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Table of Content

Effect of Parkia biglobosa extract on open skin wound healing in dexamethasone-induced hyperglycaemia and histological assessment in rats	84
Modupe Iretila Builders, Oyepata Simeon Joseph and Akpobome Raymond Vhritherhire	
Neferine and isoliensinine from Nelumbo nucifera induced reactive oxygen species (ROS)-mediated apoptosis in colorectal cancer HCT-15 cells	90
Prasath Manogaran, Narasimha Murthy Beeraka, Chih-Yang Huang, Viswanadha Vijaya Padma	

Full Length Research Paper

Effect of *Parkia biglobosa* extract on open skin wound healing in dexamethasone- induced hyperglycaemia and histological assessment in rats

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Glucocorticoid-induced diabetes mellitus (GIDM) is an abnormal increase in blood glucose associated with the use of glucocorticoids in a patient with or without a prior history of diabetes mellitus. This is a common and potentially harmful problem in clinical practice, affecting almost all medical specialties, but is often difficult to detect in clinical settings. The objective of this study was to determine effect of *Parkia biglobosa* extract on open wound healing in dexamethasone induced hyperglycaemia. Effect of three different doses of *P. biglobosa* extract (25, 50 and 100 mg/kg body wt.) for 14 consecutive days on open skin wound healing before and after dexamethasone-induced hyperglycaemia was investigated; histological assessment was also conducted on the fourteenth day. The three different doses of *P. biglobosa* extract decreased the serum glucose concentration in pre and post-treatment dexamethasone-induced hyperglycaemic animals; the percentage reduction was greater in the 50 and 100 mg/kg of *P. biglobosa*-pretreated groups (14.9 and 19.21%, respectively) as compared to that of ketoconazole, where it was only 16.5%. In the post treatment groups, the percentage reduction was greater in 100 mg/kg of *P. biglobosa* (17.7%) as compared to that of ketoconazole, where it was only 16.6%. Histological evaluation showed that the pretreated group of animals had higher performance scores on the grading scale and improved healing when compared with the post-treated groups. There was a demonstrable reduction in the wound healing process in the pre-treatment group that was dosed dependent.

Key words: *Parkia biglobosa*, open skin wound healing, dexamethasone-induced hyperglycaemia, histological assessment.

INTRODUCTION

Glucocorticoids are potent anti-inflammatory and immunosuppressive drugs which are widely used to treat a wide range of diseases. A number of side effects,

including new-onset hyperglycaemia in patients without a history of diabetes mellitus (Suh and Park, 2017), also severely uncontrolled hyperglycaemia in patients with

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known DM is also associated with them. There are two main models, that is, incisional and excision for determining three basic phases in wound healing process (inflammation, proliferation, and maturation) (Dorsett-Martin, 2004). These are simple and reproducible models which represent basic requirement assessing the effects of different external factors on skin wound healing (Regan and Barbul, 2011). The incisional (sutured) skin healing model is used for wound tensile strength measurement (Davidson, 1998) while the excisional model is more appropriate for histological evaluation due to significantly broader morphological changes which occur during the healing process. Corticosteroid induced diabetes otherwise called steroid diabetes; the most common glucocorticoids which cause steroid diabetes are prednisolone and dexamethasone. It is also a simple and inexpensive model of a complex wound healing impairment (Gal et al., 2008). The excess of either endogenous or exogenous glucocorticoids has been shown to increase gluconeogenesis and decrease tissue glucose uptake, thus resulting in hyperglycaemia, potentially inducing diabetes (Wolfsheimer, 1989).

Parkia biglobosa (Jacq.) R.Br. ex G. Don (family Fabaceae) popularly known as the “African locust bean tree”, it is a medium-sized tree growing up to 30 m in height. The plant is reported to contain carbohydrates, proteins, fats, minerals, vitamins, tannins and flavonoids. *P. biglobosa* have been used in Nigeria and other West Africa in rural communities to treat a variety of diseases as diabetes mellitus, malaria and pains. The hypoglycaemic effect of fermented seeds of *P. biglobosa*, a natural nutritional condiment that features frequently in some African diets as a spice, was investigated in alloxan induced diabetic rats (Builders, 2014).

Therefore, the aim of this study was to establish the effect of extract of *P. biglobosa* on an excisional model of skin wound healing in normal healthy and corticosteroid treated as well as to evaluate the effects of various external factors on wound healing semi quantitative assessments.

MATERIALS AND METHODS

Source of plant material and identification

The stem barks of *P. biglobosa* were collected from Chaza village in Niger State and the stem barks were identified by a taxonomist Mallam Muazam of the Department of Medicinal Plant Research and Traditional Medicine of National Institute for Pharmaceutical Research and Development (NIPRD), Abuja, Nigeria where a voucher specimen was deposited in the herbarium for reference.

Chemicals and reagents

Chemicals and reagents were purchased from Sigma Chemical Company (St. Louis, USA).

Extraction of plant

The plant material (stem bark) was air dried under shade and then ground into coarse powder with a pestle and mortar. 200 g of the powdered bark was extracted with 2 L methanol for 48 h using a Soxhlet apparatus (Quicklet, UK). The extract was filtered through Whatmann No. 1 (Whatmann International Ltd, Maidstone, UK) paper and evaporated to dryness under reduced pressure using a rotary evaporator to yield a crude extract which was stored at 4°C until used.

Animals

Adult male Wistar rats (180-200 g) maintained at Animal Facility Centre (AFC) of the Department of Pharmacology, Faculty of Pharmacy, Bingham University were used for the study. They were fed with pelleted feed (Vital®, Jos) and water *ad libitum*. The rats were allowed 7 days to acclimatize before the experiments were conducted according to the permission and prescribed guidelines of the Institutional Animal Ethics Committee.

Experimental design

Eighteen rats were administered with three different doses of *P. biglobosa* extract (25, 50 and 100 mg/kg body wt., p.o) designated as P1, P2, P3 and six rats received ketoconazole (24 mg/kg body wt., p.o.) (Marty et al., 2000) and designated as P4 for 14 consecutive days on open skin wound healing before daily administration of a pre standardized dose of dexamethasone (1 mg/kg body wt., i.m) (Gholap and Kar, 2003), and classified as group 1. In group 2, eighteen rats were treated with three different doses of *P. biglobosa* extract (25, 50 and 100 mg/kg body wt., p.o) designated as P5, P6, P7 and six rats received ketoconazole (24 mg/kg body wt., p.o.) (Marty et al., 2000) and designated as P8 for 14 consecutive days on open skin wound healing after dexamethasone-induced hyperglycaemia. Simultaneously, six rats normoglycemic animals were treated with equivalent amount of vehicle (0.2 ml of normal saline) and referred to as P9.

Anaesthesia and surgical procedures

General anaesthesia was induced by intramuscular administration of ketamine (33 mg/kg; Hameln pharmaceutical Ltd.) and xylazine (10 mg/kg; Unipex). A small incision was made above the spine through which the lower part of the belt punches pliers were slide beneath the skin. Consecutively, four round full thickness excision, 5 mm in diameter, were performed on back of each rat. The incision was then sutured (Gal et al., 2008).

Histological analysis

On days 2, 6 and 14, six rats from each group were sacrificed after surgery. Skin wounds removed and were processed routinely for light microscopy (fixating, dehydrating, embedding, and cutting). Two sections were made from each wound and stained with hematoxylin-eosin (HE- basic staining) and van Gieson (VG-collagen staining), respectively. Semi-quantitative method was used to evaluate the following histological processes and structures: reepithelization, (polymorphonuclear leucocytes, PMNL), fibroblasts

Table 1. Effect of different doses of *Parkia biglobosa* extract in serum concentration of glucose (mmol/L) before dexamethazone (1 mg/ml) induced hyperglycaemia.

Group	Glucose (Initial)	Glucose (Final)	% Reduction
N/S (0.2 ml)	6.43 ±0.52	8.20 ±0.29	-21.6±0.00
P.B (25 mg/kg)	5.90 ±0.46	5.81 ±0.45	1.53±0.19*
P.B (50 mg/kg)	5.70 ±0.33	4.85 ±0.32	14.9±0.77**
P.B (100 mg/kg)	6.56 ±0.00	5.30 ±0.75	19.2±0.52**
Ketoconazole	6.53 ±0.63	5.45 ±0.10	16.5±0.61**

n = 6; *Significantly different from the control at p<0.05; **Significantly different from the control at P < 0.01.

Table 2. Effect of different doses of *Parkia biglobosa* extract in serum concentration of glucose (mmol/L) after dexamethazone ((1mg/ml) induced hyperglycaemia.

Group	Glucose (Initial)	Glucose (Final)	% Reduction
N/S (0.2 ml)	7.60 ±0.67	10.2 ±0.00	-34.2±0.14
P.B (25 mg/kg)	6.30 ±0.72	7.00 ±0.30	-11.0±0.81
P.B (50 mg/kg)	7.40 ±0.50	7.10 ±0.44	4.1± 0.45 *
P.B (100 mg/kg)	5.10 ±0.55	4.20 ±0.51	17.7±0.33**
Ketoconazole	6.50 ±0.28	5.42 ±0.64	16.6±0.27**

n = 6; *Significantly different from the control at p<0.05; **Significantly different from the control at P < 0.01.

Table 3. Semi-quantitative scoring assessment of histological sections during skin wound healing in rats (before dexamethasone induced hyperglycaemia).

Scale	Epithalization	PMNL	Fibroblasts	New vessels	Collagen
0	Thickness of cut edges	Minimal	Absent	Absent	Absent
1	Migration of cells (<50%)	Mild	Mild	Mild	Mild
2	Migration of cells (≤50%)	Mild	Mild	Mild	Mild
3	Bridging the excision	Moderate	Moderate	Moderate	Moderate
4	Keratinization	Marked	Marked	Marked	Marked

new vessels, and new collagen. Sections were evaluated according to the scale: 0, 1, 2, 3, and 4 by two independent observers (Gupta and Kumar, 2015). The mean value was used for statistical comparison.

Statistical analysis

All data were expressed as mean values ±standard error of mean (SEM). Data were compared using one-or two-way analysis of variance (ANOVA). Semi-quantitative evaluation was analyzed using Mann-Whitney test. Differences were considered significant for P values <0.05.

RESULTS

Table 1 shows that administration of dexamethasone induced increase serum glucose level however the

hyperglycaemia was reversed by significant dose dependent of the extracts of *P. biglobosa*, this was highly significant in the groups receiving 100 mg/kg *P. biglobosa* extract and ketoconazole.

Dexamethasone induced higher increase in serum glucose level; high significant hypoglycaemia was observed in groups treated with 100 mg/kg *P. biglobosa* extract compared with the groups receiving normal saline as indicated in Table 2.

Table 3 and 4 show 4-point scale of the semi-quantitative analysis of histological section, 0 scale shows thickness of cut edges with absence of polymorphonuclear leucocytes (PMNL), fibroblasts, new vessels, and new collagen. Migration of cells <50% with mild surrounding tissues, mild subcutaneous tissues and minimal granulation tissue were described by scale 1,

Table 4. Semi-quantitative scoring assessment of histological sections during skin wound healing in rats (After dexamethasone induced hyperglycaemia).

Scale	Epithalization	PMNL	Fibroblasts	New vessels	Collagen
0	Thickness of cut edges	Absent	Absent	Absent	Absent
1	Migration of cells (<50%)	Mild	Mild	Mild	Minimal
2	Migration of cells (≤50%)	Mild	Mild	Mild	Mild
3	Bridging the excision	Moderate	Moderate	Moderate	Moderate
4	Keratinization	Marked	Marked	Marked	Marked

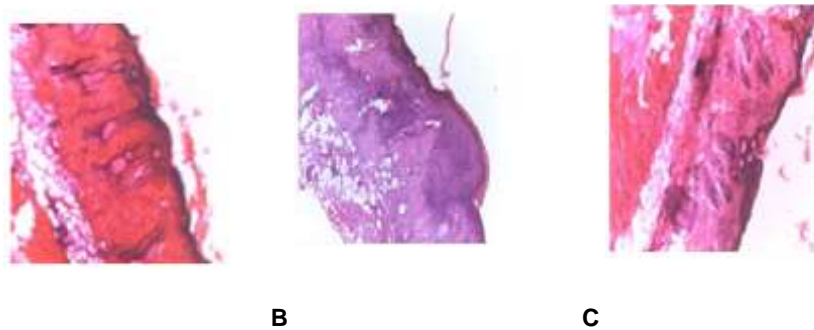


Figure 1. Histological structures of healed skin wounds on day 14 of pre wounding (stained with hematoxylin and eosin X 10). A=Control (Pre-treated), B=Pre-treated (100 mg), C=Ketoconazole.

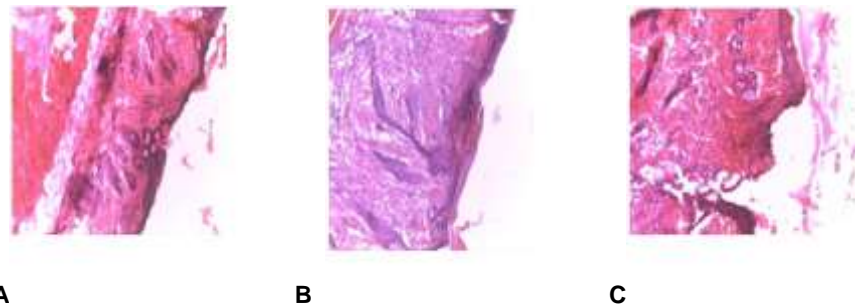


Figure 2. Histological structures of healed skin wounds on day 14 of post wounding (stained with hematoxylin and eosin X 10). A= Control, B= Post-treated (100 mg); C=Ketoconazole.

scale 2 was used to evaluate migration of cells >50% mild demarcation line or granulation tissue with mild granulation tissue. Scale 3 describes bridging of the excision, moderate tissue out of the granulation tissue and moderate granulation tissue while keratinization, marked surrounding tissue and marked granulation was evaluated by scale 4.

In the photomicrograph of pre-treated and post-treated groups, administration of 100 mg/kg of pre-treated and post treated *P. biglobosa* extract indicated increased

fibroblast growth, collagen synthesis, and the healing process as illustrated in Figures 1 and 2.

DISCUSSION

In this study, rat was used as an experimental animal model, since rat skin represents one of the most common models used in experimental studies concerning the skin wound healing. It is a useful model because we can study

the healing of three different tissue types (epidermis, dermis and striated muscle) and it is only epidermis that has the capability to regenerate (Vidinský et al., 2006).

In the pre-treated groups, the antihyperglycemic activity of the *P. biglobosa* extract in dexamethasone-treated animals may be due to decrease peripheral insulin resistance or by suppression of enzymes involved in hepatic gluconeogenesis as well as by stimulation of glucose uptake and use in peripheral tissues similar to study conducted by Shanmugasundaram et al. (1983) and Persaud et al. (1999). Decrease in serum glucose level may also be mediated through an increase in insulin release from pancreas according to the research carried out by Caro and Amatruda (1982).

Corticosteroid-induced diabetes mellitus mechanism involves insulin resistance, caused by the alteration in binding of insulin to its receptor (receptor defect) or by the impairment of the intracellular response to insulin (Rizza et al., 1982). Hyperglycaemia inhibits wound healing process associated with prolonged inflammatory phase (Naguib et al., 2004) defected angiogenesis (Goren et al., 2006) and diminished fibroblast proliferation (Hehenberger and Hansson, 1997).

In order to effectively manage chronic wounds, periodic assessment of the healing process is necessary (Mullins et al., 2005). A semi-quantitative score was adopted in this study for scoring the degree of changes observed on an ordinal scale, namely, low, medium or high grade. Even though quantitative scoring system is highly specific and standardized due to difficulty to objectify the exact interval between two values, semi-quantitative scoring systems remain in wide use in the world of the biomedical research (Lemo et al., 2010).

Corticosteroid induced diabetic wound-healing indicated a reduction in the contraction of open wounds, decreased capillary volume, decreased number of polymorphonucleocytes, increased edema, decreased number of fibroblasts, decreased neovascularization, and increased rate of infection. This reduction is related to a delay in the appearance of inflammatory cells and to a reduction in fibroplasia, a new connective tissue matrix, collagen synthesis and deposition, and wound breaking strength (Bitar, 1998).

Wound healing is composed of three stages namely inflammation, proliferation and remodeling (Whaley and Burt, 1996). The proliferative stage typically demonstrates angiogenesis, collagen deposition, granulation tissue formation, epithelialization and wound contraction. In angiogenesis, new blood vessels are formed from endothelial cells (Cotran, 1999).

Increased collagen deposition, regeneration, and well-aligned tissue observed in both pre and post-treated groups are in accordance with a study, which reported prohealing parameters (Muhammadu et al., 2016).

The influence of various factors on the wound healing was evaluated histologically on the fourteenth day similar

to study conducted by Whelan et al. (2003). In the present study the most significant changes occur during the first week of wound healing, this correlates with the study conducted by Medrado et al. (2003).

Differentiation of fibroblasts into myofibroblasts was observed during the healing process. Myofibroblasts synthesize extracellular matrix components such as collagen types I and III. Indicator for the assessment of wound healing is fibroblast proliferation (Park et al., 2005). The major cell type found in the granulation of wound tissues is fibroblasts. They play important role in wound healing including secretion of a series of growth factors that facilitates angiogenesis, proliferation and matrix deposition (Mansbridge et al., 1999).

Studies conducted on the phytochemical screening of *P. biglobosa* showed the presence of phytoconstituents such as anthraquinones, tannins, flavonoids, terpenes, saponins, phenols and steroids (Builders et al., 2016); these may be attributed to the wound healing activity of *P. biglobosa*. The enhanced wound healing activity of this extract could be related to a function of either the individual or the additive effects of the phytoconstituents which is similar to research conducted by Liu et al. (2013). These bioactives have been reported to possess pharmacological properties such as antimicrobial, antioxidant, analgesic, and anti-inflammatory activities which promote the wound-healing process mainly due to wound contraction and increased rate of epithelization (Liu et al., 2013).

Conclusion

The wound healing activity of *P. biglobosa* extract in a simple experimental model has been established. Further studies are in progress in our laboratory to isolate and characterize the relevant bioactive components and elucidate the mechanisms of actions of these active ingredients.

CONFLICT OF INTERESTS

The authors have not declared any conflict of interests.

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Full Length Research Paper

Neferine and isoliensinine from *Nelumbo nucifera* induced reactive oxygen species (ROS)-mediated apoptosis in colorectal cancer HCT-15 cells

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Several scientific reports documented the potent anti-cancer effect of various natural products such as curcumin, epigallocatechin gallate (EGCG), resveratrol via the rise in reactive oxygen species (ROS) and dysfunction of anti-apoptotic gene expressions. The present study evaluated the anticancer potential of lotus derived alkaloids, neferine and isoliensinine on colorectal cancer HCT-15 (CRCs) cells. Neferine/isoliensinine treatments induced cytotoxicity with sequential enhancement of intracellular ROS, intracellular calcium $[Ca^{2+}]_i$ and mitochondrial membrane potential ($\Delta\psi M$). Furthermore, cell cycle, Annexin FITC and PI uptake were carried out by flow cytometry. Activation of p38 MAPK and apoptotic genes expression was done by western blotting and reverse transcription polymerase chain reaction (RT-PCR) respectively. Results indicate neferine/isoliensinine induced hyper-generation of ROS was responsible for their cytotoxic effect in CRCs consequently, with a significant increase in $[Ca^{2+}]_i$ followed by a significant decrease in the $\Delta\psi M$. The above treatments induced cell cycle arrest at G1 phase whereas apoptosis was indicated by upregulation of p38 MAPK, Bax, caspase 9, caspase 3, cleaved poly (ADP-ribose) polymerase (PARP) and down-regulation of Bcl2. In conclusion, this is the first study of anticancer effect of neferine/isoliensinine via apoptotic mechanism in CRCs and the results suggest that neferine/isoliensinine induced apoptosis through the ROS generation, activation of p38 MAPK which in turn induces mitochondrial mediated apoptosis.

Key words: Neferine, isoliensinine, reactive oxygen species (ROS), HCT-15, apoptosis.

INTRODUCTION

Recent research focus has shifted towards natural products as chemotherapeutic agents.

Vincristine, irinotecan, etoposide and paclitaxel are some plant-derived natural compounds that are used in cancer

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medicine. The chief source of bisbenzylisoquinoline alkaloids is *Nelumbo nucifera* (Nymphaeaceae) often referred to as the medicinal lotus plant. Several vegetative parts plant such as rhizomes, stem, seeds, leaves, and embryos are extensively used in Chinese and Indian traditional medicine to treat skin diseases, cardiovascular diseases and neurodegenerative disorders (Asokan et al., 2018). However, the extracted compounds of this plant have been used in treating hypertension, lung diseases and microbial diseases of humans in several Asian nations. Several chemical constituents such as glycosides, steroids, fatty acids, alkaloids, minerals, and vitamins have been isolated from several parts of the *N. nucifera*. In the present scenario, the isolated alkaloids from seeds, stem, and plumule of *N. nucifera* have shown profound therapeutic efficacy in treating various metabolic diseases including cancer. Neferine is a bis-benzylisoquinoline alkaloid extracted from the seed embryo of *N. nucifera* and several research reports have illustrated that the isolated neferine possess pharmacological efficacy *in vitro* against cancer.

Colon rectal cancer (CRC) is the third most prevalent cancer worldwide. As per the United States Surveillance and Epidemiological studies, the number of CRC patients is predicted to increase to 90% by 2030 (Koosha et al., 2016). The incidence of CRCs has been on the rise in the past few decades due to changes in the lifestyle which include technological development, unhealthy food habits and sedentary life. Current clinical treatment options include surgery followed by chemotherapy. Chemotherapy causes adverse side effects such as alopecia, diarrhoea, myelosuppression and immune suppression which in turn reduce the quality of life in these patients (Bagheri et al., 2018). Hence, there is an urgent requirement for new therapeutic interventions with minimal side effects.

Oxidative stress plays a major role in several pathological conditions such as cancer, cardiovascular diseases and neurodegenerative diseases (Zhang et al., 2015). ROS generation is a cellular event which occurs during normal metabolism as well as in pathological conditions, whether it is beneficial or harmful is based on the cellular antioxidant status. An imbalance of reactive oxygen species (ROS) and cellular antioxidants result in various pathological conditions including cancer. Several studies suggest ROS involvement in various forms of cell death namely apoptosis, autophagy and necrosis (Su et al., 2019). Growing body of evidence also suggests higher ROS levels in cancer cells compared to normal cells (Kumari et al., 2018). Further, these studies indicate that cancer cells are more susceptible to ROS mediated apoptosis induced by exogenous agents compared to normal cells. Further, these studies indicate that cancer cells are more susceptible to ROS mediated apoptosis

induced by exogenous agents compared to normal cells (Poornima et al., 2013a). Previous reports have suggested apoptosis induction through ROS mediated activation of p38 (Zhang et al., 2015).

Several studies have reported the anticancer effect of isolated natural product, that is, neferine in various cancer cells (Asokan et al., 2018). Neferine induced apoptosis in osteosarcoma cells through the modulation of stress-activated protein kinase, that is, p38 MAPK signalling (Zhang et al., 2012). This natural compound has been reported to enhance the therapeutic efficacy of anticancer agents namely doxorubicin and cisplatin against A549 cells (Sivalingam et al., 2017) while it enhanced the therapeutic efficacy of mitomycin-C in cervical cancer (Hela) cells (Eid and Abdel-Rehim, 2017). Neferine induced autophagy was reported in lung (Poornima et al., 2013b) and ovarian cancer cells (Xu et al., 2016). Recent reports documented that isoliensinine causes apoptosis mode of cell death in triple negative breast cancer (MDA-MB-231) through ROS mediated MAPK pathway (Zhang et al., 2015) and in hepatocellular carcinoma by modulating NF- κ B (Shu et al., 2015) pathway. Further, it induced autophagy-mode cell death in cervical cancer cells (Law et al., 2014). However, there are no reports regarding the anticancer potential of neferine/isoliensinine in CRCs. Hence, the present study evaluates the comparative efficacy of these alkaloids against CRCs.

MATERIALS AND METHODS

Chemicals and cell culture

Neferine (CAS No.2292-16-2) and isoliensinine (CAS.No.6817-41-0) were purchased from Sigma and Baojiher best bio-tech Co. Ltd., China. The cell culture media, RPMI 1640 was purchased from Gibco. PARP, p38 and pP38 primary antibodies were purchased from Cell Signalling Technology. All the primers used for this study as well as propidium iodide were purchased from Sigma chemicals. Annexin V FITC kit was purchased from BD bioscience.

HCT-15 cell line was obtained from National Centre for Cell Science (NCCS), Pune, India. Cells were cultured in RPMI1640 media containing 10% fetal bovine serum and were maintained at 5% CO₂ with 95% humidity. In addition, the cells were supplemented with penicillin (100 units/ml), streptomycin (30 μ g/ml) and gentamycin (20 μ g/ml) antibiotics. All the experiments were carried out within 20 passages (Passage no. 50 to 70) to conform reproducibility and consistency of cell population.

Cell proliferation and clonogenic assay

1 \times 10⁵ cells per well were seeded in 96 well plates and left overnight for cell attachment. Afterwards, cells were treated with neferine and isoliensinine for 24 h time period. At the end of the treatment period, the media was removed and 5 mg/ml of 3-(4, 5-Dimethylthiazol-2-Yl) -2, 5-Diphenyltetrazolium Bromide (MTT) was added and left for 4 h. Subsequently, DMSO was added to dissolve

the formazan crystals and reading was obtained at 570 nm.

For clonogenic assay, 500 viable cells from control and treated groups were cultured for 14 days to form clones. After two weeks, cells were fixed with methanol and stained with 0.3% of crystal violet stain and the colonies were counted.

Lactate dehydrogenase (LDH) and nitric oxide (NO) release

HCT-15 cells were treated with neferine/isoliensinine for 24 h. After treatment, the LDH leakage in culture supernatant was ascertained using lithium lactate (30 mM), glycine buffer ((50 mM), pH-10), and nicotinamide adenine dinucleotide (NAD, 3 mM). The activity of LDH was measured by conversion of lithium lactate to pyruvate, in the presence of NAD, by using dinitrophenylhydrazine (DNPH) as the colorimetric reagent at 420 nm in Synergy H1 Multi-Mode Reader (Biotek). LDH activity was calculated by a standard linear graph on pyruvate using regression analysis and expressed in terms of percent leakage of LDH. Nitric oxide released inside the culture subsequently measured using Greiss reagent (Stuehr and Marletta, 1987) in terms of nitrite content as nitrite is considered as the stable output product of nitric oxide and represented in 'nM'.

Cell cycle analysis

To determine the effect of neferine/isoliensinine on cell cycle phases, 5×10^6 cells were seeded per well in 6 well plates, after overnight attachment, cells were treated with neferine/isoliensinine for 24 h. At the end of the treatment schedule, cells were harvested and fixed with 70% ethanol overnight at 4°C. Later, the cells were subjected to PBS washings subsequently stained with propidium iodide (PI) and incubated for 30 min, at room temperature. Cells were analyzed by BD C6 Accuri.

Reactive oxygen species (ROS) analysis

Intracellular ROS level was determined by the fluorescent probe, DCFDA. Briefly, 2×10^5 cells were seeded in 24 well plates. After attachment, cells were washed with PBS and incubated with DCFH-DA at 37°C for 30 min, in a CO₂ incubator. Subsequently, these cells were treated with neferine (0, 15, 30, 45 min, and 1 h)/isoliensinine (0, 1, 2, 3, 4, and 5 h) at different time points. One treatment group with H₂O₂ (50 µM) was included to serve as a positive control. At the end of the treatment period, the cells were harvested, centrifuged, washed and resuspended in PBS and the fluorescent intensity was measured using spectrofluorimetry as Ex./Em., at 480/520 nm. The estimations were carried out in triplicates, keeping the number of cells per treatment group the same to ensure reproducibility. The fluorescence peak was used to represent the level of ROS production. The values were expressed as percentage of relative fluorescence.

Intracellular Ca²⁺ level

Intracellular calcium level in treated and untreated cells was determined using fluorescent dye, 'FURA-2/AM' by Spectrofluorimetry. Briefly, 1×10^5 cells were seeded in 24 well plates and treated with neferine/isoliensinine for 24 h. At the end of treatment schedule, the media was removed and cells were washed twice with buffer A (Na₂HPO₄ (0.2 mM), CaCl₂ (2 mM), NaCl (137 mM), KH₂PO₄ (0.5 mM), NaHCO₃ (4 mM), KCl (5 mM)); cells were incubated with FURA-2/AM in buffer A for 45 min, and after the incubation, florescent intensity was measured as Ex./Em., at 500/340 nm. The values of calcium release were represented as % of relative fluorescence intensity compared to untreated.

Mitochondrial membrane potential measurement

Mitochondrial membrane integrity in different treatment groups was assessed in terms of retention of the dye Dio6 (3, 3'-dihexloacarbocyanine iodide) in comparison with control. CRCs were treated with neferine/isoliensinine for the 24 h time period. After the treatment period, the media was removed and cells were washed twice using PBS. Then, the cells were loaded with Dio6 dye (50 nm), incubated for atleast 30 min and the fluorescence intensity was measured at 488/500 nm (Ex./Em.) using spectrofluorometer (Biotek, US). Cells were incubated with CCCP (50 µM) for 15 min (induce mitochondrial depolarization) prior to loading with DiOC6-dye for the positive control. Finally, the mitochondrial membrane potential ($\Delta\psi$ M) was expressed in terms of percentage of relative fluorescence intensity when compared with control.

Scanning electron microscopy (SEM) analysis

Surface morphological changes of neferine/isoliensinine treated and untreated HCT-15 cells were determined by SEM. After treatment, cells were fixed with 2.5% glutaraldehyde in 0.1 M cacodylate buffer at room temperature for 1 h. Then, the cells were washed with cacodylate buffer twice. Followed by secondary fixation with 1% Osmium tetroxide in 0.1 M cacodylate buffer at room temperature for 1 h, the cells were dehydrated with increasing concentration of ethanol (30, 60, 90 and 100%) each for 30 min. Finally, the samples were air dried and viewed under scanning electron microscopy.

Western blotting

Total protein was collected from treated and untreated cells using lysis buffer (Sigma Aldrich). Total protein was estimated by Bradford method. Equal amount of proteins were separated in 10% gel using SDS-PAGE unit at 100 V for 2 h. Separated proteins were transferred to nitrocellulose membrane using semidry equipment. After membranes were blocked with 5% non-fat milk protein for 1 h in TBST, they were washed with TBST thrice at room temperature. Then, the blots were incubated with specific primary antibody at 4°C overnight. Next day, the blots were washed with TBST thrice for 5 min, each. Finally, the blots were incubated with HRP-linked secondary antibody for 2 h. Subsequently, DAB and H₂O₂ were added and blots stored in the dark till the bands appeared.

Quantitative real-time PCR analysis

After treatment schedule, RNA was isolated by conventional trizol method and quantified by take3 plate (Biotek). 1 µg or 500 ng of RNA was used for cDNA conversion according to manufacturer's protocol (Takara A1640). Gene expressions of treated and untreated groups were determined by real time PCR analysis and changes in mRNA expression levels normalized by GAPDH. Primers sequences used are listed in Table 1 (Ravi et al., 2015; Shafiee et al., 2016).

Propidium iodide (PI) uptake

Briefly, 2×10^5 HCT-15 cells were seeded in 12 well plates and left for overnight attachment. Subsequently, the cells were treated with neferine/isoliensinine for 24 h. Cells from different treatment groups were harvested and washed with PBS and stained with PI for 10

Table 1. Primer sequences used for real-time RT-PCR analysis.

S/N	Gene	Forward (5'-3')	Reverse (5'-3')
1	<i>BAX</i>	TGCTTCAGGGTTTCATCCAG	GGCGGCAATCATCCTCTG
2	<i>Bcl2</i>	AGGAAGTGAACATTTCCGGTGAC	GCTCAGTTCCAGGACCAGGC
3	<i>CASPASE-3</i>	CAGCACCTGGTTATTATTCT	TTGTCCGCATACTGTTTC
4	<i>CASPASE-9</i>	CCAGAGATTCGCAAACCAGAGG	GAGCACCGACATCACCAAATCC
5	<i>GAPDH</i>	ACCCAGAAGACTGTGGATGG	CAGTGAGCTTCCCGTTCAG

min, subsequently the stained cells were analyzed by flow cytometry.

Annexin V/PI apoptosis assay

Neferine/Isoliensinine-induced apoptosis in HCT-15 cells were determined by flow cytometry. Briefly, HCT-15 cells were treated with neferine/isoliensinine for 24 h. Then, cells were stained with Annexin V and PI according to BD bioscience kit protocol and analyzed using flow cytometry.

Statistical analysis

All the experiments were carried out independently three times. The data were obtained and expressed in terms of mean and standard deviation (SD). Statistical analysis was performed using one-way analysis of variance (ANOVA) to express the difference between the groups using SPSS 20.0 Software.

RESULTS

Cell viability and colony formation assay

Cytotoxic effects of neferine/isoliensinine on colon cancer HCT-15 cells were assessed by MTT assay. The cells were treated with various concentrations of neferine/isoliensinine for 24 h. As shown in Figure 1A, neferine/isoliensinine suppressed the proliferation of colon cancer HCT-15 cells in a dose-dependent manner and the IC_{50} values were found to be 8.95 ± 1.3 and 12.0 ± 1.5 μ M, respectively (Figure 1B). As shown in Figure 1D, untreated HCT-15 cells showed normal morphology whereas treatment with IC_{50} dose of neferine/isoliensinine resulted in cellular morphology alterations such as cell shrinking and rounding in addition to floating of dead cells in the medium. Furthermore, the effect of neferine/isoliensinine on colony forming ability of HCT-15 cells was analyzed by clonogenic assay. The results showed that both neferine/isoliensinine significantly decreased the colony formation ability in a dose-dependent manner in HCT-15 cells compared to control (Figure 1C).

NO and LDH release

As shown in Figure 2A and B, when HCT-15 cells were

treated with IC_{50} doses of neferine/isoliensinine, a significant increase in the concentration of NO and LDH compared to control were observed in the culture supernatant, representing the cytotoxic effect of neferine/isoliensinine on colon cancer HCT-15 cells.

Generation of ROS level

In order to determine the effect of neferine and isoliensinine treatment on 'ROS generation' in HCT-15 cells, a time course study was carried out with the fluorescence probe (DCFDA) where H_2O_2 was used as positive control. Neferine/isoliensinine treated cells showed a significant increase in the intracellular ROS levels in a time-dependent manner. As shown in Figure 3A and B, neferine treated HCT-15 cells showed a significant increase in ROS generation within 15 min, which further peaked at 30 min, whereas the isoliensinine treated HCT-15 cells showed a significant ROS generation at 1 h, which peaked at 3 h time point.

$[Ca^{2+}]_i$ release

The intracellular concentration was measured using fluorescence dye, FURA-2/AM in different treatment groups. As shown Figure 3C, neferine and isoliensinine treatments increased intracellular $[Ca^{2+}]_i$ level in HCT-15 cells compared to control.

Mitochondrial membrane potential ($\Delta\psi M$)

As mitochondrial integrity plays an important role in apoptotic mode of cell death and the changes in $\Delta\psi M$ in HCT-15 cells were observed by DioC6 dye loading. As shown in Figure 3D, a significant decrease in $\Delta\psi M$ was observed in neferine/isoliensinine treated HCT-15 cells as evidenced by reduction of DioC6 fluorescence compared to control cells. CCCP (50 μ M) served as positive control as this could induce mitochondrial membrane damage.

Cell cycle analysis

Cell cycle analysis of different treatment groups was

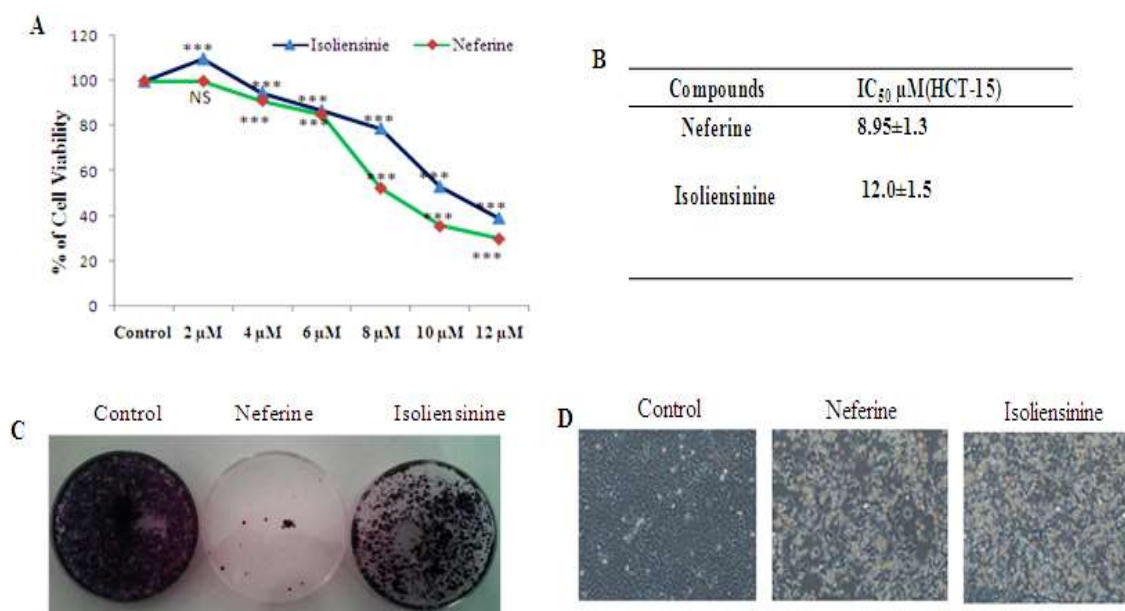


Figure 1. Neferine/Isoliensinine induced cytotoxicity on HCT-15 cells. HCT-15 cells were treated with neferine/isoliensinine for 24 h. (A) Cell viability was assessed by MTT assay and the results were expressed as % cell viability. (B) IC₅₀ values (μM) were determined. (C) HCT-15 cells treated with neferine/isoliensinine were subjected to long time colony formation, and the number of colonies formed was observed. (D) Effect of neferine/isoliensinine induced morphological changes were observed by light microscopy. Neferine/Isoliensinine treated cells showed distinct morphological changes, which suggest the cytotoxic nature of the compounds such as cell rounding and detachment compared to control. These figures are representative of one experiment out of three with similar results. The results were shown in three separate experiments carried out in triplicates and expressed as Mean ± S.D (**p<0.001 (0.0001), compared to control, non-significant-p>0.05 (0.12)).

determined by flow cytometry. The results revealed that neferine/isoliensinine treatment for 24 h led to a significant increase in the percentage of cells in G1-phase of cell cycle (62.4% vs. 75.5% and 63.1% vs. 74.4%) whereas a significant decrease was observed in the percentage of cells in G2/M-phase of cell cycle (28.9% vs. 12.2% and 31.6% vs. 12.7%) (Figure 4A). Neferine/Isoliensinine treatments have resulted in a significant increase in a number of cells in the G1 phase of the cell cycle compared to control cells. The results suggest that both neferine/isoliensinine treatments of CRCs resulted in the cell cycle arrest at G1 phase.

Morphological changes

Scanning electron microscopy (SEM) results revealed that cells treated with neferine and isoliensinine induces distinct morphological changes indicated by the appearance of apoptotic bodies and cell shrinkage (Figure 4D).

Apoptosis

Annexin V/PI staining indicates increased percentage of early apoptotic cells from 4.9% (control) to 27.49% with

neferine and from 4.9 to 23.44% with isoliensinine (Figure 4C). Propidium iodide uptake increased in neferine/isoliensinine treated cells when compared with control as shown in Figure 4B.

The imbalance in Bax/Bcl2 would result in the release of cytochrome-c from mitochondria, resulting in caspase-3 activation and subsequent initiation of apoptosis. Therefore, we observed the level of Bax and Bcl2 by real time PCR in neferine/isoliensinine treated cells. Both neferine/isoliensinine treatments significantly decreased the expression of Bcl2 and increased the expression of Bax compared to untreated cells (Figure 5A and C).

Activation of caspase 3 and PARP cleavage are the hallmarks of apoptosis. We examined the expression of caspase 3 (gene expression) and PARP cleavage through western blot analysis in neferine/isoliensinine treated HCT-15 cells. As shown in Figure 5B and E, neferine/isoliensinine increased the expression of caspase 9, 3 and triggered the cleavage of PARP protein in HCT-15 cells.

Activation of MAPK pathway

Western blot analysis of MAPK pathway proteins such as p38 and pP38 and PARP revealed neferine/isoliensinine

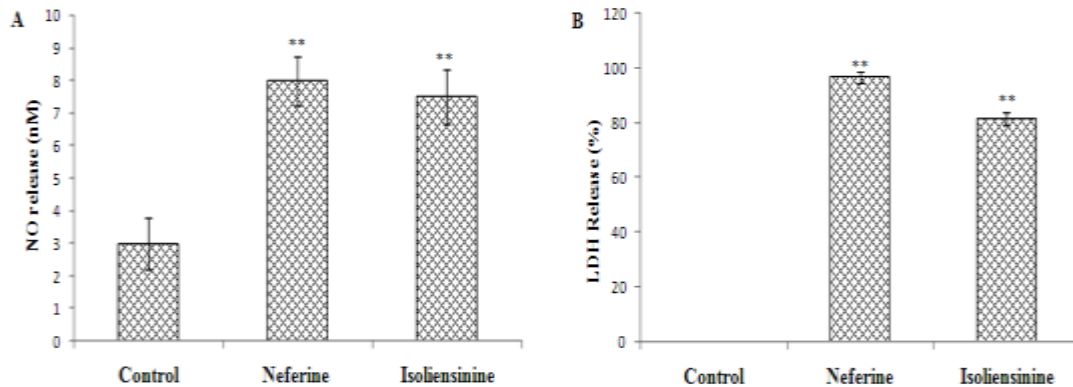


Figure 2. Effect of neferine/isoliensinine treatment on nitric oxide generation (NO) measured in terms of nitrite level (A) and lactate dehydrogenase (LDH) leakage (B) in the extracellular medium (after treatment to HCT-15 cells) were measured to assess membrane integrity (** $p < 0.01$, compared to control).

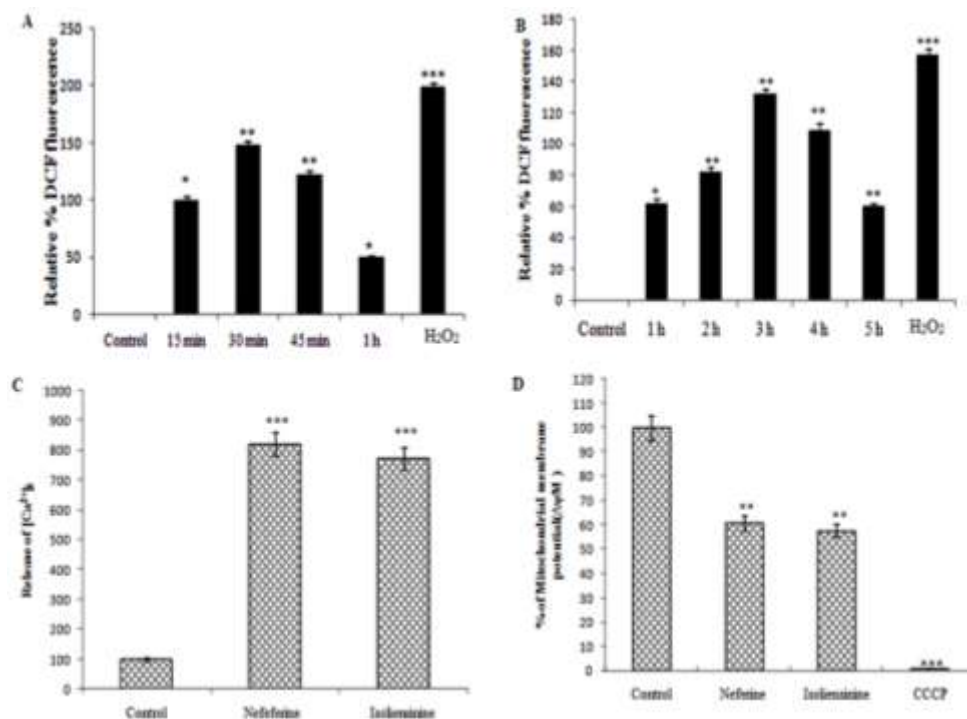


Figure 3. Time course study was carried out to determine the effect of (A) neferine/isoliensinine and (B) treatment on ROS generation in HCT-15 cells. Intracellular ROS concentration was determined by treating DCF-DA loaded HCT-15 cells with neferine/isoliensinine for different treatment periods. Results were expressed as relative DCF fluorescence in % compared to control and H₂O₂ was used as positive control. (C) Intracellular calcium concentration was measured in neferine/isoliensinine treated HCT-15 cells and results were expressed as relative FURA-2/AM fluorescence. (D) Mitochondrial membrane potential ($\Delta\Psi_m$) was measured in Spectrofluorimetry using DiOC6 in neferine/isoliensinine treated HCT-15 cells. To compare the loss of $\Delta\Psi_m$ induced by neferine/isoliensinine, CCCP was used as a positive.

treatment of CRCs induced the up-regulation of p38 and p38 protein expression and cleaved PARP as shown in

Figure 5E compared to control CRCs. Together, these data suggest that treatment with neferine/isoliensinine

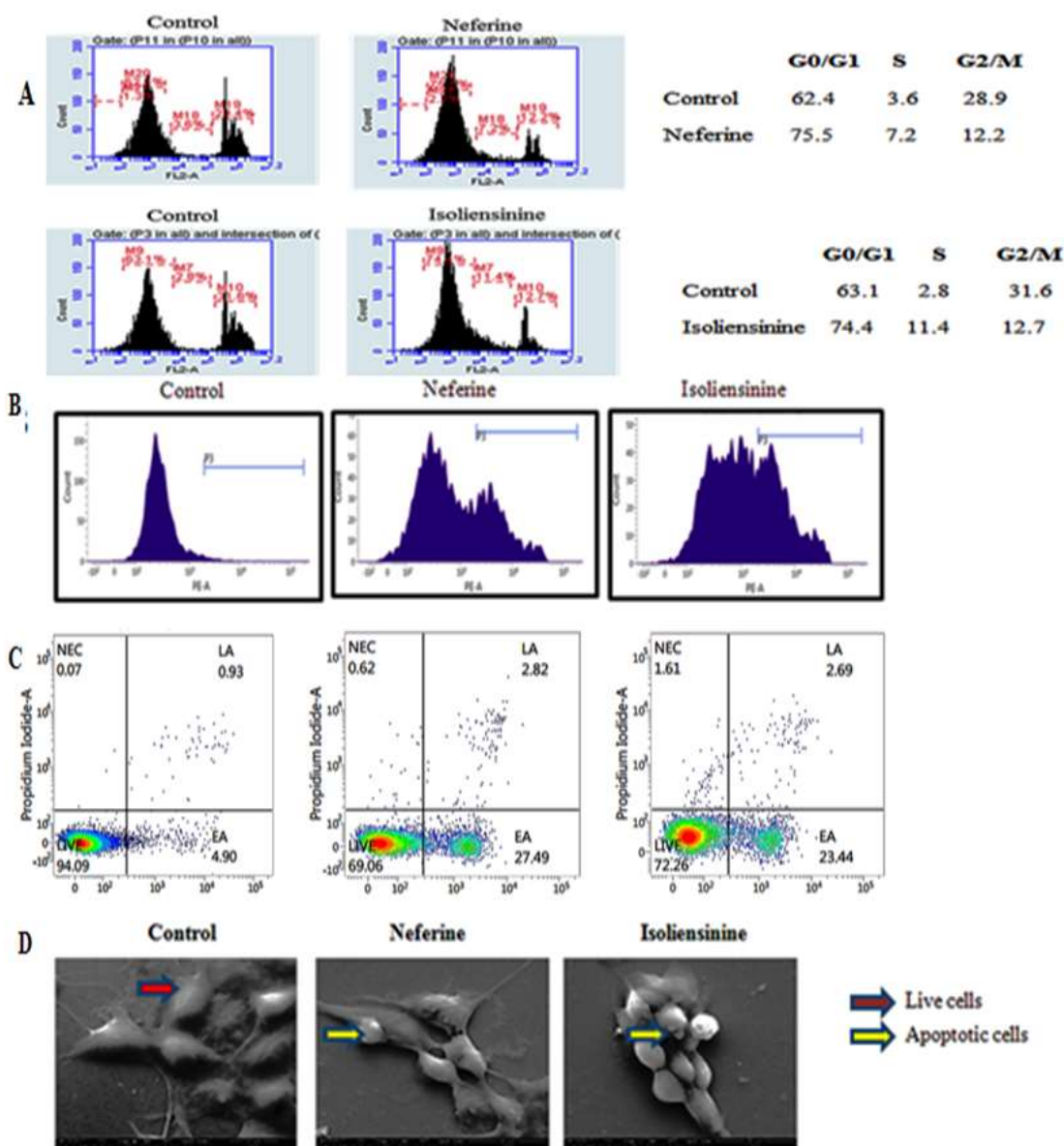


Figure 4. (A) Cell cycle distribution in neferine/isoliensinine treated HCT-15 cells was analyzed by flow cytometry using propidium iodide. (B) Propidium iodide (PI) uptake in neferine/isoliensinine treated HCT-15 cells was determined by flow cytometry. We confirmed the cytotoxic effect and apoptosis inducing nature of neferine/isoliensinine on HCT-15, results revealed that uptake of PI were more in neferine/isoliensinine treated cells. (C) Apoptosis inducing ability of neferine/isoliensinine treatment on HCT-15 cells were analyzed by flow cytometry. The % of Annexin V positive cells indicates the apoptotic induction. The results shown were representative of three separate experiments with similar results. (D) HCT-15 cells were treated with neferine/isoliensinine for 24 h, fixed and analyzed under scanning electron microscopy. Control cells, Neferine and Isoliensinine treated cells.

induce mitochondria-mediated apoptosis in CRCs.

DISCUSSION

Natural compounds serve as an important source of

therapeutics especially for the treatment of cancer. Vincristine, irinotecan, etoposide and paclitaxel are some of the natural compounds approved as cancer therapeutic drugs by Food and Drug Administration (Newman and Cragg, 2016). Previous reports of our group and other researchers have documented the

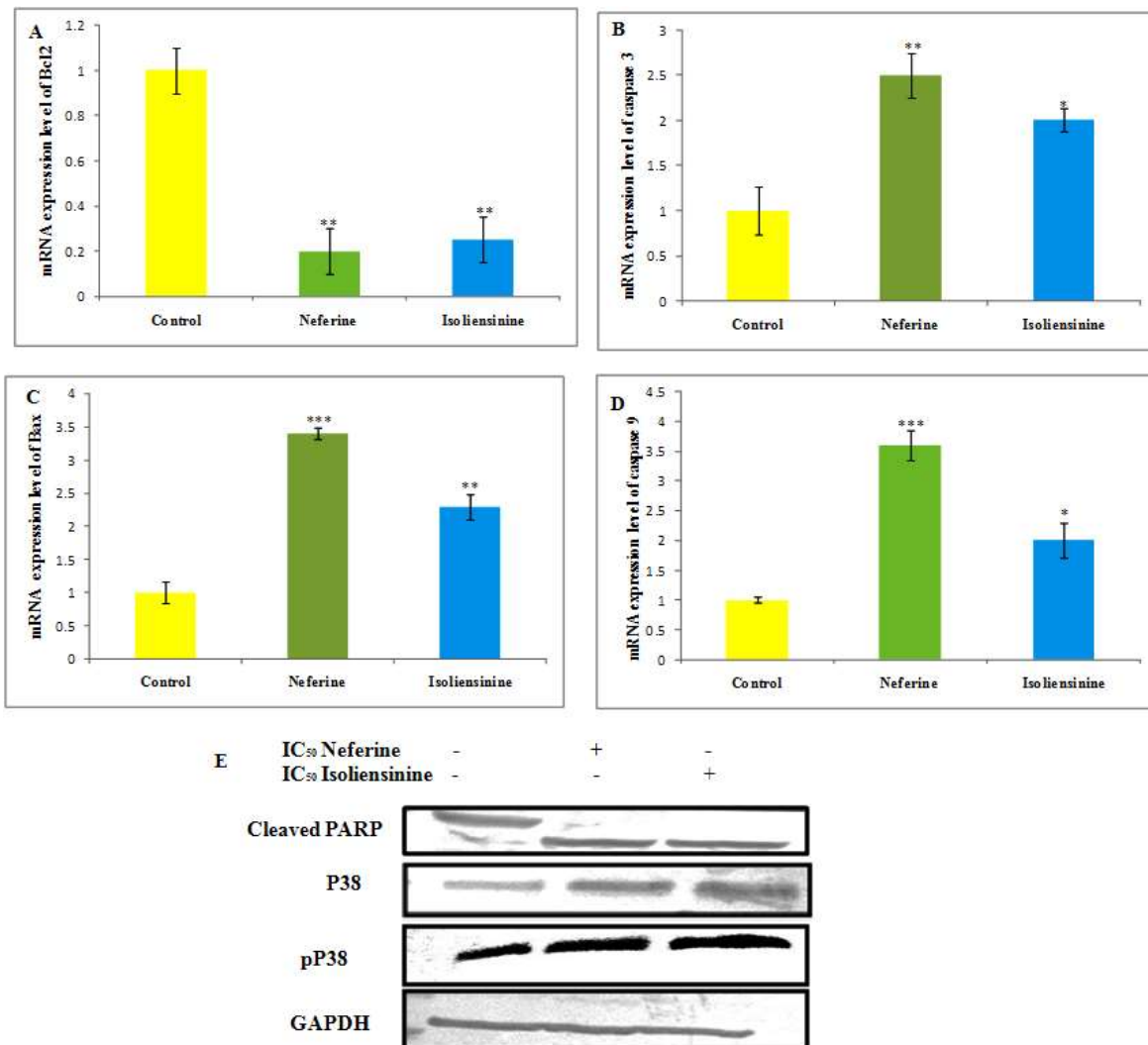


Figure 5. (A-D) Gene expression profile of caspase 9, caspase 3, Bax and Bcl-2 were carried out by Real-time PCR analysis in neferine/isoliensinine treated HCT-15 cells. All the gene expression levels were normalized by GAPDH, used as internal control. All the experiments were repeated three times with same results. (E) Effect of neferine and isoliensinine on MAPK and apoptosis protein expression. Equal amount of protein was loaded in SDS-PAGE, and electrophoresed and transferred on to nitrocellulose membrane subsequently; the expression of protein was detected by specific antibody as mentioned in methodology. GAPDH served as internal control. Each bar represents the mean of triplicate \pm S.D (***) p <0.001, (**) p <0.01, (*) p <0.05 compared to control).

anticancer activity of neferine and isoliensinine through induction of apoptosis and autophagy in various cancer cells (Law et al., 2014; Shu et al., 2015; Xu et al., 2016; Yoon et al., 2013).

Recent reports suggest that isoliensinine selectively induces apoptosis in triple-negative breast cancer cells. Their study assessed cytotoxic effects of isoliensinine, liensinine and neferine on triple-negative human breast cancer cells and has reported that isoliensinine possesses the most potent anti-cancer activity among the three alkaloids. These molecular studies were performed to conclude the protective efficacy of isoliensinine based

on cytotoxic studies and authors have failed to demonstrate the molecular mechanism behind the anticancer activity of neferine and liensinine on triple negative breast cells (Zhang et al., 2015). In the present study, we have compared the anticancer efficacy of the two alkaloids of the lotus seed embryo namely neferine and isoliensinine in HCT-15 cells. To our knowledge, this is the first report of anticancer activity of neferine and isoliensinine on colorectal cancer HCT-15 cells.

ROS generation plays a vital role in modulation of cell signaling pathways (Subramanian et al., 2016). ROS generation has been implicated in various disease

conditions including cancer and it has also been reported to be the initiator of different modes of cell death in normal as well as cancer cells (He et al., 2016; Mohan et al., 2016; Salimi et al., 2015; Wang et al., 2012). Thus, ROS generation is a key event in cellular homeostasis. Further, it was reported that neferine and isoliensinine increase the ROS generation which in turn induce apoptosis in cancer cells (Zhang et al., 2015). In the present study, neferine and isoliensinine treatment enhanced ROS generation in HCT-15 cells in a time dependent manner.

Several reports suggest that various stress signals including oxidative stress and cytokines induce activation of p38MAPK. Activation of p38 MAPK has been associated with the induction of apoptosis in cancer cells (Hsieh et al., 2014; Kim et al., 2011; Ramiro-cortes et al., 2011). Recent reports have documented that neferine and isoliensinine induce p38 MAPK pathway-mediated cell death in cancer cells including lung, hepatocellular and triple negative breast cancer cells. Neferine and isoliensinine treatment resulted in the increased expression levels of p38 and Pp38 in HCT-15 cells in the current study which is in line with the aforementioned reports.

Neferine and isoliensinine have been shown to arrest the cell cycle at G1 phase in several cancer cells (Yoon et al., 2013; Zhang et al., 2015). In the present study, both neferine and isoliensinine have been shown to arrest a significant proportion of the cells at G1 phase of cell cycle in HCT-15 cells.

Death receptor and mitochondrial cytochrome c mediated pathways are major apoptosis signaling pathways (Samejima et al., 2001; Pfeffer and Singh, 2018). Contemporary research has shown that the damage of mitochondrial membrane potential leads to mitochondrial mediated apoptosis pathway by release of mitochondrial pro-apoptotic factors (Chen et al., 2018). Several natural products have been reported to induce mitochondrial mediated apoptosis in cancer cells (Liang et al., 2017; Subramanian et al., 2016). Bcl-2 and its homologues inhibit the release of cytochrome c by adhering to the mitochondrial membrane and serve as anti-apoptotic proteins while Bax is known as apoptotic protein which promotes apoptosis. The overall expression rate of these two genes determines the fate of cells. Hence, the proportion of Bcl-2/Bax is typically observed as a standard for the determination of apoptosis. Caspase cascade, a family of cysteine proteases modulates the programmed cell death through sequential activation of caspase 9 and 3 which leads to cleavage of PARP, one of the hallmarks of programmed cell death (McArthur and Kile, 2018).

Past research documented that neferine treatment could induce sequential rise in ROS production in turn trigger increase in intercellular calcium release consequently damages mitochondrial membrane by

activating apoptotic cascade through damaged mitochondria (Poornima et al., 2014b). Similar results were reported with isoliensinine treatment in HepG2 cells (Shu et al., 2015). Recent report documented that the isoliensinine treatment significantly decreased the expression of anti-apoptotic genes, Bcl-2, Bcl-x and increased the expression of apoptotic genes caspase 3, 9 in triple negative breast cancer cells (Zhang et al., 2015). Previous reports indicate neferine and isoliensinine activate caspase 3 and induce PARP cleavage in lung A549 and breast cancer MDA-MB-231 cells, respectively (Zhang et al., 2015). Current study analyzed the mitochondrial membrane potential, intracellular calcium levels and the expression profile of the various genes of the intrinsic apoptotic pathway in HCT-15 cells and the results are in line with the aforementioned reports, which suggest that both the alkaloids induce mitochondrial mediated apoptosis in colon cancer cells. In conclusion, isolated natural products such as neferine and isoliensinine induce apoptotic mode of cell death via oxidative stress and activation of p38 MAPK pathway in HCT-15 cells. The present research findings suggest that neferine and isoliensinine may serve as potential anti-cancer agents against colon cancer cells and they can be recommended as natural medicinal agents in targeting CRCs.

Abbreviations: **AKT**, Protein kinase B; **CCCP**, carbonyl cyanide M-chlorophenyl hydrazine; **DAB**, 3, 3'-diaminobenzidine; **DCFH-DA**, 2',7'-dichlorofluorescein diacetate; **DioC6**, 3, 3'-dihexyloxycarbocyanine iodide; **Fura-2-AM**, fura-2-acetoxymethyl ester; **GAPDH**, glyceraldehyde 3-phosphate dehydrogenase; **HRP**, horseradish peroxidase; **JNK**, Janus kinase; **mTOR**, mammalian target of rapamycin; **NCCS**, National Centre for Cell Science; **PARP**, poly (ADP-ribose) polymerase; **PI3K**, phosphatidylinositol-4,5-bisphosphate 3-kinase; **TGF**, tumor growth factor; **TNBC**, triple negative breast cancer.

CONFLICT OF INTERESTS

The authors report no conflict of interest in this work

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