

HYPOGLYCEMIC AND HYPOLIPIDEMIC EFFECTS OF ETHANOL EXTRACT OF *SARCOSTEMMA SECAMONE* (L.) BENNET (ASCLEPIADACEAE) IN ALLOXAN INDUCED DIABETIC RATS

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ABSTRACT

Objective: To evaluate the hypoglycemic and hypolipidemic effects of ethanol extract of *Sarcostemma secamone* whole plant in alloxan induced diabetic rats.

Methods: Diabetes was induced in Albino rats by administration of alloxan monohydrate (150mg/kg i.p). The ethanol extracts of *Sarcostemma secamone* whole plant at a dose of 150 and 300 mg/kg of body weight were administered at a single dose per day to diabetes induced rats for a period of 14 days. The effect of ethanol extract of *Sarcostemma secamone* whole plant extract on blood glucose, plasma insulin, urea, creatinine, glycosylated haemoglobin, serum lipid profile [total cholesterol (TC), triglycerides (TG), low density lipoprotein-cholesterol(LDL-C), very low density lipoprotein-cholesterol (VLDL-C), high density lipoprotein- cholesterol (HDL-C) and phospholipid (PL), serum protein, albumin, globulin, serum enzymes [serum glutamate pyruvate transaminases] (SGPT), serum glutamate oxaloacetate transaminases (SGOT) and alkaline phosphatase (ALP)] were measured in the diabetic rats.

Results: In the acute toxicity study, ethanol extract of *Sarcostemma secamone* whole plant was non-toxic at 2000 mg/kg in rats. The increased body weight, decreased blood glucose, glycosylated haemoglobin and other biochemical parameters level was observed in diabetic rats treated with both doses of ethanol extract of *Sarcostemma secamone* whole plant compared to diabetic control rats. In diabetic rats, ethanol extract of *Sarcostemma secamone* whole plant administration, altered lipid profiles were reversed to near normal than diabetic control rats. Conclusion: Ethanol extract of *Sarcostemma secamone* whole plant possess significant hypoglycemic and hypolipidemic activity in diabetic rats.

Keywords: *Sarcostemma secamone*, Hypoglycemic, Hypolipidemic, Alloxan, Glibenclamide, SGOT, SGPT and HbA1C

INTRODUCTION

Diabetes mellitus, a chronic metabolic disorder has now become an epidemic, with a World wide incidence of 5% in the general population. The number of people suffering from diabetes has soared to 246 million and the disease now kills more people than AIDS[1]. According to WHO, the prevalence of diabetes is likely to increase by 35% by the year 2025. Statistical projection about India suggests that the number of diabetes will rise from 15 million in 1995 to 79.4 million by 2025, making it the country with highest number of diabetes in the world[2,3]. Diabetes is a serious metabolic disorder with micro and macrovascular complication that results in significant morbidity and mortality[4].

In conventional therapy, Type 1 diabetes is treated with exogenous insulin and Type 2 with oral hypoglycemic agents (Sulphonylureas, biguanides and thiozolidinediones). But they also have undesired effects associated with their uses[5]. Alternative medicines particularly herbal medicines are available for the treatment of diabetes. Common advantages of herbal medicines are effectiveness, safety, affordability and acceptability[6]. The medicinal plants might provide a useful source of new oral hypoglycemic compounds for development of pharmaceutical entities[7]. Few of the plants used for the treatment of diabetes have received scientific or medical scrutiny and even the WHO expert committee on diabetes recommended that this area warrant further attention[8]. Despite the presence of known antidiabetic medicines in the pharmaceutical market, screening for new antidiabetic sources from natural plant is still attractive because they contain substances that have an alternative and safe effect on diabetes mellitus.

Sarcostemma secamone (L) Bennet, is an important medicinal plant belonging to the family Asclepiadaceae. It is used in the traditional systems of medicine for various ailments. The decoction of the plant is useful to gargle for throat and mouth infection. The latex is bitter and used as a vulnerary. Fresh roots are prescribed for jaundice[9-12]. The milky sap forms a wash for ulcers. In combination with turpentine, it is prescribed for itch[13]. The plant is hot, bitter, tonic,

expectorant, pungent, dry and indigestible causes flatulence, diuretic, laxative, aphrodisiac, anthelmintic, useful in leucoderma and bronchitis. The juice is used in gleet, gonorrhoea, pain in the muscles, cough and given to children as an astringent[14]. Leaf powder stimulates arculatory system, increases secretion of urine and activates uterus[15]. The fruit juice is used in gonorrhoea and pain in muscles[14]. The leaves, roots and latex of *Sarcostemma secamone* are employed in treating many diseases like mouth ulcer, sour throat, jaundice and ulcers[16-18]. Realizing the importance and common use of the roots of *Sarcostemma secamone* in the treatment of liver disorder by several tribes in India.

There were no reports on the ability of *Sarcostemma secamone* whole plant on antihyperglycemic and antihyperlipidemic activities. Hence, this study was taken up to investigate the antihyperglycemic and antihyperlipidemic activities of the whole plant of *Sarcostemma secamone* in alloxan induced diabetic rats.

MATERIALS AND METHODS

Plant Material

The whole plant of *Sarcostemma secamone* (L.) Bennet was collected from Natural forests of Western Ghats at Thanniparai, Srivilliputhur, Virudhunagar District, Tamil Nadu and identified by the Botanical Survey of India, Coimbatore. A voucher specimen was retained in Ethnopharmacology Unit, Research Department of Botany, V. O. Chidambaram College, Tuticorin for further reference.

Preparation of plant extract for phytochemical screening and antidiabetic studies

The whole plant of *Sarcostemma secamone* was shade dried at room temperature and the dried whole plant was powdered in a Wiley mill. Hundred grams of powdered whole plant was packed in a Soxhlet apparatus and extracted with ethanol. The extracts were subjected to qualitative test for the identification of various

phytochemical constituents as per the standard procedures[19,20]. The ethanol extracts were concentrated in a rotary evaporator. The concentrated ethanol extract were used for antidiabetic studies.

Animals

Normal healthy male Wistar Albino rats (180- 240g) were housed under standard environmental conditions at temperature (25±2°C) and light and dark (12: 12 h). Rats were fed with standard pellet diet (Goldmohur brand, MS Hindustan lever Ltd., Mumbai, India) and water *ad libitum*. Study was carried out as per IACF approval No: 82/PHARMA/SCRI, 2010.

Acute Toxicity Study

Acute oral toxicity study was performed as per OECD-423 guidelines (acute toxic class method), albino rats (n=6) of either sex selected by random sampling were used for acute toxicity study[21]. The animals were kept fasting for overnight and provided only with water, after which the extracts were administered orally at 5mg/kg body weight by gastric intubations and observed for 14 days. If mortality was observed in two out of three animals, then the dose administered was assigned as toxic dose. If mortality was observed in one animal, then the same dose was repeated again to confirm the toxic dose. If mortality was not observed, the procedure was repeated for higher doses such as 50, 100, and 2000 mg/kg body weight.

Induction of Diabetes in Experimental animal

Rats were induced diabetes by the administration of simple intraperitoneal dose of alloxan monohydrate (150 mg/kg)[22]. Two days after alloxan injection, rats screened for diabetes having glycosuria and hypoglycemia with blood glucose level of 200-260 mg/100 ml were taken for the study. All animals were allowed free access to water and pellet diet and maintained at room temperature in plastic cages.

Experimental Design

In the present investigation, a total of 30 rats (24 diabetic surviving rats and 6 normal rats) were taken and divided into five groups of 6 rats each.

Group I: Normal untreated rats

Group II: Diabetic control rats

Group III: Diabetic rats given ethanol extract of whole plant of *Sarcostemma secamone* (150mg/kg body weight)

Group IV: Diabetic rats given ethanol extract of whole plant of *Sarcostemma secamone* (300mg/kg body weight)

Group V: Diabetic rats given standard drug glibenclamide (600µg/kg body weight).

The animals were sacrificed at the end of experimental period of 14 days by decapitation. Blood was collected, sera separated by centrifugation at 3000g for 10 minutes.

Estimation of insulin, glucose, urea, creatinine and glycosylated haemoglobin

Table 1: Effect of whole plant extract of *Sarcostemma secamone* on the Body weight and Fasting Blood Glucose in Normal, Diabetic induced and Diabetic treated rats.

Parameter	Mean initial Body weight (g)	Mean final Body weight (g)	Mean weight Gain(G↑)/ Loss(L↓) (g)	Fasting Blood Glucose (mg/dl)	
				Initial	Final (after 2 wks)
Group I	201.56±8.32	219.35±6.42	17.81±0.39↑	78.36±2.17	74.53±1.51
Group II	194.11±8.32	170.14±5.84	23.97±1.34↓*	214.33±7.56***	201.74±3.13***
Group III	212.26±7.14	191.18±4.58	21.16±1.14↓	215.32±6.31	164.20±5.10
Group IV	214.54±6.34	194.34±4.86	20.20±1.34↓	215.64±7.80ns	123.31±6.34**b
Group V	198.34±5.36	191.59±5.13	6.75±0.34↓	193.98±3.46**	118.56±2.94**ab

Serum glucose was measured by the Otoluidine method[23]. Insulin level was assayed by Enzyme Linked Immuno Sorbant Assay (ELISA) kit[24]. Urea estimation was carried out by the method of Varley[25]; serum creatinine was estimated by the method of Owen *et al*[26]. Glycosylated haemoglobin (HBA1C) estimation was carried out by a modified colorimetric method of Karunanayake and Chandrasekharan[27].

Estimation of protein, albumin, globulin, SGPT, SGOT, ALP

Serum protein[28] and serum albumins was determined by quantitative colorimetrically method by using bromocresol green. The total protein minus the albumin gives the globulin, serum glutamate pyruvate transaminase (SGPT) and serum glutamate oxaloacetate transaminase (SGOT) was measured spectrophotometrically by utilizing the method of Reitman and Frankel[29]. Serum alkaline phosphatase (ALP) was measured by the method of King and Armstrong[30].

Estimation of lipids and lipoprotein

Serum total cholesterol (TC)[31], total triglycerides (TG)[32], low density lipoprotein cholesterol (LDL-C), very low density lipoprotein cholesterol (VLDL- C)[33], high density lipoprotein cholesterol (HDL-C)[34] and phospholipids[35] were analyzed.

Statistical Analysis

The data were analyzed using student's t-test statistical methods. For the statistical tests a *p* values of less than 0.01 and 0.05 was taken as significant.

RESULTS

The phytochemical screening of ethanol extract of *S.secamone* whole plant revealed the presence of alkaloid, catechin, coumarin, flavonoid, phenol, saponin, steroid, tannin, terpenoid, sugar, glycoside and xanthoprotein.

Acute toxicity study

The ethanol extract was safe upto a dose of 2000mg/kg body weight. Behavior of the animals was closely observed for the first 8 hr then at an interval of every 4hr during the next 48hr, the extract did not cause mortality on rats during 48hr observation or any behavioral change.

Body weight and fasting blood glucose (FBG) level changes in diabetic rats

In the present study, alloxan induced diabetic rats showed significant (*p*< 0.05) reduction in body weight (Table 1). The administration of *S.secamone* and glibenclamide to diabetic rats restored the changes in levels of body weight. Table 1 shows the dose dependent antihyperglycemic activity of *S.secamone* extracts. The FBG levels of diabetic rats were significantly (*p*<0.001) higher than those of normal control rats. When different doses of *S.secamone* were tested for their glucose lowering effects, the ethanol extract at a dose of 300mg/kg body weight produced the maximum fall in the FBG levels of diabetic rats after 2 week of treatment.

Each Value is SEM of 5 animals: * $p < 0.05$ comparison with Normal Control vs Diabetic and Drug treated: * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; ns – Not significant a – $p < 0.05$ Diabetic Control vs Drug treated; b - $p < 0.05$ comparison with initial vs final

Blood glucose and other parameters levels in diabetic rats

Table 2 shows the levels of blood glucose, serum insulin, urea, creatinine and glycosylated haemoglobin of normal, diabetic control and drug treated rats. There was a significant ($p < 0.001$) increase in blood glucose level in alloxan induced diabetic rats (Group II), when compared with normal rats (Group I). The administration of whole plant extract of *S.secumone* (Group III and IV) and glibenclamide (Group V) tends to bring the parameters ($p < 0.05$) towards the normal. Serum insulin level of diabetic control group was

significantly ($p < 0.001$) decreased when compared to normal control group (Group I). The *S.secumone* whole plant extract and glibenclamide group of diabetic rats significantly ($p < 0.05$; $p < 0.001$) increased insulin. A significant elevation in urea and creatinine was observed in alloxan induced diabetic rats when compared to control rats. The *S.secumone* extracts were administered orally to diabetic rats for 14 days reversed the urea and creatinine level to near normal. The administration of ethanol extract of *S.secumone* whole plant and glibenclamide ($p < 0.05$; $p < 0.001$) reduced HbA_{1c}.

Table 2: Effect of whole plant extract of *Sarcostemma secumone* on the Serum Insulin, Glucose, Urea, Creatinine and Glycosylated Haemoglobin level of Normal, Diabetic induced and Diabetic treated rats

Parameter	Insulin ($\mu\text{g/ml}$)	Glucose (mg/dl)	dl)	Creatinine (mg/dl)	Glycosylated Hb
Group I	18.59±1.53	76.99±1.26	10.53± 1.45	0.74±0.05	5.03±0.04
Group II	5.26±1.41***	201.56±14.33***	14.91±1.68*	0.88±0.02	9.36±1.16*
Group III	8.31±1.23 ^a	184.06±4.93	13.14±1.38 ^a	0.86±0.01	7.13±1.03 ^a
Group IV	10.56±1.16 ^a	139.53±1.94 ^a	12.56±0.87	0.82±0.03	5.49±1.13
Group V	17.91±1.26 ^{aa}	102.63±2.62 ^{aa}	9.43±0.14 ^a	0.79±0.05	4.97±0.84 ^{aa}

Each Value is SEM of 5 animals: * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; *Comparison made between Normal Control and Diabetic Control and Drug treated groups : a - $p < 0.05$; aa - $p < 0.01$ Comparison made between Diabetic Control and Drug treated groups

Biochemical parameters levels in diabetic rats

The decreased total protein, albumin and globulin levels were noticed in diabetic control rats (Group II) compared to normal control rats (Group I) (Table 3). The administration of *S.secumone* whole plant extract 150 and 300mg/kg and glibenclamide

significantly ($p < 0.05$) increased total protein, albumin and globulin levels compared to diabetic control rats. Also, the SGPT, SGOT and ALP levels were elevated in alloxan induced diabetic rats compared to normal rats. Oral administration of *S.secumone* whole plant extract 300mg/kg and glibenclamide treatment reduced above parameters compared to diabetic control rats.

Table 3: Effect of whole plant extract of *Sarcostemma secumone* on the Serum protein, Albumin, Globulin, SGOT, SGPT and ALP levels of Normal, Diabetic induced and Diabetic treated rats.

Parameter	Protein (g/dl)	Albumin (g/dl)	Globulin (g/dl)	SGPT (u/l)	SGOT (u/l)	ALP (u/l)
Group I	7.93±0.14	4.13±0.23	3.80±0.67	19.56±1.14	17.39±0.36	116.34±2.56
Group II	5.98±0.26*	3.48±0.14	2.50±0.24	20.66±2.01	21.42±0.88	124.56±1.93
Group III	6.38±0.11	3.21±0.10	3.17±0.13	20.11±1.36	18.30±0.74	120.13±1.32
Group IV	7.84±0.14	4.04±0.46	3.80±0.71	19.33±0.93	16.39±0.84	119.56±1.84
Group V	8.24±0.19 ^a	4.20±0.16	4.04±0.36 ^a	17.56±0.84	18.54±0.91	108.51±1.88

Each value is SEM of 5 animals: * $p < 0.05$ *Comparison made between Normal Control and Diabetic Control and Drug treated groups: a: $p < 0.05$ Comparison made between Diabetic Control and Drug treated groups

Lipid profiles

Table 4 shows the levels of TC, TG, LDL-C, VLDL-C, HDL-C and PL in the serum of diabetic rats showed significantly ($p < 0.05$) increased serum lipid profiles except HDL-C when compared with normal rats. The ethanol extract of *S.secumone* whole plant treated rats showed a

significantly ($p < 0.05$) decreases in the content of lipid profiles when compared with diabetic induced rats. Similarly HDL-C level decreased in alloxan induced diabetic rats when compared with normal rats. The administration of ethanol extract of *S.secumone* whole plant and glibenclamide to the diabetic rats; HDL-C level was found to be restored to normal.

Table 4: Effect of whole plant extract of *Sarcostemma secumone* on the Serum Lipid profile of Normal, Diabetic induced and Diabetic treated rats

Parameter	TC (mg/dl)	T G(mg/dl)	LDL-C (mg/dl)	VLDL (mg/dl)	HDL (mg/dl)	PL (mg/dl)
Group I	118.31±2.63	83.67±1.84	24.31±1.13	77.27±1.27	16.73±0.98	173.29±3.14
Group II	184.16±1.98**	116.26±1.80*	49.64±1.73	141.27±2.14**	13.25±1.03*	231.90±2.59*
Group III	156.74±1.34	104.28±1.30	32.16±1.56	121.10±1.10	18.16±1.12	212.42±2.76
Group IV	143.29±1.91	113.43±1.24	28.14±1.22	92.47±2.08	22.68±0.93	195.52±2.88
Group V	122.33±1.42 ^a	98.26±0.94 ^a	29.56±1.61 ^a	73.12±1.83 ^{aa}	19.65±0.78	176.87±3.04

Each Value is SEM of 5 animals: * $p < 0.05$; ** $p < 0.01$ *Comparison made between Normal Control and Diabetic Control and Drug treated groups: a - $p < 0.05$; aa - $p < 0.01$ Comparison made between diabetic control and drug treated groups

DISCUSSION

Commonly practiced pharmacologic treatment of diabetes mellitus includes oral hypoglycemic agents and insulin. There is an increasing demand by patients for the use of natural products and

other dietary modulators with antidiabetic activity. This tendency is because insulin, to date, cannot be used orally and its repeated injections have many undesirable adverse effects. In addition, certain oral hypoglycemic agents are not effective in lowering the blood sugar in chronic diabetic patients. The global information on ethnobotanicals includes about 800 medicinal plants are used for controlling diabetes mellitus^[36]. Dietary management includes the use of traditional medicines that are mainly derived from plants^[37].

Even now, approximately 80% of the third world population is almost entirely dependent on traditional medicines. There are numerous traditional medicinal plants reported to have hypoglycemic properties^[38-41].

The present study indicates the hypoglycemic and antihyperlipidaemic potential of *S.secumone* whole plant ethanol extract on alloxan induced diabetic rats. In the present study, induction of diabetes by alloxan, decreased in body weight. In diabetic rats, observed reduction in body weight was possible due to catabolism of fats and protein^[42]. The administration of ethanol extract of *S.secumone* whole plant improves the body weight compared to diabetic control rats which indicates preventive effect of *S.secumone* whole plant extract on degradation of structural

proteins. Ethanol extract of *S.secamone* showed a dose dependent effect on FBG to a dose of 300mg/kg. Administration of alloxan led to more than 1.5 fold elevation of fasting glucose level which was maintained over a period of 2 weeks. Two weeks of daily treatment of *S.secamone* whole plant extract (300mg/kg) make fall in blood glucose level by 42.81%. The present findings indicate the hypoglycemic and potential antihyperglycemic nature of the extracts.

S.secamone whole plant ethanol extract (150 and 300mg/kg body weight) significantly ($p < 0.05$) decreased blood glucose level and increase in serum insulin level in alloxan induced diabetic rats. Similarly ethanol extract of leaves of *Annona squamosa* (350mg/kg) showed reduction in blood glucose level was reported^[43]. Similar antidiabetic activity was seen in the ethanol extract of leaves of *E.singampattina*^[40]. Numerous mechanisms of actions have been proposed for these plant extracts. Some hypotheses relate to their effects on the activity of pancreatic β cells (synthesis, release, cell generation/ revitalization) or the increase in the protective /inhibitory effect against insulinase and the increase of the insulin sensitivity or the insulin like activity of the plant extracts. Other mechanisms may involve improved glucose homeostasis. All of these actions may be responsible for the reduction and or abolition of diabetic complications^[44]. Hypoglycemic effects have been reported with other plants such as *Pithocellobium dulce*^[45]; *Aloe vera*^[46]; *Sphaeranthus indicus*^[47]; *Waltakake volubilis*^[48]; *Eugenia floccosa*^[39]; *Polygala rosmarinifolia*^[49] and *Anaphyllum wightii*^[50] well known for their antidiabetic activities.

In diabetes, elevated levels of serum urea and creatinine are observed which may be due to renal damage caused by abnormal glucose regulation or elevated glucose and glycosylated protein tissue levels^[51]. In the present study, significant increase in serum urea and creatinine levels was observed in diabetic rats compared to normal control rats which indicate impaired renal function in diabetic rats. The treatment with ethanol extract of *S.secamone* decreased the above parameters significantly ($p < 0.05$) compared to diabetic control rats and it showed protective effect of ethanol extract of *S.secamone* on the kidneys.

Glycosylated haemoglobin is produced by glycosylation on haemoglobin. Glycosylated haemoglobin is formed progressively and irreversibly over a period of time and is stable over the life span of the red blood cells. It is unaffected by diet, insulin or exercise, even on the day of test. Therefore glycosylated haemoglobin can be used as an excellent marker of overall glycaemic control. Since it is formed slowly and does not dissociate easily, it reflects the real blood glucose level^[52,53]. In this study, the diabetic rats had elevated levels of glycosylated haemoglobin and therefore, the significant decrease in the level of glycosylated haemoglobin in alloxan induced diabetic rats following *S.secamone* whole plant extract therapy indicates that the overall blood glucose level was controlled, probably due to improvement in insulin secretion^[54]. It noteworthy that the serum insulin level in diabetic animals treated with *S.secamone* also increased when compared to the diabetic control animals. Thus, it seems that *S.secamone* whole plant stimulated increased insulin secretion in alloxan induced diabetic rats.

In diabetic condition, occurrence of reduction in protein and albumin may be due to proteinuria, albuminuria or increased protein catabolisms, which are clinical markers in diabetic nephropathy^[55]. The protein and albumin level was reduced after the induction of diabetes and treatment of ethanol extract of whole plant *S.secamone* increased both levels considerably in diabetic rats towards normal level. This action possibly is through increase in the insulin mediated amino acid uptake, enhancement of protein synthesis and/or inhibition of protein degradation^[56]. In the present study serum enzymes such as SGOT, SGPT and ALP were used in the evaluation of hepatic damage. In diabetic rats an increase in these enzyme activities reflects active liver damage. Increased levels of SGOT and SGPT under insulin deficiency^[57] have been related with increased gluconeogenesis and ketogenesis during diabetes. Moreover, increased levels of these enzymes together with ALP are reported to be associated with liver dysfunction and leakage into the blood stream in diabetes^[58]. Administration of *S.secamone* whole

plant extract in diabetic rats resulted in reduction in the activities of these enzymes in serum compared to the diabetic control.

Diabetes mellitus is usually associated with prominent levels of serum lipids and such an increase causes the risk factor for coronary heart diseases. Alloxan induced diabetes also developed hyperlipidemia which is in agreement without previous observations^[59,60]. In the present study, *S.secamone* whole plant extract significantly reduced the TC, TG, LDL-C and VLDL-C levels with an increase of HDL-C in treated diabetic rats compared to diabetic control rats. This may be due to the insulinotropic effect or insulin secretagogue activity of this extract.

In conclusion, this study has shown that the ethanol extract of *S.secamone* whole plant had hypoglycemic and hypolipidemic effects in alloxan induced diabetic rats. Several authors reported those secondary metabolites, such as saponins, flavonoids, phenolic compounds and triterpenoids have hypoglycemic and hypolipidemic activity^[61,62]. Hence the hypoglycemic and hypolipidemic properties of *S.secamone* may be due to different types of active secondary metabolites, each with a single or diverse range of biological activities. Further study need to be isolate, identify the active compounds and formation.

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REFERENCES

1. Anonymous. Diabetes now a global threat gets own day. Sunday Times of India. 2006; 24:11.
2. King H, Aubert RE, Herman WH. Global burden of diabetes 1995-2025: prevalence, Numerical estimates and projections. Diabetes Care 1998; 21: 1414- 31.
3. Boyle JP, Honeycutt AA, Narayan KM, Hoerger TJ, Geiss LS, Chen H, Thompson TJ. Projection of diabetes burden through 2050: Impact of changing demography and disease prevalence in the US. Diabetes Care 2001; 24: 1936-40.
4. Rang HP, Dale MM, Ritter JM. The Endocrine pancreas and the control of blood glucose. In:Barbara simmons, Pharmacology, 3rd edition, U.K, Longman Group Ltd, 1991, 403-10.
5. Fowler MJ. Diabetes Treatment, Part 2: Oral agents for glycemic management. Clin Diabetes 2007; 25: 131-34.
6. Valiathan MS. Healing plants. Curr Sci 1998; 75: 1122
7. Bailey CJ, Day C. Traditional plant medicines as treatments for diabetes. Diabetes care 1989; 12:553-564.
8. World Health Organization. WHO Expert Committee on Diabetes Mellitus, Technical reports Series. World Health Organization Geneva; 1980.
9. Chopra RN, Nayar SL, Chopra IC. Glossary of Indian Medicinal plants. CSIR, New Delhi: India, 1956.
10. Chopra RN, Chopra IC, Handa KL, Kapoor LD. Indigenous Drugs of India. Academic publishers, Calcutta: India, 1958.
11. Anonymous, Phytochemical investigation of certain medicinal plants used in Ayurveda. Central Council for Research in Ayurveda and Siddha, New Delhi, 1990.
12. Nadkarni AK. Indian material medica, popular prakashan pvt ltd., Mumbai, 1982.
13. Kirtikar KR, Basu BD. Indian Medicinal plants, International book Distributors, Dehradun: India,1976.
14. Poornima N, Umarrajan KM, Babu K. Studies on Anatomical and phytochemical Analysis of *Oxystelma esculentum* (L.f) R. Br.Ex Schlt. J Bot Res International 2009; 2: 239-243.
15. Prajapati ND, Purohit SS, Sharma AK, Kumar T. A Hand book of medicinal plants. Agrobios: India, 2003.

16. Khan AV. Thesis submitted to Aligarh muslim university: Aligarh. 2002.
17. Satyavathi GV, Gupta AK, Tanabu N. Medicinal plants of India, CSIR publication, Indian council of Medical Research, Cambridge: New Delhi, 1987; 2: XI + 557.
18. Jain SK. Dictionary of Indian Folk Medicine and ethnobotany, PP. XII + 311, Deep publication: New Delhi, 1991.
19. Brinda P, Sasikala P, Purushothaman KK. Pharmacognostic studies on *Merugan kizhangu*. Bull Med Ethnobot Res 1981; 3:84-96.
20. Lala PK. Lab manuals of Pharmacognosy CSI Publishers and Distributors, Kolkata, 1993.
21. OECD. Organisation for Economic cooperation and Development). OECD guidelines for the testing of chemicals/Section 4: Health Effects Test No. 423; Acute oral Toxicity- Acute Toxic Class method. OECD. Paris 2002.
22. Nagappa AN, Thakurdesai PA, Venkat Rao N, Sing J. Antidiabetic activity of *Terminalia catappa* Linn. fruits. J Ethnopharmacol 2003; 88: 45-50.
23. Sasaki T, Mastay S, Sonae A. Effect of acetic acid concentration on the colour reaction in the Otoluidine boric acid method for blood glucose estimation. Rinsho Kagaku 1972; 1: 346-353.
24. Anderson L, Dinesen B, Jorgensen PN, Poulsen F, Roder ME. Enzyme immune assay for intact human insulin in serum or plasma. Clin Chem 1993; 39: 578-582.
25. Varley H. Practical clinical biochemistry, Arnold Heinemann Publication Pvt. Ltd., 1976; 452.
26. Owen JA, Iggo JB, Scangrett FJ, Steward IP. Determination of creatinine in plasma serum, a critical examination. J Biochem 1954; 58: 426-437.
27. Karunanayake EH, Chandrasekharan NV. An evaluation of a colorimetric procedure for the estimation of glycosylated haemoglobin and establishment of reference values for Sri Lanka. J. Nat. Sci. Coun. Sri Lanka, 1985; 13: 235-258.
28. Lowry OH, Rosenbrough NJ, Farr AL, Randall RJ. Protein measurement with the Folin's phenol reagent. J Bio Chem 1951; 193: 265-275.
29. Reitman S, Frankel SA. Colorimetric method for the determination of serum glutamic oxaloacetic and glutamic pyruvic transaminases. Amer J Clin Path 1957; 28: 56-63.
30. King EJ, Armstrong AR. Determination of serum and bile phosphatase activity. Cannad Med Assoc J 1934; 31: 56-63.
31. Parekh AC, Jung DH. Cholesterol determination with ferric acetate, uranium acetate and sulphuric acid, ferrous sulphate reagent. Anal Chem 1970; 112: 1423-1427.
32. Rice EW. Triglycerides in Serum In: Standard Methods. Clinical Chemistry. 9ed Roderick MP, Academic press, New York, 1970; 215-222.
33. Friedwald WT, Levy RI, Fredrickson DS. Estimation of the concentration of low density lipoprotein cholesterol in plasma, without use of the preparative ultra centrifuge. Clin Chem 1972; 18: 499-502.
34. Warnick GR, Nguyen T, Albers AA. Comparison of improved precipitation methods for quantification of high density lipoprotein cholesterol. Clin Chem 1985; 31: 217.
35. Takayama M, Itoh S, Nagasaki T, Tanimizu I. A new enzymatic method for determination of serum phospholipids. Clin Chem Acta 1977; 79: 93 - 98.
36. Jerald E, Banyan O, Edwin S, Ahmad S, Jamalludin S. Antidiabetic activity of few medicinal plants vs their combination of alloxan induced diabetic rats. J Pharma Res 2009; 2: 1760-1763.
37. Gayathri M, Kannabiran K. Hypoglycemic activity of *Hemidesmus indicus* R. Br. on streptozotocin-induced diabetic rats. Int J Diab Dev Ctries 2008; 28: 6-16.
38. Maruthupandian A, Mohan VR. Antidiabetic, antihyperlipidaemic and antioxidant activity of *Pterocarpus marsupian* Roxb. in alloxan induced diabetic rats. Int J Pharm Tech Res 2011; 3: 1681-1687.
39. Kala SMJ, Tresina PS, Mohan VR. Antioxidant, antihyperlipidaemic and antidiabetic activity of *Eugenia floccosa* Bedd leaves in alloxan induced diabetic rats. J Basic Clin Pharmacy 2012a; 3: 235-240.
40. Kala SMJ, Tresina PS, Mohan VR. Antioxidant, antihyperlipidaemic and antidiabetic activity of *Eugenia singamattina* Bedd leaves in alloxan induced diabetic rats. Int J Pharma Pharmaceu Sci 2012b; 4: 412-416.
41. Shakeera Banu M, Sujatha K, Sridharan G, Manikandan R. Antihyperglycemic and antihyperlipidemic potentials of *Psidium guajava* in alloxan-induced diabetic rats. Asian J Pharmaceut Clini Res 2013; 6: 88-89.
42. Veeramani C, Pushpavalli G, Pugalendi KV. Antihyperglycaemic effect of *Cardiospermum halicacabum* Linn. leaf extract on streptozotocin induced diabetic rats. J Appl Biomed 2007; 6: 19-26.
43. Gupta RK, Kesari AN, Murthy PS, Chandra R, Tandon V, Watal G. Hypoglycemic and antidiabetic effect of ethanolic extract of leaves of *Annona squamosa* L. in experimental animals. J Ethnopharmacol 2005; 99:75-81.
44. Velmurugan C, Sundaram T, Sampath Kumar R, Vivek B, SheshadriShekar D, Ashok Kumar BS. Antidiabetic and Hypolipidemic Activity of Bark of Ethanolic Extract of *Ougeinia Oojeimensis* (ROXB.) Med J Malaysia 2011; 66: 22-26.
45. Sugumaran M, Vetrichelvan J, Darlin Quine S. Antidiabetic potential of aqueous and alcoholic leaf extracts of *Pithecellobium dulce*. Asian J Research Chem 2009; 2: 83-89.
46. Noor A, Gunasekaran S, Soosai Manickam A, Vijayalakshmi MA. Antidiabetic activity of *Aloe vera* and histology of organs in streptozotocin induced diabetic rats. Current Sci 2008; 94: 8-25.
47. Jha RK, Mangilal, Bhandari A, Nema RK. Antidiabetic activity of flower head petroleum ether extracts of *Sphaeranthus indicus* Linn. Asian J Pharm Clin Res 2010; 3: 16-19.
48. Maruthupandian A, Mohan VR, Sampathraj R. Antidiabetic, antihyperlipidaemic and antioxidant activity of *Wattakaka volubilis* (L.F) Stapf. leaf. Int J Pharm Sci Res 2010; 11: 83-90.
49. Alagammal M, Nishanthini A, Mohan VR. Antihyperglycemic and Antihyperlipidaemic effect of *Polygala rosmarinifolia* Wright & Arn on alloxan induced diabetic rats. J. App. Pharmaceut Sci 2012; 2: 143-148.
50. Sr.Molly Mathew, Dharsana JN, Vijayan KS, Premkumar N. Anti-diabetic activity of *Anaphyllum wightii* Schott in alloxan induced diabetic rats. Asian J. Pharmaceu. Clinical Res 2013; 6:68-69.
51. Lal SS, Sukla Y, Singh A, Andriyas EA, Lall AM. Hyperuricemia, high serum urea and hypoproteinemia are the risk factor for diabetes. Asian J Med Sci 2009; 1: 33-34.
52. Bunn HF, Gabbay KH, Gallop PM. The glycosylation of hemoglobin: relevance to diabetes mellitus. Science 1978; 200: 21-27.
53. Bunn HF. Evaluation of glycosylated hemoglobin in diabetic patients. Diabetes 1981; 30: 613-617.
54. Daisy P, Rajathi M. Hypoglycemic Effects of *Clitoria ternatea* Linn. (Fabaceae) in Alloxan-induced Diabetes in Rats. Trop J Pharm Res 2009; 8 (5): 393-398.
55. Kaleem M, Medha P, Ahmed QU, Asif M, Bano B. Beneficial effects of *Annona squamosa* extract in streptozotocin-induced diabetic rats. Singapore Med J 2008; 49: 800.
56. Ramachandran S, Naveen KR, Rajinikanth B, Akbar M, Rajasekaran A. Antidiabetic, antihyperlipidemic and *in vivo* antioxidant potential of aqueous extract of *Anogeissus latifolia* bark in type 2 diabetic rats. Asian J Pac Trop Disease 2012; 2: S596-S602
57. Fleir P, Marliss E, Ohman J, Catill JF. Plasma amino acid levels in diabetic keto acidosis. Diabetes 1970; 19: 727-729.
58. Obaeri OC. Effect of garlic oil on the levels of various enzymes in the serum and tissue of streptozotocin diabetic rats. Biosci Rep 2001; 21: 19-24.

59. Verma VK, Sarwa KK, Zaman KMD. 2013. Antihyperglycemic activity of *Swertia chirayita* and *Andrographis paniculata* plant extracts in streptozotocin induced diabetic rats. Int J Pharm Pharmaceut Sci 2013; 5:305-311.
60. Shajeela PS, Kalpana Devi V, Mohan VR. Potential antidiabetic, hypolipidaemic and antioxidant effects of *Nymphaea pubescens* extracts in alloxan induced diabetic rats. J Appl Pharmaceut Sci 2012; 2: 83-88.
61. Tanko Y, Okasha MA, Magaji GM, Yerima M, Yaro AH, Saleh MIA, Mohammed A. Anti-diabetic properties of *Securinega virosa* (Euphorbiaceae) leaf extract. Afr J Biotech 2008; 7: 22-24.
62. Verma L, Khatri A, Kaushik B, Patil UK, Pawar RS. Antidiabetic activity of *Cassia occidentalis* (Linn) in normal and alloxan induced diabetic rats. Indian J Pharmacol 2010; 42: 224-228.