

# **UNIVERSITI PUTRA MALAYSIA**

ANTI-INFLAMMATORY AND WOUND HEALING POTENTIAL OF Alternanthera sessilis (L.) R.Br. ex DC.'s STEM EXTRACT USING In Vitro APPROACH

# KATYAKYINI A/P MUNIANDY

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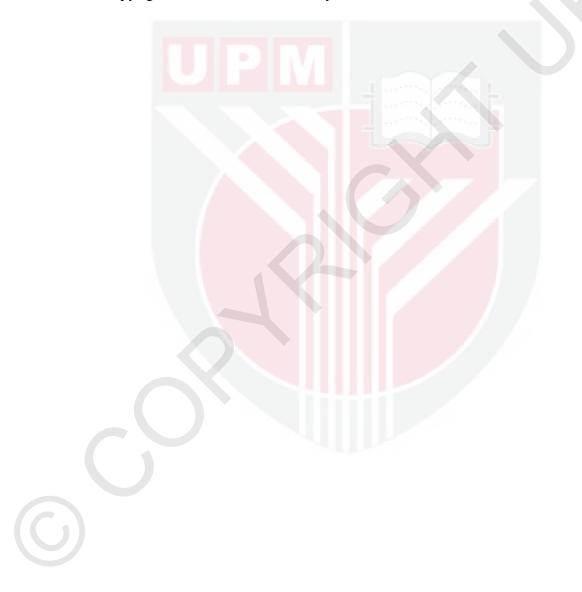
Thesis submitted to the School of Graduate Studies, Universiti Putra Malaysia in Fulfillment of the Requirements for the Degree of Master of Science

May 2018

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Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfillment of the requirements of the degree of Master of Science

## ANTI-INFLAMMATORY AND WOUND HEALING POTENTIAL OF Alternanthera sessilis (L.) R.Br. ex DC.'s STEM EXTRACT USING In Vitro APPROACH

By

## KATYAKYINI A/P MUNIANDY

May 2018

Chairman: Associate Professor Suresh Kumar Subbiah, PhDFaculty: Institute of Bioscience

Impaired wound healing, especially among the diabetic patients has become a major health problem and it is even more frightening with the tremendous increase in the prevalence of diabetic population worldwide. Factors such as the generation of a high amount of oxidative stress and prolonged inflammation than usual results in the delay of the healing process, therefore these factors need to be amended for an effective healing process. Currently, there are many treatments to overcome the wound healing problem, but unfortunately, most of them have some drawbacks such as the development of allergic reactions and high cost of treatment. Therefore, it was an idea to venture into natural product based treatments to enhance the healing rate. In the study conducted, Alternanthera sessilis, which was an edible functional food that is abundantly found in tropical countries, was chosen as the candidate to evaluate for its anti-inflammatory mechanism and wound healing activity on keratinocytes and normal fibroblast as well as diabetic human dermal fibroblast. The present study assessed the prepared ethanolic crude extract of stem part of A. sessilis. For the antiinflammatory properties, lipopolysaccharide (LPS)-stimulated RAW 264.7 macrophages was used as the best *in vitro* model. As the key inflammatory parameters, including the production of nitric oxide (NO), the cytokines such prostaglandin E2 (PGE<sub>2</sub>), interleukin (IL)-6, interleukin (IL)-1 $\beta$  and tumor necrosis factor (TNF)- $\alpha$  as well as the mediators such as cyclooxygenase (COX-2) and inducible nitric oxide synthase (iNOS) were evaluated via Griess reagent, Enzyme-Linked Immunosorbent Assay (ELISA) and Western Blot respectively. The effect of the extract on the activity of Nuclear factor-kappa-B (NF-KB) pathway using immunofluorescence and western blot techniques were examined. Subsequently, the wound healing activity involved the evaluation of cell migration on keratinocytes and fibroblast (normal and diabetic) using a scratch assay and the antioxidant activity was estimated using DPPH scavenging assay. Moreover, hyphenated techniques, Gas chromatography-mass



spectrometry (GC-MS) and Liquid chromatography-mass spectrometry (LC-MS) were used for the identification of the biochemical components present in the extract. From the conducted study, it is proven that crude extract of stem of *A. sessilis* supports wound healing process by exhibiting anti-inflammatory properties by suppressing proinflammatory parameters via the NF- $\kappa$ B pathway in a dose-dependent manner.

(

Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk ijazah Master Sains

## SIFAT ANTI-RADANG DAN PENYEMBUHAHAN LUKA DARI EKTRAK BATANG Alternanthera sessilis (L.) R.Br. ex DC MENGGUNAKAN KAJIAN In Vitro

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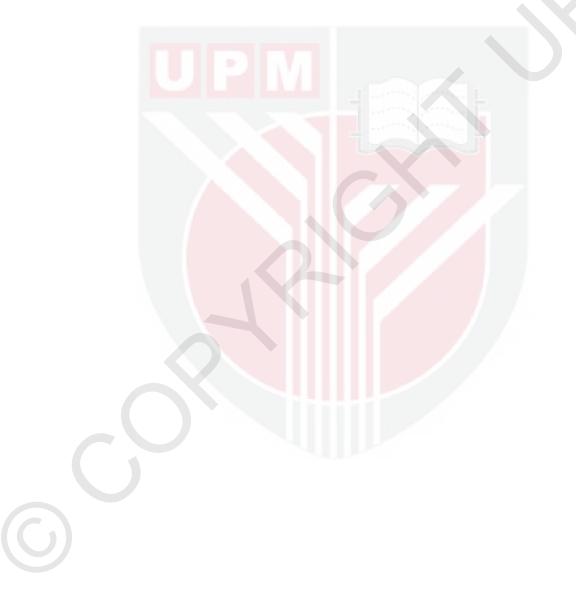
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Pengerusi : Profesor Madya Suresh Kumar Subbiah, PhD Fakulti : Institut Biosains

Kemerosotan proses penyembuhan luka, terutamanya dalam kalangan pesakit diabetes telah menjadi suatu masalah kesihatan yang utama, dan perkara ini lebih membimbangkan dengan kadar populasi pesakit diabetes yang kian meningkat di seluruh dunia. Faktor-faktor seperti penjanaan tekanan oksidatif yang tinggi dan keradangan yang berpanjangan pada kadar yang luar biasa, boleh menyebabkan kelewatan proses penyembuhan. Oleh hal yang demikian, ciri-ciri tersebut perlu diseimbangkan untuk menjamin proses penyembuhan yang berkesan. Pada masa ini, terdapat pelbagai jenis rawatan untuk mengatasi masalah penyembuhan luka, malangnya, kebanyakan rawatan yang sedia ada mempunyai kekurangan masingmasing seperti alahan dan kos terapi yang tinggi. Oleh itu, rawatan berasaskan produk semulajadi dipercayai untuk meningkatkan kadar penyembuhan luka. Dalam kajian yang dijalankan, Alternanthera sessilis (Kermak putih), sejenis sayuran yang boleh dimakan dan boleh didapati dengan banyak di kawasan tropika telah digunakan. A. sessilis telah digunakan sebagai calon uji kaji untuk menilai mekanisma anti-radang dan penyembuhan luka berdasarkan model sel kulit keratinosit, sel fibroblas normal beserta sel fibroblas diabetes. Kajian ini meliputi eksperimen yang menggunakan ekstrak etanol yang disediakan daripada bahagian batang A. sessilis. Makrofaj yang diaktifkan menggunakan lipopolisakarida (LPS) telah digunakan sebagai model in vitro bagi eksperimen berasaskan sifat anti-radang. Parameter pro-radang yang utama seperti penghasilan nitric oxide (NO), sitokin seperti prostaglandin E2 (PGE<sub>2</sub>), interleukin (IL) -6, interleukin (IL) -1β, faktor nekrosis tumor (TNF) -α dan juga pengantara mekanisma keradangan seperti enzim cyclooxygenase (COX-2) dan synthase oxide nitric oxide (iNOS) telah diuji melalui penilaian bahan uji Griess, Asai imunojerapan berpaut (ELISA) dan pemedapan Western. Kami juga telah mengkaji kesan ekstrak terhadap aktiviti laluan mekanisma nuclear faktor-kappa-B (NF-κB) menggunakan teknik imunopendarfluor dan pemedapan Western. Selanjutnya, aktiviti



penyembuhan luka telah dinilai berdasarkan migrasi sel keratinosit dan fibroblas (normal dan diabetes) menggunakan asai calaran manakala aktiviti antipengoksida telah dianggarkan menggunakan asai radikal bebas DPPH. Selain itu, teknik Kromatografi Gas-Spektrometer Jisim (GC-MS) dan Kromatografi Cecair-Spektrometer Jisim (LC-MS) telah digunakan untuk mengenalpasti komponen bioaktif yang terdapat dalam ekstrak ini. Berdasarkan kajian yang dijalankan, keputusan menunjukkan bahawa ekstrak mentah batang *A. sessilis* menyokong proses penyembuhan luka dengan memperlihatkan sifat antiradang dengan penurunan parameter keradangan yang ketara, bersandarkan dos ekstrak melalui mekanisma NF-KB.



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This thesis was submitted to the Senate of the Universiti Putra Malaysia and has been accepted as fulfilment of the requirement for the degree of Master of Science. The members of the Supervisory Committee were as follows:

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# LIST OF ABBREVIATIONS

%	Percentage
°C	Degree celcius
$\cdot O^{-2}$	Superoxide
<	Less than
>	More than
×	Dilution/ Times
×g	Times gravity
2	More than and equal to
μm	Micrometer
μΜ	Micromolar
A. sessilis	Alternanthera sessilis
APS	Ammonium Persulphate
CO <sup>2</sup>	Carbon dioxide
COX-2	Cyclooxygenase
DFU	Diabetic Foot Ulcer
DMEM	Dulbecco's Modified Eagle's Medium
DMSO	Dimethyl sulfoxide
DPPH	2,2-diphenyl-1-picrylhydrazyl
Eg	Example
FBS	Fetal bovine serum
FITC	Fluorescein
g	Gram
g/L	Gram per liter
G1	Group 1

	G2	Group 2
	GF	Growth factor
	h	Hour
	HaCaT	Keratinocytes
	HDF-D	Diabetic Human Dermal Fibroblast
	ICC	Immunocytochemistry
	ICU	Intensive Care Unit
	iKB α	Nuclear factor of kappa light polypeptide gene enhancer in B- cells inhibitor, alpha)
	IKKs	Inhibitory kappa B kinases
	IL	Interleukin
	IL-1 β	Interleukin-1B
	IL-6	Interleukin-6
	L	Liter
	LPS	Lipopolysaccharide
	LYM	Lymphocytes
	min	Minute
	mL	Milliliter
	mm	Millimeter
	mm <sup>3</sup>	Millimeter cube
	MTT	3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide
	n	Number
	NF-ĸB	Nuclear factor kappa beta
	HDF	Human Dermal Fibroblast
	NO	Nitric oxide
	PBS	Phosphate buffer saline

PBS	Phosphate Buffer Saline
PGE <sub>2</sub>	Prostaglandin E2
ROS	Reactive oxygen species
VEGF	Vascular endothelial growth factor
VEGFR	Vascular endothelial growth factor receptor
WBC	White blood cells
WHO	World Health Organization
SDS	Sodium dodecyl sulfate
TEMED	Tetramethylethylenediamine
PRRs	Pattern recognition receptors
PAMP	Pathogen-associated molecular patterns
DAMPs	Damage-associated molecular patterns
TLRs	Tol-like receptors
Versus	vs

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## **CHAPTER 1**

#### **INTRODUCTION**

#### 1.1 Background

The wound is defined as the damage occurring on the surface of epithelial and its underlying connective tissues. The rupture of the layer should be amended immediately to prevent the entry of any notorious agents via the broken skin to the body system as in severe cases, it may give a chance for the incidence of systematic inflammation that affects the whole system, which can be fatal. Systemic inflammation is one of the leading cause of mortality all over the world, and in Malaysia alone, according to the Malaysian Registry of Intensive Care, mentioned that sepsis (systemic inflammation) was the most common diagnosis leading to admission to intensive care units (ICU) in Health Ministry hospitals in 2011 (Lum., 2015). The normal physiology of wound healing involved four highly integrated phases, comprised of homeostasis, inflammation, proliferation and remodeling (Nicolaus et al., 2017). Hemostatic involves the process of formation of the clot to avoid any further loss of blood. The second event is the inflammation which the body immune system protects the body from infections from bacteria. Upon the clearance of the foreign substances from the system, the inflammatory process will be regulated into its normal level. This paves the path for the following phase of healing. The following phase, the third phase of wound healing process is the proliferation of cell to form a closure to the wound. Rapid migration of cell accompanied with good collagen formation is vital in this phase to produce good tensile strength on the skin.

An interruption in the normal phases of the physiology of healing process results in the delay in wound healing and it is one of the main challenges faced by the healthcare system. Delayed wound healing is more prominent among the diabetic patients with a statistic displayed that quarter of the diabetic patients are possible of developing foot ulcer (chronic wound healing) (Wardecki et al., 2016). It has become a major health complication with the tremendous increase in the prevalence of diabetic population worldwide, and according to the World Health Organization (2016), it was reported that 422 million adults were living with diabetes in 2014, compared to 108 million in the year 1980 which showed the increase from 4.7% to 8.5% in the adult population around the world (WHO, 2016). Another earlier study by the World Health Organization (2011) mentioned that this metabolic disease is estimated to rise from 171 million to 366 million in the year 2030 (Tam et al., 2011), which means it was predicted to be doubled in 15 years of time. Tactlessly, a current international piece of data showed that the number of diabetic patients achieved earlier than the estimated number for the next 16 years; because in the year 2014 itself the number of diabetic patients has surpassed the estimated number of diabetic patients for the year 2030. When the study is focused on Malaysia, there are about 3.5 million of the population having this metabolic disease (Bernama, 2016).

Some of the major factors that affect the healing ability among the diabetic patients are, the easy colonization of bacteria and the generation of a high amount of oxidative stress that results in the prolonged inflammatory phase than usual (Wardecki et al., 2016), that hinders the healing process to progress to the next healing step which is proliferative phase. Not only diabetic patients, but individuals with no diabetic complication also may experience wound healing problem because high glucose level is not the only systemic factor that affects wound healing. Other factors such as the age, medication, hormone, obesity, nutrition, stress and unhealthy practices such as smoking and alcohol consumption have impacts on wound healing mechanism. However, the systemic factors give impacts on the healing process through the local factors be it infection or lowered angiogenesis that ultimately prolongs the inflammatory process that has the direct impact of the wound (Guo and DiPietro, 2010).

Inflammation is a part of our immune system's process that is essential for the protective purpose of the body system (Kang et al., 2012). At the early stage of inflammation, immune cells are found to be in a high amount as they play a role in safeguarding the wound from contamination by phagocytosis but a high number of them when it is unregulated, give negative influence towards wound repair as their proteases such as elastase degrades most of the extracellular matrix components (Reed & Kita, 2004). Besides, they also produce a large amount of nitric oxide, a free oxygen radical that can generate oxidative stress on the wound which is involved in the pathogenesis of inflammation so the level of inflammatory entities should be reduced for a faster wound healing process (Dunnill et al., 2017). Apart from this, macrophage is the key immune cell in the regulation of inflammation by producing inflammatory cytokines, mediator, as well as growth factors. These products are important to regulate the inflammation to a normal state (Yun et al., 2015) as the overproduction of inflammation delays healing process thus pro-inflammatory cytokines need to be down-regulated as it is an affecting factor for efficient wound healing process. Nuclear Factor-Kappa B (NF-kB) pathway is a key inflammatory signalling pathway that regulates the expression of inflammatory mediators and to repress the pathway is the target for many anti-inflammatory studies (Khan et al., 2014).

Keratinocytes and fibroblast are the major constituents of the main layers of skin that are involved in wound closure mechanism (Wojtowicz et al., 2014). Fibroblast isolated from diabetic type II patient resembles the *in vitro* model of diabetic wound healing. Once the inflammatory is regulated into its original state, the skin cells would undergo the proliferation as well as migration to form a wound closure. This grades the healing process.

## **1.2 Problem statement**

In the current vascular surgery practice, diabetes and chronic wound remain as the leading cause (about 82%) for an individual to necessitate amputation (Johannesson et al., 2009; Pemayun et al., 2015). However, this undesirable circumstance can be

prevented if the wound can be cured, therefore, wound healing has become a significantly important subject of present research. The major problem in a non-healing wound is the lengthy inflammatory phase interrupts the healing cycle by preventing the wound to properly commencing to the next recovery step. The parameters that mark the occurrence of inflammation are the elevated level of pro-inflammatory cytokines and mediators (Monastero & Penthyala., 2017). These entities should be regulated by amending the inflammatory signalling pathway which is the NF-kB, for an effective wound closure process that involves the skin cells proliferation and migration (Song et al., 2017).

Currently, there are many solutions available to overcome wound healing problem, such as antibiotics to kill the bacteria, hyperbaric oxygen therapy to supply and nourish the tissue with sufficient oxygen, and maggot therapy, *Lucilia (Phaenicia) sericata* for debridement purpose to promote rapid healing (Sherman, 2014) and many topical creams such as Santyl, Accuzyme, silver sulfadiazine, fusidic acid and bacitracin-zinc ointment are available (Han et al., 2009; Park et al., 2017). Unfortunately, most of them have their own drawbacks such as the development of resistance by bacteria, high expenses of treatment, unwillingness due to disgust and the occurrence of allergic reactions respectively, that may vary from individuals, attributable to the difference in their sensitivity reactions and health backgrounds, respectively (Roses, 2000).

### **1.3** Significance of study

In line with that, it was an attempt to venture into natural based therapy yet an assessable source to study its regulatory potential towards the factors affecting the healing process. Therefore, Alternanthera sessilis was chosen as the sample in the study. It is commonly eaten as vegetable in many countries around the world. Besides, it has been used as a traditional remedy by folk healers for the past few centuries for the cure of many illnesses, such as headache, snake bites, febrifuge, and made into decoction to be taken orally to treat cough and gastrointestinal problem such as diarrhea. It has an excellent coolant effect that was commonly used for hair, eyes and skin health in general (Walter et al., 2014). Besides, it was also reported to have antibacterial, anti-diabetic, antioxidant, anti-allergic, anti-analgesic as well as antiinflammatory and wound healing properties (Jalalpure et al., 2008; Tan & Kim., 2012; Phusricom et al., 2013; Rayees et al., 2013; Mondal et al., 2014; Subhashini et al., Jalalpure et al., 2011). The extract was reported to be effective against including bacteria Bacillus pumillus, Salmonella typhi, Bacillus subtilis, Escherichia coli, Staphylococcus aureus, Enterococcus faecalis, Klebsiella pneumonia, and fungus Aspergillus fumigatus that were commonly found in unhealed wound. Besides, the antioxidant capacity of the extract acts as a protectant for the cells against the damage from radicals which is helpful for the healing process.



Moreover, anti-inflammatory related constitutes such as epigallocatechin, catechin, chlorogenic acid, 4-hydroxybenzoic, apigenin, vanillic acid, ferulic acid, ethyl gallate, and daidzein were reported to be found in this plant hence, all these characteristics may validate the usage of this vegetable for this field of study (Othman et al., 2016). For the previous conducted study on the anti-inflammatory and wound healing studies, it involved the usage of leaf part of the plant and it was tested on animal model, thereby leaving a gap of research on the action mechanism of wound healing on different types of skin cell lines and inflammatory parameters associated with wound healing by targeting signaling pathway.

Furthermore, a preliminary result conducted revealed that stem part of *A. sessilis* showed the best wound healing properties compared to leaves and aerial parts of the plant, therefore stem part was chosen as the best candidate to carry out the investigation. Moreover, edible plants based therapy is also believed to be minimally toxic (Chiang et al., 2017). Therefore, this examination possibly will bridge the therapeutic gap that is important for diabetic wound healing. With the information from previous studies, it is believed that *A. sessilis* is a potential candidate to be further studied for the assessment of wound healing activity along with its ability to suppress pro-inflammatory cytokines and inflammatory mediators, vital for normal skin growth physiology.

## 1.4 Objectives

## 1.4.1 General Objective

To determine the anti-inflammatory and wound healing properties of stem extract of *A. sessilis* on RAW 264.7 cells and skin cells of normal and diabetic isolated, respectively.

## 1.4.2 Specific Objectives

- i To evaluate the anti-inflammatory properties of stem extract of *A. sessilis* through *in vitro* based experiments.
- ii To investigate the wound healing activities of stem extract of *A. sessilis* on skin cells; keratinocytes, normal dermal fibroblast and diabetic human dermal fibroblast cells.

# 1.5 Hypothesis

# 1.5.1 Null Hypothesis

Stem extract of *A. sessilis* has no significant role in anti-inflammatory and wound healing properties.

# **1.5.2** Alternative Hypothesis

Stem extract of *A. sessilis* has significant role in anti-inflammatory and wound healing properties. These properties will provide strong rationale to identify the responsible bioactive compounds for diabetic wound healing.



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