

DECCAN PHARMA JOURNAL SERIES

ARMS Online Publications

www.deccanpharmajournals.com

(Research Article)

Received; accepted

**PHARMACOGNOSTIC STANDARDIZATION AND TLC FINGERPRINTING OF A NOVEL
POLYHERBAL ANTIDIABETIC FORMULATION**

Vidhi Bhatia*, Preeja G Pillai, Harsha Kathpalia, Keyur Shastri

Department of Pharmacognosy, VES College of Pharmacy, Chembur, Mumbai-400 074, India

ABSTRACT

India is a rich heritage of medicinal plants and is being used for the treatment of various diseases since centuries ago but there is a lack of scientific standardization to prove the folkloric claims. In recent years there has been an emphasis on standardization of medicinal plants of therapeutic potential. Identification and evaluation of plant drugs by Pharmacognostical study is still more reliable, accurate and inexpensive. The present investigation was evaluation of a poly herbal formulation consisting of eight medicinal plant extracts viz. *Momordica charantia*, *Gymnema sylvestre*, *Azadirachta indica*, *Syzgium cumini*, *Ocimum sanctum*, *Picrorrhiza kurroa*, *Zingiber officinale*, *Pure Commiphora mukul*. Each extract of polyherbal formulation were showed potent anti-diabetic activity. These were also potent Immunomodulator, antihyperlipidemic, hepatoprotective, Antistress, Expectorant, Anti-inflammatory. Plant material was analysed for various pharmacognostic parameters as per WHO guidelines procedure. Plant materials of formulation were subjected to Physicochemical and thin layer chromatographic study. Formulation was also scanned by UV spectrophotometer over entire UV range of 190 to 450 nm for the characterization¹. Thin layer chromatography of formulation was also developed. Herbal medicines have received greater attention as an alternative to clinical therapy and the demand for these remedies has currently increased. As per traditional Indian system of medicines, the combination of herbal drugs is more preferable because it rejuvenates body systems which help to enhance the desired pharmacological activities and considered to be less toxic and free from undesirable side effects than synthetic drugs.

For Correspondence:

Vidhi Bhatia

Department of
Pharmacognosy, VES
College of Pharmacy,
Chembur, Mumbai-400
074, India

E-mail:

mulchandani_rupa@yahoo.co.in

INTRODUCTION

Diabetes mellitus is a major lifestyle disease with varied etiology and is associated with a variety of irreversible complications. The oral synthetic hypoglycemic agents have been found to have limitations in therapeutic use, primarily because of their side effects.

A study of ancient ayurvedic literature indicates that Prameha means Diabetes was fairly well conceived as a disease entity about 2500 years ago by the vedic physicians. Many indigenous drugs have been in popular use for the treatment of Diabetes since ancient times.

In Ayurveda Diabetes is considered to be one of group of twenty conditions called 'Prameha' in which quality of urine is altered and frequency of micturation increases. 'Sushruta' distinguished two kinds of Madhumehas. "Sushruta" states that the patient of the incurable type of Diabetes has a thin, rough body eats little but is very thirsty and is restless and the patients of other type suffer from the 'disease of affluence' which arise in patients who have 'Too much' food, too much leisure, too much comfort etc, oversleeping especially during day, lack of exercise, overeating especially of oily, sweets & fatty (fried) food which increase 'Kapha' are said to cause the disease.

Materials

Vernacular name	Botanical name	Parts used
Kutki	<i>Picrorrhiza kurroa</i> ^{4,5}	Roots
Neem	<i>Azadirachta indica</i> ^{4,6}	Leaves
Karela	<i>Momordica charantia</i> ⁷⁻¹⁴	Fruit
Jamun	<i>Syzigium cumini</i> ¹⁵⁻²¹	Seeds
Sounth	<i>Zingiber officinale</i> ²²	Rhizome
Gurmar	<i>Gymnema sylvestre</i> ²³⁻²⁸	Leaves
Tulsi	<i>Ocimum sanctum</i> ²⁹⁻³⁴	Leaves
ShudhGuggul	Pure <i>Commiphora mukul</i> ³⁵⁻⁴⁰	Resin

The premonitory symptoms of 'madhumeha' are describes as tartar on the teeth, burning sensation on the palms and the soles of the feet , stickiness of the skin , thirst and a persistant sweet taste in the mouth . The characteristic symptoms also include increased frequency of urine especially during night; delayed healing of wounds and sweetness of urine¹.

The World Health Organization (WHO) released the guidelines to formulate traditional medicine and also provided guidelines for evaluation, safety, and efficacy for public health care³. In order to assess the quality control of herbal medicines, standardization of herbal formulations is required which can be achieved using modern sophisticated analytical techniques. As per traditional Indian system of medicines, the combination of herbal drugs is more preferable which enhances the desired pharmacological activities and considered to be less toxic and free from undesirable side effects other than synthetic ones².

MATERIALS AND METHODS

The crude drugs were procured from local market and authenticated by renowned botanist.

Thin Layer Chromatography

The preliminary goal of every analytical investigation is to obtain qualitative information about the sample being tested.

Selection of Stationary phase

Separation for pharmaceuticals and drugs can be performed using modified, on-modified and impregnated stationary phases due to a difference in chemical properties between the sorbent material and the compounds of the sample to be separated. For TLC the most frequently used stationary phase is silica Gel¹.

Stationary Phase- Precoated silica gel GF plates, Porous surface active silica gels are by far most commonly used sorbents in thin layer chromatography. The skeleton of silica gel is formed from SiO₄, 4 –tetrahedrons and displays as amorphous structure. The SiO₄ 4-tetrahydrons at the surface of the sorbent are saturated by silanol groups (SiOH) or siloxane bridges (Si-S-Si) in adsorption chromatography. The surface silanol groups represent the active centre at which the interaction takes place that are required for the retention of compounds to be separated. These interactions are mainly hydrogen bonding, dipole- dipole interactions and electrostatic interactions. As the retention of sample substances in adsorption chromatography is determined largely by the number of accessible silanol groups, the strength of the retention is proportional to the specific surface area of the silica gel used³.

Selection of the solvent system

The choice of a mobile phase used in Thin Layer Chromatography is made based on the nature of the solutes to be separated. Either a single solvent or a mixture of solvents can be used depending on the polarity and solubility. Selection of the mobile phase is

usually proceeded by consultation of literature sources to find those that were previously used for the separation of the target compounds or similar types of compounds. This followed by a trial and error approach to modify the mobile phase for the particular layer and other local conditions used if necessary. A great variety of factors can be adjusted to achieve the necessary separation³.

All chemicals and reagents used were Analytical grade.

Optimization of the mobile phase

Optimization is based on the analyst's experience and on modification of published data.

However, as the sample composition becomes more complex systematic solvent optimization becomes more important. Poor grade of solvent used in preparing mobile phase have been found to decrease resolution, spot differentiation and reproducibility.

Selection of Development mode

Development of a TLC plate is most often carried out in the ascending direction by immersing the lower edge of the plate in the mobile phase in a rectangular glass chamber. In ascending development, the motion of the mobile phase is in upward direction. The plate is introduced in a closed chamber containing mobile phase in such a way that the spot of the sample is above the level of the mobile phase in the chamber. In ascending development, the mobile phase is moving slowly, since its flow is against the force of gravity. Hence this type of a technique is used when there is a little difference in the R_f values of solutes getting separated on the plate.

Plate Development: A drop of sample solutions to be analyzed is introduced, with the help of a capillary or a micro syringe, at some point on the planar surface of the stationary phase on a glass plate or on an aluminium foil. Solvent is evaporated from the spots & the plate is placed in the chamber containing a mobile phase (The developer).

The chamber is kept tightly closed so that it becomes saturated with the vapour of the mobile

phase. If the chamber is not saturated, the mobile phase rising through the plate evaporates & then it is not available to the solutes on the plate for the separation purpose. Thus, the proper separation of compounds is not achieved if the chamber is not saturated with the vapour of the mobile phase³.

Mechanisms for the separation of Phytoconstituents

When a substance is applied in dissolved form to the thin layer plate during the separation process, it is transported along by the mobile phase, resides for a certain time on the stationary phase and is then carried

along again. In this way the substance is slowed down relative to the velocity of the mobile phase, the more it preferentially resides on the stationary phase the greater the slowing effect will be. Thus substances are also separated which resemble each other in their affinity for the two phase even small differences lead to differences in the chromatographic run. It depends on two basic underlying principles of the differences in affinity: adsorption and partition equilibria. The events can be described physico chemically in the following terms. During adsorption, substances dissolved in the mobile phase are adsorbed on the surface of the sorbent such as silica gel, partitioning results from differences in the solubility in two immiscible phases³.

Detection (Visualization) of spots

After development, the TLC plate is dried in an open air to evaporate the mobile phase. Compounds are detected on thin layers by their natural color, natural fluorescence under UV light, quenching of Fluorescence or coloured UV absorbing or Fluorescent zones after reaction with an appropriate reagent.

TLC of Crude drugs of a Polyherbal Formulation (Capsule)

The methodology of TLC development of crude drugs were shown in Table 1

Table 1 TLC of Crude drug of Polyherbal formulation (Methodology)

Plant extract	Sample preparation	Stationary Phase	Mobile Phase	Length of Run
KARELA	Reflux 2 g of powdered drug with 20 ml of ethanol (95%) for 1 hr.	Silica gel GF 254	Toluene : Ethyl Acetate : Glacial acetic acid 90 : 10 : 0.1	115mm

GURMAR	Reflux 2 g of powdered drug with 20 ml of ethanol (95 %) on a hot water bath for	Silica gel GF 254	Toluene : Ethyl acetate : Glacial Acetic Acid 90 : 10 : 0.1	115mm
NEEM	2 g of coarsely powdered sample add 20 ml of chloroform and reflux on a hot water bath for 20 minutes.	Silica gel GF 254	Chloroform : Methanol 97 : 3	120mm
JAMUN	2 g of powdered drug is refluxed with 20 ml of ethanol (95%) for half an hour and	Silica gel GF 254	Toluene : Ethyl acetate : Glacial acetic acid 90 : 10 : 0.1	115mm
TULSI	Dissolve 0.1 ml of volatile oil distilled from drug in 5 ml of Acetone.	Silica gel 60	Toluene : Ethyl Acetate 99 : 1	8mm
KUTKI	Macerate 1 g of powdered drug with 10 ml ethanol with occasional shaking for 30 minute.	Silica gel GF 254	Ethyl Acetate : Methanol : Glacial Acetic Acid 18 : 5 : 0.2	120mm
SOUNTH	Reflux 1 g of powdered drug with 10 ml dichloromethane. Filter and evaporate the filtrate in 2 ml of dichloromethane.	Silica gel 60	n-Hexane : Diethylether 4 : 6	100mm
GUGGUL	2 g of sample + 20 ml ethanol Reflux on water bath for 30 minutes ;	Silica gel G	Petroleum ether : Ethyl Acetate 3 : 1	120mm

UV Scan Test of Crude drugs

Sample treatment

Weighed required quantity of powdered crude drug adds 95% ethanol, Shake on a mechanical shaker for 4 hours. Allow to stand for half an hour. Then filter rapidly through a filter and collect the filtrate in a 100 ml volumetric flask. Wash the residue with a little amount of alcohol and add washings to filtrate. Make up the volume to mark with ethanol (95%). Dilute this solution with same solvent to obtain a concentration of about 10 – 20 mg per 100 ml. Scan the solution on a UV visible spectrophotometer against ethanol as a blank over a wavelength range of 190 nm to 450 nm.

Formulation

Kutki (*Picrorrhiza kurroa*)^{4,5}
 Extract- 35 mg
 Neem (*Azadirachta indica*)^{4,6}
 Extract- 50 mg
 Karela (*Momordica charantia*)⁷⁻¹⁴
 Extract- 100 mg
 Jamun (*Syzigium cumini*)¹⁵⁻²¹
 Extract- 50 mg
 Sounth (*Zingiber officinale*)²²
 Extract- 30 mg
 Gurmar (*Gymnema sylvestre*)²³⁻²⁸
 Extract- 50 mg
 Tulsi (*Ocimum sanctum*)²⁹⁻³⁴
 Extract- 50 mg
 Shudh Guggul (Pure *Commiphora mukul*)³⁵⁻⁴⁰
 Extract- 35 mg

TLC of Polyherbal capsule

Stationary Phase - Silica Gel GF 254

Mobile Phase- Toluene: Chloroform : Ethyl acetate : GAA (50 : 40 : 10 : 0.1)

Sample Preparation - 2 g of capsule content is refluxed with 10 ml of ethanol (95%) for 20 minutes on a hot water bath. Cool and filter the solution. Spot 20 µl of the filtrate.

Run - 85 mm

UV Scanning of Polyherbal capsule

Transfer about 2.5 g of capsule content to a stoppered conical flask, accurately weighed. Add 75 ml of ethanol (95%) to it. Shake on a mechanical shaker for 4 hours. Allow to stand for half an hour. Then filter rapidly through a filter and collect the filtrate in a 100 ml volumetric flask. Wash the residue with a little amount of alcohol and add washings to filtrate. Make up the volume to mark with ethanol (95%). Dilute this solution with same solvent to obtain a concentration of extract of 0.02g/100ml and 2.5g/100ml of capsule content per 100 ml of ethanol (95%). Scan both the solutions on a UV visible spectrophotometer against ethanol as a blank over a wavelength range of 190 nm to 700 nm

RESULTS

- 1) Macroscopy and UV Scan test of crude drugs

KARELA :-Appearance - The fruit is usually pointed, ribbed; bearing numerous triangular tubercles; giving it the appearance of crocodile's back
 Colour- Green, Taste- Bitter, Odour - Characteristic.

GURMAR - Appearance: 2.25 to 5 cm long and 1.2 to 3 cm broad, usually elliptic-ovate to ovate-lanceolate to obovate leaves.

Colour- Upper surface -dark green, under surface -pale green

Taste - Slightly bitter and astringent, Odour- Characteristic aromatic

NEEM : Appearance : - The leaves are compound, impariopinnate, and the leaflets are 5 – 8 cm long, serrated, lanceolate, acuminate, glabrous,

Colour : - Dark green above and pale beneath, Taste - Bitter, Odour- Characteristic

JAMUN : Appearance : - Rough surfaced , ovoid seeds along with endocarp of fruit; posses two points of attachment

Colour - Brownish black, Taste- Slightly bitter and astringent, Odour- Slight and aromatic.

TULSI : Appearance - Small leaves,

Colour – Green, Taste - Sharp bitter, Odour - Aromatic

KUTKI : Appearance : Aerial stem is very dark brown and wrinkled longitudinally. Upper and lower surface bears a few small root scars, numerous scaly leaves and thin scars.

Colour : Dark brown, Taste : Very bitter. Odour : Slightly unpleasant.

SOUNTH : The rhizomes of Zingiberofficinale branches irregularly. The pieces are 7–15 cm long, 1 –1.5 cm broad and laterally compressed. The branches, known as fingers, arise obliquely from the rhizome; about 1 – 3 cm in length and terminate in depressed scars or in undeveloped buds.

Colour : Buff, Taste : Pungent, Odour : Agreeable and aromatic

GUGGUL: Appearance : The resin occurs as vermicular or stalactite pieces.

Colour : Pale yellow, brown or dull-green, Taste : Bitter, Odour : Balsamic

Results of UV scan test were shown in Table 2.

Table 2 Results of UV Scan Test of crude drugs

Crude Drug	Concentration	Result (Characteristic peak at)
KARELA.	18.75 mg/100ml	271, 283 nm
GURMAR	200 mg/100ml	270, 326, 413 nm
NEEM	9.35 mg/100ml	221 nm
JAMUN	9.35 mg/100ml	221 nm
TULSI	9.35 mg/100 ml	203 nm
KUTKI	4.35 mg/100 ml	221 nm
SOUNTH	3.75 mg/100 ml	202 nm
GUGGUL	8.75 mg/100 ml	219, 327nm.

2) UV Scanning of Polyherbal capsule

A solution containing extract of 2.5 g of the capsule content per 100 ml of ethanol (95%) shows characteristic peaks at about 665 nm, 607 nm, 536 nm. A solution containing extract of 0.02 g of the capsule content per 100 ml of ethanol (95%) shows characteristic peaks at 272 nm

3) TLC of Crude Drugs

Developed spots were visualized under UV 254 nm and derivatization with suitable spray reagent. The results were given in table 3.

Name of the Crude drug	Visualization	Derivatization with suitable spray reagent
KARELA	UV 254 Spot 1 - Violet colour, Rf - 0.95	Vanillin sulphuric acid reagent Spot 1 - Blue Colour R _f - 0.20 Spot 2 - Blue Colour R _f - 0.62
GURMAR	Day Light Spot 1 - Yellow Colour ; Rf - about 0.95 Spot 2 - Blue Colour ; Rf - about 0.62 Spot 3 - Yellow Colour ; Rf - about 0.52 Spot 4 - Greenish blue ; Rf - about 0.39	Vanillin sulphuric acid reagent Spot 1 - Violet Colour; Rf - about 0.95 Spot 2 - Violet Colour; Rf - about 0.43 Spot 3 - Blue Colour ; Rf - about 0.29
NEEM :	-	Sulphuric acid (2%) and heat at 105 ⁰ C for 10 minutes Two brownish yellow spots with Rf values about 0.54 and 0.84 are observed.
JAMUN	-	Vanillin sulfuric acid reagent. Evaluation - Spot 1 - Violet Pink ; Rf about 0.16 Spot 2 - Violet Pink ; Rf about 0.29 Spot 3 - Pink ; Rf about 0.7 Spot 4 - Blue ; Rf about 0.96
TULSI	-	Vanillin Sulphuric Acid Reagent. Spot 1 - Reddish brown spot - Rf - 0.37 (Eugenol) Spot 2 - Dark Violet spot - Rf - 0.94 (βCaryophylline) Spot 3 - Two Pink spots - Rf - 0.68, 0.45 Spot 4 - Violet Spot - Rf - 0.31 Spot 5 - Light Blue Spot - Rf - 0.16
KUTKI	UV light (254 nm) Strong fluorescent quenching is visible in both reference and test solution at Rf - 0.61 and 0.46	-

	corresponding to Picroside I and Kutkoside respectively.	
SOUNTH	-	<p>With Barton reagent - Pungent principles appear as prominent blue zones just above the application site and at Rf- 0.2 (Major spot) due to gingerols and / or Shogaols.</p> <p>With Vanillin Sulphuric Acid Reagent Prominent blue violet zones at Rf- 0.59 and a major spot near solvent front (Rf - 0.95) due to terpenes</p>
GUGGUL	-	<p>Dilute Sulfuric acid</p> <p>Total 7 spots are observed</p> <p>Violet spot ; Rf- 0.091, Violet spot ; Rf- 0.34, Yellow spot ; Rf- 0.46, Violet Spot ; Rf - 0.56, Yellow spot ; Rf - 0.64, Violet spot ; Rf - 0.725, Pink spot ; Rf - 0.86</p>
TLC of Polyherbal capsule	under UV 254 - 5 Violet Spots are observed with Rf values of about 0.89, 0.5, 0.4, 0.34 and 0.28	<p>With Anisaldehyde sulfuric acid reagent 8 spots are observed . A dark green colour spot with Rf of about 0.9, 5 grey colour spots with Rf values about 0.65, 0.57, 0.47, 0.34 and 0.12. Two blue spots are observed with Rf values of about 0.3 and 0.21</p>

Discussion

TLC is one of the important techniques for the separation of complex mixtures. TLC of Crude drugs of poly herbal formulation were developed using different composition of solvent system and the best resolution and intensity of coloured spots were observed in the above selected solvent systems. UV scanning of crude drugs and poly herbal formulation showed maximum absorbance and characteristic peaks between 202-413 nm. The present study serves the source of literature for isolation and quantitative analysis of herbal drugs to ascertain the purity and potency in formulations.

Conclusion

Thin layer chromatography is one of the relevant separation technique based on the polarity, solubility and acidity/ basicity of phytoconstituents. The present pharmacognostical study and finger printing of poly herbal formulation yielded a set of qualitative standards that can serve as an important source of information to ascertain the quality and purity of the different plant material composed in this polyherbal formulation.

REFERENCES

- 1) Charak Samhita
- 2) Quality control methods for medicinal plant materials. World Health Organization, Geneva, 2002 p -1-50.
- 3) PK Mukherjee: Quality Control of Herbal Drugs: An Approach to Evaluation of Botanicals. Business Horizons, 2002 p – 426-429.
- 4) R.D Chaudhri, Herbal Drug Industry, A Practical approach to Pharmacognosy. Harborne JB. Phytochemical methods. Edn 2, Chapman & Hall Ltd., London, 1973.p – 26-27,68, 75-76, 78,79
- 5) Indian Journal of Medical Research April 1988, p 401-404
- 6) Indian journal of Pharmacy 1978,10,247
- 7) Glossary p. 168 and supplement p 71.
- 8) Journal Diabetic association of India 1986, p 17-19.
- 9) Philippines journal of science, 1985 p135-150.
- 10) Indian journal of natural products 1990,6(1), 16-19
- 11) Journal National Research Council, Thailand 1987, 19(1), 1-11
- 12) Indian journal of experimental biology 1987, 25, 570-572.
- 13) Journal Ethnopharmacology 1990, 30(2) 199-204.
- 14) Fitoterapia 1991, 62(4), 337-346
- 15) IPC p 127
- 16) Glossary p 238, Supplement p 95
- 17) Nadkarni p 517
- 18) Asian Medical Journal 1983;26(7):489-491
- 19) Journal Scientific Research, Plant Medicine ; 1986;6(1-4), p 21-25
- 20) International Journal of Pharmacognosy 1991; 29;81;88
- 21) Fitoterapia 4/91; 321-323
- 22) Satyavati Pharmacology Review 1983; p 128
- 23) Journal Ethnopharmacology, 1989;27(3) 243-275
- 24) Fitoterapia 3/90, 240-247.
- 25) Journal Research Educ. Indian Medicine 1990, p 103-108
- 26) Ethnopharmacology 7(1963) p205-234 Gym
- 27) Indian Journal Crude Drug Research 24(1986) ;304;171-176 Gym

- 28) Journal Ethnopharmacology 1990;
30(3) 295-315 Gym
- 29) Journal Ethnopharmacology 1988, p
193-198
- 30) All India institute of Medical Sciences,
New Delhi, 1989.
- 31) Indian drugs 35(5); p 172-176
- 32) Indian journal Pharmacology, 1989; p
71-72
- 33) Journal Scientific Research in Plant
Medicine, 1987; p 7-9
- 34) Glossary of Indian Medicinal Plants,
CSIR 1956, p 179
- 35) JRAS September, 1980; p 335-344
- 36) MAPIS-October; 1985; 2811
- 37) MAPIS – April 1986, p 179
- 38) MAPIS – June , 1986; No : 1367
- 39) Rajasthan Medical journal ; 1985 24(3),
p 90-92
- 40) Indian Journal of Pharmaceutical
sciences , 1989, 51(8), 251-253