

Available online at http://www.journalcra.com

International Journal of Current Research Vol. 8, Issue, 06, pp.33072-33077, June, 2016 INTERNATIONAL JOURNAL OF CURRENT RESEARCH

# **RESEARCH ARTICLE**

## ANTI BACTERIAL ACTIVITY OF *TINOSPORA CORDIFOLIA* EXTRACTS ON CLINICAL ISOLATES FROM HIV INFECTED PATIENTS

## Gurajala Nageswari, Aswartha Harinatha Reddy and \*Bada Venkatappa

Immunology Division, Department of Microbiology, Sri Krishnadevaraya University, Anantapur-515 003, Andhra Pradesh, India

ARTICLE INFO	ABSTRACT				
<i>Article History:</i> Received 27 <sup>th</sup> March, 2016 Received in revised form 23 <sup>rd</sup> April, 2016 Accepted 04 <sup>th</sup> May, 2016 Published online 30 <sup>th</sup> June, 2016	The present study was carried out to evaluate the <i>in vitro</i> antibacterial activity of aqueous leaf and stem extracts of <i>Tinospora cordifolia</i> on HIV related opportunistic bacterial pathogens. The leaves and stems of <i>T. cordifolia</i> were powdered and subjected to aqueous extraction. Preliminary phyotochemical screening was done by using standard procedures. The antibacterial activity of the aqueous extract of leaves and stems of <i>T. cordifolia</i> was studied using disc diffusion method against <i>Escherichia coli, Enterococcus faecalis, Streptococcus pneumoniae, Salmonella typhi and Staphylocccus aureus</i> these were isolated from blood and urine samples of HIV infected patients. The aqueous extracts of <i>T. cordifolia</i> exhibited effective				
Key words:	antimicrobial activity against all tested microorganisms, while the leaf aqueous extract of <i>T. cordifolia</i> exhibited maximum zone of inhibition against <i>Enterococcus faecalis</i> (28 mm) and <i>Salmonella typhi</i>				
Human Immunodeficiency Virus (HIV), Phytochemicals, Antimicrobial activity.	(26 mm) at 50 mg/ml concentration. The stem aqueous extract of <i>T. cordifolia</i> exhibited maximum zone of inhibition against <i>Enterococcus faecalis</i> (23 mm) and <i>Streptococcus pneumonia</i> (24 mm) at 50 mg/ml concentration. The present results suggest that the aqueous extracts of <i>T. cordifolia</i> have significant antibacterial activity against HIV related opportunistic bacterial pathogens.				

*Copyright©2016, GurajalaNageswari et al.* This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Gurajala Nageswari, Aswartha Harinatha Reddy and Bada Venkatappa, 2016. "Anti bacterial activity of *Tinospora cordifolia* extracts on clinical isolates from HIV infected patients", *International Journal of Current Research*, 8, (06), 33072-33077.

## INTRODUCTION

In the present time multi-drug resistant microbial strains are continuously increasing due to indiscriminate and repetitive use of antimicrobial drugs. In addition, synthetic drugs are more expensive for the treatment of diseases. Therefore there is a need to develop new infection fighting strategies to control microbial infections (Rajesh et al., 2007; Sieradzki et al., 1999). Medicinal plants represent a rich source of antimicrobial agents. Among the estimated 250,000-500,000 plant species, onlv a small percentage have been investigated phytochemically (Mahesh and Satish, 2008). Recently, the plant T.cordifolia is of great interest to researchers across the globe because of its reported medicinal properties like antidiabetic, anti-periodic, anti-spasmodic, anti-inflammatory, antiarthritic, anti-oxidant, anti-allergic, anti-stress, anti-leprotic, anti-malarial, hepatoprotective, immunomodulatory and antineoplastic activities (Soham and Shyamasree, 2012). T. cordifolia is climbing shrub, which belongs to family Menispermaceae, widely distributed in India, China, Burma,

#### \*Corresponding author: BadaVenkatappa,

Immunology Division, Department of Microbiology, Sri Krishnadevaraya University, Anantapur-515 003, Andhra Pradesh, India.

Ceylon, Myanmar and Sri Lanka, which is known by the common names Heart-leaved Moonseed, Guduchi and Giloy. Anti-HIV effects of *T.cordifolia* extract (TCE) was revealed by reduction in eosinophil count, stimulation of B lymphocytes, macrophages and polymorphonuclear leucocvtes and hemoglobin percentage revealing its promising role in management of the disease (Soham and Shyamasree, 2012; Kalikar et al., 2008; Akhtar, 2010). The antibacterial activity of TCE has been assayed against Escherichia coli, Staphylococcus aureus, Klebsiella pneumoniae, Proteus vulgaris, Salmonella typhi, Shigellaflexneri, Salmonella paratyphi, Salmonella typhi murium, Pseudomonas aeruginosa, Enterobacter aerogene, and Serratia marcesenses (Jevachandran et al., 2003; Tambekar et al., 2006; Naravanan et al., 2011). In mice models, TCE has been reported to function in bacterial clearance and improved phagocytic and intracellular bactericidal capacities of neutrophils (Thatte et al., 1992).

## **MATERIALS AND MEHODS**

## **Collection of plant material**

*T. cordifolia* samples were collected from Pamidi Kothapalli Village, Anantapur District, Andhra pradesh, India. The plant was authenticated by a botanist, S.K.University.

#### Extraction of selected plant material by Maceration method

The leaves and stems of T.cordifolia were shade dried for 5 days and were ground into powder separately. Exposure to sunlight was avoided to prevent loss of active components. 100 gms of each leaf and stem powders were soaked in 1000ml of double distilled water separately and kept at room temperature for 3 days with intermittent shaking. The extracts were filtered through muslin cloth. The extracted liquids were subjected to water bath evaporation to remove the water. For water bath evaporation, liquid extracts were placed in a beaker and subjected to water bath evaporation at 60°C temperature for 7-10 hr daily for 3-4 days until as emisolid state of extracted liquid is obtained. The semisolid extracts produced were kept in the deep freezer at -20°C overnight and then subjected to freeze drying. Extracts obtained by this method were then weighed and percentage yield was found to be stem 16.73 %, leaf 10.73%. The above aqueous extracts were stored at 4 °C until further use.

#### **Collection of microorganisms**

All the test cultures were procured from ART Center, RDT Hospital, Bathalapalli, Anantapuramu district. These are clinical isolates from blood and urine samples of HIV infected patients.

#### Preliminary phytochemical analysis

The aqueous extracts of *T.cordifolia* subjected to preliminary phyotochemical screening byusing standard procedures to identify the phytoconstituents as described by Trease and Evans, 1978.

# Antibacterial activity evaluation by Agar well diffusion assay

*In vitro* antibacterial activity was evaluated by Agar well diffusion method using Mueller Hinton Agar (MHA) (Bauer *et al.*, 1996).

Working stock was prepared as 1ml of each bacterial strain was initially inoculated in100 ml of sterile Mueller Hinton broth and incubated for 37°±1°C for 24 hr respectively. Then 0.2ml of the each test organisms from the working stock were seeded into 100ml sterile MHA medium and cooled to 48°C to 50°C in a sterile Petri dish respectively. When the MHA solidifies, six holes of uniform diameter (7 mm) were made using sterile alluminium borer. Then, 70µl of each leaf, stem aqueous extracts standard solution (10, 20, 30, 40, 50 mg/ml) respectively and control (Ciprofloxacin 25mg/ml) were placed in each hole separately under aseptic condition. The plates were then maintained at room temperature for 2 hr to allow the diffusion of the solution into the medium. All the bacterial plates were then incubated at 37°±1°C for 18 hr and the zone of inhibition was measured (including the diameter of the bore (7 mm)) and the results were recorded.

#### RESULTS

The result of preliminary phytochemical analysis presented in Table 1, clearly indicated the presence of plant secondary metabolites like alkaloids, flavonoids, proteins, phenolics, tannins, carbohydrates and glycosides. Antimicrobial activity against the pathogens isolated from HIV infected patients, such as Escherichia coli, Staphylococcus aureus, Salmonella typhi, Enterococcus faecalis and Streptococcus pneumonia were presented in Table 2 and in the Fig.1 (1-5) are the images for inhibitory zones of leaf aqueous extract and (6-10) are the images for inhibitory zones of the stem aqueous extract respectively. The aqueous extracts of T. cordifolia exhibit antimicrobial activity effective against all tested microorganisms, like leaf aqueous extract of T. cordifolia exhibited maximum zone of inhibition against E. faecalis (28 mm) and S. typhi (26 mm) at 50 mg/ml concentration (Fig.2), while the stem aqueous extract of T. cordifolia exhibited maximum zone of inhibition against E. faecalis (23 mm) and S. pneumonia (24 mm) at 50 mg/ml concentration (Fig.3).

Table 1. Phytochemical analysis

S. No	Phytoconstituents		Stem Aqueous Extract	Leaf Aqueous Extract
1	Alkaloids			
	Mayer's test	+		+
	Hager's test	+		+
	Dragondorff's test	-		+
	Wagner's test	-		+
2	Flavanoids			
	Shinoda test	+		+
3	Proteins & amino acids			
	Biuret test	+		+
	Millons test	-		+
	Precipitation test	+		+
	Ninhydrin test	+		+
4	Carbohydrates			
	Molish test	+		+
5	Phenolics and tannins			
	Ferric chloride test	-		+
6	Glycosides			
	Keller- Killiant test for cardiac glycosides	+		-
	Borntrager's test for anthraquinone glycosides	-		-
	Foam test for saponin glycosides	+		+
	Alcohol extract test for coumarin glycosides	+		+
	Cyanic glycosides	-		+

(-): Absence, (+): Presence

	Microorganism (Strain)	Zone of inhibition measured in mm											
S. No.		Leaf aqueous extract (mg/ml)					Stem aqueous extracts(mg/ml)						
		Control (25)	10	20	30	40	50	Control (25)	10	20	30	40	50
1	E. coli	24	10	12	14	17	18	24	12	14	17	18	19
2	E.faecalis	27	19	21	24	25	28	27	16	18	20	21	23
3	S.pneumoniae	26	11	14	18	20	24	26	16	18	21	23	24
4	S. typhi	30	14	18	20	24	26	30	07	08	13	15	17
5	S. aureus	28	12	13	15	18	20	28	11	14	15	16	16

Table 2. Antimicrobial activity of extracts of *T.cordifolia* on pathogens isolated from HIV infected patients



Escherichia coli



Enterococcus faecalis



Streptococcus pneumoniae

5



Salmonella typhi



Staphylococcus aureus

Escherichia coli



Enterococcus faecalis



Streptococcus pneumoniae



Salmonella typhi



Staphylococcus aureus



Fig. 1. Antimicrobial activity of extracts of *T. cordifolia* on pathogens isolated from HIV infected patients

Fig. 2. Graphical representation of antimicrobial activity of leaf aqueous extract of *T. cordifolia* on pathogens isolated from HIV infected patients



Fig. 3. Graphical representation of antimicrobial activity of stem aqueous extract of *T. cordifolia* on pathogens isolated from HIV infected patients

## DISCUSSION

The Emergence and widespread of Multidrug resistance bacterial and fungal diseases has been the major concern now plants have been a cornerstone in traditional folk medicine to treat microbial infections. A days and has been scientifically validated for their safety, efficacy and irrespective of the presence of conventional medicine (Dieudonné et al., 2015; Ravi Kant et al., 2011). The leaf and stem aqueous extracts is potential source for purification of phytochemicals, and they have good antimicrobial activity against several bacterial strains (Ravi Kant et al., 2011). The preliminary phytochemical analysis of leaf and stem aqueous extracts of T. cordifolia revealed the presence of alkaloids, flavonoids, carbohydrates, tannins, phenolic compounds, amino acids, proteins and glycosides may also account for its very high antimicrobial activity against test microorganisms. Acquired immune deficiency syndrome (AIDS) is a fatal illness caused by human immune deficiency virus (HIV), which breaks down the host immune system, leaving the subject vulnerable to lifethreatening opportunistic infections. Opportunistic infections and associated complications account for a considerable proportion of mortality (Anonymous, 2007). Traditional medicine has demonstrated its contribution to health through reduction of disabilities caused by diseases such as HIV/AIDS, malaria, tuberculosis and other microbial infections (Elujoba et al., 2005). From the experiment the results suggested that T. cordifolia aqueous leaf and stem extract can be used for treatment of opportunistic infections in HIV/ AIDS patients.

#### Conclusion

It is concluded that *T. cordifolia* plant is a richest source of phytochemical constituents and has antimicrobial activity on pathogenic organisms. The results of the present study are

encouraging as all the tested pathogens exhibited sensitivity to aqueous extracts of *T.cordifolia*, and also support the traditional uses of the plants for the treatment of opportunistic infections in HIV/ AIDS patients.

#### Acknowledgement

The authors express their sincere thanks to UGC, New Delhi for financial support to carry out this research work. Authors also thank the Rural Development Trust Hospital, Bathalapalli for providing clinical isolates.

#### **Conflicts of interest**

There are no conflicts of interest.

#### REFERENCES

- Akhtar S. 2010. Use of *Tinosporacordifolia* in HIV infection. Indian *J Pharmacol.*, 42: 57.
- Anonymous, 2007. Guidelines for prevention and management of common opportunistic infections / malignancies among HIV-infected adult and adolescent. National AIDS Control Organization, Ministry of Health and Family Welfare, Government of India, 2(1): 1-70.
- Bauer A.W, Kirby W.M, Sherris J.C, and Jurck M. 1996. Antibiotic susceptibility testing by a standard single disc method. Am J ClinPathol., 45 (4): 493-96.
- DieudonnéLemuhNjimoh, Jules Clement N. Assob, SeraphineEbenyeMokake, Dinga Jerome Nyhalah, Claude KweYinda, and Bertrand Sandjon. 2015. Antimicrobial activities of a Plethora of medicinal plant extracts and hydrolates against human pathogens and their potential to reverse antibiotic resistance. *Int J Microbiol.*, 2015: 1-15.

- Elujoba A.A, Odeleye O.M and Ogunyemi C.M. 2005. Traditional medicine development for medical and dental primary health care delivery system in Africa. *Afr J Tradit Complement Altern Med.*, 2 (1): 46- 61.
- Jeyachandran R, Xavier TF, Anand SP. 2003. Antibacterial activity of stem extracts of *Tinosporacordifolia* (Willd) Hook. f and Thomson. *AncSci Life*, 23: 40-3.
- Kalikar MV, Thawani VR, Varadpande UK, Sontakke SD, Singh RP, Khiyani RK. 2008. Immunomodulatory effect of *Tinosporacordifolia* extract in human immuno-deficiency virus positive patients. *Indian J Pharmacol.*, 40: 107-10.
- Mahesh B and Satish S. 2008. Antimicrobial activity of some important medicinal plant against plant and human pathogens. WJ AgriSci., 4(S): 839-43.
- Narayanan AS, Raja SS, Ponmurugan K, Kandekar SC, Natarajaseenivasan K, Maripandi A et al. 2011. Antibacterial activity of selected medicinal plants against multiple antibiotic resistant uropathogens: A study from Kolli Hills, Tamil Nadu, India. Benef Microbes, 2: 235-43.
- Rajesh Dabur, Amita Gupta, Mandal T K, Desh Deepak Singh, VivekBajpai, Gurav AM et al. 2007. Antimicrobial activity of some Indian medicinal plants. *Afr J Tradit Complement Altern Med.*, 4 (3): 313-18.

- Ravi Kant Upadhyay, RajaniTripathi, Shoeb Ahmed. 2011. Antimicrobial activity of two Indian medicinal plants *Tinosporacordifolia* and *Cassia fistula* against human pathogenic bacteria. *Journal of Pharmacy Research*, 4(1):167-70.
- Sieradzki K, Wu SW and Tomasz A. 1999. Inactivation of the methicillin resistance gene mecA in vancomycin-resistant *Staphylococcus aureus*. *Micro Drug Resist*, 5(4): 253-57.
- SohamSaha and ShyamasreeGhosh. 2012. *Tinosporacordifolia*: One plant, many roles. *AncSci Life*, 31(4): 151-59.
- Tambekar DH, Khante BS, Chandak BR, Titare AS, Boralkar SS, Aghadte SN. 2009. Screening of antibacterial potentials of some medicinal plants from Melghat forest in India. *Afr J Tradit Complement Altern Med.*, 6: 228-32.
- Thatte UM, Kulkarni MR, Dahanukar SA. 1992. Immunotherapeutic modification of *Escherichia coli* peritonitis and bacteremia by *Tinosporacordifolia*. J *Postgrad Med.*, 38:13-5.
- Trease GS. and Evans HC. 1978. Phytochemical constituents of medicinal plants. Textbook of Pharmacognosy, 9th edition. *BailiarZindall Publishers*, 18-25.

\*\*\*\*\*\*