

## Evaluation of analgesic and antipyretic activity of ethanol extract of *Oxalis corniculata* Linn.

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### ABSTRACT

To evaluate the analgesic and antipyretic activity of ethanol extract of *oxalis corniculata* Linn. Analgesic activity was carried out using acetic acid induced writhing method in swiss albino mice (25-30 gm), and antipyretic activity done by Brewer's yeast induced pyrexia in rat at the dose level of 200mg/kg p.o and 400mg/kg p.o. Oral administration of ethanol extract of *oxalis corniculata* (EEOC) significantly reducing ( $p < 0.01$ ) the number of writhing and significantly ( $p < 0.01$ ) reduced pyrexia 1 to 4 hr compared to 0h of the same group animal at the dose level of 200mg/kg p.o and 400mg/kg p.o. when compared to control. The result of pharmacological test was performed in the present study suggest that (EEOC) possess potent Analgesic and Anti pyretic activity. hence we can consider EEOC is better alternative for the treatment than the current treatment regimen NSAID and Analgesic drug.

**Keywords:** *Oxalis corniculata*, Brewer's yeast, Acetic acid, NSAID, Analgesic activity, pyrexia.

### 1. INTRODUCTION

Pain is an unpleasant sensory or emotional experience associated with actual or potential tissue damage, or described in terms of such damage. Pain is always subjective. It is unquestionably a sensation in a part of the body, but it is also unpleasant, and therefore also an emotional experience.<sup>1</sup> Typically, it is a direct response to an untoward event associated with tissue damage, such as injury, inflammation or cancer, but severe pain can arise independently of any obvious predisposing cause (e.g. trigeminal neuralgia), or persistent long after the precipitating injury has healed (e.g. phantom limb pain). It can also occur as a consequence of brain or nerve injury (e.g. following a stroke or herpes infection). With many pathological conditions, tissue injury is the immediate cause of the pain, and this result in the local release of a variety of chemical agents, which are assumed to act on the nerve terminals, either activating them directly or enhancing their sensitivity to other of stimulation<sup>[2]</sup>.

Pyrexia is caused as a secondary impact of infection, malignancy or other disease states.<sup>[3]</sup> It is the body's natural defence to create an environment where the microorganism enters into the body and its damaged tissue. Normally the infected or damaged tissue initiate

the enhanced formation of pro-inflammatory mediators (cytokines like interleukin-1 $\beta$ ,  $\alpha$ ,  $\beta$  and TNF  $\alpha$ ) which increase the synthesis of PGE<sub>2</sub> near the hypothalamus area and thereby triggering the hypothalamus to elevate the body temperature. As the temperature regulatory system is governed by a nervous feedback mechanism, so when body temperature becomes high, it dilates the blood vessels and increases sweating to reduce the temperature, but when body temperature becomes very low, the hypothalamus protects the initial temperature by vasoconstriction. Most of the antipyretic drugs inhibit the COX-2 expression to reduce the elevated body temperature by inhibiting PGE<sub>2</sub> biosynthesis more over the synthetic agent irreversibly inhibits COX-2 with high selectivity but more toxic to hepatic cells, brain and heart muscle, whereas natural COX-2 has low selectivity with fewer side effects.<sup>[4]</sup> *Oxalis corniculata* is a small plant found in river side and agricultural land in India. The whole plant has been used traditionally such as antimicrobial, astringent, cardiotoxic, febrifuge, hypotensive, stomachic, vasodilator and immunomodulatory, analgesic, fever, hyperlipidemia, antioxidant.<sup>5-7</sup> A bibliographic survey showed that there are no reports on the analgesic and anti-pyretic activity of *oxalis corniculata*. This prompted us to investigate the effects of pharmacological activities of *Borassus flabellifer* in experimental models of analgesia and pyrexia.

## 2. MATERIALS AND METHODS

### 2.1. Collection of plant materials

The whole plant of *oxalis corniculata* Linn were collected from various parts of salem district, Tamilnadu during the month of july to September and were authenticated from ABS garden salem.

### 2.2. Extraction procedure

Whole plant of *oxalis corniculata* were collected and was dried for 7 days. After drying they were again pulverized. The size is reduced. The dried whole plant of *oxalis corniculata* powder mixture was weighed about 500g. Extracted by soxhlet apparatus using 90% of ethanol as a solvent for 72 hours. The yield of product was 6.825% w/w.

### 2.3. Experimental Animals

Swiss Albino Mice (25-30g) and Albino Rats (180-250g) of either sex were used in the study. They were procured from Venkateshwara Enterprises, Bangalore, Karnataka, India. They were randomly distributed into groups and housed in cages (6 per cage) and maintained under standard conditions at  $26 \pm 2^\circ\text{C}$  and relative humidity 44-56% and 10h light: 14h dark cycles each day for one week before and during the experiments. All animals were fed the standard rodent pellet diet (Amrut, India) and water ad libitum. This project was cleared by Institutional Animal Ethical Committee.

### 2.4. Acute oral toxicity studies

Acute oral toxicity study was performed as per Organization for Economic Cooperation and Development (OECD) guideline 423 method. The test substance was administered in a single dose by gavage using specially designed mice oral needle. Animals are fasted 3 h prior to dosing (food was withheld for 3 h but not water). Following the period of fasting animals was weighed and test substance was administered. After the test substance administration, food was withheld 2 h in mice. Animals are observed individually after dosing at least once during the first 30 minutes, periodically during the first 24 hrs, with special attention given during the first 4 hrs, and daily thereafter, for a total of 14 days. Animals are removed, if any humanely killed for animals welfare reasons or are found dead. All the observations are systemically recorded. [8-9]

### 2.5. Analgesic activity [10]

Acetic acid induced writhing method five groups of mice (n = 6) were randomly formed groups were treated as control group which received 1% v/w CMC as vehicle and standard drug is Aspirin (100mg/mL). 4&5 received (200

and 400 mg/kg). Respectively, Acetic acid solution 0.3% v/v (10 ml/kg) was injected by intraperitoneal route one hour after treatment and number of writhes (i.e. index of pain reaction against chemical stimuli characterized by abdominal muscle contraction together with turning of trunk and extension of hind limbs) was counted over a period of 20 min. Analgesic activity was expressed as percentage of inhibition of writhes with respect to the control group. [9]

**Group-1:** control group which received CMC 1% v/w p.o

**Group-2:** disease control group which received only Acetic acid(0.3%v/v)i.p

**Group-3:** Served as standard drug treatment group which received only Aspirin (100mg/mlp.o)

**Group- 4:** group 4 has received the EEOC 200mg/kg. p.o.

**Group-5:** group 5 has received EEOC 400mg/kg. p.o.

### 2.6. Anti Pyretic Activity [11-12]

Animals were selected for four groups the experiment after confirmation of approximate constant rectal temperature for 7 days. The antipyretic activity of the extracts was evaluated based on Brewer's yeast-induced pyrexia in rats. Pyrexia was induced by subcutaneous injection of 10 ml/kg of 15% w/v Brewer's yeast suspension in 0.09% of saline below the nape of the neck. The rectal temperature of each rat was measured at time, 0 h, using a thermometer and before injection of the yeast. At 18 h following yeast injection, the different groups were treated with the vehicle, extracts (200 and 400 mg/kg) and standard drug, paracetamol (150 mg/kg). The rectal temperature was then recorded over a period of 4 hrs.

**Group-1:** disease control group which received only brewar'syeast(15% v/w)

**Group-2:** Served as standard drug treatment group which received only Paracetamol (150mg/mlp.o)

**Group-3:** has received the EEOC 200mg/kg.p.o.

**Group-4:** has received EEOC 400mg/kg.p.o.

### 2.7. Statistical analysis

The values are expressed in mean  $\pm$  SEM. One way ANOVA followed by Dunnet's multiple comparison Test was used to analyse the effect of different doses of drugs when compared to control, with the help of Graph Pad Instat software, version 3.01.  $P < 0.01$  is considered as significant. All data are expressed in mean  $\pm$  SEM.

\*\* P<0.01, \*P<0.05ns One way ANOVA followed by Dunnet's multiple comparison test with control.

**Table - 1: Preliminary Phytochemical Screening Of *oxalis corniculata***

Name of the Phytoconstituents	EEOC extract
Carbohydrates	+
Total Phenolic substances	+
Glycosides	+
Alkaloids	-
Proteins and Amino acids	+
Flavanoids	+
Tannins	+
Phytosterols	+
Gums and Mucilage	-
Phenols	+
Terpenoids	-
Saponins	-
Fixed oil and Fats	-
Volatile oil	+

**Table - 2: Analgesic Activity Of EEOC by acetic acid Induced writhing methods**

Group	Dose level(mg/kg p.o)	No.of writhing in 20 min
Normal control	1% v/w CMC	30.66±2.58
Disease control	10 ml/kg	12.66± 1.751
Aspirin	100 mg/kg	24.2±3.64***
<b>EEOC</b>	200 mg/kg	17.16±1.42**
<b>EEOC</b>	400 mg/kg	19.7±1.862**

All data are expressed in mean ± SEM. \*\* P<0.01, \*P<0.05ns One way ANOVA followed by Dunnet's multiple comparison Test with control.

**Table - 3: Antipyretic Activity Of EEOC By yeast induced pyrexia Methods**

Group	-18h	0h	1h	2h	3h	4h
<b>CONTROL</b>	37.4±0.172	38.28±0.04	38.41±0.09	38.84±0.07	38.93±0.06	39.07±0.05
<b>STANDARD</b>	37.36±0.68	38.66±0.62	37.51±0.17	37.21±0.292	37.18±0.61	37.08±0.32
<b>EEOC</b>	37.08±0.0.257	38.56±0.12	37.68±0.10	37.58±0.14	37.51±0.03	37.01±0.160
<b>EEOC</b>	37.16±0.07	38.21±0.16	38.01±0.23	37.63±0.15	37.26±0.11	37.18±0.613

All data are expressed in mean ± SEM. \*\* P<0.01, \*P<0.05ns One way ANOVA followed by Dunnet's multiple comparison Test with control.

### 3. RESULTS

#### 3.1. Preliminary Phytochemical Screening

In this study ethanol extract of EOC (ethanol extract of *oxalis corniculata*) showed positive to following phytochemical constituent's alkaloids, carbohydrates, tannins, flavonoides, total phenolic substances, glycosides, amino acid and proteins and terpenoids. The results are tabulated in table 1

#### 3.2. Analgesic activity

The effect of extract on acetic acid induced writhies in mice have been shown in table 2. aspirin 100 mg/kg and EEOC at the dose level of (200mg/kg and 400 mg/kg) significantly (P<0.01) reduced the pain when compared to the disease control group.

#### 3.3. Anti pyretic activity

The antipyretic effect of *oxalis corniculata* have been shown in table 2. EEOC 200mg/kg and paracetamol 150 mg/kg after administration significantly (p<0.01) reduced pyrexia 1 to 4 hr

compared to 0h of the same group animal. EEOC 400 mg/kg it will start to decrease the fever on 2h to 4h compared to the 0h of the same group animal.

### 5. DISCUSSION

Increased body temperature and pain are two major sign of the body against inflammation. A drug with anti-inflammatory activity usually also exhibit antipyretic and analgesic activity. the best example would be the NSAID drug which posses all three activity. [13-15]

Acetic acid induced writhing method of central and pheripheral analgesic activity. table showed aspirin 100 mg/kg and EEOC at the dose level of ( 200mg/kg and 400 mg/kg) significantly (P<0.01 ) reduced the pain when compared to the disease control group. Pain is a complex mediator (eg) PG, bradykinins, sub-p etc. acetic acid induced writhing model in animal the abdominal construction will produced by acetic acid because its releasing the PGE2 and PGF2 in the peritoneal fluid. So that the EEOC suppress the formation of

inflammatory mediator. So that the EEOC suppress the pain.

Subcutaneous injection of Brewer's yeast induces pyrexia by increasing the synthesis of prostaglandin. It is considered as a useful test for the screening of plant materials as well as synthetic drugs for their antipyretic effect. [16,17] Yeast-induced pyrexia is called pathogenic fever and its etiology could be the production of prostaglandins. The inhibition of prostaglandin synthesis could be the possible mechanism of antipyretic action as that of paracetamol and the inhibition of prostaglandin can be achieved by blocking the cyclooxygenase enzyme activity. There are several mediators for pyrexia and the inhibition of these mediators is responsible for the antipyretic effect [17].

Normally the infected or damaged tissue initiate the enhanced formation of pro inflammatory mediator;s (cytokines like interleukin  $1\beta$ ,  $\alpha$ ,  $\beta$  and TNF  $\alpha$ ) which increase the synthesis of PGE2 near peptic hypothalamus area and there by triggering the hypothalamus to elevate the body temp Most of antipyretic drug inhibit COX -2 expression tyo body temperature by inhibition PGE2 synthesis.<sup>35</sup>EEOC 200mg/kg and paracetamol 150 mg/kg after administration significantly ( $p < 0.01$ ) reduced pyrexia 1 to 4 hr compared to 0h of the same group animal. EOC 400 mg/kg it will start to decrease the fever on 2h to 4h compared to the 0h of the same group animal.

From the Preliminary phytochemical screening result ethanol extracts of oxalis corniculata showed the following phytochemical constituents such as total phenolic substances, glycosides, alkaloids, flavanoids, tannins, terpenoids and saponins gave positive ,due to the presence of phytochemical constituents ,which might be in part responsible for the analgesic and anti pyretic activity. [18]

The result was conclude that EEOC will be safer drug in the long term treatment. hence we can consider EEOC is better alternative for the treatment than the current treatment regimen NSAID and Analgesic drug.

## 6. REFERENCES

1. International Association for the Study of Pain: Pain Definitions. [cited 10 Sep 2011]. "Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage" Derived from Bonica JJ. **The need of a taxonomy. Pain.** 1979; 6(3): 247-8.
2. Rang HP, Dale MM and Ritter JM. Pharmacology. 5<sup>th</sup> ed., Churchill Livingstone. London; 1993; 562.
3. Chattopadhyay D, Arunachalam G and Ghosh L. Antipyretic activity of Alstoniamacrophylla Wall ex A. DC: An ethnomedicine of Andaman Islands. **J Pharm Pharmaceutical Sci.** 2005; 8: 558-564.
4. Spacer CB, Breder CD. The neurologic basis of fever. **N Engl J Med** 1994;330: 1880-1886.
5. Panda H. Medicinal plant cultivation and their uses. **Asica pacific business press Inc.** Delhi 2000; 343-344.
6. Sakat SS and Preeti Tupe and Archana Juvekar. Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage" Derived from Boniva JJ. The need of taxonomy. Pain.. **International Association for the Study of Pain: Pain Definitions [Retrieved 10 Sep 2011]** 1979; 6(3):247-248. PMID 460931.
7. Raghavendra MP, Satish S and Raveesha KA. Phytochemical analysis and antibacterial activity of Oxalis corniculata. **My science,** 2006; 1: 72-78.
8. **OECD (test no.423) guideline for testing of chemicals, acute oral toxicity-acute toxic class method. 2001.**
9. Chan PK and Hayes AW. **Principles and methods for acute toxicity and eye irritancy, in principles and methods of toxicity, 2<sup>nd</sup> edition, Raven Press, NY, 1989.**
10. Vyass, Agarwal PR, Solankip, Trivedip. Analgesic and Antiinflammatory activities of trigonellafoenum -graecum(seed)extract. **Actapoloniae pharmaceutical drug research** 2008; 65; 473-476.
11. Khana, Abdullabaki MD, Abdul alim al-baraii M, Hassan. Antipyretic activityof roots of *laporatacrenulataguad* in rabbit. **Research journal medicine and medicinal science,** 2007; 2: 58-61.
12. Chakraborty A, Devi RKB, Ritas S and Sharatchandrak. preliminary studies on anti-inflammatory and analgesic activites of *spilanthescmella* in experimental animal model. **Indian journal pharmacology,** 2004; 148-50.
13. Meli RE, Antonelli and Cirino G. Analgesia and cyclo-oxygenase inhibitors. **Digestive and liver disease.** 2001; 33(2) :S8-S11.
14. Perianayagam JP, Sharma SK, Joseph A and Christina AJM. Evaluation of anti pyretic and

- analgesic activity of emblicaofficinalis Gaertn. **J.Ethnopharmacol.**, 2004; 95: 83-85.
15. Buffurn M and Buffurn JC. Nonsteroidal anti – inflammatory drugs in the elderly. **Pain management nursing**, 2000; 1:40-50.
  16. Kathiriya A, Das K, Kumar EP and Matha KB. Evaluation of antitumor and antioxidant activity of oxalis corniculatalinn. Against ehrlich ascites carcinoma on mice. **Iran j cancer prev.** 2010; 3(4) 157-65.
  17. Devi BP, Boominathan R and Mandal SC. Evaluation of antipyretic potential of Cleome viscosa Linn. (Capparidaceae) extract in rats. **J Ethno pharmacol.** 2003; 87(1):11-13.
  18. Moltz H. Fever: causes and consequences. **Neuro sci Biobehav Rev.**, 1993; 17(3):237-269.