



**Effect of aqueous extracts of some medicinal plants on blood glucose level and lipid profile in diabetic rats**

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**Abstract:** The objective of the present study was to investigate the effects of aqueous extracts of chamomile, lavender, rosemary, marjoram, fenugreek and cinnamon on blood glucose and lipid profile in alloxan-induced diabetic rats. Total phenols (mg/100gm), antioxidant activity (DPPH %) and Phenolic acids of the plants under study were determined. Forty five rats were divided into nine groups (n=5). One of them untreated rats which was considered normal control (group 1), while the rest of rats were injected (i.p) with alloxan- monohydrate (100 mg/kg bw) dissolved in normal saline induced diabetic. Diabetic rats divided into eight groups, one of them was diabetic control positive untreated received 1ml of distilled water (group 2), followed by diabetic reference received glipisid tablets (group 3). The rest of diabetic rats group treated with the plants extracts orally at a dose of 300 mg/kg body weight dissolved in 1ml distilled water. Blood samples were collected from the eyes of the rats by capillary tube at 2, 4, and 6 h. after extract administration and were analyzed for glucose content and lipid profile. The results showed that, rosemary had the highest level of total phenols which record (6.27 g/100g), followed by lavender which record (4.76 g /100g), followed by cinnamon which record (4.26 g/100g) followed by marjoram which record (4.25g /100g). On the other hand, lavender and cinnamon have higher contents of Chlorogenic, P.OH. Benzoic, Caffeic, Benzoic and Ellagic acids. The results also showed that blood glucose level decreased significantly in all the treated groups at 2, 4 and 6h. after treatment as compared to the diabetic control group. The highest decrease was noticed in the group treated with rosemary extract followed by cinnamon group. Concerning blood lipid profile, the diabetic group treated with extracts of lavender leaves exhibited the lowest level in plasma total cholesterol followed by aqueous extracts of rosemary at 2, 4 and 6h. after treatment. Also, the group treated with rosemary, lavender and marjoram showed significant decrease in triglyceride level while the extracts of lavender, cinnamon and rosemary caused a significant increase in HDL-c and a significant decrease in LDL-c level in comparing with diabetic control.

**Keywords:** Diabetes, chamomile-lavender, cinnamon, rosemary, fenugreek, marjoram, hypoglycemia, hyperlipidemia, phenols

## **Introduction**

Diabetes mellitus (DM) is the common metabolic disorder characterized by hyper glycaemia. There are an estimated 143 million people worldwide suffering from the disease (**Harris and Macaulay, 1998**). And this is almost five times the estimate ten years ago. It has been predicted that the number may probably double by the year 2030 (**Kingh et al., 1998**). Diabetes mellitus is a chronic disease caused by inherited and acquired deficiency in production of insulin by the pancreas or by the ineffectiveness of the insulin produced (**Yazdanparast et al., 2005 and Atef, 2010**). Many macrovascular complications resulting from defects in insulin secretion (**Chandra et al., 2007**). The macrovascular complications of diabetes are associated with oxidative stress induced by hyperglycemia (**Evans et al., 2002**).

There is possibility of hyperlipidemia and liver damage in the later stages of diabetes due to disorders in lipid metabolism and increased gluconeogenesis and ketogenesis(**Virdi et al., 2003**). The field of herbal medicines research has been gaining significant importance in the last few decades and the demand to use natural products in the treatment of than400plant species showing anti diabetic activity, although some of these may remain to be scientifically established (**Rai., 1995, Nalamolu et al., 2006**).Increased oxidative stress has been postulated in the diabetic state (**Lawrence et al., 2001**). It has also been shown that alloxan induces its diabetogenic activity mainly by inducing the formation oxygen free radicals and thereby damaging the pancreas (**Halliwell and Gutteridge 1985**).It is important to mention that antioxidant compounds either naturally or synthetic, could provide effects against various disease including DM (**Giugliano et al., 1996; Ceriello, 2003; Rahimi et al., 2005; Batubara et al., 2010**).The side effects of antidiabetic drugs has led to use several species of medicinal plants with hypoglycemic properties (**Li and Crawford 2004**). The hypoglycemic properties of these plants are reported to be due to their higher contents of flavonoides and different bioactive compounds. Chamomile (*Matricariachamomilla L.*) which was known in ancient Egypt and Rome, is one of the common medicinal plants used in the world. The main active components of *M. chamomilla L.* are bisabolol, bisabololoxide, bisabolonoxide, and chamazulene. It contains 0.75% of a volatile oil that is blue in colour(**Baytop 1984**).Chamomile is well known for its pharmaceutical

properties such as anti-inflammatory, immunomodulatory activity, anticarcinogenic property, anti-cancer activity and antipruritic effect (**Cemek et al., 2008**).

Lavender (*Lavandula angustifolia*) is a widely distributed ornamental plant belongs to the family Lamiaceae and cultivated extensively in temperate climates of South America, Europe, and Asia. It has been traditionally considered for its very pleasant smell and a bitter taste. Its purple flowers and essential oil are used in toiletry, cosmetics, perfume, pharmaceutical, food and flavor industries. Many compounds have been detected in lavender aerial parts and flowers extract, including geraniol, linalool, linalyl acetate, ursolic acid, luteolin, umbelliferone, coumarin etc. The plant is used in traditional and folk medicines in the different parts of the world for the treatment of several skin sores, insect bites, gastrointestinal, nervous and rheumatic disorders. It also showed carminative, diuretic, antiepileptic, anti-rheumatic, pain reliever, relaxant, sedative, antioxidant, burn healing, antibacterial and anti-inflammatory properties (**Brajesh et al., 2016**). Its leaves and stems are used to prepare decoctions against rheumatism, chill and digestive system diseases (**El-Hilaly et al., 2003**).

Lavender essential oils are advocated for their use as an antibacterial agent in both early and modern aromatherapy texts (**Lawless, 1992**). Lavender has been extensively phytochemically studied, with limited work on pharmacological aspects and is used by traditional healers for various diseases of the central nervous system, like epilepsy and migraine (**Nadkarni, 1982**). Rosemary (*Rosmarinus officinalis* Linn.) and mint Labiateae family are common household plant grown in many parts of the world. They are commonly used as a spice and flavoring agent in food processing (**Saito et al., 2004**).

Also, rosemary is used as an antispasmodic in renal colic and dysmenorrhea, in relieving respiratory disorders and to stimulate hair growth. Extract of rosemary relaxes smooth muscles of trachea and intestine, and has choleric, hepatoprotective and antitumorigenic activity. (**Al-Sereiti et al., 1999; Masuda et al., 2002; Sotelo-Fleix et al., 2002; Osakabe et al., 2004**).

Marjoram is one of the most familiar kitchen herbs. It is cultivated for use of its aromatic leaves for flavouring and other culinary purposes.

Sweet marjoram leaves are also excellent in salads. The medicinal effects of marjoram are gastrointestinal tract stimulant, tonic, carminative, diaphoretic, hypoglycemic, diuretic as well as antibacterial (**Leeja and Thoppil, 2007**) and as antioxidant (**Handl et al., 2008** and **Lamiaa et al., 2009**). Thus food additives like herbs, which have free radical scavenging activity, may be useful in controlling glucose levels in diabetic patients.

Cinnamon (*C. zeylanicum*, Family Lauraceae) bark is commonly used in Arabian countries as a spice for most foods. In Eastern and Western folk medicine it used for treating abdominal and chest pains, chronic diarrhea, hypertension, kidney disorders and rheumatism. Intake of 3g or 6g of cinnamon bark reduced serum glucose in people with type 2 diabetes (**Khan et al., 2003**). Cinnamon extracts have also demonstrated hepatoprotective and antioxidant effects in CCL4 - intoxicated rats (**Moselhy and Ali, 2009**).

Fenugreek (*Trigonella foenum-graecum*) seeds is an old herbal remedies used to treat metabolic and nutritive dysfunctions (**Eskander and won 1995** and **Chevassus et al., 2009**). Fenugreek is a leguminous herb, commonly cultivated and used as a condiment in India and North African countries. The seeds are yellow in colour, bitter to taste (**Mishkinisky et al., 1967**) and are a rich source of fiber. It contains mucilaginous fiber and total fiber to the extent of 20% and 50% respectively. (**Raghuram et al., 1993**).

Accordingly, this study was carried out to evaluate antioxidant activity of the selected plants concerning total phenols, antioxidant activity and phenolic acids and investigate the effects of aqueous extracts of chamomile, lavender, rosemary, marjoram, fenugreek and cinnamon on blood glucose and lipid profile in alloxan- induced diabetic rats.

## **Materials and methods**

**Plant Samples:** The leaves of lavender, rosemary, marjoram, chamomile in addition to fenugreek seeds and cinnamon were purchased from Mansoura local markets, Egypt.

**Kits:** Glucose, Total cholesterol (TC), Triglycerides (TG), High density lipoprotein cholesterol (HDL-c). All chemicals are purchased from Sigma.

### **Samples preparation**

The leaves of lavender, rosemary, marjoram, chamomile, in addition to fenugreek seeds and cinnamon were washed with tap water three times and then used a cross flow drier to dried at 70 °C for 5 h.. The dried lavender, rosemary, marjoram, chamomile, in addition to fenugreek seeds and cinnamon were powdered using a hammer mill to obtain a fine powder, through a 0.5 mm sieve. The samples powder were stored in freezer until use.

### **Preparation of the aqueous extracts**

The extraction procedure for the hydro-alcoholic extract was carried out according to (**Charles *et al.*, 1993**). About 250 grams of each milled plant samples were macerated in 500 ml of methanol over night at room temperature, then filtered and the methanolic crude extract was collected. Another portion of 500 ml of methanol were added to the plant residue and boiled for two hours under reflux condenser in a water bath and then filtered. The filtered was collected to the previous crude extract. In the same manner 500 ml portion of water were added to the residue plant and left at room temperature overnight, then filtered.

The filtrate was added to the previous crude extract. Another volume of water was added to the residue, boiled for two hours under reflux condenser and filtered. The hot water filtrate and the methanolic crude extract obtained previously were gathered to form the hydro-alcoholic crude extract. The solvents were evaporated under vacuum using rotary evaporator. The crude extract was obtained, kept in dark bottles and stored in a deep freezer until use.

## **Experimental, Biological Evaluation**

### **Animals**

Adult male white rats weighing (250-300) were used in this study. The animals were purchased from the animal house of National Research Center, Cairo-Egypt. All animal were kept under standardized conditions (12h light/ dark cycle, 22 °C) and were provided free access to standard diets (Table1) and water accordance with the National Institute of

Health guidelines for the care and use of laboratory animals. Half of the rats were subjected to alloxan monohydrate to be diabetic.

**Table (1):** Composition of the standard diet.

<b>Ingredients</b>	<b>g/kg Diet</b>
Casein	200
Corn starch	497
Sucrose	100
Vitamin mixture	020
Mineral mixture	100
Corn oil	050
Cellulose	030
Methionine	003

### **Induction of Diabetes**

Rats were injected (i.p) with alloxan- monohydrate (BDH) (100 mg/kg bw) dissolved in normal saline(Djrolo *et al.*, 1998). Seven days after alloxan administration, blood was collected from the rat eye by means of Haematocrit tubes in EDTA tubes. Plasma was separated by centrifugation and analysed for blood glucose. Animals showing fasting blood glucose higher than 200mg/dl (Misra and Fridovich1972)were selected and used as diabetic rats.

### **Experimental design**

Forty five rats were divided into nine groups (n=5), one of themisuntreated rats (Group1) which was considered normal control ,while the rest of the groups were diabetic and treated with the extracts (300 mg/kg b w) dissolved in 1ml distilled water and distilled to sup groups as follows: Group2 (Diabetic control): received 1ml of distilled water, Group3 (reference): received glipisidetablets, Group4: received the extract of chamomile, Group5:received the extract of lavender, Group6: received the extract of rosemary, Group7: received the extract of marjoram, Group8:received the extract of cinnamon and Group9:received the extract of fenugreek. At the end the of the experiment animals were deprived of food overnight and, blood samples were collected from eyes of the rats by capillary tubes for hematology it all analyses.

### **Chemical analysis**

#### **Determination of antioxidant activity(%)**

The effect of plant samples on DPPH radical was studied, employing the modified method described earlier by (AOAC Methods 2000 and Ranganna1979). Briefly, 1.5 ml of DPPH solution (0.1 Mm, in 95% Ethanol)was incubated with varying concentrations of the extract (plant samples , 0.75 - 5.0 mg).The reaction mixture was shaken well and incubated for 20 min at room temperature and the absorbance of the resulting solution was read at 517 nm against a blank. The radical scavenging activity was measured as a decrease in the absorbance of DPPH and was calculated using the following equation:

$$\text{Scavenging effect \%} = \frac{1 - A_{\text{Sample}}(517\text{nm})}{A_{\text{Control}}(517\text{nm})} \times 100$$

$A_{\text{Control}}(517\text{nm})$

#### **Determination of total phenolic compounds**

Total phenolic compounds were determined by HPLC according to the method of (Goupy et al., 1999) at Central lab. of Food Technology Research Institute Agric. Res. cent. Egypt .

#### **Fractionation and identification of phenolic acids**

Phenolic acids were estimated in Central Laboratory of Food Tech. Res. Inst., Agric. Res. Center, Giza, Egypt. An HP 1100 HPLC system equipped with an alpha Bond C18 125A column (4.6 · 250 mm, particle size 5 μm) and coupled with Agilent 1100 series Chem Station software was used for quantifying the individual phenolic acids. The mobile phases consisted of 2.0% acetic acid in distilled water (A) and acetonitrile (B). The column was eluted at 1.0 ml/min under a linear gradient from 5% mobile phase B to 75% over 20 min, to 100% over 5 min, isocratic for 5 min, to 25% over 5 min and to 5% over 5 min. Plant samples injection volumes were 20 μl. Compounds were detected at 280 nm with an HP 1100 series ultraviolet (UV) Diode Array Detector. Standards of ellagic, catechin, caffeic, protocatechuic, syringic, furan, vanillic, gallic and coumarin were injected for identification at 280 nm.

#### **Biochemical analysis**

Fasting blood glucose was estimated by an enzymatic colorimetric method according to (Siest et al., 1981). Total cholesterol, HDL-cholesterol and triglyceride content were determined by enzymatic

colorimetric method according to (**Allian *et al.*, 1974, Richmond 1973 and Fossati and Principle 1982**), respectively. LDL-cholesterol and VLDL-cholesterol were calculated according to **Friedewald *et al.*, 1972**).

### **Statistical analysis**

Results of the biochemical estimations of the rats are reported as mean  $\pm$  SD.. The total variation was analysed by performing one-way analysis of variance. Least Significant Difference (LSD) was used for determining significance (**Sümbüloğlu, 1998**).

### **Results and discussion**

#### **Total phenols and antioxidant activity of the selected plants**

Total phenols and antioxidant activity of chamomile, lavender, rosemary, marjoram, cinnamon and fenugreek are tabulated in Table (2). The antioxidant activity (%) of rosemary and cinnamon had the highest levels which recorded 92.12% and 91.17%, respectively, followed by lavender and marjoram which recorded (89.13% and 85.33%) respectively. On the other hand, the results showed that antioxidant activity (%) of chamomile and fenugreek were 46.47% and 20.81%, respectively. Our results are in agreement with that obtained by (**Hopia *et al.*, 1996**) who observed that , antioxidant activity of rosemary extracts depends on their composition. Aqueous extracts with higher content were the most effective.

The results also showed that, rosemary had the highest level of total phenols was (6.27g\100g), followed by lavender was (4.76g\100g), cinnamon was (4.26g/100g) and marjoram was (4.25g\100g) while the fenugreek had the lowest content was (0.95g/100g). Lavender essential oils a higher scavenging capacity which may be related to the presence of phenolic compounds (**Pascual *et al.*, 1983 and Nogueira and Romano 2002**). They found that this antioxidant capacity remained lower than that of ascorbic acid.

A good correlation between the phenols and antioxidant activity to agents that scavenge free radicals (**Haug *et al.*, 2005, Silva *et al.*, 2006 and Gonzalez *et al.*, 2011**). Free radicals have been implicated in the causation of several disorders, which includes diabetes, and the agents that scavenge free radicals may have great potential in ameliorating these disease processes (**Wilson, 1988**). Antioxidants play an important role in



protecting the human body against damage by reactive oxygen species (Lollinger, 1981).

**Table (2):** Total phenols and antioxidant activity of the selected plants .

Sample	Antioxidant activity (%)	Total phenols (g/100g on DW)
Chamomile	46.47	2.84
Lavender	89.13	4.76
Rosemary	92.12	6.27
Marjoram	85.33	4.25
Cinnamon	91.17	4.26
Fenugreek	20.81	0.95

#### **Phenolic acids of the selected plants**

Polyphenolic compounds are very important constituents, by virtue of their antioxidant activity by chelating redox- active meta ions, inactivating lipid free radical chains and preventing hydroperoxide. The main phenolic acids identified in chamomile, lavender, rosemary, marjoram, cinnamon and fenugreek are presented in Table (3). The results showed that lavender and cinnamon have higher contents of Chlorogenic, P.OH. Benzoic, Caffeic, Benzoic and Ellagic acids, these were (220.68 vs 330.93, 1267.70 vs 234.10, 72.30 vs 67.73, 1209.08 vs 1514.84, 538.01 vs 1565.44 mg/100g,) respectively. **El-Ashmawy et al., (2005)** reported that majorana contains phenolic terpenoids, flavonoids, tannins, hydroquinone and phenolic glycosides. They stated that natural dietary antioxidants are extensively studied for their ability to protect cells from miscellaneous damages.

Phenols are very important plant constituents because of their scavenging ability on free radicals due to their hydroxyl groups (**Heim et al., 2002**). The beneficial effect of polyphenols is associated with a multitude of biological activities, including antioxidant and free radical-scavenging properties, anti-platelet aggregation and inhibition of vascular smooth muscle cell proliferation. These observations might explain their cardiovascular protective properties (**Fuhrman and Aviram 2001**). **Frankel, (1999)** demonstrated that rosemary extracts contain a large number of phenolic compounds, including carnosic acid, carnosol, and

rosmarinic acid. The rosmarinic acid and other phenolic compounds were found in the leaves of

Flavonoids and phenolic compounds such as hispidulin, cirsimaritin, apigenin, genkwanin, naringin, caffeic acid and rosmarinic acid are also present rosemary extracts (**Zheng and Wang, 2001; Ibáñez et al., 2003**).

**Table (3):**Phenolic acids (mg/100g) DW of the selected plants

Test items	Chamomile	Lavender	Rosemary	Marjoram	Cinnamon	fenugreek
Syring	36.60					
Pyrogallol	-	174.76	-	-	-	2506.58
Gallic	22.02	-	3.11	-	-	4.11
Protocatechuic	-	-	24.97	-	467.53	3.93
Catechol	-	-	-	9.60	103.71	2.08
c4-Amnopenzoic	5.89	12.52	4.77	-	-	1.14
Catechein	27.56	-	8.55	-	227.12	3.65
Chlorogenic	89.91	220.68	24.56	28.64	330.93	2.38
P.OH.Benzoic	-	1267.70	59.11	27.84	234.10	4.23
Epicatechen	2022.30	873.39	37.27	48.74	1126.74	41.53
Caffeic	-	72.30	4.68	28.80	67.73	5.08
Vanillic	28.53	79.74	10.28	3.54	14.50	2.91
Caffiene	78.40	-	14.05	19.78	57.70	19.80
Ferulic	82.74	57.82	28.40	35.88	146.92	4.45
Benzoic	-	1209.08	732.22	-	1514.84	45.98
Salicylic	309.50	622.52	-	475.03	2259.29	-
Coumarin	-	159.82	83.09	45.10	301.70	3.06
Ellagic	174.10	538.01	83.11	317.43	1565.44	15.49
Cinnamic	10.75	26.45	17.24	49.30	5370.00	4.57

### **Effect of plants extracts on blood glucose and total cholesterol levels of the diabetic rats**

Data in Table (4) revealed a significant elevation in fasting blood glucose and plasma total cholesterol levels of diabetic control (+) when compared with normal control (-). All the groups treated with plant extracts in addition to the reference group exhibited significant reduction in blood glucose and total cholesterol levels at 2, 4 and 6 h. after extract administration. The highest decrease in blood glucose level was noticed in diabetic rats treated with the extract of rosemary leaves which was (115.3±11.9, 102.3± 4.04 and 91.3± 16.4 mg/dl) after 2, 4 and 6h. respectively, followed by diabetic rats treated with the extract of cinnamon (130.6±22.1, 110±19.4 and 105±15 mg/dl) after 2, 4 and 6h. respectively. The lowest effect was noticed in the rats group treated with

fenugreek extract where it did not show significant decrease in blood glucose after 2 hours of administration. Activity of chamomile extract has shown to be independent of insulin secretion (**Eddouks et al., 2005**), and studies further reveal its protective effect on pancreatic beta cells in diminishing hyperglycemia-related oxidative stress (**Cemek et al., 2008**).

Our results clearly demonstrated that continuous infusion of chamaemelum extract for three hours lowered both blood glucose levels and endogenous glucose production, whereas the metabolic clearance rate of glucose remains unchanged. Previously, we have reported that inhibition of endogenous glucose production accounts for the hypoglycaemic activity of *Spergularia purpurea* aqueous extract in streptozotocin-induced mice (**Eddouks, 2003**). Hyperglycemia in diabetic subjects caused stress (free radical generation) and vice versa (**Lawrence et al., 2001; West., 2000 and Sushruta et al., 2006**). Our results are in agreement with that obtained by (**Vijayakumar et al., 2005; Qin et al., 2004; Choi et al., 2004 and Qin et al., 2003**) they reported that to explain the insulin sensitizing activity of cinnamon and fenugreek extracts. After three weeks of cinnamon treatment (300 mg kg<sup>-1</sup>), the skeletal muscle insulin-stimulated IR- $\beta$  and the IRS-1 tyrosine phosphorylation levels were 18 and 33% higher in treated rats. Our results are in agreement with that obtained by (**Gilani et al., 2000**) who found that cinnamon reduce blood sugar levels. Also, water-soluble cinnamon extract induced significant decrease in free blood glucose level (**Hiebautz et al., 2007 and Time et al., 2006**), found also that cinnamon with rice pudding reduces postprandial blood glucose.

Also, the hypoglycaemic activity of fenugreek seed extract was mediated through the stimulation of an insulin signalling pathway especially in adipocytes and liver cells (**Reaven, 1995**) promotes glucose utilization and leads to decrease blood glucose levels. Fenugreek seeds contains trigonelline, an alkaloid known to reduce blood glucose level. Fenugreek seed powder in the diet reduces blood sugar and urine sugar with concomitant improvement in glucose tolerance and diabetic symptoms in both NIDDM and IDDM. (**Raghuram et al., 1993**).

Concerning plasma total cholesterol, Data present in Table (4) revealed that the rats group treated with the extract of lavender leaves showed the lowest reduction in total cholesterol as being (86.3 $\pm$ 7.5, 75.3  $\pm$  10.9 and 73.3  $\pm$  15 mg/dl) at 2,4 and 6h. after treatment, respectively in comparing with diabetic control. Also both rosemary and fenugreek

extracts decreased blood total cholesterol to levels better than that of glipiside drug. So, it is possible to suggest that the extracts of marjoram, rosemary and lavender leaves and cinnamon might directly improve the blood glucose level and plasma total cholesterol.

Lavender extracts have also positive effects on wound, urinal infections, cardiac diseases and eczema (**Benabdelkader *et al.*, 2011**). Lavender is a medicinal plant largely used in the Tunisian traditional medicine. This plant is known to protect against headaches, depression and diabetes (**Gilani *et al.*, 2000 and Cavanagh and Wilkinson 2002**).

Rosemary constituents have a therapeutic potential in the treatment or prevention of bronchial asthma, spamogenic disorders, diabetes mellitus, peptic ulcer, inflammatory diseases, hepatotoxicity, atherosclerosis, ischemic heart diseases, cataract, cancer and poor sperm motility (**Al-Sereiti *et al.*, 1999; Masuda *et al.*, 2002; Sotelo-Fleix *et al.*, 2002 and Osakabe *et al.*, 2004**).

The present study showed that the extracts under study caused high reduction in blood glucose level in treated diabetic rats as compared to diabetic control. It was likely that the antioxidant activity of the extracts produced better response in such stressful conditions.

**Table (4):** Effect of plants extracts on blood glucose and plasma total cholesterol levels in alloxan-induced diabetic rats

Groups	blood glucose (mg/dl)			T.C.(mg/dl)		
	2h	4h	6h	2h	4h	6h
Control(-)	100± 1.1*	97.3±4.01*	90.3± 9.5*	97.3±4.0*	89±3.46*	84.6±6.9*
Control (+)	258.3±7.6	280±10	291.6±10.4	170±5.0	210.3±7.5	220.66±4.04
Glipizide	132.3±17.4*	104±12.1*	87± 1.7*	103.66±2.9*	86.7±9.8*	68±10.3*
Chamomile	233.6±19.2	178±9.9*	125.6±7.23*	123 ±8.7*	86.6±7.5*	83.3 ± 8*
Lavender	175± 6.3*	169.6± 11.4*	133± 10.4*	86.3±7.5*	75.3±10.9*	73.3 ± 15*
Rosemary	115.3±11.9*	102.3± 4.04*	91.3± 16.4*	88.00± 13.2*	86±7.3 *	82.7± 3.5*
Marjoram	158.3± 2.9*	140.3±3.5*	128±11.1*	115± 1.7*	89.6±21.4*	84.4± 9.2*
Cinnamon	130.6±22.1*	110±19.4*	105±15*	108.66±2.8*	98 ± 12.1*	88.66 ± 4.6*
Fenugreek	248.6± 9.3	215.6±19.9*	161±23.1*	96.6±4.6*	85.3± 4.6*	79.3±9.2*

Each value is the mean±SD of 5 rats.

\*p<0.05 when compared to diabetic control group (+)

**Effect of plants extracts on plasma triglycerides and plasma HDL-c levels in alloxan- induced diabetic rats**

Administration of plant extracts to diabetic rats recorded a significant decrease in plasma triglyceride levels and a significant increase in HDL-cholesterol levels as shown in Table 5 at 2, 4 and 6 h. after administration as compared to diabetic control group (+). The results revealed that the diabetic rats groups treated with glipiside and plant extracts had significantly lower values of plasma triglyceride than those of diabetic control (+). The highest decreases in plasma triglyceride levels were noticed in diabetic rats group treated with aqueous extracts of rosemary leaves which were ( $92\pm 10.4$ ,  $74.3\pm 7.5$  and  $61.7\pm 2.9$  mg/dl) after 2, 4 and 6h. respectively, followed by diabetic rats group treated with aqueous extracts of lavender leaves with values of  $94.3\pm 4.1$ ,  $80.3\pm 5.2$  and  $64.7\pm 9.2$ mg/dl after 2, 4 and 6h., respectively, while diabetic rats group treated with aqueous extracts of marjoram leaves reduced plasma triglyceride to levels of  $96.7\pm 1.2$ ,  $81.3\pm 2.3$  and  $78\pm 6.9$ mg/dl after 2, 4 and 6h., respectively. Marjoram powder was the most effective in reducing the values of the biochemical parameters of lipid profiles and antioxidant properties (**Soltan and Abdel-Wahab 2006 and Shelbaya et al., 2014**).

On the other hand, a significant increases in HDL-cholesterol in the diabetic group treated with lavender leaves extract were observed with values of ( $29.3\pm 1.15$ ,  $35\pm 4.2$  and  $42.6\pm 4.8$ mg/dl), followed by diabetic rats group treated with aqueous extracts of cinnamon ( $29.3\pm 5.7$ ,  $34.3\pm 2.3$  and  $40.7\pm 6.3$  mg/dl), the diabetic group treated with rosemary extract ( $23.6\pm 8.1$ ,  $32\pm 3.4$  and  $39\pm 1.73$ mg/dl) at 2, 4 and 6h. after extract administration, respectively as compared to diabetic control ( $19.3\pm 3.75$ ,  $15.6\pm 1.2$  and  $15\pm 3.7$  mg/dl) after 2, 4 and 6h., respectively. Our results are in agreement with that obtained by (**Pimple et al., 2012**) who observed that the extract of chamomile was more effective in reducing the serum lipid levels significantly in NIDDM rats.

So it is advised by giving aqueous extracts of rosemary, lavender and marjoram leaves and aqueous extracts of cinnamon to the patients with hyperlipidemia or those exposed to atherosclerosis. Other studies showed that diabetic rats which fed on groundnut oil exhibited significant reductions in the blood levels of triglycerides, cholesterol, LDL-c, and elevation in HDL-c level when compared with corresponding controls (**Ramesh et al., 2006 and Khan et al., 2005**).

**Table (5):**Effect of plants extracts on plasma triglycerides and plasma HDL-c levels in alloxan-induced diabetic rats

Groups	Plasma Triglycerides level			Plasma HDL-c level		
	2h	4h	6h	2h	4h	6h
Control(-)	88±6.9*	83.3±2.8*	82.3±2.9*	31±15.5	27.3±17.9*	42±8.6*
Control (+)	165.8±3.9	186.3±7.1	204.3±5.13	19.3±3.75	15.6±1.2	15±3.7
Glipiside	91.3±1.5*	80±17.3*	69.3±8.08*	22.7±4.6	22.7 ±2.3	26±3.5*
Chamomile	115.7±15.1*	91±11.2*	81.7±1.15*	21±1.9	24.6±5.1	24±1.7*
Lavender	94.3±4.1*	80.3±5.2*	64.7±9.2*	29.3±1.15	35±4.2*	42.6±4.8*
Rosemary	92±10.4*	74.3±7.5*	61.7±2.9*	23.6±8.1	32±3.4*	39±1.73*
Marjoram	96.7±1.2*	81.3±2.3*	78±6.9*	17.3±5.8*	21.6±1.9	29±1.73*
Cinnamon	128±17.3*	114.3±9.6*	69±15.6*	29.3±5.7	34.3±2.3*	40.7±6.3*
Fenugreek	99±1.7*	82.7±1.7*	75.7±9.8*	17±8.6	24.6±2.1	33.7±2.9*

Each value is the mean±SD of 5 rats.

\*p<0.05 when compared to control group (+)

**Effect of plants extracts on plasma LDL-c and plasma VLDL-c levels in alloxan- induced diabetic rats**

The results in Table (6) revealed significant decreases in plasma LDL- cholesterol and plasma VLDL-cholesterol levels as shown in the diabetic rats group treated with glipiside, and all the diabetic groups treated with the plant extracts under study when compared with diabetic control (+) at 2, 4 and 6 h. after treatment. The highest decrease in plasma LDL-c levels was noticed in diabetic rats group treated with aqueous extracts of lavender leaves as being (38.4 ± 1.6, 24.3±4.2, and 17.8±2.7 mg/dl) after 2, 4 and 6h. respectively, followed by diabetic rats group treated with aqueous extracts of rosemary leaves (46± 4.7, 39.14± 5.3 and 31.4±11.54 mg/dl) and the diabetic rats group treated with aqueous extracts of cinnamon (53.76±1.1, 40.84±11.6 and 34.16±4.8 mg/dl) after 2, 4 and 6h., respectively.

Concerning plasma VLDL- cholesterol, Data present in Table (6), revealed that the rats group treated with aqueous extracts of rosemary leaves caused significant decrease in plasma VLDL- cholesterol as follows (18.4±2.1, 14.86±0.23 and 12.3±0.577 mg/dl) after 2, 4 and 6h., respectively in comparing with the diabetic control

(33.15±0.78, 37.26±1.4 and 40.86±1.1 mg/dl) after 2, 4 and 6h. respectively. Also the group treated with aqueous extracts of lavender leaves exhibited low levels in plasma VLDL- cholesterol (18.86±0.8, 16.0± 1.1 and 12.9 ±1.8 mg/dl) after 2, 4 and 6h., respectively when compared with the diabetic control (+). Fenugreek seeds have the potential to alter glycemic and lipidemic status and reduce abdominal fat in normal rats (Gee *et al.*, 1983; Srichamroen *et al.*, 2008) and reduced the risk of heart-attack.

**Table (6):** Effect of plants extracts on plasma LDL-c and plasma VLDL-c levels in alloxan-induced diabetic rats

Groups	Plasma LDL-c levels			Plasma VLDL-c levels		
	2h.	4h.	6h.	2h.	4h.	6h.
Control(-)	53.4±14.2*	45±10.4*	26.5±5.77*	17.6±1.4*	16.7± 0.67*	16.4 ± 2.4*
Control (+)	117.6±2.1	157.4±7.5	164.8±3.3	33.15±0.78	37.26±1.4	40.86±1.1
Glipizide	62.6±1.7*	48 ± 8.6*	28.1±12.2*	18.3±0.11*	16.0± 3.5*	13.86±1.6*
Chamomile	78.9± 4.6*	43.8±1.3*	43±5.4*	23.1±2.77*	18.2±7.3*	16.3±0.23*
Lavender	38.4 ± 1.6*	24.3±4.2*	17.8±2.7*	18.86±0.8*	16.0± 1.1*	12.9±1.8*
Rosemary	46± 4.7*	39.14± 5.3*	31.4±11.54*	18.4±2.1*	14.86±0.23*	12.3±0.577*
Marjoram	78.4 ± 4.3*	51.74±24.1*	39.8±5.7*	19.3±0.23*	16.26±1.5*	15.6±1.38*
Cinnamon	53.76±1.1*	40.84±11.6*	34.16±4.8	25.6±3.5*	22.86±5.4*	13.8±3.1*
Fenugreek	59.8±13.62*	44.16±9.1*	30.2±1.4*	19.8±0.34*	16.54±0.46*	15.14±1.9*

Each value is the mean±SD of 5 rats.  
\*p<0.05 when compared to control (+).

### Conclusion

The study indicates that since the aqueous extracts of chamomile, lavender, rosemary, marjoram leaves and fenugreek, cinnamon are used in the preparation of foods, they may be useful in the control of postprandial rise of blood glucose particularly in diabetic patients. Additionally, their daily use may help in reducing complications associated with chronic diabetes as noticed by improving lipid profile of the diabetic rats and hence prevent cardiovascular diseases.

## References

- Allian, C.A. , Poon, S., Chan, C. S. G. Richmond, W. and Fu, P.C.(1974).** Enzymaticdetermination of total serum cholesterol. *Clinical Chemistry*, 20:470-475.
- Al-Sereiti MR, Abu-Amer KM and Sen P. (1999).** Pharmacology of rosemary(*Rosmarinusofficinalis* Linn.) and its therapeutic potentials. *Indian J ExpBiol*,37:124- 130.
- AOAC (2000).** Official Methods of Analysis, 17thed. The Association of OfficialAnalytical Chemists, .
- Atef, M. Al-Attar (2010).** Physiological Effects of Some Plant Oils Supplementationon Streptozotocin-Induced Diabetic Rats, *Research Journal of Medicine andMedical Sciences*, 5(1): 55 71.
- Batubara , I., L.K. Darusman , T . Mitsunage, M. Rahminiwati and E.Djauhari (2010).** Potency ofIndonesian medicinal plants as tyrosinaseinhibitor and antioxidant agent . *J. Biol.Sci.*, 10:138-144.
- Baytop T(1984).** Therapy with medicinal plants in Turkey (past and present). *Publications of the Istanbul University*, Istanbul, p 348.
- Benabdelkader T, Zitouni A, Guitton Y, Jullien F, Maitre D, Casabianca H, Legendre L andKameli A( 2011).** Essential oils from wild populations of AlgerianLavandulastoechas L.: composition, chemical variability, and in vitrobiological properties .*ChemBiodivers*, 8:937-953.
- Brajesh K, Kumari S., Karla S., and Luis C.(2016).** Aqueous Phase Lavender Leaf Mediated Green Synthesis of Gold Nanoparticles and Evaluation of its Antioxidant Activity, *Biol Med* (Aligarh) 8: 290.
- Cavanagh HMA, andWilkinson JM (2002).** Biological activities of lavender essential oil.*Phytother Res*, 16:301-308.
- Cemek M, Kaga S, Simsek N, Buyukokuroglu EM and Konuk M. (2008).** Antihyperglycemic and antioxidative potential of Matricariachamomilla L. in Streptozotocin-induced diabetic rats. *J Nat Med*62:284–293.
- Ceriello, A., 2003:** New insights on oxidative stress and diabetic complication may lead to a causal antioxidant therapy. *Diabetes Care*, 26: 1589- 1596.
- Chandra A, Mahdi AA, Ahmad S and Singh RK. (2007).** Indian herbs result in hypoglycemic responses inStreptozotocin-induced diabetic rats. *Nutr. Res.* 27(3): 161-168.
- Charles, D.J.; Morales; R.; and Simon, E. (1993).** Essential oil content and chemical composition of hydroalcoholic extract of fennel, *New crops*, 570-3.



- Chevassus H., Molimier N., Costa F., Galtie F., Renard E. and Petit P. A.(2009).** Fenugreek seed extract selectively reduces spontaneous fat consumption in healthy volunteers. *Eur J ClinPharmacol* , 65: 1175- 1178.
- Choi, S.B., J.D. Wha and S. Park, (2004).** The insulin sensitizing effect of homoisoflavoneenriched fraction in *Liriopeplatyphylla* Wang et Tang via PI3-kinase pathway. *Life Sci.*, 75: 2653-2664.
- Djrolo F, Hougbe H, Auode G, Addia B, Kodjoh K, Avinadje M and Monterio B.(1998).** Lediabete lie a la malnutrition (diabete tropical). *Medicine Afrique Noire*, 45: 538-542.
- Eddouks, M., H. Jouad, M. Maghrani, A. Lemhadri and R. Burcelin, (2003).** Inhibition of endogenous glucose production accounts for hypoglycemic effect of *Spergulariapurpurea* in streptozotocin mice. *Phytomedicine*, 10: 594-599.
- Eddouks M, Lemhadri A, Zeggwah NA and Michel JB . (2005).** Potent hypoglycaemic activity of the aqueous extract of *chamaemelumnobile* in normal and streptozotocin-induced diabetic rats. *Diabetes Res Clin Pract*;67:189–195.
- El-Ashmawy IM, El-Nahas AF andSalama OM.( 2005).** Protective effect of volatile oil, alcoholic and aqueous extracts of *Origanummajorana* on lead acetate toxicity in mice. *Basic Clin. Pharnmacol. Toxicol*; 97:238-243.
- El-Hilaly J, Hmammouchi M and Lyoussi B (2003).** Ethnobotanical studies and economic evaluation of medicinal plants in Taounate province (Northern Morocco)*J Ethnopharmacol*, 86:149-158.
- Eskander E.F., Won J. H. (1995).** Hypoglycemic and hyperinsulinemic effects of some Egyptian herbs used for the treatment of diabetes mellitus (type II) in rats. *Egypt J Pharm Sci*; 36: 331-342.
- Evans JL, Goldfine ID, Maddux BA, Grodsky GM. (2002).** Oxidative Stress and Stress-Activated Signaling Pathways: A Unifying Hypothesis of Type 2 Diabetes.*Endocr. Rev.* 23(5): 599-622.
- Fossati, P. and Principle, L.(1982).** Estimation of the concentration of triglyceride in plasma and liver. *Clinical Chemistry* 28: 2077- 2081.
- Friedewald and Fredrickson, D. S. (1972).** Estimation of the plasma low density lipoprotein cholesterol without use of the preparative ultracentrifuge. *Clinical Chemistry*,18:499- 502.
- Fuhrman B andAviram M (2001).** Flavonoids protect LDL from oxidation and attenuate atherosclerosis .*CurrOpinLipidol*, 12:41-48.
- Gee J. M., Blackburn N. A . and Johnson I. T.(1983).** The influence of guar gum on intestinal cholesterol transport in the rat. *Brit. J. Nutri.* 50: 215–224.

- Gilani AH, Aziz N, Khan MA, Shaheen F, Jabeen Q, Siddiqui BS and Herzig JW (2000).** Ethnopharmacological evaluation of the anticonvulsant, sedative and antispasmodic activities of *Lavandula stoechas* L. *J Ethnopharmacol*, 71:161-167.
- Giugliano, D., A., Ceriello and G. Paolisso (1996).** Oxidative stress and diabetic vascular complication. *Diabetes Care*, 19: 257-267.
- González, I.N., Valverde, V.G., Alonso, J.G., and Periago, M.G. (2011).** Chemical profile, functional and antioxidant properties of tomato peel fiber. *Food Research International* 44, 1528–1535.
- Goupy, P; Hugues M., Boivin, P and Amiot, j. (1999).** Antioxidant composition and activity of barley (*Hordeum vulgare*) and malt extract and of isolated phenolic compounds. *J.Sci. Food Agric.* 79: 1625-1634.
- Halliwell, B., and Gutteridge, JMC (1985).** Free Radicals in Biology and Medicine. (1st ed.), Clarendon Press. Oxford; 279 – 313.
- Handl S. P., Hellweg A., Khol-Parisini B., Rossmann K., Thurner W., Luf J., Novak J. and Zentek (2008).** Effect of oregano (*O. majorana*) on performance and antioxidative capacity of quails fed a diet rich in omega-3 fatty acids. *J. Anim. Physiol. Anim. Nut.*, 92: 242-245.
- Harris, S.B., and Macaulay, A.C. (1998).** Diabetes management: new evidence based recommendations. Highlights of the Canadian clinical practice guidelines. *Canadian Diabetes Association. Can Fam Physician*; 44: 2465-6.
- Huang, D.; Ou, B. and Prior, R.L. (2005).** The chemistry behind antioxidant capacity assays. *Journal of Agriculture and Food Chemistry*, 53, 1841-1856.
- Heim, K. E., Tagliaferro, A. R., and Bobilya, D.J. (2002).** Flavonoid antioxidant: chemistry, metabolism and structure, activity relationships. *J. Nutr. Biochem.* 13, 572 - 584.
- Henry, R. J. (1964).** Clinical Chemistry, Principles and Techniques, pp. 732—748, Harper & Row Publishers, New York, 181.
- Henry, R.J. (1974).** Henry R ed. Clinical chemistry: Principles and techniques, 2nd ed New York. Harper and Row. 723.
- Hiebouicz, J., Darwiche, G., Bjorgell, O. and Almer, L.O. (2007).** Effect of cinnamon on postprandial blood glucose, gastric emptying and satiety in healthy subjects, *American journal of Clinical Nutrition*, (6):1552-1556.
- Hopla A., Huang S., Schwartz K., German B. and Frankel E., (1996).** Effect of different lipid systems on antioxidant activity of rosemary constituents carnosol and carnosic acid with and without  $\alpha$ -tocopherol. *J Agric Food Chem* 44, 2030-2036.

- Ibáñez E., KuBbatova A., Senorans F., Cavero S., Reglero G., and Hawthorne S., (2003).** Supercritical water extraction of antioxidant compounds from Rosemary plants. *J Agric Food Chem* 51, 375-382
- Khan, M. S., Safdar, M., Khan M.M. A., Khattak, K.N. and Anderson, R.A. (2003).** Cinnamon improves glucose and lipids of people with type 2 diabetes. *Diabetes Care*, 26: 3215-3218.
- Khan, M.A., M. Tayyib, M. Ashraf, A. Ditta, A.R.Choudhary and A. Ali (2005).** Changes in serum lipid profile of albino rats fed on canola oil supplemented with atherogenic elements: 18 weeks study. *Ann. King Edward Med. Coll.*, 11:5-7.
- Kingh, H., Aubert, R.E., and Herman, W.H. (1998).** Global burden of diabetes, 1995-2025: prevalence, numerical estimates, and projections. *Diabetes Care*. Sep; 21(9): 1414-31.
- Lamiaa A. , Ahmed, R. S. R. and Mohamed R. A. (2009).** Biochemical and Histopathological Studies on the Water Extracts of Marjoram and Chicory Herbs and Their Mixture in Obese Rats. *Pakistan Journal of Nutrition* 8 (10): 1581-1587.
- Lawless J. (1992).** Lavender essential oils. *The Encyclopaedia of Essential Oils*. Melbourne, Australia.
- Lawrence J.C., Jill S.G., Eric P.D., Joyle A.D., Donald D.L. and Mark AY. ( 2001).** Effect of antioxidant treatment on streptozotocin induced diabetic rats on endoneurial blood flow, motor nerve conduction velocity and vascular reactivity of epineurial arterioles of the sciatic nerve. *Diabetes*; 50: 1927-1937.
- Leeja, L. and L.E. Thoppil ( 2007).** Antimicrobial activity of methanol extract of *Origanum majorana L.* *J. Environ. Biol.*, 28: 145-146.
- Li, MK and Crawford JM (2004).** "The Pathology of Cholestasis," *Seminars in Liver Disease*, 24 (1):21-42.
- Lollinger, J.(1981).** Free radicals and Food additives. Ed. By Taylor and Francis, London p: 121.
- Masuda T, Inaba Y, Maekawa T, Takeda Y, Tamura, H and Yamaguchi H. (2002).** Recovery mechanism of the antioxidant activity from carnolic acid, Quinone, and oxidized sage and rosemary antioxidant. *J Agric Food Chem*, 50:5863-5869.
- Mishkinisky J. Joseph B and Sulman F.(1967).** Hypoglycaemic effect of trigonelline. *Lancet* 1;1311.
- Misra H P & Fridovich I. (1972).** The role of superoxide anion in the autoxidation of epinephrine and a simple assay for superoxide dismutase. *J Biol. Chem.*, 247:3170-3175.

- Moselhy, S.S. and Ali, H.K. (2009).** Hepatoprotective effect of cinnamon extracts against carbon tetrachloride induced oxidative stress and liver injury in rats. *Biol. Res.*, 42: 93-98.
- Nadkarni KM (1982).** *Indian materiamedica* p. 730 (3rd ed.). Bombay: PopularPrakashan.
- Nalamolu, K., R. Wara and N. Srinivas (2006).** Anti-diabetic and Reno protective effect of the chloroform extract of *Terminariachebula* Retz. seeds in STZ-induced diabetic rats. *Biomed. J. BMC. Com.*, 14: 222-231.
- Nogueira JMF and Romano A (2002).** Essential oils from micropropagated plants of *Lavandulaviridis*. *Phytochem Anal*, 13:4-7.
- Osakabe N, Yasuda A, Natsume M and Yoshikawa T.( 2004).** Rosmarinic acidinhibits epidermal inflammatory responses: anti-carcinogenic effect of *Perillafrutescens* extract in the murine two-stage skin model. *Carcinogenesis*, 25:549-557.
- Pascual TJD, Caballero E, Caballero C andMachin G (1983).** Constituents of the essential oil of *Lavandulatifolia*. *Phytochem*, 22:1033-1034.
- Pimple B P, Kadam P V and Patil M J; (2012).** Comparative antihyperglycaemic and antihyperlipidemic effect of *Origanummajorana* extracts in NIDDM rats. *Orient Pharm Exp Med.*, 12:41–50.
- Qin, B., M. Nagasaki, M. Ren, G. Bajotto, Y. Oshida and Y. Sato, (2004).** Gosha-jinki-gan (a herbal complex) corrects abnormal insulin signalling. *Evid. Based Complem. Alternat. Med.*, 1: 269-276.
- Qin, B., M. Nagasaki, M. Ren, G. Bajotto, Y. Oshida and Y. Sato, Y., (2003).** Cinnamon extract (traditional herb) potentiates in vivo insulin regulated glucose utilization via enhancing insulin signalling in rats. *Diabetes Res. Clin. Pract.*, 62: 139-148.
- Rahimi, R. S. Nikfar, B. Larijani and M. Abdollahi(2005).** A review on the role ofantioxidants in the management of diabetes and complications. *Biomed.Pharmacother.*, 59:365-373.
- Rai, M.K.(1995).** A review on some antidiabetic plants of India. *Anci. Sci. Life.*, 14:42-54.
- Ramesh, B. R., Saravanan, and K.V. Pugalendi(2006).**Effect of dietarysubstitution of groundnut oil on blood glucose, lipid profile, and redox status in streptozotocin-diabetic rats. *Yale J. Biol. Med.*, 79: 9-17.
- Raghuram, T.C. Swaran p. and Sharma R.D. (1993)** .Diet and Diabetes,P.19.
- Ranganna, S. (1979).** Manual of Analysis of Fruit and Vegetable Products. 2nd Edn., Tata McGraw-Hill Publ. Co. Ltd., New Delhi, India, Pp: 634-222.

- Reaven, G.M., (1995).** Pathophysiology of insulin resistance in human disease. *Pharmacol. Rev.*, 75: 473-486.
- Richmond, W. (1973).** Estimation of free and etherified tissue cholesterol. *Clinical Chemistry* 19: 1350- 1354.
- Saito Y, Shiga A, Yoshida Y, Furuhashi T, Fujita Y and Niki E.g .(2004).** Effectsof novel gaseous antioxidative system containing a rosemary extract on the oxidation induced by nitrogen dioxideand ultraviolet radiation. *Biosci.BiotechnolBiochem*, 68:781-786.
- Shelbaya, A. L., El Mehairy, F. H. and El-Zainy A.R.M. (2014).** AntioxidantActivities of Marjoram (*Origanummajoranum* L.) Added to Frozen Beef Koftaand its Therapeutic Effect Against Kidney Damage in Rats ,*World Applied Sciences Journals* 31 (8): 1406-1414.
- Siest, G., Henny J., and Schiele J. (1981).** Determination enzymatique due glucosein Karger (ed). *Interpretation des examens de laboratoire*, pp206-223.
- Silva, E.M.; Souza, J.N.S.; Rogez,H.; Rees, J.F. and Larondella,Y.(2006):**Antioxidant activities and polyphenolic contents of fifteen selectedplant species from the Amazonian region . *Food chemistry*,101(3),1012-1018.
- Sotelo-Felix J I , Martinez-Fong D and Muriel De la Torre P .(2002).** . Protective effect of carnosol on CCl<sub>4</sub>-induced acute liverdamage in rats.*Eur JGastroenterolHepatol*, 14:1001-1006.
- Soltan, S.S.A. and H.M. Abdel Wahab ( 2006).** Effects of some herbs and spices on hypercholesterolemic rats. *Bulletin of Faculty of Agric. Cairo Univ.*, 57(3): 429-447.
- Srichamroen A., Field C. J., Thomson A. B.and Basu T. K.(2008).** The modifying effects of galactomannan from canadian-grown fenugreek (*Trigonellafoenum-graecum* L.) on the glycemic and lipidemic status in rats. *J. Clin. Biochem. Nutr.* 43: 167–174.
- Sümbüloğlu, K., Sümbüloğlu, V., and Biyoistatistik(1998).** 8<sup>th</sup> .,HatibogluYayinevi, Ankara, p, 76-86.
- Sushruta, K., Satyanarayana, S., Srinivas N. and Raja Sekhar, J. (2006).**Evaluation of the Blood-Glucose Reducing Effects ofAqueous Extracts of the SelectedUmbelliferous Fruits Used in Culinary Practices. *Tropical Journal of Pharmaceutical Research*, 5 (2): 613-617.
- Tim N.Z., Jennfer E.H., Ronald W.M., Jamie I., and Richrad A.A. (2006).** Theeffects of water soluble cinnamon extract on body composition and features ofthe metabolic syndrome in pre-diabetic men and women. *J.Int.Soc.SportsNutr.*, 3:45-53.

- Trinder P. (1969)** .Determination of glucose in blood using glucose oxidase with on alternative oxygen receptor. *Ann Clin. Biochem.* 6: 24-27.
- Vijayakumar, M.V., S. Singh, R.R. Chhipa and M.K. Bhat,( 2005).** The hypoglycaemic activity of fenugreek seed extract is mediated through the stimulation of an insulin signalling pathway. *Br. J. Pharmacol.*, 146: 41-48.
- Virdi J, Sivakami S, Shahani S, Suthar AC, Banavalikar MM, and Biyani MK. (2003):**Antihyperglycemic effects of three extracts from *Momordica charantia*. *J. Ethnopharmacol.* 88(1): 107-111.
- West, I.C. (2000).** Radicals and oxidative stress in diabetes. *Diabet. Med.* 17: 171-180.
- Wilson, R.L.(1988).** Free Radicals and Tissue Damage, Mechanistic Evidence from Radiation Studies. In: *Biochemical Mechanisms of Liver Injury. Academic Press, New York.*; pp.123.
- Yazdanparast, R., M.A. Esmailil and J. AshrafiHeien 2005).** *Teucrium polium* extract effects pancreatic function of streptozotocin diabetic rats: A histopathological examination. *Iran Biomedical J.*, 9: 81-85.
- Zheng W., and Wang S.,( 2001).** Antioxidant activity and phenolic compounds in selected herbs. *J Agric Food Chem* 49, 5165-5170.

## تأثير المستخلصات المائية لبعض النباتات الطبية على مستوى سكر ودهون الدم في الفئران المصابة بداء السكري

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تهدف الدراسة الحالية الى إستكشاف تأثير المستخلص المائي للبابونج، واللافندر وإكليل الجبل والبردقوش والحلبة والقرفة على مستوى سكر ودهون الدم بواسطة الالوكسان المحث علي اصابة الفئران بالسكري. وتم تحديد الفينولات الكلية، ودراسة النشاط المضاد للأكسدة وتفريد الأحماض الفينولية للنباتات عينه الدراسة. تم تقسيم خمسة وأربعين فأرا إلى تسع مجموعات (ن = ٥). ادهم وهو مجموعه الفئران السليمة غير المعالجة التي اعتبرت كنترول سالب (مجموعه ١)، في حين أن بقية الفئران تم حقنها بالالوكسان (١٠٠ مجم/ كجم من وزن الجسم) الذائب في محلول ملحي للحث علي الإصابة بالسكري. ثم تم تقسيم الفئران المصابة بداء السكري إلى ثمانية مجموعات، ادهم وهو الكنترول الموجب وهو السكري غير المعالج واعطي له امل من الماء المقطر (مجموعه ٢)، تليها مجموعه الفئران السكري التي تم علاجها بأقراص glipiside (مجموعه ٣). بقية الفئران المصابة بداء السكري تم علاجها بمستخلصات بعض النباتات الطبية بجرعة ٣٠٠ ملجم / كجم من وزن الجسم المذاب في ١ مل من الماء المقطر عن طريق الفم. تم جمع عينات الدم من العين من جميع الفئران بعد تناول المستخلصات بواسطة أنبوب شعري خلال ٢ و ٤ و ٦ ساعات. وتم تحليل مستوى الجلوكوز ودهون الدم. وأظهرت النتائج أن اعلي محتوى للفينولات الكلية في اكليل الجبل (٢٧، ٦ جم / ١٠٠ جم)، يليها اللافندر (٧٦، ٤ جم / ١٠٠ جم)، ثم القرفة (٢٦، ٤ جم / ١٠٠ جم)، ثم البردقوش (٢٥، ٤ جم / ١٠٠ جم). وأشارت النتائج الي ارتفاع محتوى اللافندر والقرفة من Ellagic acids، Benzoic، Caffeic، P.OH.Benzoic، Chlorogenic. كما أظهرت النتائج أن مستوى سكر الدم انخفض بشكل ملحوظ في جميع المجموعات التي تم علاجها خلال ٢ و ٤ و ٦ ساعات بالمقارنة بالكنترول السكري. ولوحظ ايضا ان أكبر انخفاض في مستوى سكر الدم اتضح في المجموعة التي تم علاجها بالمستخلص المائي لأوراق إكليل الجبل تليها المجموعة التي تم علاجها بالمستخلص المائي للقرفة. وفيما يتعلق بدهون الدم، كشفت النتائج أن مجموعة الفئران السكري التي تم علاجها بالمستخلص المائي لللافندر أظهرت أدنى مستوى في الكوليسترول الكلي، تليها المجموعة التي تم علاجها بإكليل الجبل خلال ٢ و ٤ و ٦ ساعات بعد تناول المستخلص بالمقارنة بالكنترول السكري. وأشارت النتائج ان مجموعة الفئران المصابة بداء السكري والتي تم علاجها بالمستخلص المائي لإكليل الجبل واللافندر والبردقوش اظهرت انخفاض ملحوظ في مستوى الدهون الثلاثية، في حين تسبب كلا من المستخلص المائي لللافندر، والقرفة، وإكليل الجبل في زيادة كبيرة في مستوى الليبوبروتينات المرتفعة الكثافة، وانخفاض ملحوظ في مستوى في الليبوبروتينات المنخفضة الكثافة مقارنة مع الكنترول السكري. وتوصي الدراسة باستخدام البابونج، اللافندر وإكليل الجبل، وأوراق البردقوش وبذور الحلبة، والقرفة في إعداد الأطعمة، وأنها تفيد في السيطرة على ارتفاع السكر في الدم بعد الأكل لاسيما في حالة السكري. بالإضافة إلى ذلك، الاستخدام اليومي قد يساعد في الحد من المضاعفات المرتبطة بداء السكري المزمن. وايضا توصي الدراسة باستخدام تلك النباتات وخاصة لمرضي السكري لما لها اثر فعال في خفض سكر وليبيدات الدم.