

2 **Evaluation of Microbial Purity and acute and sub-**
3 **acute toxicities** of a Nigerian Commercial Polyherbal
4 **Formulation used in the Treatment of Diabetes**
5 **Mellitus**

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20 **ABSTRACT**

Objective: This study evaluated acute and sub-acute toxicities in rodents and microbial purity of a polyherbal formulation, Bobwell[®] popular among the natives for the management of diabetes mellitus (DM). It was prepared with unspecified quantities of the following plant materials viz. *Gongronema latifolium*, *Garcinia kola*, *Vernonia amygdalina*, *Sphenocentrum jollyanum* and *Kigelia Africana* leaves.

Material and Methods: Microbial purity was evaluated on some bacterial and fungal organisms using appropriate diagnostic media. Toxicity of the polyherbal preparation was evaluated in Swiss albino mice by administering to the animals graded oral doses of the lyophilized preparation in the ranges of 1.0 to 20.0 g/kg **body weight (bwt)** and observed for changes. Wistar rats were also fed with different doses of the lyophilized formulation for 30 days and the effects on the biochemical profiles and haematological parameters were evaluated.

Results: The purity evaluation test revealed presence of some bacterial organisms with the load within officially acceptable limits except *Escherichia coli* having a load of 1.50×10^2 cfu/ml while no fungal organisms were observed. The median acute toxicity value (LD_{50}) of the polyherbal medicine was determined to be 15.2 g/kg bwt. **There was significant increase ($P \leq 0.05$) in the body weight of the animals treated with the highest dose of the formulation compared to the control.** The biochemical parameters showed marked decrease in the plasma glucose level compared to the control. Increase in creatinine level was observed only in the animals that received the highest dose of the formulation while aspartate aminotransferase (AST) decreased significantly. **On the other hand,** alanine aminotransferase (ALT) **exhibited significant increased ($P \leq 0.05$)** at the highest dose. The photomicrograph of hepatic tissue showed focal necro-inflammation around the portal hepatics. There was marked increase in the haemoglobin level and in the **red blood cell (RBC)** count at the highest doses. There was also significant increase in **white blood cells (WBC)**.

Conclusion: The high LD_{50} value indicated that the polyherbal preparations could be safe for use but its safety was negated by high presence of *E coli* load. Although the formulation showed good hypoglycaemic activity and beneficial effects on cardiovascular risk factors, at the highest dose, the formulation exhibited deleterious effect on the hepatic tissue.

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Keywords: Microbial purity, acute, **sub-acute, toxicity**, polyherbal formulation.

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23 **1. INTRODUCTION**

24

25 Diabetes mellitus (DM) is a group of metabolic disordered diseases resulting from absolute
26 or relative defects in insulin secretion or action or both. It is defined as “a state of premature
27 cardiovascular death which is associated with chronic hyperglycemia and also associated
28 with blindness and renal failure” (Barnett and O’Gara, 2003). Oral hypoglycemic drugs
29 including suphonylureas, biguanides and thiazolidinediones, have been employed in the
30 treatment of the disease without achieving a total cure and are without some undesired side
31 effects. Attention is, therefore, now focused on the use of alternative therapy for the disease
32 treatment with plant and plant derived medicines as the best option. Plant derived medicine
33 is known as herbal medicine and is currently being used by about 60% of the world
34 population both in the developing and in the developed countries where modern medicines
35 are predominantly used (Rickert *et al.*, 1999; Ogonnia *et al.*, 2008).

36

37 The increasing popularity in the use of herbal remedies could be attributed to their
38 advantages of being efficacious and a cheap source of medical care. Secondly, there is a
39 growing disillusionment with modern medicine and also misconception that herbal remedy
40 being natural may be devoid of adverse and toxic effects associated with allopathic
41 medicines. **More often, and due to the misconception, herbal drugs are administered in most**
42 **disease conditions over a long period of time without proper dosage monitoring and**
43 **consideration of toxic effects that might result from such prolonged usage.** The danger
44 associated with the potential toxicity of such therapy and other herbal therapies used over a
45 long period of time demand that the practitioners be kept abreast of the reported incidence of
46 renal and hepatic toxicity resulting from the ingestion of medicinal herbs (Tédong *et al.*,
47 2007).

48

49 Herbal preparations could be contaminated with microbiological and foreign materials, such
50 as heavy metals, pesticide residues or even aflatoxins. Contaminants when present in an

51 herbal preparation may lead to serious health defects underscoring the claimed safety. An
52 increase in the morbidity and mortality associated with the use of herbal or the so called
53 traditional medicines has raised universal attention in the last few years (Bandaranayake,
54 2006; Ogbonnia *et al.*, 2010). Upon exposure, the clinical toxicity may vary from mild to
55 severe and even life threatening making the safety and toxicity evaluations of these
56 preparations imperative. Also lack of standardization is a major concern regarding the use of
57 medicinal herbal medicines (Angell and Kassier, 1998).

58

59 Herbal medicine is most often a 'polyherbal' preparation from mixtures of many plant parts
60 obtained from various plant species and families and may contain multiple bioactive
61 constituents that could be difficult to characterize (Ogbonnia *et al.*, 2010). The bioactive
62 principle(s) in most herbal preparations are not always known and there could be
63 possibilities of interaction with each other in solution. The quality as well as the safety criteria
64 for herbal drugs may be based, therefore, on a clear scientific definition of the raw materials
65 used for such preparations.

66

67 The aim of the study was to evaluate the safety of a polyherbal preparation, Bobwell,[®] an
68 antidiabetic, formulation sold openly in the markets and widely consumed locally for the
69 treatment of DM in most Nigerians south western states for microbial purity and also to carry
70 out **its toxicity profile studies** in rodents. Bobwell[®] was claimed to be prepared with
71 unspecified quantities of the following plant material constituents: *Gongronema latifolium*
72 (Asclepiadaceae), *Garcinia kola* Heckle (Guttiferaceae), *Vernonia amygdalina*
73 Del(Asteraceae), *Sphenocentrum jollyanum* (Menispermaceae), and *Kigelia africana* (Lam).
74 Benth (Bignoniaceae).

75

76 **2. MATERIAL AND METHODS**

77

78 **2.1 Material**

79 The antidiabetic polyherbal formulation Bobwell® (a liquid dosage form, 1.5L) a slightly thick,
80 non viscous brownish coloured liquid was selected on the basis of its local consumption rate
81 and was procured from the Mushin market in Lagos suburb. The un-tampered procured
82 polyherbal formulation bottle was stored in a refrigerator at 4- 6°C until the quantity needed
83 for the purity test was aseptically taken. 1000 ml of the formulation was filtered and the
84 resulting 875 ml was freeze dried which yielded 37.5 g gel. The prescribed dose for human
85 adult was 30 ml daily. The label indicated only the plant material constituents used in the
86 formulation without specifying the quantity of each used, and also there was no indication of
87 the batch number, the manufacturing and expiring dates.

88

89 **2.2 Animals**

90 Swiss albino mice (20 – 25 g) of either sex were used for the acute toxicity study, while adult
91 Wistar rats (130±15g) were used for the **sub-acute** toxicity profiling. The animals were
92 obtained from the animal house of the College of Medicine of the University of Lagos. **They**
93 **were randomly selected with no preference for sex and were fed with a standard animal diet**
94 **(Pfizer Feeds Ltd, Nigeria) and had access to water *ad libitum*.** **The animals** were maintained
95 in separate (**both sexes**) spacious polypropylene cages in well ventilated animal house with
96 12 hrs dark and light cycle and were acclimatized for a week before the commencement of
97 the study. The use and care of the animals, and the experimental protocol were in strict
98 compliance with the Institute of Laboratory Animal Research (ILAR) guidelines on the use
99 and care of animals, in experimental studies (ILAR, 1996).

100

101 **2.3 Determination of microbial purity**

102 The microbial load of the preparation was determined using the standard plate method
103 (Fontana *et al.*, 2004). Various diagnostic media-Tryptone Soya Agar (TSA), Salmonella-
104 Shigella Agar (SSA), Eosin Methylene Blue Agar (EMBA), MacConkey Agar (MAC), Nutrient
105 Agar (NA), Manitol Salt Agar (MSA), Sabouraud Dextrose Agar (SDA) - were used to culture

106 the test products. Each of the media was prepared according to manufacturers' instruction
107 and sterilized at 121 °C for 15 minutes.

108

109 Three fold serial dilutions (10^{-1} , 10^{-2} and 10^{-3}) were made using sterile distilled water. The
110 media were allowed to cool to 45 °C and 1ml each of the dilutions seeded in 25 ml each of
111 the sterile culture media swirled and left to solidify. The bacterial media were incubated at 37
112 °C for 3 days while the fungal medium (SDA culture) was incubated at ambient temperature
113 for 7 days. They were examined 24 hourly during this period for the colonies and the results
114 recorded (Table 1). The purity of the formulations for proteus organisms was evaluated using
115 the 1/10 dilution, a loopful was taken and dropped aseptically at the centre of nutrient agar
116 plate. The site of inoculation was swabbed. The triplicate plates were prepared, covered and
117 incubated in inverted position at 37 °C and observed daily for 3 days for swarming of
118 proteus.

119

120 **2.4 Assay of antimicrobial activity**

121 The antimicrobial activity of the preparation was investigated using the cup diffusion method
122 on Mueller Hinton Agar for bacterial organisms and Sabouraud Dextrose Agar (SDA) for
123 fungal organisms (Raghavendra, 2006). 10^6 cfu/ml of the overnight clinical cultures of
124 *Escherichia coli*, *Pseudomonas aeruginosa*, *Klebsiella species*, *Shigella species* was seeded
125 in 25 ml Mueller Hinton Agar respectively while *Candida albican* was seeded in Sabouraud
126 Dextrose Agar. Wells were bored in each of the culture media using a sterile 12 mm cork
127 borer and various dilutions (100 %, 50 %, 25 % and 12.5 %) of the test material were
128 prepared using sterile water. 0.5 ml of each dilution was respectively seeded in wells made
129 in inoculated plates with a blank well in each of the plates seeded with 0.5 ml sterile distilled
130 water to serve as a control standard. The cultures were incubated at 37 °C for 24 hrs for
131 bacterial cultures and at ambient temperature for 7 days for fungal cultures and observations
132 were made for zones of inhibitions (NCCLS, 1997).

133

134 **2.5 Acute Toxicity Study**

135 The toxicity study was carried out using thirty-five (35) male and female Swiss albino mice
136 (weighing 20 – 25 g) obtained from the Laboratory Animals Center, College of Medicine,
137 University of Lagos. The animals were randomly distributed into: one control group and six
138 treated groups, containing five animals per group. The rationale for five mice per group was
139 to obtain more reliable mortality information following the polyherbal administration. They
140 were maintained on animal cubes (Feeds Nigeria Ltd), provided with water *ad libitum* and
141 were allowed to acclimatize for seven days to the laboratory conditions before the
142 experiment. After the overnight fasting, the control group received 0.3 ml of acacia solution
143 (2 %) orally. The doses 1.0, 2.5, 5.0, 10.0, 15.0 and 20.0 g/kg *bwt* were respectively
144 administered orally to the groups from acacia solution of the formulation gel. The stock
145 solution was prepared by dispersing 16 g of the gel with 7 ml of the acacia solution in a 100
146 ml beaker and then transferred to a 20 mL volumetric flask. The volume was made to mark
147 with the acacia solution to give a stock solution of 800 mg/mL (80% w/v). For mice of
148 average weight of 22.5 g administered 20,000 mg/kg *bwt* (20mg/g), the total volume
149 consumed was 0.56 mL (450+800mL) while for 15,000mg/kg *bwt* (15mg/g) the total volume
150 received was 0.42 mL. The animals were observed continuously for the first 4 hrs and then
151 for each hour for the next 24 hrs and at 6 hourly interval for the next 48 hrs after
152 administering the extract to observe any death or changes in general behaviour and other
153 physiological activities (Shah *et al.*, 1997; Bürger *et al.*, 2005).

154

155 **2.6 Determination of LD₅₀**

156 The median lethal dose (LD₅₀) was estimated for each group by log dose – probit analysis
157 (Miller and Tainter, 1944). The LD₅₀ was calculated as the geometrical mean of the maximum
158 dose producing 0 % mortality and the minimum dose producing 100 % mortality.

159

160

161

162 **2.7 Sub-acute study**

163 Male and female Wistar rats weighing $130 \text{ g} \pm 20 \text{ g}$ were used. They were allowed to
164 acclimatize to the laboratory conditions for seven days. The animals were maintained on
165 standard animal feeds and provided with water *ad libitum*. The animals were weighed and
166 divided into four groups of five animals each and after the overnight fast of the animals the
167 control group received a dose of 0.6 ml of acacia solution (2 %) orally once a day for 30
168 days. The three treated groups respectively received the following doses: 200 mg/kg, 300
169 mg/kg and 600 mg/kg bwt of the gel orally once a day for 30 days (Pieme *et al.*, 2006; Joshi
170 *et al.*, 2007; Mythilypriya *et al.*, 2007). The gel suspension (12 %w/v) was prepared by
171 dispersing the gel (12 g) with 45 ml of acacia (2 %) solution in a beaker, and transferred to a
172 100 mL volumetric flask. Then the beaker was rinsed with the solution and the content
173 transferred to the volumetric flask and volume made to mark with the acacia solution.

174

175 The animals were weighed every five days, from the start of the treatment, to note any
176 weight variation. At the end of the experiment, the animals were starved overnight and on
177 the 26th day, they were made unconscious by cervical dislodgement. The blood was
178 collected via cardiac puncture in three tubes: one with EDTA for analysis of hematological
179 parameters and the blood chemistry, Fluoride oxalate tube for glucose analysis and with
180 heparin to separate plasma for biochemical profiles. The heparinized blood was centrifuged
181 within 5 min of collection at 4000 g for 10 min to obtain plasma which was analyzed for total
182 cholesterol, total triglyceride, and HDL-cholesterol levels by modified enzymatic procedures
183 from Sigma Diagnostics (Wasan *et al.*, 2001). LDL-cholesterol levels were calculated using
184 Friedwald equation (Crook, 2006). Plasma was analyzed for Alanine aminotransferase
185 (ALT), aspartate aminotransferase (AST), and creatinine by standard enzymatic assay

186 methods (Sushruta *et al.*, 2006). Plasma glucose contents and protein contents were
187 determined using enzymatic spectroscopic methods (Hussain and Eshrat, 2002).
188 Haematocrit was estimated using the method as described by (Ekaidem *et al.*, 2006).
189 Haematocrit tubes were filled with whole blood to the mark by capillary action and the bottom
190 of the tubes sealed with plasticide and centrifuged for 4-5 minutes using haematocrit
191 centrifuge. The percentage cell volume was read by sliding the tube along a “critocap” chart
192 until the meniscus of the plasma intersected the 100 % line. Hemoglobin contents were
193 determined using Cyanmethaemoglobin (Drabkin) method (Ekaidem *et al.*, 2006).

194

195 **2.8 Tissue histology**

196 The organs were fixed in 10 % formal saline for ten days before embedding in paraffin wax.
197 Each organ tissue was sectioned at 5 µm and stained with Haematoxylin and Eosin (H and
198 E) stain (Mbaka *et al.*, 2012). The slide specimens were examined under light microscope at
199 high power magnification for changes in organ architecture and photomicrographs were
200 taken.

201

202 **2.9 Statistical analysis:** Significant differences were determined using a Student’s t-test.

203 Differences were considered significant if $p < 0.05$. All data were expressed as mean \pm
204 standard error of the mean.

205

206 **3. RESULTS AND DISCUSSION**

207

208 The microbial purity evaluation of the formulation (Table 1) showed no growth of bacterial
209 and fungal organisms in the first 24 hrs in the various diagnostic media used. The growth of
210 *Bacillus subtilis* (1.0×10^2 cfu/ml) were observed in Tryptone Soy Agar culture and of other
211 coli forms (2.25×10^2 cfu/ml) observed in MacConkey agar culture after 72 hrs but all were
212 within acceptable official limit (Fontana *et al.*, 2004). There was no growth observed on
213 Sabouraud Dextrose Agar even on the 6th and 7th day of incubation indicating the absence

214 of fungal organisms. In the Eosine Methylene Blue Agar medium showed the growth of *E.*
 215 *coli* (1.5×10^2 cfu/ml) which was above the acceptable microbial limit for aqueous herbal
 216 formulations according to World Health Organization guidelines for the assessment of the
 217 safety, efficacy, and quality of herbal medicines as a prerequisite for global harmonization
 218 (W H O, 1966). An increase in *E. coli* level above the acceptable limit can cause serious
 219 diarrheal infection which could be a bloody or watery diarrhea depending on the *E. coli*
 220 patho-type of toxin produced (Antai and Anozie, 2008; Hegde *et al.*, 2012).

221 **Table 1: Microbial Purity test of the polyherbal formulation**

MEDIA	<i>S. typhi</i>	<i>Bacillus</i> species $\times 10^2$	<i>Shigella</i> species	Other Coliforms $\times 10^2$	Proteus species	<i>P aeruginosa</i>	<i>S. aureus</i>	<i>E. coli</i> $\times 10^2$	TMYC	TACC $\times 10^2$	TOTAL
SSA	0	-	0			-	-	-	-	-	0
MAC	-	-	-	2.25	-	-	-	-	-	-	2.25×10^2
NA	-	-	-	-	0	-	-	-	-	-	0
CA	-	-	-	-	-	0	-	-	-	-	0
MSA	-	0	-	-	-	-	0	-	-	-	0
EMBA	-	-	-	-	-	-	-	1.50^*	-	-	1.50×10
SDA	-	-	-	-	-	-	-	-	0	-	0
TSA	-	1.0×10^2	-	-	-	-	-	-	-	9.93	1.093×10^3

222 N=5; values = $m \pm sem$ * $P < 0.05$; ** $P < 0.01$ vs. control group

223 Targeted organisms: *Salmonella typhi* 0, *Shigella* species 0, Other *Coli* forms 2.25×10^2 , *Proteus* species 0,
 224 *Pseudomonas aeruginosa* 0, *Staphylococcus aureus* 0, *Escherichia coli* 1.50×10^2 , Mould and Yeast 0 and *Bacillus*
 225 *species* 1.0×10^2

226 CA - Cetrimide Agar, EMBA - Eosine Methylene Blue Agar, MAC- MacConkey Agar, NA-Nutrient Agar, SDA-
 227 Sabouraud Dextrose Agar, SSA - Salmonella Shigella Agar, TSA- Tryptone Soya Agar, TNTC-To numerous to count
 228 TYMC Total yeast and mould count

229

230 In the acute toxicity study (Table 2) of the formulation no changes in the behaviour and in the
 231 sensory nervous system responses were observed in the animals. Also no adverse
 232 gastrointestinal effects were observed in the male and female mice used in the experiment.
 233 All the animals that received 5.0 g/kg bwt dose survived beyond the 24 hrs of observation
 234 while four of the mice that received 20.0 g/kg bwt dose of the extract died within 4 hrs. The
 235 median acute toxicity value (LD₅₀) of the formulation was determined to be 15.2 g/kg bwt.
 236 According to World Health Organization (WHO) toxicity index of 2 g/kg bwt (Ghosh.1984;
 237 Klassen *et al.*, 1995) the extract could be classified as being non toxic, since the LD₅₀ was
 238 found to be above 15.0 g/kg bwt translating to 1064 g equivalence dose in human adult. This
 239 is a very high value making the preparation relatively safe for use. The viscera of the dead
 240 animals did not show any macroscopic changes that could point to the cause of the death
 241 neither did the animals convulse before dying. It could therefore, be postulated that the
 242 formulation did not kill the mice by the action on the nervous system (Ogwal- Okeng *et al.*,
 243 2003).

244

245 **Table 2: Acute toxicity evaluation of the polyherbal formulation in mice**

<u>Doses of drugs g/kg</u>	<u>Number of Animals</u>	<u>Number of animals dead</u>	<u>% cumulative Death</u>
Control	0	0	0
0.5	5	0	0
1.0	5	0	0
2.5	5	0	0
5.0	5	0	0
10.0	5	1	14.3
15.0	5	2	24.8
20.0	5	4	100

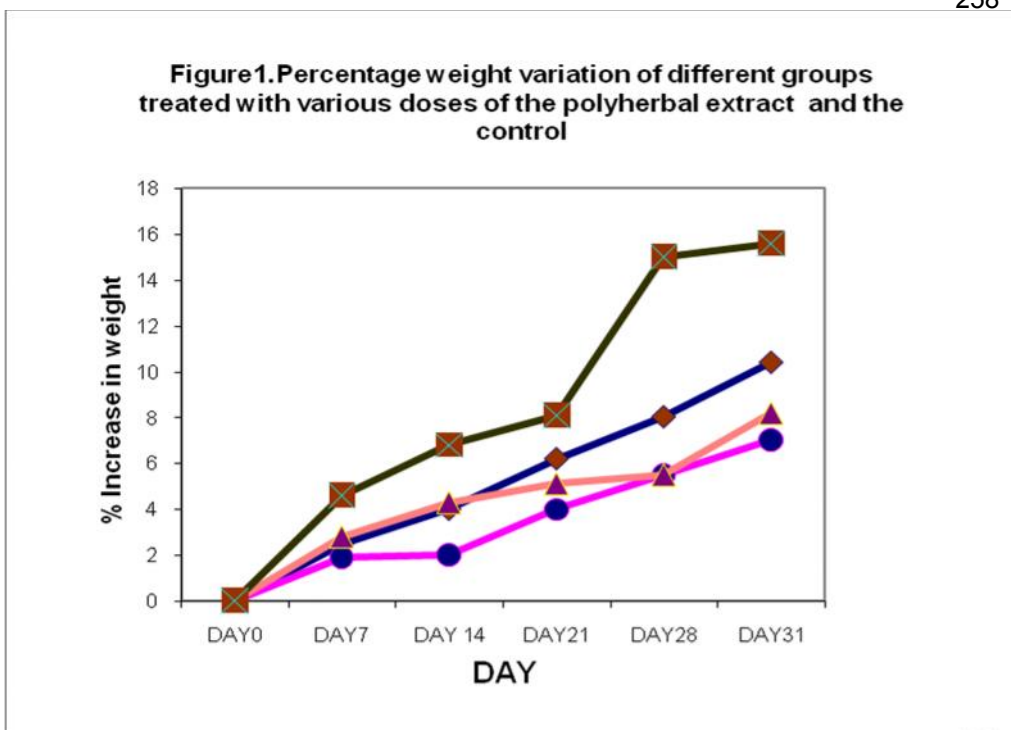
246 Control received 0,3ml of Acacia (2%w/v) solution

247

248 The effects of the formulation on the body weight of the animals treated with various doses
 249 are summarized in Fig. 1. Significant ($P \leq 0.05$) increase in the body weight was observed
 250 only in animals that received the highest dose (600 mg/kg bwt) of the lyophilized extract

251 while no significant ($P \geq 0.05$) increase occurred in the weight of animals treated with lower
 252 doses of the polyherbal formulation compared to the control. The appreciable weight gain of
 253 the animals that received the highest dose of the formulation suggested the ability of the
 254 polyherbal formulation to have the tendency to stimulate appetite at high dosage. Although
 255 the amount of food and water made available to the animals were not quantified, the animals
 256 that received the highest extract dose were observed to have consumed more food and as
 257 well as had more water intake.

258



259

272

273 ♦GPI –Control group treated with 0.5ml Acacia (2%w/v) solution., ●GPII Animals treated
 274 with the extract 200mg/kg body weight, ▲ GPIII Animals treated with the extract 300mg/kg
 275 body weight, X GPIV Animals treated with the extract 600mg/kg body weight

276

277 Effects of the polyherbal formulation on the biochemical profiles were summarized in Table
 278 3. There was a remarkable decrease in the plasma glucose levels especially in the animals
 279 treated with the highest dose of the formulation compared to the control. This clearly

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280 indicated the presence of hypoglycaemic components in the formulation and gives credence
 281 to the use of the polyherbal formulation as a hypoglycaemic agent. Significant ($P \leq 0.05$)
 282 increase in creatinine level was observed only in the animals that received the highest dose
 283 of the formulation (600 mg/kg bwt). The elevation in the plasma creatinine concentration
 284 could suggest inflammatory activity in the kidney, specifically by renal filtration mechanism
 285 (Wasan *et al.*, 2001). There was significant decrease in AST level at all the doses. The ALT
 286 level except at the lowest extract dose showed progressive increase that was significant at
 287 the highest dose compared to the control. An elevation in plasma concentration of ALT is
 288 usually due to liver damage while increase in AST level could be linked to damage to either
 289 cardiac or hepatic tissues or damage to both (Wasan *et al.*, 2001; Crook, 2006). The marked
 290 increase in ALT at the highest dose was therefore indicative of inflammatory challenge of the
 291 formulation on the liver. The decrease in the plasma total cholesterol (TC) and triglyceride
 292 (TG) levels might be attributable to the presence of hypolipidaemic agents in the extract. A
 293 significant increase in HDL-cholesterol levels and a reduction in LDL-cholesterol levels
 294 observed in all the treated animals was an indication that the formulation has the tendency to
 295 reduce the cardiovascular risk factors which contribute to death of diabetic subjects (Barnett
 296 and O’Gara, 2003). The ability of the formulation to exert a decrease in cardiovascular risk
 297 factors lent further support for its use as a hypoglycaemic agent.

298

299 **Table 3: Plasma glucose level and other biochemical profiles of animals treated**
 300 **respectively with various doses of polyherbal formulation extract for 30 days and the**
 301 **control**

PARAMETER	Group I	Group II	Group III	Group IV
Glucose(mmol/l)	4.1±0.2	3.2±0.4**	2.7±0.2*	2.2±0.3*
Cholesterol(mmol/l)	2.0±0.3	1.4±0.1*	1.6±0.2**	1.3±0.5*
Triglyceride(mmol/l)	0.5±0.0	0.4±0.0	0.3±0.0*	0.2±0.0*

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HDL(mmol/l)	1.5±1.0	2.0±0.5**	2.0±0.6**	2.0±0.7**
Creatinine(mmol/l)	59.6±0.3	67.6±0.1	57.8±0.0	130.9±2.5*
AST(IU/L)	304.0±0.5	244.7±5.0**	208.7±0.4*	205.3±0.0*
ALT(IU/L)	66.7±2.0	59.9±0.2	68.8±0.3	79.4±0.2*
LDL(mmol/l)	1.3±0.5	0.8±0.3**	1.0±0.2**	0.6±0.2*

302 N=5, values = $m \pm \text{sem}$ * $P < 0.05$; ** $P < 0.01$ vs. control group. Control group received 0.5

303 ml Acacia (2 %w/v) solution.

304 GP I (Control), GPII (200mg/kg), GP III (300mg/kg), GP IV (600mg/kg)

305 HDL- High density lipoprotein; LDL - Low density lipoprotein; AST - Aspartine

306 aminotransferease; ALT- Alanine aminotransferease

307

308 The photomicrograph of hepatic tissue of the animals administered with the highest dose of

309 the formulation showed focal necro-inflammation around the portal hepatics. It was obvious

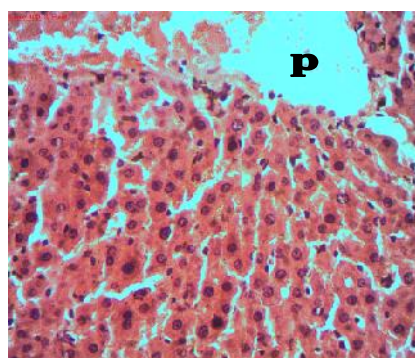
310 the inflammatory changes in the hepatic tissue precipitated an increase in the ALT level. The

311 photomicrograph of renal and testicular tissues on the other hand showed normal

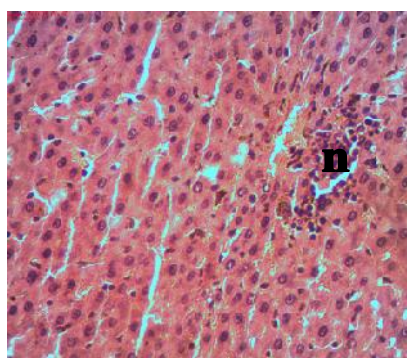
312 appearance. Therefore, the cause of marked increase in creatinine level at the highest dose

313 of the formulation is likely due to other remote factors.

314



315 Fig. 2a: Photomicrograph of normal hepatic tissue indicating portal area (p) and radially arranged cords of hepatocytes separated by sinusoids. (H&E stain) Mag. X400



316 Fig. 2b: Photomicrograph of hepatic tissue treatment with 600mg/kg of the formulation indicating focal necro-inflammation (n) around portal hepatics. (H&E stain) Mag. X400

317

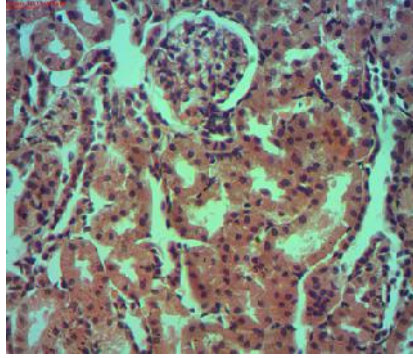


Fig. 3a: Photomicrograph of a cross section of cortical region of the renal tissue of the control indicating renal corpuscles and convoluted tubules. (H&E stain) Mag. X400

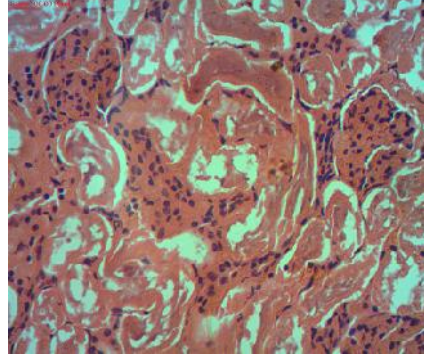


Fig. 3b: Photomicrograph of a cross section of cortical region of the treated animals (600mg/kg) showing normal appearance. (H&E stain) Mag. X400

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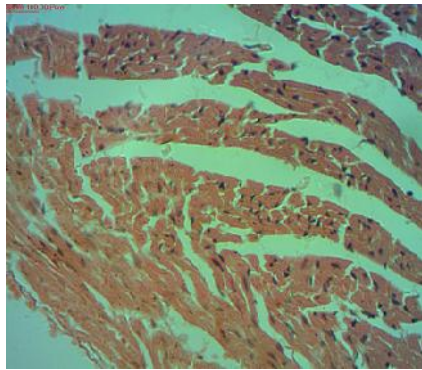


Fig. 4a: Photomicrograph of a cross section of cardiac muscle of the control group showing the branched network of muscle fibres. (H&E stain) Mag. X400

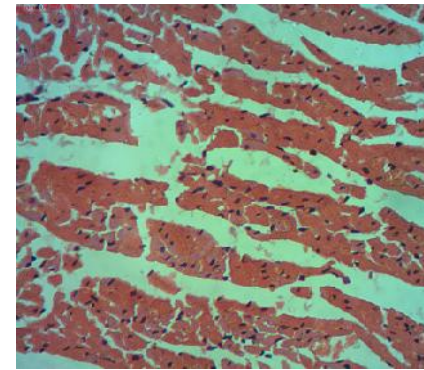


Fig. 4b: The cross section of cardiac muscle of animal treated with 600mg/kg of the formulation indicating no abnormality. (H&E stain) Mag. X400

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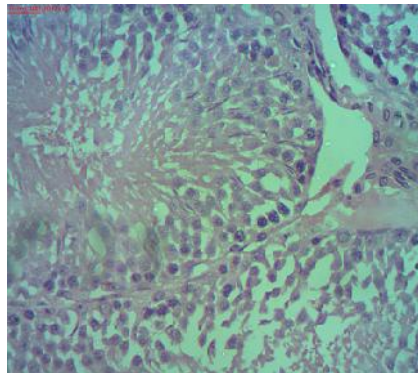


Fig. 5a: The histology of testes of the control group showing cross sections of seminiferous tubules and interstitial cells. (H&E stain) Mag. X400

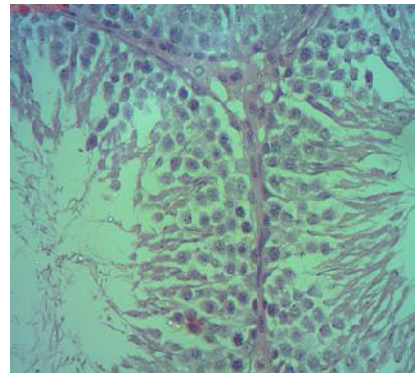


Fig. 5b: The cross section of seminiferous tubules of testis treated with 600mg/kg of the polyherbal drug showing no abnormality. (H&E stain) Mag. X400

322

323

324 Although the haematocrit level at the highest dose of treatment showed no significant
 325 variation compared to the control, the marked increase in the haemoglobin level and in the
 326 RBC count at the highest dose was indicative that the polyherbal formulation does possess
 327 active principle that can enhance RBC production (erythropoiesis) (Sanchez-Elsner *et al.*,
 328 2004). This potential haematinic property emphasized the beneficial effect of the formulation
 329 to the general well being of the animals. The haematinic effect of the formulation could be
 330 due to the activity of *Sphenocentrum jollyanum*, a constituent of the formulation reported to
 331 be rich in haematinic property (Mbaka *et al.*, 2010; Mbaka and Adeyemi, 2010). This study
 332 showed that there was no significant change in MCHC in the treated animals compared to
 333 the control. Low MCHC is associated with iron deficiency anaemia where microcytic
 334 hypochromic red cells are produced as a result of lack of iron to support haemoglobin
 335 synthesis (Agbor *et al.*, 2005). There was also no significant change in MCV. However, there
 336 was a significant increase in WBC count which is known to rise as body defense in response
 337 to toxic environment (Ngogan, 2005). Also, lymphocyte, the main effector cell of the immune
 338 system (Mc Knight *et al.*, 1999; Tegua *et al.*, 2007) recorded marginal increase implying that
 339 the formulation might not have exerted challenge on the immune system of the animals.

340

341 **Table 4: Haematological and blood differential profiles of animals treated respectively**
 342 **with various doses of polyherbal formulation extract for 30 days and the control**

PARAMETER	Group I	Group II	Group III	Group IV
RBC x 10 ³	6.0±0.0	6.7±0.3	6.3±0.2	8.1±0.4*
WBC(10 ⁶)	4.5±0.1	9.0±0.1*	7.0±0.3*	8.9±0.2*
MCV(fl)	64.1±0.3	52.8±0.1*	54.6±0.2*	53.9±0.5*
HCT (%)	44.0±1.0	39.7±0.5	38.9±0.7	44.6±0.6

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PLT (%)	451.0±2.0	527.0±5.0	292.1±0.5	502.0±0.7
PCT (%)	0.3±0.0	0.3±0.1	0.2±0.0	0.3±0.0
Hb (g/dl)	12.8±0.2	61.9±1.5	14.9±0.1	15.9±0.5**
MCH(pg)	21.6±1.0	19.8±0.5	20.5±0.7	19.7±0.6
MCHC (g/dl)	33.7±0.5	37.4±0.6	37.5±1.0	36.6±0.5
LYM (%)	69.2±2.0	61.9±1.5	81.3±0.5	70.2±0.3

343

344 N=5 m ± sem**P* <0.05; ** *P* <0.01 vs. control group. Control group received 0.5 Acacia (2
345 %w/v) solution

346 KEY GP I (Control), GPII (200mg/kg), GP III (300mg/kg), GP IV (600mg/kg)

347

348

349 **Table 5: The effects on the weights on kidney, heart, liver and brain of animals treated**
350 **with various doses of the polyherbal formulation extract for 30 days and the control in**
351 **the sub-acute toxicity study.**

ORGAN /100gkgbw	GPI	GPII	GPIII	GPIV
Heart(g)	0.5±0.2	0.5±0.1	0.5±0.0	0.5±0.0
Liver(g)	3.4±0.1	3.6±0.5	3.6±0.5	3.7±0.6
Kidney(g)	0.8±0.0	0.9±0.0	0.7±0.0	0.9±0.0
Brain(g)	1.5±0.1	1.5±0.1	1.3±0.0	1.5±0.0

352

353 N=5 values= (m ± sem)*P <0.05; ** P <0.01 vs. control group. Control group received 0.5
354 Acacia (2 %w/v) solution
355 GP I (Control), GPII (200mg/kg), GP III (300mg/kg), GP IV (600mg/kg)

356

357 **4. CONCLUSION**

358 The high LD₅₀ value (15.2 g/kg) obtained clearly indicated that the polyherbal preparations
359 could be safe for use but its safety was negated by the presence of *E coli* load above
360 officially accepted limit for liquid herbal preparation. The study showed that the formulation
361 had some hypoglycaemic activity and good reducing effects on cardiovascular factors and
362 did not provoke toxic effects to the animals' heart tissues. Furthermore, the presence of
363 haematinic agent emphasized the beneficial effect of the formulation. However, at highest
364 dose used, the formulation exhibited deleterious effect on the hepatic tissue thus
365 necessitating for a cautious use. It could therefore be estimated that 300mg/kg bwt was the
366 highest dose the herbal formulation did not exert an observed toxic effect to the animals.

367

368 **ETHICAL APPROVAL**

369 All authors hereby declare that "Principles of laboratory animal care" (NIH publication No.
370 85-23, revised 1985) were followed, as well as specific national laws where applicable. All
371 experiments have been examined and approved by the appropriate ethics committee of our
372 Institution". All authors hereby declare that all experiments have been examined and
373 approved by the appropriate ethics committee and have therefore been performed in
374 accordance with the ethical standards laid down in the 1964 Declaration of Helsinki.

375

376 **COMPETING INTEREST:** There is no conflict of financial interest in connection with the
377 submitted manuscript.

378

379 **AUTHORS' CONTRIBUTIONS:** Author A designed the experiment, the protocol for the
380 study and also partook in the manuscript preparation and statistical analysis. Author B
381 undertook the tissue processing and analysis as well as partook in the write up and editing of
382 the manuscript. Author C conducted the laboratory work and did part of the literature search.
383 Authors D, E&F evaluated the microbial purity of the formulations and did part of the
384 literature search.

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