Antibacterial and Antifungal Activity of Acalyphawilkesiana.

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ABSTRACT

The antimicrobial activity of the leave of *Acalyphawilkesiana*methanolic extract and its four derivative fractions were determined on human pathogenic bacteria namely strains of Staphylococcus aureus, Streptococcus pyogenes, Enterococcus faecalis, Pseudomonas aeruginosa, Proteus vulgaris and Escherichia coli and fungi; Aspergillusniger, A. flavus, A. carbonerium, Trichophytonmentagrophytes and Candida albicans. Methanolic extract (200 mg/ml)and its fractions were tested on the bacteria and fungi using the disc diffusion method. *In vitro* antibacterial and antifungal activity were screened by using Mueller Hinton Agar (MHA) and Potato Dextrose Agar (PDA) respectively. The minimum inhibitory concentration for the bacteria and fungi were also determined. Results showed broad spectrum antimicrobial activity against the Gram-negative and Gram-positive bacteria but same cannot be said about its activity against the fungi. The ethyl acetate fraction inhibited the growth of more bacteria and fungi compared to the other fractions; however, the aqueous extract was more effective on the bacteria isolates as it showed the lowest MIC for more bacteria compared to the other fractions. The extract and its fractions were active against bacteria which some standard antibiotics were not able to inhibit. Methanolic extract of A. wilkesiana leaves and its fractions showed a better antibacterial activity than antifungal activity. The fact that the plant was active against both clinical and laboratory isolates is an indication that it can be a source of very potent antibiotic substances that can be used against drug resistant microorganisms. The search for new drugs to counter the challenge posed by resistant strains of bacteria and some fungi might have started yielding results as the investigation of this plant has demonstrated enormous therapeutic potential.

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Keywords: Acalyphawilkesiana, antimicrobial, antibacterial, antifungal, resistance.

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1.0 INTRODUCTION.

Plants have been a source of medicine in the past centuries and today scientists and the general public recognize their value as a source of new or complimentary medicinal products [1]. This plant-based, traditional medicine system continues to play an essential role in health care, with about 80% of the world's inhabitants relying mainly on traditional medicines for their primary health care [2]. Long before mankind discovered the existence of microbes, the idea that certain plants had healing potential and that they contained what we would currently characterize as antimicrobial principles, was well accepted. Since antiquity, man has used plants to treat common infectious diseases and some of these traditional medicines are still included as part of the habitual treatment of various maladies. For example, the use of bear-berry (*Arctostaphylosuva-ursi*) and cranberry juice (*Vacciniummacrocarpon*) to treat urinary tract infections is reported in different manuals of phytotherapy, while species such as lemon balm (*Melissa officinalis*), garlic (*Allium sativum*) and tea tree (*Melaleucaalternifolia*) are described as broad-spectrum antimicrobial agents [3].

During the last two decades, there has been a considerable increase in the study and use of medicinal plants all over the world especially in advanced countries. Medicinal plants have been used in Africa before the introduction of antibiotics and other modern drugs [4].

According to World Health Organization, medicinal plants would be the best source to obtain a variety of drugs [5]. Therefore, such plants should be investigated to better understand their properties, safety and efficacy.

The success story of chemotherapy lies in the continuous search for new drugs to counter the challenge posed by resistant strains of microorganisms. The investigation of certain indigenous plants for their antimicrobial properties may yield useful results. Many studies indicate that some plants have substances such as peptides, unsaturated long chain aldehydes, alkaloids, essential oils, phenolics, as well as different ethanol, chloroform, methanol and butanol soluble compounds. These plants have emerged as plants with compounds possessing significant therapeutic potential against human pathogens, including bacteria, fungi or virus [6].

Nigeria has a great variety of natural vegetation, which is used in trado-medicine to cure various ailments [7]. Among the plants used for medicinal purpose in Africa, particularly in Nigeria is *Acalyphawilkesiana*.

The genus "Acalypha" comprises about 570 species [8]. Acalyphawilkesiana Mull. Arg. belongs to the family Euphorbiaceae and grows as an annual bedding plant [9]. This fast growing, evergreen shrub provides a continuous splash of color in the landscape with the bronze red to muted red, 4 to 8 inch long, ear-shaped leaves available in varying mottled combinations of green, purple, yellow, orange, pink or white, depending upon cultivar [10]. Investigation is ongoing on almost all the available cultivars within Nigeria with respect to their phytochemicals and antimicrobial action against medically inclined and agriculturally related pathogens [9,11,12,13,14,15]. Consequently, this plant has been reported to have antibacterial and antifungal properties [13] as the expressed juice or boiled decoction is locally used within

Nigeria and some other parts of West Africa for the treatment of malaria, dermatological and gastrointestinal infections [12].

Seeds from *Acalyphawilkesiana* are essential components of a complex plant mixture used by traditional healers in southwest Nigeria in the treatment of breast tumors and inflammation [16].

The aim of this study was to compare the antimicrobial activity of *Acalyphawilkesiana's* methanolic extract and its fractions on bacterial and fungal isolates.

2.0 MATERIALS AND METHODS.

2.1 Materials

2.1.1 Collection and Identification of Plant Samples

Fresh leaf samples of *A. wilkesiana*were collected from the horticulture garden of Babcock University, Ilishan Remo, Ogun State (Nigeria) in May 2011. The plant was identified at the botanical unit and assigned the voucher number busst20. It was then deposited at the herbarium of the same institution. The leaves were thoroughly rinsed twice in running tap water and then in sterile water before being air-dried for 2weeks. The dried leaves were ground into fine texture using an electric blender, then stored in sealed and labeled sterilized glass container.

The test organisms used were obtained from the Department of Medical Laboratory Sciences, Benjamin Carson's (Snr) College of Medicine, Babcock University, Ilisan-Remo, OgunState.

2.2 Methods

2.2.1 Extraction

200 g of the dried and powdered *A. wilkesiana* leaves were extracted at room temperature with 2 L absolute methanol for 72 h. The filtrate obtained was concentrated using rotatory evaporator at 45° C.Methanolic extract (32g)obtained was re-dissolved in methanol and distilled water at ratio 1:3 to obtained aqueous methanolic extract solution. The aqueous methanolic extract solution was partitioned with hexane (3 × 200ml) to obtain the hexane fraction. The aqueous solution remaining was further partitioned with chloroform and ethyl acetate (3 × 200ml) respectively, to obtain the chloroform and ethyl acetate fractions. Theremaining aqueous solution became the aqueous fraction. All the fractions were concentrated in the rotary evaporator at 45° C and stored at 4° C till use (Fig.1).

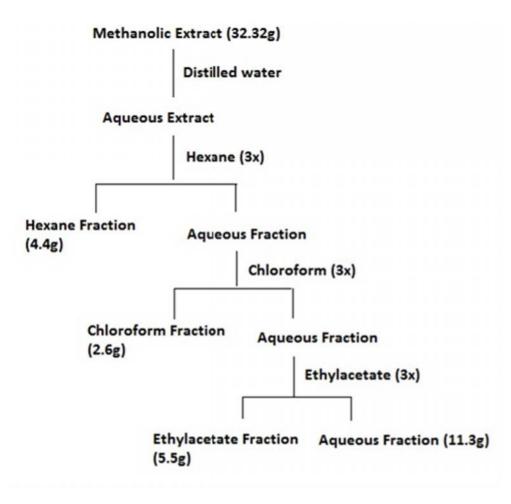


Figure 1: Extraction yield of all the fractions of methanolic extract of A. wilkesiana.

2.2.2 Confirmation of test organisms.

The test organisms used were standard strains of pathogenic bacteria and clinical isolate of fungi. They include five strains of Gram-positive bacteria; which are three strains of Staphylococcus aureus; S. aureus (ATCC 29213), S. aureus (ATCC 55620) and S. aureus (ATCC 25923), Streptococcus pyogenes (ATCC 8662) and Enterococcus faecalis (ATCC 29212). Six strains of Gram-negative bacteria namely; three strains of Escherichia coli - E. coli (ATCC 23922), E. coli (ATCC 25922) and E. coli (ATCC 35218) others are Klebsiellapneumoniae (ATCC 700603), Pseudomonas aeruginosa (ATCC 27853) and Proteus vulgaris (ATCC 13315). Biochemical analysis was carried out on each of the test organisms for confirmation as described by MacFaddin [17], Fobreset al. [18] and Leboffe and Pierce [19].The Bergey's Manual of Systematic Bacteriology [20] was used for species authentication. The fungi isolates include: Aspergillusniger, A. flavus, A. carbonerius, Trichophytonmentagrophytes and Candida albicans, as identified via macroscopic and microscopic observations as well as germ tube test and chlamydospore production on cornmeal agar fortified with Tween 80 polysorbate for the yeast [21-23].

2.3 Antimicrobial Assay of the methanolic extract and its fractions.

2.3.1 Antimicrobial susceptibility test for Bacteria.

Stock cultures were maintained at 4 °C on slopes of nutrient agar. Active cultures for experiments were prepared by transferring a loopful of cells from the stock cultures to test tubes of Mueller-Hinton broth (MHB) and were incubated without agitation for 24 h at 37 °C. The cultures were diluted with Mueller-Hinton broth to achieve optical densities corresponding to 2.0 ×10⁶cfu/ml. The disc diffusion method was used to determine the antibacterial activity of the methanol extract and the other four fractions. *In vitro* antibacterial activity was screened by using Mueller Hinton Agar (MHA) (LAB, UK). The MHA plates were prepared by pouring 15 ml of molten media into sterile petri dishes. The plates were allowed to solidify for 10 min and a standard loopful of each of the eleven bacteria strain was streaked uniformly on the different plates and incubated at room temperature for 10 min after which sterile cork borer of 5 mm diameter was used to make two ditches (wells) on each inoculated plate and filled with 1 ml of the methanol extractof the plant and the same was done for each of the eleven bacteria strain using the other four fractions. These were carried out in triplicate for each bacterium. They were left on the bench for 30 min to ensure adequate diffusion of the extract and fractions and thereafter were incubated at 37 °C for 24 h and the diameter of all resulting zones of inhibition around the ditches were measured to the nearest millimeter along two axis and the mean of the two measurements was calculated. Each set of culture plates was compared for confirmation.

Antibiotic susceptibility test was carried out on the test bacteria as control. A multi-sensitivity disc bearing different antibiotics of GBMTS-NEG (Lot: NH05/P)(AbtekBiologicals ltd. Liverpool L9 7AR, UK) with their concentrations; amoxycillin (25 μg), cotrimoxazole (25 μg), nitrofurantoin (300 μg), gentamicin (10 μg), nalidixic acid (30 μg), ofloxacin (30 μg), amoxicillin-clavulanate (Augmentin, 30 μg), tetracycline (30 μg) and DT-POS (Lot: JB04/P) with their concentrations; ampicillin (10 μg), chloramphenicol (10 μg), cloxacillin (5 μg), erythromycin (5 μg), gentamicin (10 μg), penicillin (1 i.u.), streptomycin (10 μg), tetracycline (10 μg)were used against each of the test bacteria inoculated on Mueller Hinton agar plates. These were incubated at 37 °C for 24 h. After incubation, the diameter of the zone of inhibition around each ditch was measured to the nearest mm along two axes and the mean of the two readings was then calculated.

2.3.2 Antimicrobial susceptibility test for Fungi.

Stock fungi were maintained at room temperature on Potato Dextrose Agar (Oxoid, UK). Active fungi for experiments were prepared by seeding a loopful of fungi into Potatoes dextrose broth and incubated without agitation for 48 h at 25 °C. The broth was diluted with Potatoes dextrose broth to achieve optical densities corresponding to 2.0×10^5 spore/ml for the fungal strains

The disc diffusion method was also used to screen for antifungal properties. *In vitro* antifungal activity was screened by using Potato Dextrose Agar (PDA). The PDA plates were prepared by pouring 15 ml of molten media into sterile petri plates. The plates were allowed to solidify for 10 min and 1 ml of the test culture was introduced into agar and allowed to spread while the excess was drained off. The plate was incubated at room temperature for 10 min. A sterile cork borer of 5 mm diameter was used to make two ditches (wells) on each plate and filled with 1ml (200 mg) of the methanol extract and its fractions. The same was repeated for each fungus strain using the extract and its fractions. These were carried out in triplicate for each fungus. The plates were

incubated at 25 °C for 96 h and the resulting zone of inhibition around the ditches were measured to the nearest millimeter along two axes and the mean of the two measurements was calculated. Each set of seeded plates were compared for confirmation. Control test was carried out using 10mg/ml of Fluconazole

2.3.3 Determination of minimum inhibitory concentration (MIC)

In determining the antimicrobial activity of *Acalyphawilkesiana*, the minimum bacterial growth inhibition was accessed using the methanol extract and its fractions.

2 ml of nutrient broth was pipetted into test tubes for the methanolic extract and its four fractions. 0.5 ml of 25 mg/ml, 50 mg/ml and 100 mg/mlof the extract and fractions were added to different test tubes containing the nutrient broth. This was prepared for each organism and done in triplicate. A colony of 24 h cultured organism was inoculated into test tube containing 1 ml of normal saline to form a turbidity of 0.5 McFarland standard and was thereafter dispense into the test tube containing the suspension of nutrient broth, methanolic extract and the various fractions of the extract. This was done for all the organisms at the varying concentrations. All test tubes were properly corked and incubated at 37 °C for 24 h and at 25°C for 96 h for bacteria and fungirespectively. After which they were observed for absence or presence of visible growth. The lowest concentration of the methanolic extract and each fraction showing no visible growth was recorded as the minimum inhibitory concentration (MIC). It was further standardized in terms of absorbance at 600 nm in a visible spectrophotometer. Ofloxacinand Fluconazole were used as the positive control for bacteria and fungi respectively.

3. RESULTS AND DISCUSSION

3.1 Results

This study revealed the *in vitro* susceptibility of some bacteria to the methanolic extract of *A. wilkesiana* and its fractions. Table 1 shows the mean ±standard deviation of the inhibition zone in the various agar plates of bacteria exposed to the extract fractions. It was noticed that all the fractions and the extract used inhibited the growth of *S. aureus* (ATCC 25923). However, the methanolic extract, aqueous, ethyl acetate and hexane fractions inhibited S. *aureus* (ATCC 29213), whilemethanolic extract, aqueous and ethyl acetate fractions inhibited *S. aureus* (ATCC 55620). This study showed that all the *S. aureus* strains were the only organisms susceptible to the crude methanol extract while aqueous and ethyl acetate fractions were the only fractions that inhibited *P. vulgaris* (ATCC 13315), *P. aeruginosa* (ATCC 27853) and *S. pyogenes*(ATCC 8662). The *E. coli* strains and *Enterococcus faecalis* were resistant to the crude extract and two of the fractions except ethyl acetate and chloroform which inhibited *E. coli* (ATCC 35218) and *E. faecalis* (ATCC 29212) respectively. *Klebsiellapneumoniae* (ATCC 15380), *E. coli* (ATCC 25922) and *E. coli* (ATCC 23922) were not susceptible to any of the fractions used in this study.

The aqueous fraction against <u>S. pyogenes</u> (ATCC 8662) yielded the highest inhibition value while ethyl acetate fraction gave the greatest number of inhibition, i.e. more test bacteria were susceptible to ethyl acetate fraction.

Table 1: The mean± S.D (mm) of zone of inhibition observed on bacteria cultured plates of isolates exposed to methanolic extract and different fractions of *A. wilkesiana*.

Organisms	Methanolic	Aqueous	Ethyl acetate	Hexane	Chloroform
S. aureus (ATCC 25923)	5.0 ± 0.0	6.5 ± 0.3	7.5 ± 2.9	5.0 ± 0.0	6.0 ± 0.0
S. aureus (ATCC 29213)	7.5 ± 0.9	5.0 ± 0.0	7.0 ± 0.4	3.0 ± 0.0	0.0
S. aureus (ATCC 55620)	7.5 ± 0.3	7.3 ± 0.5	9.5 ± 2.3	0.0	<mark>0.0</mark>
P. aeruginosa(ATCC 27853)	0.0	5.0 ± 0.0	8.0 ± 0.4	<mark>0.0</mark>	<mark>0.0</mark>
P. vulgaris (ATCC 13325)	<mark>0.0</mark>	7.0 ± 0.0	6.5 ± 0.3	<mark>0.0</mark>	<mark>0.0</mark>
S. pyogenes (ATCC 8662)	<mark>0.0</mark>	10.0 ± 0.0	8.8 ± 0.5	<mark>0.0</mark>	<mark>0.0</mark>
E. faecalis (ATCC 29212)	<mark>0.0</mark>	0.0	0.0	<mark>0.0</mark>	6.5 ± 0.3
E. coli (ATCC 35218)	<mark>0.0</mark>	<mark>0.0</mark>	9.5 ± 0.3	<mark>0.0</mark>	0.0
E. coli (ATCC 23922)	<mark>0.0</mark>	<mark>0.0</mark>	0.0	<mark>0.0</mark>	<mark>0.0</mark>
E. coli (ATCC 25922)	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>
K. pneumoniae (ATCC 15380)	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>

The susceptibility of the clinical fungi isolates used is shown in Table 2, which revealed that four of the fungi were completely resistant to all fractions of the extract. *A. niger* was susceptible to the ethyl acetate fraction while *C. albicans* was susceptible to the aqueous, ethyl acetate and chloroform fractions, with the plate treated with aqueous fraction producing the highest zone of inhibition observed.

Table 2: The mean± S.D (mm) of zone of inhibition observed on fungi seeded plates of isolates exposed to methanolic extract and different fractions of *A. wilkesiana*.

Organisms	Methanolic	Aqueous	Ethyl acetate	Hexane	Chloroform
Aspergillusniger	0.0	0.0	6.5 ± 0.3	0.0	0.0
<u>Aspergillusflavus</u>	<mark>0.0</mark>	<mark>0.0</mark>	0.0	<mark>0.0</mark>	<mark>0.0</mark>
Aspergilluscarbonerium	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>	<mark>0.0</mark>
Candida albicans	<mark>0.0</mark>	7.5 ± 0.3	7.0 ± 0.4	<mark>0.0</mark>	5.0 ± 0.0
Trichophytonmentagrophytes	<mark>0.0</mark>	<mark>0.0</mark>	0.0	<mark>0.0</mark>	0.0

All test organisms expressed various resistant pattern as shown in Table 3 for bacteria which were tested against known commercially prepared antibiotics while, Table 4 shows the resistant pattern of the fungi to Fluconazole used.

Table 3: Antibiotic Resistant Pattern of the Test Bacteria

Bacteria	Antibiotic Resistance	Antibiotic Susceptibility
S. aureus(ATCC 55620)	AMP, CHL,CXC,ERY,GEN,PEN,STR and	OFL, AUG, NIT, AMX, COT and
	TET.	NAL
S. aureus (ATCC 29213)	Resistant to none	AMP, CHL,CXC,ERY,GEN,STR,
		TET,OFL, AUG, NIT, AMX,
		COT, NAL and PEN
S. aureus (ATCC 25923)	AMP,CXC,ERY,GEN,PEN and STR.	CHL, TET, OFL, AUG, NIT,
		AMX, COT and NAL
S. pyogenes (ATCC 8662)	AMP,CHL,CXC,ERY,GEN,PEN,STR and	OFL, AUG, NIT, AMX, COT and
	TET	NAL
E. faecalis (ATCC 29212)	AMP, CHL, CXC, ERY, PEN, STR and TET	GEN, OFL, AUG, NIT, AMX,
		COT and NAL

P.aeruginosa (ATCC 27853)	AMX, COT,NIT, GEN, NAL,AUG and TET	AMP, CHL, CXC, ERY, PEN,
		STR and OFL
P. vulgaris (ATCC 13315)	AMX, COT,NIT, NAL and AUG	AMP, CHL, CXC, ERY, GEN,
		PEN, STR, TET, OFL and PEN
E. coli (ATCC 35218)	AMX, <mark>COT,NAL,</mark> and AUG	AMP, CHL, CXC, ERY, GEN,
		STR, TET, OFL, NIT and PEN
E. coli (ATCC 23922)	AMX and AUG	AMP, CHL ,CXC, ERY, GEN,
		STR, TET, OFL, NIT, COT,
E 1: (A TGG 25022)	AND LANC	NAL and PEN
E. coli (ATCC 25922)	AMX and AUG	AMP, CHL, CXC, ERY, GEN,
		STR, TET, OFL, NIT, COT,
V (ATCC 700(02)	AMY COT NIT NAT I ALIC	NAL and PEN
<i>K. pneumoniae</i> (ATCC 700603)	AMX,COT,NIT,NAL and AUG	AMP, CHL,CXC,ERY,GEN,STR,
		TET, OFL and PEN

Key:OFL = Ofloxacin, GEN = Gentamicin, STR= Streptomycin, TET = Tetracycline, AUG = Augumentin, NIT = Nitrofurantoin, AMX = Amoxicillin, COT = Cotrimoxazole, CHL = Chloramphenicol, NAL = Nalidixic acid, ERY = Erythromycin, AMP= Ampicillin, CXC= Cloxacillin, PEN= Penicillin

Table 4: Antifungal Susceptibility pattern to Fluconazole

Fungi	Susceptibility pattern
Aspergillusniger	Resistant
A. flavus	Resistant
A. carbonerium	Resistant
C. albicans	Susceptible
Trichophytonmentagrophytes	Susceptible

Table 5 showed that aqueous fraction had the lowest MIC values of 25 mg/ml for eight bacteria; namelyS. aureus (ATCC 29213),E. faecalis(ATCC 29212), K. pneumoniae(ATCC 700603),E. coli (ATCC 23922),E. coli (ATCC 25922), E. coli (ATCC 35218),P. aeruginosa(ATCC 27853) and P. vulgaris (ATCC 13315). The ethyl acetate and chloroform fractions followed with four bacteria each and hexane fraction with two bacteria. The result also revealed that all the fractions and the methanolic extract had the lowest MIC value for P. vulgaris (ATCC 13315). However only ethyl acetate and hexane fractions showed the lowest MIC value of 50 mg/ml for C. albicans while ethyl acetate showed the same value for A. niger. Ofloxacin which was the positive control used for the bacteria showed MIC value <25 mg/ml and Fluconazole used a positive control for fungi showed MIC value of <25 mg/ml for just for C.albicans and Trichophytonmentagrophytes.

Table 5: Minimum Inhibitory Concentration of methanolic extract, aqueous, ethyl acetate, hexane and chloroform fractions of *A. wilkesiana* (mg/ml)

Organisms	Methanolic	Aqueous	Ethyl acetate	Hexane	Chloroform
S. aureus (ATCC 25923)	<mark>25</mark>	<mark>50</mark>	<mark>25</mark>	<mark>50</mark>	25
S. aureus (ATCC 29213)	<mark>25</mark>	<mark>25</mark>	<mark>25</mark>	<mark>50</mark>	<mark>50</mark>
S. aureus (ATCC 55620)	<mark>50</mark>	<mark>50</mark>	100	<mark>50</mark>	<mark>25</mark>
P. aeruginosa(ATCC 27853)	<mark>50</mark>	<mark>25</mark>	<mark>100</mark>	<mark>50</mark>	<mark>50</mark>
P. vulgaris (ATCC 13325)	<mark>25</mark>	<mark>25</mark>	<mark>25</mark>	<mark>25</mark>	<mark>25</mark>
S. pyogenes (ATCC 8662)	<mark>50</mark> _	<mark>50</mark>	<mark>100</mark>	<mark>50</mark>	<mark>50</mark>
E. faecalis (ATCC 29212)	<mark>100</mark>	<mark>25</mark>	<mark>25</mark>	<mark>100</mark>	<mark>50</mark>
E. coli (ATCC 35218)	<mark>50</mark>	<mark>25</mark>	<mark>100</mark>	<mark>25</mark>	<mark>25</mark>
E. coli (ATCC 23922)	<mark>50</mark> _	<mark>25</mark>	<mark>100</mark>	<mark>100</mark>	<mark>50</mark> _
E. coli (ATCC 25922)	<mark>100</mark>	<mark>25</mark>	<mark>100</mark>	<mark>100</mark>	<mark>100</mark>
K. pneumoniae(ATCC 15380)	<mark>50</mark>	<mark>25</mark>	<mark>50</mark>	<mark>100</mark>	<mark>50</mark>
<mark>Aspergillusniger</mark>	<mark>>100</mark>	>100	<mark>50</mark>	<mark>>100</mark>	<mark>>100</mark>
<mark>A. flavus</mark>	<mark>>100</mark>	>100	<mark>>100</mark>	<mark>>100</mark>	<mark>>100</mark>
<mark>A. carbonerium</mark>	>100	>100	<u>>100</u>	>100	>1 <mark>00</mark>
C. albicans	<mark>100</mark>	<mark>100</mark>	<mark>50</mark>	<mark>100</mark>	<mark>50</mark>
Trichophytonmentagrophytes	> 100	> 100	> 100	>100	> 100

3.2 Discussion.

Many studies have established the usefulness of medicinal plants as a great source for the isolation of active principles for drug formulation [24-26].

Several species of the genus Acalyphahave been studied and it has been demonstrated that they have antioxidant, wound healing, post-coital antifertility, neutralization of venom, antibacterial, antifungal and antitrypanosomal activities [27-29]. The results of this study support the antibacterial and antifungal activities of A.wilkesiana as a broad spectrum antimicrobial agent since it inhibited the growth of Gram-positive(S. aureus, S. pyogenes, E. faecalis) and gram negative bacteria (E. coli, P. aeruginosa, P. vulgaris) as well as some fungi (A. niger, C. albicans).

The fact that the methanolic extract of *A. wilkesiana* and its fractions showed activity against most of the test organisms is a major breakthrough in appreciating the medicinal potential of the plant especially in the management of both community acquired and nosocomial associated infections.

Also that some organisms were not susceptible to its activity, corroborated the fact that resistance to antimicrobial agents cannot be eliminated but curtailed since some organisms are intrinsically resistant as stated by Oluremi*et al.* [30].

However the effectiveness of its antimicrobial potency seems to be more of antibacterial than antifungal. This study revealed that only *A. niger* and *C. albicans* were inhibited among the fungi used which support the work of Onocha and Olusanya[31] which showed that the methanolic extracts of *A. wilkesiana* inhibited only *A. niger* and *C. albicans*. Also support the report of Oladunmoye[9] which revealed that *A. niger* was inhibited by methanolic extract of this plant. It is noteworthy to see that *A. niger* which was resistant to fluconazole was susceptible to the ethyl acetate fraction.

In the present study it was found that the aqueous fraction had the lowest MIC value of 25 mg/ml on 8 of the 11 test bacteria while ethyl acetate and chloroform showed same value of 25 mg/ml for 4 bacteria each. This imply that though ethyl acetate fraction inhibited more bacteria but the aqueous fraction was more effective against the bacteria. The lowest MIC value of 50 mg/ml was observed for *C. albican* and *A. niger* by ethyl acetate and same was recorded for hexane fraction on *C. albicans*. The resistance of fungi to the tested extract and fraction may be due to the presence of more complex cell wall with rigidity than the thin cell membrane of bacteria. Also, this may be due to their ability to produce extracellular enzymes that helps them to degrade and metabolize substrate such that the extract becomes a source of food to the fungi instead of inhibiting their growth after they have been rendered nontoxic due to degradation [32].

The result also showed that there were disparity between the methanolic extract and its fractions and standard antibiotics as the former inhibited the growth of organisms that some of the standard antibiotics failed to inhibit. The disparity between the activities of the extract and the standard antimicrobial drug may be due to the mixtures of bioactive compounds present in the extract compared to the pure compound contained in the standard antibiotics [33]. This demonstration of activity against such test bacteria may form the scientific bases for the local dependence on this plant in the treatment of various ailments.

This present study also revealed that the ethyl acetate fraction of the extract was the most potent of all the fractions used. It was the only fraction which inhibited the highest number of bacteria and fungi. The only exception to this was *E. faecalis* which was only susceptible to the Chloroform fraction.

Several strains of pathogenic *S. aureus* and *E. coli* used in this study revealed that the methanolic extract inhibited all strains of *S. aureus* but did not inhibit any strain of *E. coli* and the other Gram negative bacteria, this may suggest that the methanolic extract is mainly active against *S. aureus*. Though the methanolic extract did not inhibit any Gram negative bacteria, the ethyl acetate and aqueous fractions did and this may be due to the partial purification of the methanolic extract which enabled the bioactive compounds to exhibit stronger antimicrobial activity. Gallic acid, corilagin and geraniin have been reported to be the active compounds responsible for the antimicrobial activity of *A. wilkesiana* [11], however, that study was limited to bacteria isolates. Further purification of the ethyl acetate and aqueous fractions of methanolic extract of *A. wilkesiana* will give more insight into the bioactive compounds responsible for the antibacterial and antifungal properties of this plant.

4. CONCLUSION.

The demonstration of activity against both gram-negative and gram-positive bacteria and fungi is an indication that the plant can be a source of bioactive substances that could be of broad

spectrum of activity. The fact that the plant was active against both clinical and laboratory isolates is also an indication that it can be a source of very potent antibiotic substances that can be used against drug resistant microorganisms. The search for new drugs to counter the challenge posed by resistant strains of bacteria and some fungi might have started yielding results as the investigation of this plant has demonstrated enormous therapeutic potential. It can serve the desired purpose with lesser side effects that are often associated with synthetic antimicrobial agents.

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