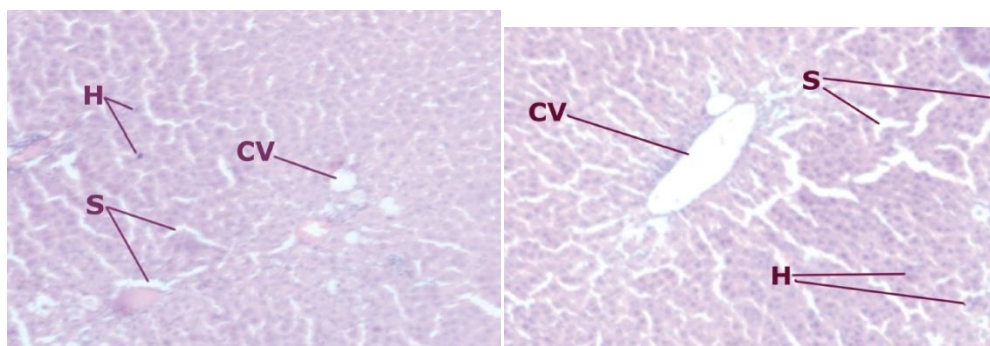


Fig 8 Silymarin+ CCl₄ (200 mg/kg + 0.50 ml/kg) **Fig. 9** Chloroform Extract of FB (400 mg) + CCl₄ treated

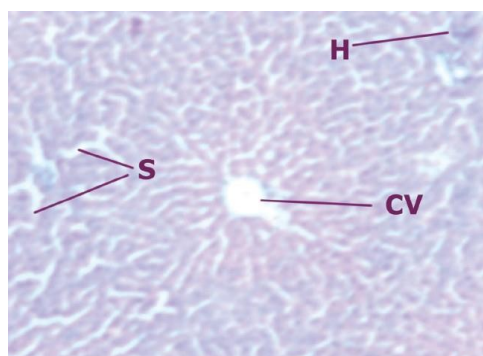


Fig. 10 Methanol Extract (400 mg) + CCl₄ treated
CP=Cytoplasm
CV=Central vein
B=Ballooning

H=Hepatocytes
N=Nucleus
NC=Necrosis

DISCUSSION

The CCl₄ is one of the most commonly used hepatotoxins in experimental study of liver disease [Johnson]. CCl₄ toxicity is dependent on one of its highly reactive products, the trichloromethyl radical (CCl₃). This radical binds covalently to the neighboring proteins and lipids and initiates lipid peroxidation that causes severe membrane alterations. Transaminase leaks out through the damaged membrane, elevating the serum level. Inhibition of CCl₄ bioactivation could reduce this toxic effect. Many compounds exhibit liver protection against CCl₄ either by decreasing the production of CCl₃ free radicals or by impairment of CCl₄-induced lipid peroxidation. A decrease in the concentration of these enzymes after treatment by various extracts of FB indicates the possibility of induced accelerated regeneration of liver cells by reducing the leakage of GPT, GOT and Bilirubin into the blood and thereby lowering their values in the serum. Serum transaminase returns to normal with the healing of liver parenchyma and regeneration of liver cells.

CONCLUSION:

These findings suggested that methanolic extract administration has significantly neutralized the toxic effect of CCl₄. Since, the preliminary phytochemical analysis of the extracts has shown the presence of flavonoids and phenolic compounds, which have been known for their hepatoprotective activity. Thus, it

can be concluded that the possible mechanism of hepatoprotective activity of *Ficus benjamina* leaves may be due to the presence of flavonoids and phenolic compounds.

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