Hypolipidemic properties of the methanol leafy extracts of *Pupalia lappacea and Morinda lucida* on diet-induced lipidemic albino wister rats: A comparative analysis

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Abstract

Introduction

Comparative hypolipidemic properties of methanol extracts of Pupalia lappacea and Morinda lucida on dietinduced lipidemic rats were studied.

Methodology: Thirty (30) rats weighing between $180g-200g \pm 20g$ were assigned into six (6) groups having five (5) animals per group according to their weight (X ± 20 g). Group A was the normal control and received normal rat pellets only, without extract and cholesterol. Group B received 1000mg/kg of cholesterol and normal rat pellets without extract. While groups C, D, E received 10mg/kg, 1000mg/kg, 1000mg/kg of the plant extract plus 1000mg/kg of cholesterol and normal rat pellets, respectively in P. lappacea model, they received 100mg/kg, 2000mg/kg and 5000mg/kg of the plant extract plus 1000mg/kg of cholesterol and normal rat pellets, respectively in M.lucida model. Group F received 5mg/kg of Fenofibrate plus 1000mg/kg of cholesterol and normal rat pellets, respectively in M.lucida model. Group F received 5mg/kg of Fenofibrate plus 1000mg/kg of cholesterol and normal rat pellets in both cases. The experiment lasted for 28days. On the 29th day, the animals were bled through retro-orbital puncture under ether anaesthesia after an overnight fast and the sera separated by centrifugation. Lipid profile (cholesterol, high density lipoprotein-HDL, low density lipoprotein-LDL and triglyceride-TAG) was analyzed according to standard methods. SPSS analytical software windows version 15 was used for statistical analysis and one way analysis of variance (ANOVA) determine differences between means, followed by Tukey's post-hoc comparisons. P < 0.05 was considered significant. Comparison of the post-treatment and baseline values was used as an index of hypolipidemic activities.

Result: There were post induction increases and post-treatment decreases in all the lipid components. The baseline and post treatment values of cholesterol in groups D (p = 0.639), E (p = 0.080) and E (p = .058) in P. lappacea and M.lucida, respectively and the LDL values across the groups (p > 0.05) in P. lappacea and in groups D (p = 0.413), E (p=0.382) and F (p = 0.938) in M.lucida showed no significant difference. The baseline and post treatment TAG values in groups D (p = 0.170), E (p = 0.340), F (p = 0.077) and D (p = 0.848), E (p = 0.122) and F (p = 0.077) in P. lappacea and M.lucida, respectively had no significant change after treatment than at baseline. **Conclusion**

Both plants extracts possess hypolipidemic activities in all the lipid components albeit at different degrees.

Key words: Hypolipidemia, High Density Lipoprotein, Low Density Lipoprotein, Cardiovascular Diseases, Phytotherapeutic Agents. <u>2,*for correspondence</u>

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I. Introduction

Recently, the prevalence of non-communicable diseases (NCDs), such as cardiovascular diseases (CVDs) and chronic obstructive pulmonary diseases (COPDs) have become an emerging pandemic globally with developing countries recording higher rates (Terzic and Waldman 2011). The World Health Organization (WHO, 2013) estimates that by 2020, NCDs will account for 80 percent of the global burden of disease, causing seven out of every ten deaths in developing countries, about half of them premature deaths of children under the age of 7 (WHO, 2013).

NCDs deaths worldwide exceed all communicable diseases death and represent an emerging global health threat (Alwan *et al* 2001). Majority of the deaths occur in low and middle-income countries where the numbers of people affected by NCDs are growing. The health systems are often not equipped to respond effectively. In developing countries where intercultural pollution has affected nutritional behaviours adversely, cardio-vascular diseases and other nutrition- related diseases are on the increase. The resultant effect is diseases that were aliens to Nigeria culture are now very common among all ages and sexes. In a culture characterized with illiteracy, fragile economic base and poor public health policies, the impact of NCDs has recently been forced into mass consciousness as the death tolls associated with these diseases affect virtually every family. There is an urgent need to look inwards and begin to manage the diseases with locally available resources. The plant kingdom holds a strong promise to this quest as many tropical plants have been reported to be efficacious in the management of tropical disease(Inya-Agha et al 2006, Igoli *et al.*, 2006), if scientists can direct research beam to herbal plants, with the aim to establishing their phytochemical and nutritional compositions that may be harnessed in ethno medicine.

In Nigeria as with other developing countries of the world, the morbidity and mortality of NCDS have become more glaring(Opadijo 2004) owing to a lot of factors, including socio-economy, inadequate primary healthcare delivery and illiteracy, to mention but a few. With the prevailing economic recession in Nigeria, access to conventional synthetic drugs will continue to be classic, exclusively within the reach of the privileged of the society. This will shift the disease burden to the poor and less privileged unless alternative disease management through non-synthetic means is explored. There is a strong need to explore alternative means of cardio-vascular and related diseases management using natural, easily available and cost effective, safe resources. *P.lapecia* and *M.lucida* which have been used in folk remedies and are reported to have a broad range of therapeutic and prophylactic effects (Asuzu *et al.*, 1990, Olajide *et al.*, 1999 Joppa *et al.*, 2008, Oduola *et al.*, 2010, Domekouo *et al.*, 2016).are good candidates for further investigations into their effects on cardio-vascular diseases risk factors such as hyperlipidemia. This study investigated the lipid lowering potentials of the methanol extracts of *P. lappacea* and *M.lucida* in albino Wister rats on cholesterol- rich diet.

II. Materials and Methods

2.1 Collection, identification and treatment of plant samples

Fresh leaves of *P. lappacea*, and *M.lucida* plants were randomly collected from the bush and fallow lands in the towns of Egede and Enugu Ngwo, both in Udi L.G.A of Enugu State. They were identified by a plant taxonomist in the Department of Plant science and Biotechnology, University of Nigeria Nsukka. They were washed with clean tap water, allowed to drain for 15mins in a plastic sieve and dried at room temperature for seven (7) days. The dried samples were pulverized into a homogeneous texture of 60µ using a laboratory hammer mill.

Preparation of methanol extracts of the four plant samples

Methanol extract of each plant sample (*P. lappacea*, *M. lucida*) were prepared by cold maceration as described by Ibeziem *et al* (2012) with slight modifications. The extracts were screened for phytoconstituents following standard procedures (Harborne 1984, Trease and Evans 2002).

Experimental Design and Conduct

Thirty (30) rats weighing between $180g-200g \pm 20g$ obtained from the animal house unit of the College of Medicine, University of Nigeria Enugu Campus, were assigned into six (6) groups having five (5) animals per group according to their weight (X ± 20 g), after oral acute toxicity was determined in rat as described by Lorke (1983). Group A was the normal control and received normal rat pellets only, without extract and cholesterol. Group B received normal rat pellets and 1000mg/kg of cholesterol but without extract. While groups C, D, E received 10mg/kg, 1000mg/kg of the plant extract plus 1000mg/kg of cholesterol, respectively in *P*.

lappacea model, they received 100mg/kg, 2000mg/kg and 5000mg/kg of the plant extract plus 1000mg/kg of cholesterol, respectively in *M.lucida* model. Group F received 5mg/kg of Fenofibrate plus 1000mg/kg of cholesterol in both cases. The experiment lasted for 28days. On the 29th day, the animals were bled through retro-orbital puncture under ether anaesthesia after an overnight fast. The blood samples were allowed to stand undisturbed to clot and retract; the sera were separated by centrifugation and stored frozen for lipid profile. All experimental protocols and animal handling were in compliance with the international guidelines for experiments involving the use of animals as reported in McGrath *et al* (2010).

Biochemical analysis

The parameters tested for were; Total Cholesterol (TC), High Density Lipoprotein Cholesterol (HDL-C), Triglyceride (TG), Low Density Lipoprotein Cholesterol (LDL-C) – calculated. Total cholesterol was analysed using the enzymatic method of Fredrickson (Fredrickson, 1967), HDL cholesterol by phophotungstate method of Richmond (Richmond, 1973) and triglyceride by GPO-PAP method of Trinder (Trinder, 1969) and LDL cholesterol values were calculated using the empirical Friedewald equation (Friedwald, 1972). Reagent kits for the analyses were the products of Randox laboratories Limited, United Kingdom. Tests were carried out following manufacturer's manual

Data analysis

Results were expressed as mean \pm standard error of mean. The analysis was carried out on SPSS analytical software windows version 15. Differences between means were determined by the one way analysis of variance (ANOVA) followed by Tukey's *post-hoc* comparisons. P < 0.05 was considered significant. Comparison of the post-treatment and baseline values was used as an index of hypolipidemic activities

III. Results And Discussion

The pytoconstituents identified were flavonoids (++, +++), tannins (++, ++), alkaloid (++, +++), saponnins(+,+), phenols (++, ++++), glycosides (++, ++), terpenoids (++, +++) in *P. lappacea* and *M.lucida*, respectively. *M.lucida* extract contained alkaloid, phenols and terpenoids more abundantly than *P. lappacea*. The extracts had phytoconstituents of medicinal importance and the findings were in line with those of Adesogan *et al* (1984), Rath (1995), Trease and Evans (2002), Olajide *et al* (1999) which showed that alkaloids, glycosides, saponins, flavonoids, tannins, terpenoids, steroids were present in the leaf, stem, bark and root of the plants under study.

The extracts had a wide therapeutic window as no death was recorded in the dose- ranges used in the acute toxicity test but the *M.lucida* extract had a wider margin of safety(5000mg/kgbwt) than *P. lappacea* (1000mg/kgbwt)

The rise in all components of lipid profile above the baseline values after induction indicated the success of the diet-induced lipidemia. This is in agreement with other studies elsewhere during which cholesterol–enriched diets were used to induce hyperlidemia in rats (Annamária *et al* 2003, Giricz *et al* 2009, Fatma *et al.*, 2019).

Though the extracts caused a significant decrease in cholesterol and low-density lipoprotein (LDL) values of the diet-induced lipidemia after treatment when compared with the control group (A), non-treated (B) and the baseline values, the effects vary between the two plants. The baseline and post treatment cholesterol values in *P. lappacea* (table1) showed significant differences only in groups C (p = 0.006) and F (p < 0.001) but the baseline and post treatment cholesterol values in *M.lucida* (table 2) showed significant difference in groups C (p < 0.001), D (p = 0.005) and F (p = 0.001). At the maximum concentrations of the extracts (1000mg/kgbwt and 5000mg/kgbwt) for *P. lappacea* and *M.lucida* respectively, the post treatment effects on cholesterol were more pronounced in *M.lucida* extract when compared to control A (79.40±5.22mg/dl against 80.00±6.44mg/dl) than in *P. lappacea* (82.00±6.12mg/dl against 80.00±6.44mg/dl).

Table1: Effects of P. lappacea Methanol Leaf Extracts on Cholesterol (mg/dl) of Diet-induced
Hyperlipidemic Rats

	Hyperipluenite Kats				
Group	Baseline	After Treatment	Т	p-value	
-	M±SD	M±SD		-	
- A (not induced)	63.20±2.39	80.00±6.44	-	-	
- B (not treated)	68.80±4.66	126.40±3.91	-	-	
- C (10mg/kg^3)	70.60±10.09	100.80 ± 5.07	5.327	.006 ^c	
- D (100mg/kg^3)	81.40±9.94	83.60±6.23	.507	.639 ^b	
- $E(1000 \text{ mg/kg}^3)$	70.60±6.99	82.00±6.12	2.334	$.080^{b}$	
- F (Std. drugs)	66.80±5.36	85.80±5.50	8.253	.001°	

Superscripts: a = groups with significantly lesser cholesterol level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher cholesterol level after treatment than at baseline; n = 5 per group

	nyperinpideniic Kats				
Group	Baseline	After Treatment	Т	p-value	
	M±SD	M±SD			
- A (not induced)	63.20±2.39	80.00±6.44	-	-	
- B (not treated)	68.80±4.66	124.40±3.51	-	-	
- C (100mg/kg^3)	64.60±5.18	101.00±8.66	11.962	< .001 ^c	
- D (2000mg/kg ³)	65.00±4.47	86.80±4.60	5.548	.005°	
- E (5000mg/kg ³)	65.00±7.97	79.40±5.22	2.635	.058 ^b	
- F (Std. drugs)	66.80±5.36	85.80±5.50	8.253	.001 ^c	

 Table 2: Effects of M.lucida Methanol Leaf Extracts on Cholesterol (mg/dl) of Diet-induced

 hyperlinidemic Bats

Superscripts: a = groups with significantly lesser cholesterol level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher cholesterol level after treatment than at baseline; n = 5 per group

While the baseline and post treatment LDL values (tables 3 and 4) showed no significant difference across the groups except for group C (p = 0.026, p = 0.019) in *lappacea* and *M.lucida* respectively, C (p = 0.019) in *M.lucida* had LDL level after treatment significantly higher than the baseline, but at the maximum concentrations of the extracts (1000mg/kgbwt and 5000mg/kgbwt) for *P. lappacea* and *M.lucida*, respectively, the post treatment effects on LDL were more pronounced in *M.lucida* extract when compared to group B (15.00 \pm 1.00mg/dl against 71.00 \pm 6.56 mg/dl) than in *P. lappacea* (16.80 \pm 2.59mg/dl against 71.00 \pm 6.56 mg/dl). When the post-treatment values at maximum concentrations of the extracts were compared with the group A baseline value, *M.lucida* extract also showed more activity (15.00 \pm 1.00 mg/dl against 15.80 \pm 3.11mg/dl) than *P. lappacea* (16.80 \pm 2.59 mg/dl against 15.80 \pm 3.11 mg/dl)

Table 3: Effects of P. lappacea Methanol Leaf Extracts on LDL (mg/dl) of Diet-induced hyperlipidemic

		Rats		
Group	Baseline	After Treatment	Т	p-value
-	M±SD	M±SD		-
- A (not induced)	15.80±3.11	17.20±2.28	-	-
- B (not treated)	17.40 ± 2.41	71.00±6.56	-	-
- C (10mg/kg^3)	17.60 ± 2.70	18.00 ± 1.58	.250	.815 ^b
- D (100mg/kg^3)	21.00±1.87	17.20±2.77	-2.598	.060 ^b
- E (1000mg/kg^3)	23.20±2.28	16.80±2.59	-3.441	.026 ^a
- F (Std. drugs)	18.80 ± 1.92	19.00±3.87	.083	.938 ^b

Superscripts: a = groups with significantly lesser LDL level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher LDL level after treatment than at baseline; n = 5 per group

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Group	Baseline	After Treatment	Т	p-value
	M±SD	M±SD		
- A (not induced)	15.80±3.11	17.20±2.28	-	-
- B (not treated)	17.40 ± 2.41	71.00±6.56	-	-
- C (100mg/kg^3)	16.60±2.41	21.60±1.52	3.835	.019 ^c
- D (2000mg/kg^3)	15.80±3.11	17.80±2.39	.913	.413 ^b
- E (5000mg/kg ³)	16.60±2.79	15.00 ± 1.00	981	.382 ^b
- F (Std. drugs)	18.80 ± 1.92	19.00±3.87	.083	.938 ^b

Superscripts: a = groups with significantly lesser LDL level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher LDL level after treatment than at baseline; n = 5 per group

At the maximum concentrations of the extracts (1000mg/kgbwt and 5000mg/kgbwt) for *P. lappacea* and *M.lucida*, respectively the post treatment effects on HDL were more pronounced in *P. lappacea* extract when compared to group B (68.20 ± 5.93 mg/dlagainst 14.20 ± 2.28 mg/dl) than in *M.lucida* (62.60 ± 2.97 mg/dl against 14.20 ± 2.28 mg/dl). When the post-treatment values at maximum concentrations of the extracts were compared with the group A baseline value, *P. lappacea* extract also showed more activity (68.20 ± 5.93 mg/dlagainst 86.20 ± 4.92 mg/dl) than *M.lucida* (62.60 ± 2.97 mg/dl against 86.20 ± 4.92 mg/dl)

Table 5: Effects of *P. lappacea* Methanol Leaf Extracts on HDL (mg/dl) of Diet-induced hyperlipidemic

		Kats		
Group	Baseline	After Treatment	Т	p-
-	M±SD	M±SD		value
- A (not induced)	86.20±4.92	75.40±6.54	-	-
- B (not treated)	79.60±3.29	14.20 ± 2.28	-	-

$C(10-1)^{3}$	78.40±4.83	62.20±2.86	-11.631	<
- C (10mg/kg)				.001 ^a
- D (100mg/kg^3)	81.40±5.13	63.00±1.41	-7.025	.002 ^a
- $E(1000 \text{mg/kg}^3)$	71.00±2.24	68.20±5.93	-1.095	.335 ^b
$\mathbf{E}(\mathbf{S}_{t+1}, \mathbf{d}_{t+1}, \mathbf{s}_{t+1})$	82.40±2.30	53.20±5.45	-12.519	<
- F (Sta. arugs)				001 ^a

Superscripts: a = groups with significantly lesser HDL level after treatment than at baseline: b = groups with no significant change after treatment than at baseline; c = groups with significantly higher HDL level after treatment than at baseline; n = 5 per group

Table 6: Effects of <i>M.lucida</i> Metha	anol Leaf Extracts on HDL	(mg/dl) of Diet-induced	hyperlipidemic Rats
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Group	Baseline	After Treatment	Т	p-value
	M±SD	M±SD		
- A (not induced)	86.20±4.92	75.40±6.54	-	-
- B (not treated)	79.60±3.29	14.20 ± 2.28	-	-
- C (100mg/kg^3)	90.40±3.85	43.20±4.44	-12.923	$< .001^{a}$
- D (2000mg/kg ³)	88.20±2.68	55.20±3.70	-11.892	$< .001^{a}$
- E (5000mg/kg^3)	85.40±7.99	62.60 ± 2.97	-6.290	.003 ^a
- F (Std. drugs)	82.40±2.30	53.20±5.45	-12.519	$< .001^{a}$

Superscripts: a = groups with significantly lesser HDL level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher HDL level after treatment than at baseline; n = 5 per group

At the maximum concentrations of the extracts (1000mg/kgbwt and 5000mg/kgbwt) for P. lappacea and M.lucida, the post treatment effects on TAG were more pronounced in P. lappacea extract when compared to group B (95.80±12.01mg/dl against 133.40±3.85 mg/dl) than in M.lucida (96.40±5.18 mg/dl against 133.40±3.85 mg/dl). When the post-treatment values at maximum concentrations of the extracts were compared with the group A baseline value, P. lappacea extract also showed more activity (95.80±12.01 mg/dl against 94.80±4.15 mg/dl) than *M.lucida* (96.40±5.18 mg/dl against 94.80±4.15 mg/dl)

Table7: Effects of P. lappacea Methanol Leaf Extracts on TAG (mg/dl) of Diet-induced hyperlipidemic

Rats					
Group	Baseline	After Treatment	Т	p-value	
-	M±SD	M±SD		-	
- A (not induced)	94.80±4.15	94.20±5.67	-	-	
- B (not treated)	95.60±4.16	133.40±3.85	-	-	
- C (10mg/kg ³)	86.00±5.70	95.00±3.61	3.087	.037°	
- D (100mg/kg^3)	87.80±2.86	92.60±6.62	1.672	.170 ^b	
- E (1000mg/kg^3)	90.80±3.11	95.80±12.01	1.083	.340 ^b	
- F (Std. drugs)	94.00±3.39	101.40±6.99	2.369	.077 ^b	
<i>a</i> 1					

Superscripts: a = groups with significantly lesser TAG level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher TAG level after treatment than at baseline; n = 5 per group

Group	Baseline	After Treatment	т	p-value
croup	M±SD	M±SD	-	p fulle
- A (not induced)	94.80±4.15	94.20±5.67	-	-
- B (not treated)	95.60±4.16	133.40±3.85	-	-
- C (100mg/kg^3)	92.60±5.98	104.60±6.77	3.029	.039°
- D (2000mg/kg^3)	91.60±3.65	92.40±6.19	.204	.848 ^b
- E (5000mg/kg^3)	92.00±2.74	96.40±5.18	1.956	.122 ^b
- F (Std. drugs)	94.00±3.39	101.40±6.99	2.369	.077 ^b

Table 8: Effects of M.lucida Methanol Leaf Extracts on TAG (mg/dl) of Diet-induced hyperlipidemic Rats

Superscripts: a = groups with significantly lesser TAG level after treatment than at baseline; b = groups with no significant change after treatment than at baseline; c = groups with significantly higher TAG level after treatment than at baseline; n = 5 per group

These observed effects probably could be due to the presence of the identified phytoconstituents. Alkaloids, glycosides, saponins and flavonoids are known to reduce serum lipid level in animals (Asghar et al., 2018, Semerdjieva and Zhaljazkov 2019). Literature showed that saponing may lower cholesterol by preventing its absorption after it has been excreted in the bile. saponins could do this by binding to bile salts or promoting the binding of bile salt to polysaccharides in dietary fibre, causing a reduction in enterohepatic circulation of bile acids and increase the faecal excretion (Rotimi et al., 2011). The usage of diet with high saponin content is also suggested to reduce heart diseases (Oakenfull, 1981, Hostettman and Marston, 1995). Flavonoids are water soluble polyphenolic molecules with antioxidants activity which has many beneficial effects on cardiovascular system (Evans, 1989). Epidemiological studies have illustrated that heart diseases could be managed with flavonoid intake (Peterson et al., 2012). Flavonoids prevent the oxidation of low density lipoprotein, lowers the blood level of cholesterol and triglycerides thereby reducing the risk for development of atherosclerosis

(Subramani and Casimir, 2002). Phytosterols are reported to displace intestinal cholesterol absorption from the intestine (Ikeda and Sugano, 1998; Demonty *et al.*, 2009).

IV. Conclusion

This study has proved that the extracts of the two plants are good phytotherapeutic agents in lowering blood lipid and therefore should be recommended as a medicament in the management of cardiovascular diseases associated with hyperlipidemia. Given the high cost of using synthetic drugs in cardiovascular disease management, and the undesirable side effects, the use of the plants extracts is a welcome development. However, because of different degrees of effects of the two plants extracts on some lipid components there is a need for further investigations on the combined effects-synergistic or antagonistic, so that the hypolipidemic properties of the plants will be maximally utilized in CVDs management.

References

- [1]. Adesogan, E.K., (1973): Anthraquinones and anthraquinols from Morinda lucida: The biogenic significance of Oruwal and Oruwalol. Tetrahedron, 29: 4099-102.
- [2]. Annamária Ónody, Csaba Csonka, Zoltán Giricz, Péter Ferdinandy, Hyperlipidemia induced by a cholesterol-rich diet leads to enhanced peroxynitrite formation in rat hearts, *Cardiovascular Research*, Volume 58, Issue 3, June 2003, Pages 663–670, <u>https://doi.org/10.1016/S0008-6363(03)00330-4</u>
- [3]. Asghar N, Mushtaq Z, Arshad MU, Imran M, Ahmad RS, Hussain SM. Phytochemical composition, antilipidemic and antihypercholestrolemic perspectives of Bael leaf extracts. *Lipids Health Dis.* 2018;17(1):68. Published 2018 Apr 3. doi:10.1186/s12944-018-0713-9
- [4]. Asuzu, I.U., Chineme, C.N., (1990): Effects of Morinda lucida leaf extract on Trypanosoma brucei infection in mice. J. Ethnopharmacol., 30:307-313.
- [5]. Demonty I, Ras RT, van der Knaap HC, et al. Continuous dose-response relationship of the LDL-cholesterol-lowering effect of phytosterol intake. J Nutr. 2009;139(2):271-284. (PubMed)
- [6]. Domekouo UL, Longo F Tarkang PA, Tchinda AT, Tsabang N, Donfagsiteli NT, Tamze V, Kamtchouing P, Agbor GA; Evaluation of the antidiabetic and antioxidant properties of Morinda lucida stem bark extract in streptozotocin intoxicated rats. <u>Pak J Pharm Sci.</u> 2016 May;29(3):903-11.
- [7]. Evans W.C (1989). In Trease and Evans pharmacognosy, 13th edition Bailliere Jindall, London, pp. 16-235.
- [8]. Evans, W.C., Trease, G.E., Evans, D., (2002): Trease and Evans Pharmacognosy, 15thedition. Edinburgh, Saunders. pp. 249, 454.
- [9]. Fatma Mohamed Hussein Shediwah, Khalid Mohammed Naji Hussein Saleh Gumaih, Antioxidant and antihyperlipidemic activity of Costus speciosus against atherogenic diet-induced hyperlipidemia in rabbits 2019, Journal of integrative medicine 17(3) DOI: <u>10.1016/j.joim.2019.02.002</u> a
- [10]. Fredrickson D.S., Levy, R.I. and Lees R.S. (1967). Executive Summary of the Third Report of the National Cholesterol and Fat Transport in Lipoproteins- An Integrated Approach to Mechanisms and Treatments: 655pp
- [11]. Friedewald W.T., Levy R.T. and Fredickson D.S (1972): Estimation of LDL Cholesterol without the Use of Plasma Ultracentrifuge. Clinical Chemistry. 18:499-520.
- [12]. Giricz Z, Görbe A, Pipis J, Burley DS, Ferdinandy P, Baxter GF. Hyperlipidaemia induced by a high-cholesterol diet leads to the deterioration of guanosine-3',5'-cyclic monophosphate/protein kinase G-dependent cardioprotection in rats. Br J Pharmacol. 2009;158(6):1495–1502. doi:10.1111/j.1476-5381.2009.00424.x
- [13]. Harborne JB; Phytochemical Methods: A Guide to Modern Techniques of Plant Analysis, 2nd edition, Chapman and Hall, New York, 198
- [14]. Hostettman K, Marston A. (1995): Saponins. Cambridge University Press, Cambidge 12: 232-286
- [15]. Ibezim, E. C., Kenechukwu, F. C., Ödimegwu, D. C., Bonlders, P. F, Kabele-Toge B., Anie C., Igwilo, C. O., Otuu, F. C., and Onyenkwu C., (2011); Anti Microbial Efficacy of a Syrup Formulated from Methanol Extract of *Garcinia* Kola Seed. *African Journal* of *Pharmaceutical Research and Development, Vol. 3*, No. 1, pp 22- 27.
- [16]. Ikeda I, Sugano M (1998).Current Opinion on Lipidology 9: 527-531. International Diabetes Federation (IDF), (2003). Access to insulin: A Report on the IDF Insulin Task Force on Insulin, 1994-1997.
- [17]. Igoli, J.O., Ogaji, O.G., Tor-Anyiin, T.A., Igoli, N.P., (2006): Traditional medicine practice amongst Igede People of Nigeria, part II.
- [18]. Inya-Agha, S.I., Ezea, S.C., Odukoya, D.A., (2006). Evaluation of Picralima Nitida Hypoglycemic Activity, Toxicity and Analytical Standards. Planta Medica, 10:551.
- [19]. Joppa KM, Vovor A, Eklu-Gadegbeku K, Agbonon A, Aklikokou K, Gbeassor M.Effect of Morinda lucida Benth. (Rubiaceae) and Newbouldia leavis P. Beauv. (Bignoniaceae) on sickling of red blood cells]. <u>Med Trop (Mars)</u>. 2008 Jun;68(3):251-6.
- [20]. Lorke, D., 1983. A new approach to practical acute toxicity testing. Arch. Toxicol., 54: 275-287
- [21]. McGrath JC, Drummond GB, McLachlan EM, Kilkenny C, Wainwright CL. Guidelines for reporting experiments involving animals: the ARRIVE guidelines. Br J Pharmacol. 2010;160(7):1573–1576. doi:10.1111/j.1476-5381.2010.00873.x
- [22]. Oakenfull D (1981). Saponins in food. Food chemistry 6:19-40.
- [23]. Oduola T, Bello I, Adeosun G, Ademosun AW, Raheem G, Avwioro G. Hepatotoxicity and nephrotoxicity evaluation in Wistar albino rats exposed to Morinda lucida leaf extract. <u>N Am J Med Sci.</u> 2010 May;2(5):230-3. doi: 10.4297/najms.2010.2230
- [24]. Olajide, O.S., Awe, S. O., Makinde, J. M. & Morbise, O. (1999). "Evaluation of the anti-diabetic property of Morinda Lucida ssleaves in streptozotocin-diabetic rats," *journal of pharmacy and pharmacology*, 50(11), 1321-1324. View at Google Scholor
- [25]. Opadijo, 0.0. (2004): Prevalence of Coronary Heart Disease Risk Factors in Nigerians with Systemic Hypertension. African Journal of Medical Science, 33(2): 121-5.
- [26]. Peterson JJ, Dwyer JT, Jacques PF, McCullough ML. Associations between flavonoids and cardiovascular disease incidence or mortality in European and US populations. *Nutr Rev.* 2012;70(9):491–508. doi:10.1111/j.1753-4887.2012.00508.x
- [27]. Richmond, W. (1973): Cholesterol Enzymatic Colorimetric Test CHOP-PAP Method of Estimation of Total Cholesterol in Serum. Clinical Chemistry 19: 1350-1356.

- [28]. Rotimi, S.O., Omotosho O.E. and Rotimi, O.A. (2011): Persistence of Acidosis in Alloxan-Induced Diabetic Rats Treated with the Juice of Asystasia gangetica Leaves. Pharmacognosy Magazine. 7:25-30
- [29]. Semerdjieva, I. B., & Zheljazkov, V. D. (2019). Chemical Constituents, Biological Properties, and Uses of Tribulus terrestris: A Review. Natural Product Communications. <u>https://doi.org/10.1177/1934578X19868394</u>
- [30]. Subramani A.J., Casimir C.A., (2002). Flavonoids and antioxidant activity of Georgia grown Vidalia onions. Journal of Agriculture and Food Chemistry. 50(19): 5338-5342.
- [31]. Terzic, A.Waldman, S. (2011). Chronic diseases: the emerging pandemic. Clinical and translational science. 4 (3): 225-226
- [32]. Trinder, P. (1969): Triglyceride Estimation by GPO-PAP Method. Journal of Clinical Chemistry 6: 24-27.,October (2013)<u>"Diabetes Fact sheet N°312"</u>Accessed 25 March 2014.
- [33]. WHO. October (2013) "Diabetes Fact sheet N°312" Accessed 25 March 2014

Oji, Rachel U, et. al. "Hypolipidemic properties of the methanol extracts of Pupalia lapecia and Morinda lucida on diet-induced lipidemic albino wister rats: A comparative analysis." *IOSR Journal of Environmental Science, Toxicology and Food Technology (IOSR-JESTFT)*, 14(6), (2020): pp 01-07.

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