		DateMarch 15, 1989
ETHICA	L REVIEW COMMIT	TEE, ICDDR,B.
Principal Investigator Dr.Kama		97 —
Application No. PCC/1/88 (REV.		
		porting Agency (if Non-ICDDR,B) PCC-Collaborat
Title of Study Anti-shigella	drug from Pro	ject status: funding.
plant extract:	() New Study
	() Continuation with change
) No change (do not fill out rest of form)
Circle the appropriate answer:	to each of the	C-11- / C-2-
1. Source of Population:	NA 5	following (If Not Applicable write NA).
(a) Ill subjects	Yes No	. Will signed consent form be required:
(b) Non-ill subjects	Yes (No)	(a) From subjects Yes (No.
(c) Minors or persons	163 (10)	(b) From parent or guardian
under guardianship	Yes (No) 6,	(if subjects are minors) Yes (No
2. Does the study involve:	100 (10)	1 be taken to protect
(a) Physical risks to the	7.	anonymity of subjects Yes No
subjects	Yes (No)	Check documents being submitted herewith to Committee:
(b) Social Risks	Yes (No)	a d
(c) Psychological risks		V Umbrella proposal - Initially submit a overview (all other requirements will
to subjects	Yes (No)	be submitted with individual studies).
(d) Discomfort to subjects	Yes (No)	Protocol (Required)
(e) Invasion of privacy	Yes (No)	Abstract Summary (Required)
(f) Disclosure of informa-	•	X Statement given or read to subjects on
tion damaging to sub-	_	nature of study, risks, types of quest
ject or others	Yes (Ng)	ions to be asked, and right to refuse
Does the study involve:	•	to participate or withdraw (Required)
(a) Use of records, (hosp-		Informed consent form for subjects
ital, medical, death,		X Informed consent form for parent or
birth or other) (b) Use of fetal tissue or	Yes (No)	guardian
(b) Use of fetal tissue or abortus	v 🥏	Procedure for maintaining confidential
(c) Use of organs or body	Yes (No)	1ty
fluids	V 60	Questionnaire or interview schedule *
Are subjects clearly inform	Yes (No)	* If the final instrument is not completed
(a) Nature and purposes of	ed about:	prior to review, the following information
study	Yes No	should be included in the abstract summary
(b) Procedures to be	res my	1. A description of the areas to be
followed including		covered in the questionnaire or
alternatives used	Yes 🔞	interview which could be considered
(c) Physical risks	Yes (No	either sensitive or which would
(d) Sensitive questions	Yes (No	constitute an invasion of privacy. 2. Examples of the type of specific
(e) Benefits to be derived	Yes (No)	i or obcerite
(f) Right to refuse to		questions to be asked in the sensitive areas.
participate or to with-		
draw from study	Yes (No)	 An indication as to when the question- naire will be presented to the Cttee.
(g) Confidential handling	\tilde{a}	for review.
of data	Yes (No)	,
(h) Compensation &/or treat	<u> </u>	
ment where there are ri	sks	•
or privacy is involved	in _	

any particular procedure Yes No e agree to obtain approval of the Ethical Review Committee for any changes nvolving the rights and welfare of subjects before making such change.

Principal Investigator

(PTO)

FORMAT FOR PREPARATION OF BMRC & ICDDR, B COLLABORATIVE PROTOCOLS

1. <u>Title</u> : Anti-Snigella drug from plant

extract.

2. Principal Investigator : Dr. Kamaluddin Ahmad

<u>Co-Investigator</u> : Dr. Khaleda Haider, ICDDR,B

Dr. Khurshid Jahan, D.U.

Dr. Khorshed Alam Chowdhury, ICDDR, B.

3. Starting date : February 1988

4. <u>Completion Date</u> : January 1989

5. Total Direct Cost : Tk. 371,000.00

6. ABSTRACT

We have learnt from folk medicine anecdotes that the juice of the leaves of *Euphorbia hirta* is occasionally used in the treatment of diarrhoea and bloody dysentery. This led to find out sinn *in vitro* tests of the activities of the juice against many diarrhoeagenic organisms.

Our interest has deepened whem we found that the juice is effective against *Shigella dysenteriae* type 1 that is resistant to a number of antibiotics, including nalidixic acid. In view of the fact that many strain of *Shigella* resistant to common antibiotics are being encountered in the field we consider extremely important that this herbal drug be developed. It may not be out of place to mention that the crude preparation was used to treat 21 *Shigella* patients (age 1-4 yrs) infected with resistant *Shigella*. All of them became "culture netgative" within 2-4 days. These patients

also underwent various biochemical tests for liver and kidney functions which remained unaffected by the drug, which constituted of alcoholic extracts of 100 gr of fresh leaves a day. The alcohol was distilled off from the extract and the latter was prepared as aqueous suspension for oral administration.

In this protocol, we wish to undertake research leading to purification of the active principle(s), its (their) toxicity and finally efficacy in experimental shigellosis in animals (when such models are available).

The procedure for isolation will be application of biochemical separation methods with in vitro trials for activity at every stage of purification. The tentative procedure would be:

- 1. Extraction of fresh leaves of E. hirta with 95% alcohol.
- 2. Concentrate of the extract
- 3. Attempts to prepare the active substance from the associated impurities by extraction in different solvents at different pH and application of defferent biochemical separation techniques as indicated during the progress of the work (e.g. different kinds of chromatography).

The active sfubstance will be tested for functional group so that derivatives can be made for further purification. Biochemical separation methods to be used will be determined by the results of preceding procedures. Characterization will be done following chemical analytical tools. The isolated material will be used for standard toxicity test using rats.

The efficacy of the material for treating experimental shigellosis will depend on the availability of Monkey models for the purpose for which another protocol will be submitted at a later stage.

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8.

a.	Ethical Review Committee :
b.	Research Review Committee:
О.	Director's signature and remark, if any :

i) Signature of Scientific
 Program Head (ICDDR,B) :

Mu (4//20) 20/3/8

√ii) Signature of Heads of Collaborative collaborative departments/institute:

Valu 21/3/88

iii) ICDDR,8 Ethical Review Committee :

Dept. of Biochemismy
Dacco Haiverstr

Chairman

iv) PCC Research Review Committee :

Approved/Not approved

SECTION II : RESEARCH PLAN

A. INTRODUCTION

1. Objectives

To isolate, purify and characterize the active ingredients of the plant extract which will show antibacterial activity against shigellae.

2. Background Information

Shigellosis is a major cause of morbidity and mortality in children in the developing countries (1) Antimicrobial therapy has been widely used to treat shigellosis. gradual acquiring of drug resistances in Shigella strains has promted the search for newer and more effective drugs. Although many antibiotics have been used effectively in the past for the treatment of shigellosis, most of these are now ineffective, because of complete or partial resistance to them. Sulphadiazine was the drug of choice for treatment of shigellosis back in 1940s, and it was followed by tetracycline. By 1952, 80% of Shigella strains were resistant to sulphonamides (2) and by 1958, a majority exhibited multiple resistance to sulphonamides streptomycin, tetracycline, and chloramphenicol. With the development of multiple-drug resistance among Shigella species, ampicillin became the drug of choice in early 1970s. However, resistance of Shigella to ampicillin has been reported by many workers from various parts of the world (3,4).

the ampicillin resistant strains, trimethoprimsulphamethoxazole was tried and found to be effective and
suitable drug for the treatment of shigellosis (5,6).
However, during the last few years, there are reports of the
emergence of trimethoprim-sulphamethoxazole-resistant
strains among the clinical isolates of *Shigella* (7,8,9).
Nalidixic acid has then been used successfully in many
places for the treatment of shigellosis caused by multipleresistant strains. However, emergence of resistance to this
drug has also been observed in Bangladesh. (10). It is
vital, at this stage, to search for new antimicrobial agents
against shigellosis.

Drug of plant origin have been shown to have promising antibacterial activity against various bacteria (11,12,13,14,15). Preliminary investigation, on the biological activity in vitro of the crude extract of E. hirta (20 mg/disc) on multiple drug resistant Shigella dysenteriae type 1 strains (resistant to ampicillin, chloramphenicol, streptomycin, tetracycline, trimethoprimsulphamethoxazole, and nalidixic acid) was done at ICDDR,B by way of collaboration with University of Dhaka. In vivo efficacy of the crude extract was also tested in 21 patients of shigellosis following BMRC ethical clearance with encouraging results at the University of Dhaka. Stool examination of these patients and isolation of Shigella organisms was also done at ICDDR,B laboratory (unpublished

observation). However, no detailed study on antibacterial activity of herbal medicine specially on *Shigella* has been reported. Thus this study will be carried out with an aim to develop an Anti-Shigella drug from plant extract.

3. Rationale

Shigellosis due to multiple drug resistant *Shigella* strains has become a great public health problem in developing countries. It is a urgent need to develope antimicrobial drug which will be active against multiple drug resistent shigellae. Prospective activity of the herbal drugs as an antimicrobial agents lead us to study the antibacterial activity of these drug against shigellae and to isolate, and characterize the active component of the plant extrct of *Euphorbia hirta*.

B. SPECIFIC AIMS

- To isolate, purify and characterize the active components of the plant extract which has antimicrobial activity against multiple drug resistant shigellae strains.
- To study the in vitro antibacterial activity of the extracts of the plant on eight multiple drug resistant shigellae strains (two from each species).
- 3. To determine the acute and chronic toxicities of the plant extracts in animal model (rats).

C. METHODS AND MATERIALS

1. Bacterial strains

Eight multiple drug resistant *Snigella* strains (two from each species) which are biochemically and serologically characterized, are stored in trypticase soy broth with 0.3% yeast extract and 15% glycerol at -70°C, at ICDDR,B will be used in this study.

2. Preparation of the plant extract:

The leaves (fresh) of the plant Euphorbia hista will be extracted by 95% alcohol, the extract will then be concentrated in vacuo. The active crude extract will be purified using different biochemical separation techniques following at each step its antimicrobial activity.

3. Susceptibility tests of the antimicrobial agent(s):

a) Antimicorbial susceptibility tests will be performed on the multiple drug resistant Shigella strains using standard method of Kirby Bauer method (16). The antimicrobial agents in discs (BBL) which will be used in this study are ampicillin, chloramphenicol, tetracycline, streptomycin, trimethoprim-sulphamethoxazole nalidixic acid, Kanamycin, gentamycin, norfloxacin, and Pevmecillinum. The active component of the plant extract.will be soaked in sterile discs and will also be used against the

Shigella strains. A disc, soaked in the solvent used for the plant extract, will be used as blank control.

b) MIC: Minimum inhibitory concentration of the active component of the plant extract will be done by serial tube dilution method of Seligman et al (17).

4. <u>Toxicity Tests</u>

- i) Determination of LD_{50} in mg/kg by oral administration in mouse will ascertain the acute toxicity of the test material.
- toxicity test using animal model: Sub-chronic toxicity test of the active component of the plant extract will be performed using rat model. Twenty young rats will be divided into four equal groups (5 in each). Groups 1-3 will receive active component of plant extract in high, medium and low doses to be determined on the basis of in vitro activity, vis-a-vis, known antibiotics. Group 4 will receive sterile solvent used for the active principle under consideration which will act as control. All twenty rats will be fed the respective materials on day 1 by means of a special syringe. The animal will then be allowed to live on normal food; and water for 90 days. On

90 days all the experimental rats will sacrificed and a routine postmortem will be performed. The organs/tissues that will be in 10% buffered formalin for collected histopathological examination are : liver, kidney, spleen, heart, brain pancreas, testis, ovary and skeletal muscle. Gross and microscopic changes of these organs will be recorded. Any toxic effects, i.e. degeneration, necrosis, hemorrhages or neoplastic lesion will be recorded. These lesion will be compared with the control rats. For evaluation of pathological changes, a grading system of 0-3 (No significant lesion, minimal, mild and severe lesion) will be used to express severity of the changes observed. Groups of rats fed with plant material will then be compared to the control group using chi-square analysis.

D. SIGNIFICANCE

Treatment of shigellosis due to multiple drug resistant shigellae, by a low cost, easily available, herbal medicine shall be a great benefit to the public health problem of the developing countries. The purification of the active principle will help us find out about its chemical action, mode of action and probable toxicity on short and long term use. It may lead us to devicing new structure for development of still newer drugs.

E. FACILITIES REQUIRED

General facilities required for isolation and characterization of the active component of the plant product will be done at the laboratory of the department of Biochemistry, Dhaka University and the newly established Bangladesh Institute of Herbal Medicine.

F. COLLABORATIVE ARRANGEMENTS

ICDDR,8 shall provide all the facilities required for in vitro testing of the antimicrobial activity of the active component of the plant extract and toxicity tests on animal model.

FLOW SHEET OF THE PROCEDURES

Fresh leaves of *E. hirta* extracted with equal volume of 95 percent alcohol in blendor. Test for antimicrobial activity against *Shigella* spp.

Evaporate off the alcohol in a rotary evaporator

Add water to make an equal suspension.

Determine pH

Take one portion (Fraction 1) to acidic pH 5 and another (Fraction 2) to alkaline pH 8

Extract fraction 1 and fraction 2 with benzene

Test the extract for antimicrobial activity against *Shigella* spp.

Chromatograph the active fraction in a column (alumine-celite) using benzene as the running solvent and collect the eluent in a fraction collector

Identify the active portion of the eluent by anti-microbial test on Shigella

Remove the solvent from the active portion

Do thin layer chromatography for further purification.

Do MIC of the active component on shigellae and toxicity test on rats.

REFERENCES

- 1. Khan MU, Curlin G. Shigellae dysėnteriae: A new health hazard in Bangladesh. Bangladesh Med J. 1974;3:42-7.
- 2. Suzuki S, Nakazawa S, Ushioda T. Drug resistance of Shigella strains isolated in Kyoto. Chemotherapy 1956:4:336-8.
- 3. Ross S, Controni G, Khan W. Resistance of shigellae to ampicillin and other antibiotics: Its clinical and epidemiological implications. JAMA 1972;221:45-7.
- 4. Rahaman MM, Huq I, Dey CR, Kibriya AKMG, Curlin G. Ampicillin-resistant Shiga bacillary in Bangladesh (Letter).

 Lancet 1974; 1:406-7.
- 5. Trrence MD, Owens MT, Cho CT. Ampicillin-resistant *Shigella* (Letter). JAMA 1973;226:1359.
- 6. Yunus M, Rahman ASMM, Farooque ASG, Glass RI. Clinical trial of ampicillin V. trimethoprim-sulfamethoxazole in the treatment of *Shigella dysentery*. J Trop Med Hyg 1982;85:195-9.
- 7. Zaman K, Yunus M, Baqui AH, Hossain KMB,1 Khan MU. Cotrimoxazole-resistant *Shigella dysenteriae* type 1 outbreak in a family in rural Bangladesh (Letter). Lancet 1983;2:796-7.

- 8. Frost JA, Rowe B, Vandepitte J. Aequisition of trimethoprim resistance in epidemic strain of *Shigella dysenteriae* type 1 from Zaire (Letter). Lancet 1982;1:963.
- 9. Tiemens KM, Shipley PL, Correia RA, Shields DS, Guerrant RL. Sulfamethoxazole-trimethoprim-resistant *Shigella flexneri* in Northenstern Brazil. Antimicrobial Agents Chemother 1984;25:653-4.
- 10. Munshi MH, Sack DA, Haider K, Ahmed ZU, Rahaman MM, Morshed MG. Plasmid mediated resistance to nalidixic acid in Shigella dysenteriae type 1. Lancet 1987, August 22;419-421.
- 11. Chinemana F, Drummond RB, Mavi S, de-Zoysa, I. Indigenous plant remediesin Zimbabwe. J. Ethnopharmacol. 1985;14(2):159-72.
- 12. Pang QF, Wan XB, Chen SD, Xie XL. Treatment of rotavirus infection in tree strews (Tupaia belangeri Yunalis) with herbal valeriana Jatamansi (VJ). J Tradit Chin Med 1984; 4(4):301-6.
- 13. Singh KV and Shukla NP. Activity of garlic extract (Allium Sativum) on multiple resistant bacteria, Fitoterapia, 1984,55(5): 313-315.
- 14. Kumar A and Sharma VD. Inhibitory effect of garlic (Allium rativum) on enterotoxigenic *E. coli* Ind J Med Res 1982;76(Suppl.):66-70.

- 15. Arunachalan K. Antimicrobial activity of genlic, onion, and honey, Geobios, 1980;7:46.
- 16. Bauer AW, Kirby WMM, Sherris JC, Turch M. Antibiotic susceptibility testing by a standardized single disk method. Am J Clin Pathol. 1966;45:493-496.
- 17. Seligman SJ, Mad havan T, alcid D. Trimethoprim-sulfamethoxazole in the treatment of bacterial endocarditis.

 J. Infect Dis 1973;128:S754-S61.

SECTION III : BUDGET

1. Personnel Services

					Taka		
	Name	Position	%	Time Per required	month	Per Year	
ı	Prof. Kamal Ahmad	Prof.Dept. Biochemistry		30%	5,000	60,000	
	Dr. Khaleda Haider	Asstt.Scientist	t	10%	-	_	
	Dr.Khurshid Jahan	Assoc.Prof. INFS, DU.		30%	3,000	36,000	
	A Research Assistar			100%	3,500	42,000	
	A Research Fellow	to be appointed		100%	3,000	30,000	
	A Lab Attendant to	be appointed		100%	2,500	30,000	
2.	Supplies:					·	
	Media, Equipment Petridishes, Chemic	cals				60,000	
3.	Animals					100,000	
4.	Conveyance and Trai	nsport				8,000	
5.	Printing and reprod	duction				5,000	
		•		TOTAL	_ TAKA	371,000 ======	