Phyto-Screening and Inhibitory Activity of Aqueous and Methanolic Extracts of *Gymnema Sylvestre* and *Syzygium Cumini* on Porcine Pancreatic Amylase Activity

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]

[1,2] Department of Botany and Seed Technology, Sahyadri Science College, Kuvempu University, Shivamogga

Abstract – Diabetes has become a common global health problem affecting >170 million people worldwide. It is one of the leading causes of death, estimated number to be 366 million by year 2030. The majority of diabetes (~90%) is of type II diabetes (T2D) caused by a combination of impaired insulin secretion from pancreatic beta cells and insulin resistance of the peripheral target tissues, especially muscle and liver. An in vitro anti-diabetic activity of two indigenous medicinal plants were evaluated by α-amylase inhibition assay using the methanol and water extracts. Qualitative phytochemical analysis was performed to evaluate the presence of flavonoids, alkaloids, glycosides, saponins, carbohydrates and tannins. Traditional Medicines obtained from medicinal plants are used by about 40-60% of the world's population. Though there are many approaches to control diabetes and its secondary complications, herbal formulations are preferred due to lesser side effects and low cost. In this study, the inhibitory effect of Gymnema sylvestre and Syzygium cumini seeds extract on porcine pancreatic amylase was evaluted. The aqueous and methanolic extracts of G. sylvestre significantly exhibited higher (p < 0.05) inhibition of α-amylase activity than Syzygium cumini seeds as compared to standard drug acarbose.

Keywords – α-Amylase, Diabetes, Inhibition, Gymnema Sylvestre and Syzygium Cumini

- X -

1. INTRODUCTION

Diabetes being the king of all diseases exists in two forms, blood sugar, and urine sugar. Blood sugar is known as diabetes mellitus, a chronic metabolic disease characterized by high blood sugar (glucose) level due to defective insulin production from beta cells of pancreas which is known as insulin-dependent diabetes mellitus (IDDM; type-I), or inappropriate action of insulin known as non-insulin-dependent diabetes mellitus" (NIDDM; type-II). Delayed and improper treatment of diabetes mellitus results into long standing hyperglycemia which produces many complications viz. hyper-lipidemia, oxidative stress, diabetic keto-acidosis, nephropathy, neuropathy and cardiovascular disorders [24]. High blood glucose level generates reactive oxygen species (ROS) which in turn damage the cell membrane and cause oxidative stress, lipid peroxidation and destruction of β-cells [3]. Dietary starch compounds are the important sources of blood glucose, and pancreatic α-amylase is the main enzyme which governs the breakdown of starch and intestinal absorption of glucose [14]. India has the highest number of diabetes cases worldwide (40 million) [17]. About 30 million Indians are pre-diabetic, and are at high risk of developing type II diabetes, a major cause of mortality in India. Indians with diabetes have the worst glycemic control, [6] and a higher incidence of renal disease than other diabetic populations of the world [21]. Certain drugs have moderate action against pancreatic α-amylase and maintain optimal blood glucose level after meal and hence can be the most beneficial therapy for diabetes mellitus [12]. Studies conducted in India in the last decade have highlighted that not only is the prevalence of diabetes high but also it is increasing rapidly in the urban population [1]. Experimental evidences suggest the involvement of free radicals in the pathogenesis of diabetes and more importantly in the development of diabetic complications [18]. Free radicals are capable of damaging cellular molecules, DNA, proteins and lipids leading to altered cellular functions. Many recent studies reveal that antioxidants capable of neutralizing free radicals are effective in preventing experimentally induced diabetes in animal models [5] as well as reducing the severity of diabetic complications [16]. In diabetic patients, extra-cellular and long lived proteins, such as elastin, laminin, collagen are the major targets of free radicals. These proteins are modified to form glycoproteins due to hyperglycemia [8] During diabetes, lipoproteins are oxidized by free radicals.

912

There are also multiple abnormalities of lipoprotein metabolism in very low density lipoprotein (VLDL), low density lipoprotein (LDL), and high density lipoprotein (HDL) in diabetes. Lipid peroxidation is enhanced due to increased oxidative stress in diabetic condition. Although several therapies are in use for treatment, there are certain limitations due to high cost and side effects such as development of hypoglycemia, weight gain, gastrointestinal disturbances, liver toxicity etc., [19]. Based on recent advances and the involvement of oxidative stress in complicating diabetes mellitus, efforts are on to find suitable anti-diabetic and antioxidant therapy. Indigenous medicinal plants have been identified and used effectively to maintain normal blood glucose level for a long period of time. Different mechanisms of actions that control the normal blood glucose level mimics insulin activity, reduction of insulin resistance and inhibition of α-amylase enzymes activity is of importance [9]. α-amylase as an inhibitor can effectively reduce the glucose absorption, by blocking the breakdown of long-chain carbohydrates into glucose [23]. Inhibition of the enzyme activity has become the vital therapeutic approach to retard glucose absorption and suppress postprandial hyperglycemia [4]. Parenteral administration of insulin and oral use of hypoglycemic drugs like sulphonylureas, biguanides, D-phenylalanine derivatives, and meglitinides inhibitors is the routine approach for the treatment of diabetes. Prolonged use of these allopathic drugs is associated with side effects like nausea, gastrointestinal disturbance, headache, dizziness, lactic acidosis, pernicious anemia, dyspepsia and joint pain. Herbal drugs are economic and possesses no or less adverse effects as compared to anti-hyperglycemic drugs [15]. Over 400 traditional plant treatments for diabetes have been documented, although only a small number of these have received scientific and medical evaluation to assess their efficacy. Many medicinal plants are being consumed or used in Ayurveda for the treatment of diabetes [11]. A number of medicinal plants and their formulations are used for treating diabetes in the traditional Indian Ayurvedic system as well as in ethnomedicinal practices. Pharmacological properties of α-glucosidase inhibitors such as acarbose that can also inhibit pancreatic α-amylase revealed that the complications of DM such as onset of renal, retinal, lens and neurological changes and the development of ischaemic myocardial lesions are prevented or delayed. Long-term day-to- day management of diabetes, with acarbose is well tolerated and can improve glycaemic control as monotherapy, as well as in combination therapy *Gymnema sylvestre* and *Syzygium cumini seeds* are well known in Ayurveda to possess anti-diabetic properties. Structurally as well as mechanistically [21, 7], PPA (Porcine pancreatic α-amylase) is closely related to the HPA (Human pancreatic α-amylase). Hence, sequential solvent extracts of the above medicinal plants were screened for the presence of PPA inhibitors, Pancreatic α-amylase, is a key enzyme in the digestive system and catalyses the initial step in hydrolysis of starch to maltose and finally to glucose. Degradation of this dietary starch proceeds rapidly and leads to elevated post prandial hyperglycemia (PPHG). Hence retardation of starch digestion by inhibition of enzymes such as α-amylase would play a key role in the control of diabetes. Inhibitors such as acarbose, miglitol, and voglibose, are known to inhibit a wide range of glycosidases such as α- glucosidase and α-amylase. A large number of medicinal plants are growing surrounding Shivamogga district of Karnataka in India, and many of them might have an anti-diabetic potential. Hence, the present research work was carried out to explore *in vitro* anti-diabetic activity or inhibitory effect of two medicinal plant (*Gymnema sylvestre* and *Syzygium cumini* seeds) extracts on PPA.

2.   MATERIALS AND METHODS

All the chemicals procured for this work were of analytical grade, (PPA), Starch, chloroform, methanol, iso-propanol, methyl-butyl tertiary ether, acetone, and dimethylsulfoxide (DMSO) were procured from S.D. Fine Chem. Ltd, Mumbai, India. Porcine pancreatic α-amylase, 3,5- dinitrosalicylicacid (DNSA) was obtained from HiMedia Laboratories, Mumbai, India. Human pancreatic α-amylase (HPA) and acarbose were purchased from Sigma Aldrich, Bangalore.

2.1 Collection and processing of plant material

The two plant materials were collected from surrounding regions of Shivamogga district, Karnataka (India). Collected plant materials were identified and authenticated by Dr. T. Parmeshwar Naik, a renowned botanist from Sahyadri Science College, Shivamogga. The collected plant materials were washed with tap water followed by shade drying. The dried material was grinded to fine powder and stored in an air-tight container for further use.

2.2 Preparation Of Plant Extracts

The plant materials were subjected to air drying, 60–100 gm of the plant material was macerated with liquid nitrogen, and extracted in polar to nonpolar solvent on an increasing degree of non- polarity. Different extracts were sequentially obtained with cold water, hot water, methanol, iso-propanol, chloroform, acetone, and methyl-butyl tertiary ether. The extraction procedures were carried out taking into consideration the fact that traditional methods of preparing herbal formulations are mainly aqueous. Also, aqueous extracts contain peptides, proteins, or glycans, which would otherwise be denatured by organic solvents and at high-temperature extraction. Distilled water was added to the crushed material in a ratio of 1: 4 (w/v) and kept at 30°C (24 hrs) and 55°C (2 hrs) at 120 RPM for cold-and hot-water extracts, respectively. For each solvent, the extract was filtered, centrifuged, and the residue collected for subsequent solvent extraction. The organic solvents

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]

were added in a ratio of 1: 3 (w/v) and refluxed with the residue for 3 hrs at their respective boiling temperatures. Each extract was filtered and stored at −20°C for future work.

2.3 Phytochemical screening

Qualitative phytochemical screening was performed for each extract as per standard procedures described by Harborne [10].

2.3.1 Tests for alkaloid

Test solution was prepared by tritrating 40 to 50 mg extract with dilute acid (10 % acetic acid or 1 to 5 % hydrochloric acid). After filtration, 0.5 to 1 mL filtrate was added with 1 to 2 mL of following reagents.

Mayer's test

Mayer's reagent (Solution I: Dissolve 1.36 g $HgCl_2$ in 60 mL water; Solution II: Dissolve 5 g potassium iodide in 10 mL water. Combine these two solutions and add water up to 100 mL). Test solution (0.5 to 1 mL) was added with 1 to 2 mL of Mayer's reagent and development of white or buff colour precipitates indicates the presence of alkaloid.

2.3.2 Test for flavonoid

Test solution was prepared by dissolving 50 to 100 mg extract in 10 mL methanol/water.

Shinoda test

Test solution (1 to 2 mL) was added with a pinch of magnesium metal powder and a few drops of concentrated hydrochloric acid. Development of orange, pink, red to purple colours indicated the presence of flavones, flavonols or xanthones.

Sulfuric acid test

Test solution (1 to 2 mL) was added with few drops of concentrated sulfuric acid from the side wall of test tubes. Flavones and flavonols dissolve into concentrated H_2SO_4, producing a deep yellow coloured solution. Flavanones give orange to red colour.

2.3.3 Test for saponin

Take 0.1 to 0.2 g of extract and add 10 mL distilled water, and shake vigorously. The appearance of froth that stabilizes for 10 to 15 minutes indicates the presence of saponin.

2.3.4 Test for glycoside

Salkowaski's test

To the crude extract (about 50 to 100 mg) taken add 2 mL of chloroform, shake well and then add 2 mL of concentrated H_2SO_4 along the side of the test tube. The development of reddish brown colour at the interface indicates the presence of sterol.

2.3.5 Test for sugars

Molisch's Test

Molisch's reagent (Dissolve 1 g of α- naphthol in 10 mL of methanol or isopropyl alcohol). Test solution (1 to 2 mL) was mixed in a test tube containing 0.5 mL of water, and added with two drops of Molisch's reagent followed by 1 mL of concentrated sulphuric acid from the side of the inclined test tube. Appearance of red brown/violet ring at the interface of acid and aqueous solution indicates the presence of sugars.

2.3.6 Test for tannins

Ferric Chloride Test

Prepare 5 % solution of ferric chloride in 90 % methanol. Test solution (1 to 2 mL) was added with few drops of ferric chloride solution and development of dark green or deep blue colour indicates the presence of tannins.

2.4. α-Amylase Inhibition Assay

Initially Porcine Pancreatic Amylase was used for preliminary screening of α-amylase inhibitors from the extracts obtained. Chromogenic DNSA method was employed to study the inhibition property [25]. The total assay mixture composed of 500 µL of 0.02 M sodium phosphate buffer (pH 6.9 containing 6 mM sodium chloride), 0.04 units of PPA solution, and plant extracts at concentration in the range of 0.1–1.5 mg mL−1 (w/v), incubated at 37°C for 10 min. After pre-incubation, 500 µL of 1% (v/v) starch solution in the above buffer was added to each tube and incubated at 37°C for 15 min. The reaction was terminated with 1.0 mL DNSA reagent, placed in boiling water bath for 5 min, cooled to room temperature, diluted, and the absorbance was measured at 540 nm. The control reaction representing 100% enzyme activity did not contain any plant extract. To eliminate the absorbance produced by plant extract, appropriate extract controls were included. One unit of enzyme activity is defined as the amount of enzyme required to release one micromole of maltose from starch per min under the assay conditions. For the determination of the inhibitor concentration at which 50% inhibition of enzyme activity occurs (IC_{50}), the assay was performed as above except that the inhibitor/plant extract concentrations varied from 0.1–150 µg.

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]

Acarbose was used as a positive control in a concentration range of 6.5µg–32.6 µg. The IC_{50} values were determined from plots of percent inhibition versus log inhibitor concentration and calculated by logarithmic regression analysis from the mean inhibitory values. The IC_{50} values were defined as the concentration of the extracts, containing the α-amylase inhibitor that inhibited 50% of the PPA.

% Relative enzyme activity = (enzyme activity of test/enzyme activity of control) *100

% inhibition in the α-amylase activity = (100 −% relative enzyme activity).

3.   RESULTS & DISCUSSION

Qualitative analysis of different phytochemical compounds of the two plant extracts obtained from Shivamogga region in Karnataka (Table-1)**.** Extract of *Gymnema sylvestre* and *Syzygium cumini seeds* has shown the presence of various phytochemical ingredients like flavonoids, alkaloids, tannins and glycosides which might be responsible for *in vitro* anti-diabetic effects. Early reports suggest that plants containing natural antioxidants like tannins, flavonoids Vitamin C and Vitamin E can inhibit the lipid peroxidation and generation of diabetes-induced reactive oxygen species (ROS), and prevent the further destruction of β-cells of pancreas [13]. Of the different extracts of two medicinal plants obtained from Shivamogga region in Karnataka, the methanolic extract of *Gymnema sylvestre* have shown good inhibitory activity against PPA (α-amylase), when sequentially extracted with polar to non- polar solvents. Commonly its always the cold-and hot-water extracts used in the traditional method of preparing medicines in Ayurveda, and there is high possibility of missing out on bioactive principles with better amylase inhibitory potential from less polar solvents. Per cent inhibitions of α-amylase enzymatic activity is shown respectively (Table-2). An α-amylase is responsible for the conversion of starch into mono and disaccharides which ultimately increases the blood sugar level. PPA was used as a target enzyme for screening the inhibitory activity from the above mentioned plant extracts. The aqueous and methanolic extracts of *Gymnema sylvestre* leaf 100 µg/mL have shown good per cent inhibition of PPA than the extracts of *Syzygium cumini seeds.* The control reaction representing 100% enzyme activity was 0.20 µ/mL for PPA. The dried extract samples dissolved in DMSO with a final yield of 1.5 mg mL−1, didn't affect the enzyme activity of PPA at that concentration used. The appropriately diluted plant extract was used for enzyme inhibition assay and the activity obtained with each extract was normalized to percent relative activity (Figure-1) from which the percent inhibition was calculated. The most significant inhibitory activity was obtained with the aqueous and methanolic extracts of, *Gymnema sylvestre* than *Syzygium cumini* seeds. The known PPA inhibitor, acarbose, taken as a positive control exhibited an IC_{50} value of 79.86 µgml (Table-
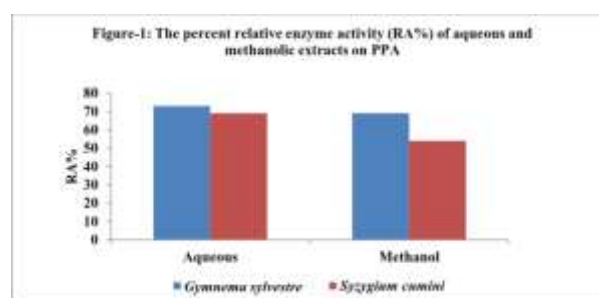
2). Gymnema sylvestre contains gymnemic acid, a triterpenoid saponin joined with sugar moiety which is also a potent anti-diabetic agent [23]. Whereas *Syzygium cumini* leaves, bark and seeds are used traditionally as anti-diabetic in the Indian traditional medicine as it contains bioactive compounds like alkaloids, amino acids, flavonoids, glycosides, saponins, steroids, tannins triterpenoids and mycaminose which may be responsible for the inhibitory activities [2, 7]. Higher enzyme inhibitory action of *Gymnema sylvestre* might be due to the presence of flavonoids, alkaloids, glycosides, saponins and tannins which are known for their antioxidant and anti-diabetic activities [21]. *Syzygium cumini* seed extracts have shown quite lower activity against PPA.

Table-1. Phyto-chemical screening of the plant extracts

PLANT SPECIES	FAMILY	PART USED	EXTRACT	Alkaloids	Sugars	Saponins	Glycosides	Flavonoids	Tannins
Gymnema sylvestre	*Asclepiadaceae*	Leaves	Cold water	-	-	-	-	-	-
			Hot water	-	-	+	-	-	-
			Methanol	+	+	-	+	+	+
			Isopropanol	-	-	-	+	-	-
			Chloroform	-	+	-	+	-	-
			Acetone	-	+	+	-	-	-
			Methyl-butyl tertiary ether	-	-	+	-	-	+
Syzygium cumini	*Myrtaceae*	Seeds	Cold water	+	-	-	+	-	-
			Hot water	-	+	+	+	-	+
			Methanol	+	-	+	+	-	+
			Isopropanol	-	-	-	-	+	+
			Chloroform	+	-	+	-	+	-
			Acetone	-	-	-	-	-	-
			Methyl-butyl tertiary ether	-	-	+	-	-	-

Table-2: IC_{50} OF ACARBOSE

Standard drug	Concentrations (µg/ml)	% inhibition	Ic_{50} value
ACARBOSE	100	57.48	79.86
	80	46.86	
	60	37.93	
	40	26.64	
	20	20.41	
	10	17.10	

Figure–1: The percent relative enzyme activity (RA%) of aqueous and methanolic extracts on PPA

4.   CONCLUSION:

Most of the Indian population from the rural side utilize these plants for food purposes as well to treat diabetes. The leaf extracts of *Gymnema sylvestre* and *Syzygium cumini* contain active phytochemicals viz. flavonoids, alkaloids, glycosides, saponins and tannins. Our results indicate that retardation of starch hydrolysis by inhibition of PPA activity of these plant extracts leads to a reduction in glucose concentrations, significantly exhibiting *in vitro* anti-diabetic activity. *Gymnema sylvestre* exhibited

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]

significant inhibition of PPA than *Syzygium cumini*, suggesting that they contain compounds capable of PPA inhibition. Preliminary phytochemical analysis of the leaf extracts suggests the occurrence of proteins/peptides and polyphenols in cold and hot water extracts while the tannins, alkaloids, flavonoids, and saponins are found in non-polar extracts. Flavonoids and polyphenolics may be responsible for hypoglycemic activity. In conclusion, these natural plant metabolites might have therapeutic potential for the control of postprandial blood glucose levels and development of novel and effective anti-diabetic drugs in future.

5. ACKNOWLEDGEMENT:

6. REFERENCES:

1. K. G. Alberti, P. Zimmet and J. Shaw (2007), "International Diabetes Federation: a consensus on Type 2 diabetes prevention". Diabet Med., Vol. 24, No. 5, pp.451–463.

2. Anonymous (1985), "The Wealth of India", New Delhi: CSIR, I A, pp. 92.

3. S.M. Aruna, D.B. Yadav and A.K. Chandrashekar (2013), "Antioxidant and in vivo anti-hyperglycemic activity of Muntingiacalabura leaves extracts". Der. Pharmacia. Letter., Vol. 5, No. 3, pp. 427-435.

4. M.R. Bhandari, N. Jong-Anurakkun, G. Hong and J. Kawabata (2008), "Alpha-glucosidase and alpha-amylase inhibitory activities of Nepalese medicinal herb Pakhanbhed". Food Chemistry, Vol. 106, pp. 247-252.

5. S. Bjork, A. Kapur, H. King, J. Nair and A. Ramachandran (2003), "Global policy: aspects of diabetes in India.Health Policy", Vol. 66, No. 1, pp. 61–72.

6. M. Chandalia, P. Lin and T. Seenivasan (2007), "Insulin resistance and body fat distribution in South Asian men compared to Caucasian men". PLoS ONE; Vol. 2, No. 8, pp. 812.

7. A.K.N. Chaudhuei, S. Pal, A. Gomes, and S. Bhattacharya (1990), "Anti-inflammatory and related actions of Syzygium cumini seed extract", Phytotherphy Research., Vol. 4, pp. 5–10.

8. A.N. Dixon, N.T. Raymond and S. Mughal (2006), "Prevalence of micro-albuminuria and hypertension in South Asians and white Europeans with type 2 diabetes: a report from the United Kingdom Asian Diabetes Study (UKADS)". Diab Vasc Dis Res., Vol. 3, No. 1, pp. 22–25.

9. A. Duraiswamy, D. Shanmugasundaram, C.S. Sasikumar, S.M. Cherian and K.M. Cherian (2016), "Development of an antidiabetic formulation (ADJ6) and its inhibitory activity against α-amylase and α-glucosidase". Journal of Traditional and Complementary Medicine., Vol. 6, No. 3, pp. 204-208.

10. A.J. Harborne (1998), "Phytochemical methods-A guide to modern techniques of plant analysis". Springer science & Business Media, 3rd ed., Chapman and Hall, London, U.K.

11. V. Khan, A.K. Najmi, M. Akhtar, M. Aqil, M. Mujeeb and K.K. Pilla (2012), "A pharmacological appraisal of medicinal plants with antidiabetic potential". Journal of Pharmacy and Bio allied Sciences, Vol. 4, pp.27-42.

12. Y.I. Kwon, E. Apostolidis and K. Shetty (2008), "In vitro studies of eggplant (Solanum melongena) phenolics as inhibitors of key enzymes relevant for type 2 diabetes and hypertension". Bio-resource Technology, Vol. 99, pp. 2981-2988.

13. X. Liu, J.K. Kim, Y. Li, J. Li, F. Liu and X. Chen (2005), "Tannic acid stimulates glucose transport and inhibits adipocyte differentiation in 3T3-L1 cells". The Journal of Nutrition, Vol. 135, pp. 165-71.

14. S. Lordan, J. Thomas, S. Anna, S. Catherine and R. Ross (2013), "The α-amylase and α-glucosidase inhibitory effects of Irish seaweed Extracts". Food Chemistry, Vol. 141, pp. 2170-2176.

15. R.J. Marles and N.R. Farnsworth (1994), "Plants as sources of antidiabetic agents". In: Wagner H, Farms worth NR, eds. Economic and Medicinal Plant Research, Academic Press Ltd, London, pp. 149-187.

16. H.M. Mather, N. Chaturvedi and A.M. Kehely (1998), "Comparison of prevalence and risk factors for micro-albuminuria in South Asians and Europeans with type 2 diabetes mellitus". Diabet. Med., Vol. 15, No. 8, pp. 672–677.

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]

17. V. Mohan, M. Deepa and R. Deepa (2006), "Secular trends in the prevalence of diabetes and impaired glucose tolerance in urban South India--the Chennai Urban Rural Epidemiology Study (CURES-17)". Diabetologia., Vol. 49, No.6, pp. 1175–1178.

18. B. Mukhopadhyay, N.G. Forouhi, B.M. Fisher, C.M. Kesson and N. Sattar (2006), "A comparison of glycaemic and metabolic control over time among South Asian and European patients with Type 2 diabetes: results from follow-up in a routine diabetes clinic". Diabetic Medicine., Vol. 23, No. 1, pp. 94–98.

19. A. Raji, E.W. Seely, R.A. Arky and D.C. Simonson (2001), "Body fat distribution and insulin resistance in healthy Asian Indians and Caucasians". J Clin Endocrinol Metab. Nov., Vol. 86, No. 11, pp. 5366–5371.

20. A. Ramachandran, C. Snehalatha and A. Kapur (2001), "High prevalence of diabetes and impaired glucose tolerance in India: National Urban Diabetes Survey". Diabetologia., Vol. 44, No. 9, pp. 1094–1101.

21. R.A. Sabitha, V. Nagamani, S. Patnaik, and B. Saidulu (2012), "Gymnema sylvestre R. Br: An important antidiabetic plant of India: A Review", Plant Sciences Feed., Vol. 2, No. 12, pp. 174-179.

22. P. Tiwari, B.N. Mishra and N.S. Sangwan (2014), "Phytochemical and Pharmacological Properties of Gymnema sylvestre: An Important Medicinal Plant". Bio Med Research International, pp. 1-18.

23. H. Wang, Y.J. Du and H.C. Song (2010), "Alpha-glucosidase and alpha-amylase inhibitory activities of guava leaves". FoodChemistry., Vol. 123, pp. 6-13.

24. S. Yusuf, S. Hawken, and S. Ounpuu (2004), "Effect of potentially modifiable risk factors associated with myocardial infarction in 52 countries (the INTERHEART study): case-control study", Lancet., Vol. 364, No. 9438, pp. 937–952.

Corresponding Author

Ramanna Krishna Murthy*

Department of Botany and Seed Technology, Sahyadri Science College, Kuvempu University, Shivamogga

rkmurthy07@gmail.com

Ramanna Krishna Murthy[1]* Parmeshwara Naik T.[2]