

The Effect of Teucrium Polium Boiled Extract in Diabetic Rats

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ABSTRACT

OBJECTIVE: In traditional medicaments, Teucrium Polium is used as anti-fungal, antibacterial, anti-inflammatory and antidiabetic. Modern researches have shown that use of T. polium in vitro leads to decrease in fatty acids. To confirm the anti-diabetic evidences of Teucrium polium this survey was done to evaluate the effect of boiled aqueous extract of T. polium on serum lipids, body weight and glucose, aspartate aminotransferase (AST), alanine aminotransferase (ALT), alkaline phosphatase (ALP), and Creatinine (CRT) in diabetic male rats.

MATERIALS AND METHODS: 20 male rats became diabetic by intraperitoneal injection of streptozotocin (60 mg/kg). The animals were divided randomly into two groups. The aerial parts of Teucrium polium was powdered, drenched and boiled. The experimental diabetic groups received this boiled extract (2% and 4%) freely for two weeks but the control group received tap water. Liver enzymes and biochemical parameters (cholesterol, triglyceride, glucose, alanine transaminase, aspartate transaminase, alkaline phosphatase, urea and Uric Acid) were measured by kinetic (Enzymatic) and colorimetric methods.

RESULTS: Our results showed that 4% dose of T. polium can decrease serum glucose and triglyceride significantly ($P < 0.05$), but cholesterol, urea, U Acid, ALT, AST and CRT were not significant between the test and control groups after using T. polium. 2% concentration of T. polium does not have any effect except on body weight.

CONCLUSION: Although the aqueous extract of Teucrium polium has hypoglycemic properties and can improve body weight in experimental animals, it seems that it does not have any effect on other factors and is not suitable as an alternative treatment.

KEYWORDS: Teucrium Polium, Diabetes, Rat.

INTRODUCTION

Diabetes Mellitus (DM) is a metabolic disorder resulting from a defect in insulin secretion, insulin action or both (1). Recent estimates indicate that 200 million people are globally suffering from diabetes, making it the most common serious metabolic disorder worldwide (2). Several synthetic oral

hypoglycemic agents are used in treatment of diabetic patients, which may produce some undesirable side effects (3). Since medicinal plants are frequently considered to be safer than synthetic drugs, herbal remedies and dietary traditions, play an effective role in attenuating metabolic disorders (4). Phenolic coumarins derived from the plant materials

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(fruits and vegetables) might play a key role as dietary antioxidants (5). The traditional medications demonstrated a clear horizon in treatment of diabetic patients and provided a guideline for investigation in this field (6). Teucrium polium L. is a member of 300 species in the genus Teucrium and mainly is found in the Mediterranean and Western Irano-Turanian sphere (7). Teucrium polium L. has long been recognized in folk medicine in the treatment of many pathophysiological implications, such as gastrointestinal disorders, inflammations, diabetes and rheumatism (8). Several researches have shown that this plant has hypotensive (9), anti-inflammatory (10,11), hypoglycemic (10,12,13), antispasmodic (14,15), antibacterial and antipyretic (16) activities. Various compounds such as iridoids, flavonoids and cirsiliols are characterized in T. polium by phytochemical analyses (11,17). Intra-peritoneal (ip) injection of T. polium extract could decrease blood glucose in rats after 4 and 24 hours (18). Intra-esophageal administration of T. polium aqueous extract, after 24 h, resulted in a significant decrease in the serum glucose level, in streptozotocin-induced diabetic rats, which reached those of the normoglycemic animals in 8 days (19). Oral and ip administration of an extract from dried aerial parts and blooms of T. polium led to a reduction in appetite, water and food consumption and consequently body weight in rats (20). Despite of these evidences, Ansari Asl et al., reported that oral administration of T. polium alcoholic extract had no effect on the levels of fasting and postprandial blood sugar in diabetic patients (21). Considering the controversial reports regarding anti-diabetic effects of T. polium, the prime aim of this study was to identify the effect of boiled extract from this herbal medicine on blood glucose, enzymes linked to liver dysfunction and serum lipid in streptozotocin diabetic male rats.

MATERIALS AND METHODS

Animals: In an experimental trial study, 4-8 week-old male Wistar rats weighing 200–250

g were provided from the Pasteur Institute, Tehran, Iran. They were housed under conventional conditions in animal house (School of Medicine, Shahid Sadoughi University of Medical Sciences, Yazd, Iran). Animals were maintained at 22 ± 2 °C with a 12-h light–dark cycle.

Extraction: The aerial parts of Teucrium polium L. were purchased from a popular market in Yazd-Iran. To prepare 2% and 4% extract, we drenched 2 and 4 g of Teucrium polium in 10 ml water and this mixture was boiled for 10 minutes. The solution was cooled and filtered and its volume was adjusted to 100 mL by distilled water. This extract was given to the test groups as their drink ad libitum.

Induction of Experimental Diabetes: Streptozotocin (STZ; Sigma, USA; 60 mg/kg body weight) was dissolved in cold 0.9% saline immediately before use and intraperitoneally injected to the rats. One week after STZ administration, animals with fasting blood glucose levels of 270 mg/dl or more, were considered as the diabetic rats (22).

Experimental Groups: A group of 5 rats was considered as normal group that received normal chow and tap water. 15 diabetic animals were divided randomly and equally into 3 groups: one group considered as sham group (control diabetic animal) and two groups as treatment animals that received different concentrations (2%, and 4%) of boiled extract of Teucrium polium ad libitum for 2 weeks. Blood samples were obtained from orbital sinuses at the start and end of the experimental procedure and body weight was monitored. Biochemical parameters such as blood glucose, cholesterol, triglyceride (TG), alanine transaminase (ALT), aspartate transaminase (AST), alkaline phosphatase (ALP), urea, uric acid and creatinine (CRT) were measured by kinetic (Enzymatic) and colorimetric methods.

Statistical Analysis: The data were analyzed as Mean \pm SEM of variables in different groups using one-way ANOVA followed by Tukey's post test. $P \leq 0.05$ was considered as the significant level.

RESULTS

Prior to the onset of this experiment animals were selected in a narrow weight range (200-250 g), so there was no significant difference between the animals weight in different groups. Following the induction of diabetes (1 week after the administration of Streptozotocin), the diabetic rats showed a significant weight loss (175 ± 22 vs. 274 ± 16 , $P < 0.05$, Table 1). However, 2 weeks after the initiation of treatments, Teucrium polium-treated rats showed a significant recovery in body weight (230 ± 35.5 and 251 ± 29.7 in 2% and 4% concentrations, respectively vs. 175 ± 20 in untreated diabetic rats $P < 0.05$, Figure 1).

Data from biochemical analysis are

summarized in Tables 1 and 2. As shown in Table 1, there are significant changes between the healthy and diabetic rats in all measured biochemical parameters except for the creatininne. According to Table 2, after 2 weeks of experimental procedure, in rats treated with 4% of Teucrium polium, the blood glucose and TG levels were

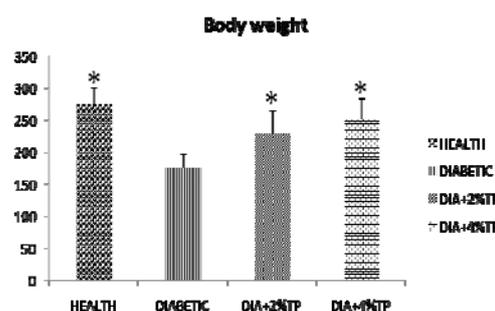


Figure 1: The effect of boiled extract of *T. polium* on the body weight of treated diabetic groups (DIA 2% and DIA 4%), as compared to untreated diabetic rats. There was also a significant weight loss in diabetic rats as compared to healthy control group. Data are presented as mean \pm SEM. * indicates a significant difference ($P < 0.05$) as compared to the healthy group, using one way ANOVA followed by Tukey's post test.

Table 1- Comparison between the biochemical parameters in diabetic and normal groups.

Group	Biochemical parameters									Body weight	
	ALP	AST	ALT	creatininne	Uric acid	Urea	TG	Cholesterol	glucose	15 days later	Initial
Healthy	182 \pm 21	106 \pm 32	43 \pm 15	1 \pm 0.2	0.06 \pm 0.01	39 \pm 9	74 \pm 16	57 \pm 24	97 \pm 14	274 \pm 38	269 \pm 25
diabetic	1082* \pm 270	411* \pm 312	148* \pm 127	1.02 \pm 019	1.17* \pm 0.7	117* \pm 35	41* \pm 16.9	97* \pm 13.9	557* \pm 149	175* \pm 22	230 \pm 18

Data are presented as mean \pm SEM. * indicates a significant difference ($P < 0.05$) as compared to the healthy group, using one-way ANOVA followed by Tukey's post test.

Table2- Comparison of the biochemical parameters in treated and untreated diabetic groups.

	untreated	2% T.P treated	4% T.P treated
glucose	557 \pm 149.8	435.5 \pm 55	216* \pm 84.7
CHL	67 \pm 13.9	85 \pm 15.4	66 \pm 8.6
TG	41 \pm 16.9	44 \pm 18.9	18* \pm 4.8
UREA	117 \pm 35	123 \pm 10.2	130 \pm 11
UAcid	1.17 \pm 0.7	1.75 \pm 0.8	1.22 \pm 0.4
ALT	148 \pm 127	120 \pm 67.3	101 \pm 17.4
AST	411 \pm 312	134 \pm 25.3	168 \pm 35.4
ALP	1082 \pm 270	1437* \pm 216.9	1707* \pm 142.4
CRT	1.02 \pm 019	1.22 \pm 0.05	1.1 \pm 0.08

Data are presented as mean \pm SEM. * indicates a significant difference ($P < 0.05$) as compared to the healthy group, using one-way ANOVA followed by Tukey's post test.

significantly lower than the diabetic control group (216 ± 84.7 vs. 557 ± 149.8 and 17.8 ± 4.8 vs. 41.4 ± 16.9 , respectively, $P < 0.05$), while the serum ALP was significantly increased in animals that received 2% and 4% T. polium (1437.7 ± 216.9 vs. 1082 ± 270.2 and 1707 ± 142.3 vs. 1082 ± 270.2 , respectively, $P < 0.05$). But cholesterol, ALT, AST, Urea, U Acid and CRT were not significantly different after T. polium administration compared to untreated animals.

DISCUSSION

According to this study, boiled extract of T. polium has hypoglycemic activity in diabetic rats. These results confirm several previous studies that T. polium extracts can decrease blood glucose in diabetic animals. Shahraki et al. showed that serum glucose decreased significantly in diabetic rats after receiving 50 mg/kg Teucrium polium for a month (23). Gharaibeh et al. reported a reduction in blood glucose concentrations of streptozotocin-hyperglycemic rats after treatment by a single iv, ip and oral dose of Teucrium polium aqueous decoction (24). Esmaeili and Yazdanparast observed a significant decrease in blood concentration of glucose in streptozotocin induced hyperglycemic rats after six weeks of consecutive oral treatment with aqueous extract of Teucrium polium via a relatively potent insulin tropic action (25). These findings also support the traditional use of this plant as a hypoglycemic agent that has been reported in literature (12,26,27). Phytochemical investigations on Teucrium spp have shown the presence of bioactive compounds such as diterpene derivatives (28), fatty acid esters (29), flavonoids (17) and steroids (30). It has been suggested that hypoglycemic effect of aqueous T. polium extract may be attributed to its constituents such as iridoids, flavonoids and circsiliol (31,32). Our results also revealed that serum TG value was significantly decreased but cholesterol, ALT, AST, Urea, UAcid and CRT did not show any significant difference in the control and treatment groups. These findings

support the previous report by Rasaekh et al. (18) and Karimi F et al. (33), who indicated an antilipidemic effect for T. polium extract, but disagree with Shahraki et al. (23) and Mirzaei et al. (34) who showed that T. polium extract led to an increase in TG and cholesterol. These controversies may be due to the difference in method of T. polium extraction and routes of its administration. Polymeros et al. (35) and Mezokopakis et al. (36) have shown that AST and ALT values are increased after T. polium administration. They attributed a hepatotoxic effect to this plant and suggested that it is not suitable to use in human as an antidiabetic agent. Although in our study boiled T. polium drink did not increase these factors, T. polium consumption, led to a significant increase in ALP. The source of this elevation is not clear to us and needs to be further investigated by using electrophoresis to distinguished bone and liver isoenzymes (37). Our results also showed that in animals treated with 2% and 4% boiled T. polium extract, body weight was significantly decreased after 2 weeks. This finding is in accordance with Ramesh B et al. (38) who showed that T. polium can decrease body weight and weight loss in diabetic rats is due to the decrease in food intake. It is probable that absence of weight loss in treatment group may be attributed to some of components of T. polium extract. In the other study researches have shown that T. polium extract does not have any significant effect on body weight (23). For comprehension of mechanism of T. polium, further studies are needed to elucidate whether T. polium could be useful in the management of human diseases. Previous studies showed that pharmacological and physiological effects of T. polium extract act nonspecifically. Complementary studies will probably show the role of each of these components in reducing serum glucose level and other effects.

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REFERENCES

- Moore H, Summerbell C, Hooper L, Cruickshank K, Vyas A, Johnstone P, et al. Dietary advice for treatment of type 2 diabetes mellitus in adults. *Cochrane database of systematic reviews* (Online) 2004;(2).
- Potier P, Sasaki A, Bakala J, Garcia-Alvarez MC, Franck G, Nhiri N. New aspects of diabetes. *Ann Pharm* 2005;63:371–84.
- Hamnvik OP, McMahon GT. Balancing risk and benefit with oral hypoglycemic drugs. *Mt Sinai J Med* 2009;76: 234–43.
- Hasani-Ranjbar S, Nayebi N, Larijani B, Abdollahi M. A systematic review of the efficacy and safety of *Teucrium* species; from anti-oxidant to anti-diabetic effects. *Int. J. Pharmacol* 2010;6: 315-25.
- Hoult JRS, Paya M. Pharmacological and biochemical actions of simple coumarins: natural products with therapeutic potential. *Gen Pharmacol* 1996; 27:713-22.
- Mohamed B, Abderrahim Z, Hassane M, Abdelhafid T, Abdelkhaleq L. Medicinal plants with potential antidiabetic activity – A review of ten years of herbal medicine research (1990-2000). *Int J Diabetes Metabol* 2006;14:1-25.
- Affifa FU, Al-Khalidib B, Khalil E. Studies on the in vivo hypoglycemic activities of two medicinal plants used in the treatment of diabetes in Jordanian traditional medicine following intranasal administration. *Journal of Ethnopharmacology* 2005;100: 314–8.
- Zargari A. Medicinal plants. Tehran University Press 1990; 4:130-2.
- Suleiman MS, Abdul-Ghani AS, Al-Khalil S, Amin R. Effect of *Teucrium polium* boiled leaf extract on intestinal motility and blood pressure. *Journal of ethnopharmacology* 1988;22(1):111-6.
- Tariq M, Ageel AM, Al-Yahya MA, Mossa JS, Al-Said MS. Anti-inflammatory activity of *Teucrium polium*. *International journal of tissue reactions* 1989;11(4):185-8.
- Capasso F, Cerri R, Morrica P, Senatore F. Chemical composition and anti-inflammatory activity of an alcoholic extract of *Teucrium polium* L. *Boll Soc Ital Biol* 1983; 59 (11): 1639-43.
- Gharaibeh MN, Elayan HH, Salhab AS. Hypoglycemic effects of *Teucrium polium*. *Journal of Ethnopharmacology* 1988; 24:93–9.
- Yaniv Z, Dafni A, Friedman J, Palevitch D. Plants used for the treatment of diabetes in Israel. *Journal of Ethnopharmacology* 1987; 19(2): 145-51.
- Elayan HH, Salhab AA, Abu-rumeileh N. Some pharmacological properties of *Al-Ja'adeh* plant. *Dirasat* 1981;8:131-138.
- Salhab AS, Elayan HH, Strenstrom UH. Crystalline isolation and physicochemical characterization of guaiol as a major constituent of an active spasmolytic fraction of the essential oil of *Teucrium polium* L. *Dirasat* 1987;14:93-101.
- Autore G, Capasso F, De Fusco R, Fasulo MP, Lembo M, Mascolo N, et al. Antipyretic and antibacterial actions of *Teucrium polium* (L.). *Pharmacol Res Commun* 1984;16(1):21-9.
- Rizk AM, Hammouda FM, Kamel A. Iridoids and flavonoids of *Teucrium polium* herb. *Planta Med* 1986; 43: 324–6.
- Rasekh HR, Khoshnood Mansourkhani MJ, Kamalianejad M. Hypolipidemic effects of *Teucrium polium* in rats. *Fitoterapia* 2001;72(8): 937-9.
- Zal F, Vasei M, Rasti M, Vessal M. Hepatotoxicity associated with hypoglycemic effects of *Teucrium polium* in diabetic rats. *Archives of Iranian Medicine* 2001;4(4):188-92.
- Gharaibeh MN, Elayan HH, Salhab AS. Anorexic effect of *Teucrium polium* in rats. *Int J Crude Drug Res* 1989;27:201-7
- Ansari Asl A, Soveid M, Azadbakht M, Omrani GR, Solimani SM, Samani M. The effect of extract of *Teucrium polium* on blood sugar and insulin levels of type 2 diabetic patients. *Shiraz E-Medical Journal* 2002. Available from: URL: <http://www.sums.ac.ir/~semj/vo13/mar/rTP&NIDDM.htm>.
- Rosen P, Ballhausen T, Stockklauser K. Impairment of endothelium dependent relaxation in the diabetic rat heart: mechanisms and implications. *Diabetes research and clinical practice* 1996;31:S143-S155.
- Shahraki MR, Arab MR, Mirimokaddam E. The Effect of *Teucrium polium* (Calpoureh) on Liver function, Serum Lipids and Glucose in Diabetic Male Rats. *Iranian Biomedical Journal* 2007;11 (1): 65-8
- Gharaibeh MN, Elayan HH, Salhab AS. Hypoglycemic effects of *Teucrium polium*. *Journal of Ethnopharmacology* 1984; 24: 93–9.
- Esmaili MA, Yazdanparast R. Hypoglycemic effect of *Teucrium polium*: studies with rat pancreatic islets. *Journal of Ethnopharmacology* 2004; 95:27–30.
- Pushparaj PN, Huat Tan BK, Hong Tan C. The mechanism of hypoglycaemic action of semi-purified fractions of *Averrhoa bilimbi* in streptozotocin-diabetic rat. *Life Sciences* 2001;70: 535–47.
- Noor H, Ashcroft SJH. Pharmacological characterisation of the antihyperglycaemic properties of *Tinospora crispa* extract. *Journal of ethnopharmacology* 1998;62(1):7-13.
- Mini DA, Zhang P, Zhao X, Wang Chong S, Zheno Q. A neo clerodane diterpene from *Teucrium japonicum*. *Phytochemistry* 1991;30: 4175–7.
- Fontana G, Savona G, Rodriguez B, De La Torre MC. Unusual 6'-fatty acid esters of (24S)-24-ethylcholesta-5, 25-dien-3 [beta]-yl [beta]-

- glucopyranoside from *Teucrium fruticans*. *Phytochemistry* 1999;50(2):283-5.
30. Ulubelen A, Topcu G, Kaya. Steroidal compounds from *Teucrium chamaedrys* subsp. *chamaedrys*. *Phytochemistry* 1994;36(1):171-3.
 31. Shakhanbeh J, Atrouse O. *Teucrium polium* inhibits nerve conduction and carrageenan induced inflammation in the rat skin. *Turkish Journal of Medical Sciences* 2001; 31(1): 15-21.
 32. Esmaeili MA, Zohari F, Sadeghi H. Antioxidant and Protective Effects of Major Flavonoids from *Teucrium polium* on β -Cell Destruction in a Model of Streptozotocin-Induced Diabetes. *Planta Med* 2009; 75(13): 1418-20
 33. Karimi F, Abbasi S, Bateni AR. The Effect of *Teucrium Polium* on Blood Glucose in Diabetes Mellitus Type 2; A Comparison With Glibenclamide. *Iranian South Medical Journal (ISMJ)* 2002; 4(2):96-103.
 34. Mirzaei A, Jaberi Hafshajani. Effects of Hydroalcoholic Extract of *Teucrium Polium* on Biochemical and Hematological Parameters of Hepatotoxic Rats. *Armaghan Danesh Journal (YUMS)* 2001;15(1): 67-75
 35. Polymeros D, Kamberoglou D, Tzias V. Acute cholestatic hepatitis caused by *Teucrium polium* (golden germander) with transient appearance of antimitochondrial antibody. *Journal of clinical gastroenterology* 2002;34(1):100.
 36. Mazokopakis E, Lazaridou S, Tzardi M, Mixaki J, Diamantis I, Ganotakis E. Acute cholestatic hepatitis caused by *Teucrium polium* L. *Phytomedicine* 2004;11(1):83-4.
 37. Shahbazkia HR, Aminlari M, Mohamadnia AR. Determination of alkaline phosphatase isoenzymes and isoforms in dog serum by a simple anion exchange chromatographic method. *Comparative Clinical Pathology* 2009; 18(4): 427-32.
 38. Ramesh B, Pugalendi KV. Antihyperlipidemic and antidiabetic effects of umbelliferone in streptozotocin diabetic rats. *Yale J.Biol. Med.* 2005; 78(4):189-96.