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## EXPLORING THE POTENTIAL EFFECTS OF *AMARANTHUS TRICOLOR* LEAVES IN DYSLIPIDEMIA AND DYSLIPIDEMIA INDUCED COMPLICATIONS IN RATS

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### Keywords:

*Amaranthus tricolor*,  
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**ABSTRACT:** The present research work was considered to achieve preliminary phytochemical screening, acute oral toxicity, antioxidant activity, and to evaluate the antihyperlipidemic property of the aqueous and ethanolic extracts of leaves of *Amaranthus tricolor*. Antioxidant activities of the aqueous and ethanolic extracts of leaves of *Amaranthus tricolor* were investigated by Free Radical Scavenging Activity (DPPH method) and antihyperlipidemic activity by *in-vivo* effects on an atherogenic diet (2% cholesterol, 1% choline chloride and 2% Lard) induced rats hyperlipidemia. Our results exposed that *Amaranthus tricolor* showed potent antioxidant properties. In the cholesterol-induced hyperlipidemic model, groups of rats treated with extracts *A. tricolor* showed a significant reduction in total cholesterol (TC), triglycerides (TG) and in levels of SGOT, SGPT, ALP, LDH, and CKMB activities whereas increase in the level of high-density lipoprotein (HDL) compared to cholesterol-induced hyperlipidemic control group at dose-dependent manner but the effect was less than the standard drug Atorvastatin. It was observed from the histopathological findings that rats fed with *A. tricolor* extracts showed a decrease in granular degeneration caused by cholesterol feedings.

**INTRODUCTION:** Coronary artery disease (CAD) is one of the most important causes of death all over the world. Hyperlipidemia is one of the risk factors for CAD<sup>1</sup>. According to WHO, blood cholesterol contributes to about 56% of cases of cardiovascular diseases worldwide and causes about 4.4 million deaths every year. Of which the highest incidence being seen in Indian (5.6%) population followed by Chinese (4.7%) & Malaysians (3.6%).

The National surveillance survey conducted reported that: Males (5%) have a higher prevalence of high blood cholesterol compared with females (4.3%) as reported by the WHO the annual number of deaths due to cardiovascular disease will rise from 17 million in 2008 to 25 million in 2030.

The larger number of NCD (non-communicable disease) death is caused due to cardiovascular diseases<sup>2</sup> (48%). Dyslipidaemia, which can range from hypercholesterolemia to hyperlipoproteinemia, is one of the many modifiable risk factors for coronary artery disease (CAD), stroke, and peripheral vascular disease. Raised serum lipids like, particularly of cholesterol along with the generation of reactive oxygen species (ROS), play a key role in the development of CAD and atherosclerosis<sup>3,4,5</sup>.

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As none among the available agents fulfill requirements of the desired drug, there is a need to explore the possibility of introducing effective, safe, and inexpensive alternatives<sup>3, 4, 5</sup> although currently available anti-dyslipidaemic agents include statins, fibrates, nicotinic acids, and bile acid sequestrants<sup>3</sup>.

Since these drugs are not only costly but also have potential side effects, a search for alternative therapeutic agents was necessitated. Several synthetic hypocholesterolemic agents such as statins, fibrates, resins, and nicotinic acid are capable of efficiently reducing total plasma cholesterol (TC) levels, but LDL does not undergo any significant alteration. Also, synthetic hypolipidemic agents have side effects, *i.e.*, Liver failure, myopathy, rhabdomyolysis, renal insufficiency, intense cutaneous flush (accompanied by an uncomfortable feeling of warmth and pruritus nausea abdominal pain and are unable to increase HDL levels<sup>6</sup>.

Phytotherapies are now recognized as several alternative countries for the treatment of CVS diseases, hyperlipidemia and the prevention of atherosclerosis, a huge number of plants have been found to lower plasma lipid levels<sup>7, 8</sup>. Few specific examples of the plants explored their anti-hyperlipidemic activity *Morus*<sup>9</sup>, *Dioscoreophyllum cumminsii*<sup>10</sup>, *Campomanesia adamantium*<sup>11</sup>, *Cassia occidentalis*<sup>12</sup>, *Curatella americana*<sup>13</sup>, *Morus nigra*<sup>14</sup>, *Labisia pumila*<sup>15</sup>. As several plants with various metabolites have the potential for therapeutic applications<sup>6, 7</sup>. *Amaranthus tricolor* L. belongs to the family *Amaranthaceae*. Preliminary phytochemical screening of the leaf extracts revealed the existence of steroids, triterpenoids, alkaloids, carbohydrates, proteins, saponins, flavonoids, tannins, and glycosides. The leaves are very nutritious. The nutrients existing in the leaves are carbohydrates, protein, vitamin A, vitamin C, riboflavin (Vitamin B<sub>2</sub>), thiamin (Vitamin B<sub>1</sub>) niacin, and minerals like calcium and iron. The plant has been scientifically reported to possess hepatoprotective (Simran et al., 2013), anti-inflammatory activities (Gopal et al., 2013), anti-cancer effects, anti-arthritic and cytotoxic activity, antioxidant (Samsul et al., 2013) activity. *A. tricolor* L. is one of the traditional medicines used in many folk claims, and the plant has been

extensively used in Ayurveda and Siddha for treating menorrhagia, diarrhea, dysentery, hemorrhagic colitis, bowel hemorrhages, cough, and bronchitis. It is also used externally as an emollient poultice or a mouth wash to treat ulcerated conditions of the throat and mouth.

The leaves of *A. tricolor* have been used against external inflammations, as a diuretic, and as a treatment for bladder distress). High-fat diet-induced hyperlipidemia in rats as characterized by decreased levels of antioxidant enzymes, increased levels of cholesterol profile, and damages in hepatic tissues. However, long-term consumption of a high-fat diet that makes lipid changes could increase the possibility of metabolic function damage. Hence, considering the antioxidant, anti-inflammatory the present study was designed to study the effect of *Amaranthus tricolor* for antioxidant and hypolipidemic activity in cholesterol diet-induced hyperlipidemia in rats<sup>15-19</sup>.

## MATERIALS AND METHODS:

### Collection and Identification of the Plant

**Materials:** *Amaranthus tricolor* leaves were collected. A voucher specimen (Voucher no. 1289) was kept at the Department of Botany, Sri Venkateswara University (SVU), Tirupati, Andhra Pradesh, India after identification of the plant by Dr. K. Madhava Chetty, Assistant Professor, Botany Department.

**Extraction of Plant Material:** The collected roots were dried in the shade and grind with a mechanical grinder. About 30g powder poured in separating funnel with 50% methanol for 48 h. The collected residues were kept at 55-60 °C in a water bath to concentrate it and finally transfer into the Hot Air Oven to dry it. The about 5.8g crude extract was prepared (Yield= 19%) and used for further studies<sup>20</sup>.

**Preliminary Phytochemical Screening:** Standard screening test were carried out for various plant constituents. The methanolic and aqueous crude extract was screened for presence or absence of secondary metabolites such as alkaloids, tannins, steroids, phenols, flavonoids, saponins, and phlobatannins, *etc.* using standard procedures to identify the constituents as described by Khandelwal<sup>20</sup> (2005).

**Experimental Animals:** Male Wistar rats weighing 200-250 g were acclimatized to the experimental room having temperature  $23\pm 2^\circ\text{C}$ , controlled humidity conditions, and 12:12 h light and dark cycle. Animals were caged in polypropylene cages in a group with a maximum of three animals per cage. The rats were fed with standard food pellets and water *ad libitum*. The study was approved by the Institutional Animal Ethical Committee (IAEC), Resolution no-2015/837/ac/PhD/06, IFTM University Lodhipur Rajput, Delhi Road, Moradabad, India.

**Acute Toxicity Study:** Acute toxicity was determined according to the OECD guidelines No. 423. Female albino rats (n = 3 per step) were selected by random sampling technique. The rats were kept fasting for overnight providing with water *ad libitum*. The aqueous and ethanol extract of *Amaranthus tricolor* leaves were administered separately to two sets of rats (n = 3 per set) at a dose of 300 mg/kg by intra-gastric tube.

Food was withheld for further 3 - 4 h and observed once in every 30 min during the first 24 h and daily after that, for 14 days for any mortality. If mortality was not observed for any animal, then the procedure was repeated with higher doses such as 1000 and 2000 mg/kg, and the animals were observed for toxic symptoms as per the above procedure<sup>21</sup>.

### Protocol for Anti-hyperlipidemic Activity:

TABLE 1: THE EXPERIMENTAL ANIMALS WERE DIVIDED INTO SEVEN GROUPS, EIGHT ANIMALS IN EACH GROUP

S. no.	Group no. (N)	Description	Animal per Group (n)
1	I	Normal control: normal diet	8 Rats
2	II	Positive control: High cholesterol diet	8 Rats
3	III	Standard Drug: high cholesterol diet + (Atorvastatin 10 mg/kg)	8 Rats
4	IV	(Ethanol extract of <i>Amaranthus tricolor</i> ) (200 mg/kg)	8 Rats
5	V	(Ethanol extract of <i>Amaranthus tricolor</i> ) (400 mg/kg)	8 Rats
6	VI	(Aqueous extract of <i>Amaranthus tricolor</i> ) (200 mg/kg)	8 Rats
7	VII	(Aqueous extract of <i>Amaranthus tricolor</i> ) (400 mg/kg)	8 Rats

**Blood Sample Collection and Analysis:** On day 22<sup>nd</sup>, animals were anesthetized with diethyl ether, and blood was collected by a retro orbital puncture. The blood was allowed to clot for 30 min at room temperature and then was subjected to centrifugation at 2000 rpm for 15 min to obtain serum<sup>22</sup>. The resulting upper serum layer was collected in clean, dry, and labeled micro-centrifuge tubes. This serum was analyzed for

**Experimental Induction of Atherosclerosis:** In rats, hyperlipidemia was induced by daily administration of 1% choline chloride, 2% cholesterol, and 2% lard over 21 days. The cholesterol diet was given at approximately the same time every day<sup>22,23</sup>.

**Preparation of Feed:** Normal animal food pellets were crushed in mortar and pestle to crush into small pieces and then ground into fine powder in a mixer grinder. The other ingredients, *i.e.* 1% choline chloride, 2% cholesterol and 2% lard too, were added in the mixer grinder in ascending order of their quantity and mixed well. This dried powder was then mixed with the same quantity of water every time to make small balls of feed, and later this was stored in self-sealing plastic covers in the refrigerator at  $2^\circ\text{C}$  to  $8^\circ\text{C}$ .

The feed for the normal group was prepared similarly by grinding only the normal food pellets and then mixing with water without the other excipients. This preparation of feed was done once in three days for all the animals<sup>22,23</sup>.

**Preparation of Herbal Drug Extract and Standard Drug Atorvastatin:** Different doses of EEAT, AEAT (200 mg/kg and 400 mg/kg) and Atorvastatin (10 mg/kg) were dissolved in 2% tween 80 to obtain a concentration required<sup>24</sup>.

serum total serum cholesterol (TC), triglyceride (TG), and high-density lipoprotein cholesterol (HDL-C) was estimated using diagnostic kits. High-density lipoprotein ratio (HDL-C ratio). Serum glutamate oxaloacetate transaminase (SGOT), serum glutamate pyruvate transaminase (SGPT) and alkaline phosphatase (ALP) activities, creatine kinase-MB (CKMB) were also measured by using diagnostic kits.

**Histopathological Analysis:** Histopathological study was performed in all the groups of animals. The liver and heart sections were isolated and preserved in 10% formalin<sup>25</sup>. The liver and heart sections were then evaluated for any architectural change.

**Statistical Analysis:** The results were expressed as mean  $\pm$  S.E.M (n=8). The statistical analysis involving seven groups was performed by means analysis of variance (ANOVA) followed by Dunnett test. p-value at <0.05 was considered as statistically significant. Data were processed with graph pad prism version 5.00 software.

**TABLE 3: EFFECT OF AT ON ATHEROGENIC DIET & ATORVASTATIN ON SERUM LIPID LEVELS**

	Normal control	AD Diet control	Atorvastatin 10 mg/kg	EEAT 200 mg/kg	EEAT 400 mg/kg	AEAT 200 mg/kg	AEAT 400 mg/kg
TC <sup>f</sup>	68.8 $\pm$ 4.3***	144.9 $\pm$ 7.7	73.3 $\pm$ 6.8***	116.8 $\pm$ 8.5***	102.9 $\pm$ 15.9***	119.5 $\pm$ 5.8***	103.7 $\pm$ 13.3***
TG <sup>f</sup>	81.1 $\pm$ 8.7***	174.9 $\pm$ 4.5	103.7 $\pm$ 4.9***	142.9 $\pm$ 8.9***	138.3 $\pm$ 9.7***	141.6 $\pm$ 7.5***	119.4 $\pm$ 3.5***
HDL <sup>f</sup>	39.6 $\pm$ 3.2***	30.4 $\pm$ 1.8	35.6 $\pm$ 2.9**	31.9 $\pm$ 3.5	32.8 $\pm$ 3.32	27.4 $\pm$ 2.8	33.8 $\pm$ 1.2
Non HDL <sup>f</sup>	29.2 $\pm$ 2.9***	114.5 $\pm$ 8.3	37.7 $\pm$ 5.5***	84.9 $\pm$ 6.9***	70.1 $\pm$ 14.9***	92.1 $\pm$ 6.4***	69.9 $\pm$ 2.5***
TC:HDL	2.35 $\pm$ 0.1***	4.83 $\pm$ 0.4	2.05 $\pm$ 0.1***	3.66 $\pm$ 2.42	3.13 $\pm$ 0.5**	4.36 $\pm$ 0.6	3.06 $\pm$ 0.2**

<sup>f</sup> mg/dl, units Values are mean  $\pm$  SEM (n=8)

**Statistical Analysis:** The results were expressed as mean  $\pm$  S.E.M (n=8). The statistical analysis involving seven groups was performed by means analysis of variance (ANOVA) followed by Dunnett test. p-value at <0.05 was considered as statistically significant. p values: \*<0.05, \*\*<0.01, \*\*\*<0.001, as compared with AD diet, Data were processed with graph pad prism version 5.00 software.

#### Antioxidant Activities of *Amaranthus tricolor*:

The radical scavenging activity of the plant extracts was measured in terms of hydrogen donating or radical scavenging ability using the stable radical DPPH (2, 2-diphenyl-1-picrylhydrazyl) as described by Molyneux. 0.1 mM solution of DPPH in methanol was prepared, and 1.0 ml of this solution was added to 1.0 ml of extract solution in

## RESULTS:

**TABLE 2: PRELIMINARY PHYTOCHEMICAL SCREENING OF THE ETHANOLIC AND AQUEOUS EXTRACT OF LEAVES *AMARANTHUS TRICOLOR***

S. no.	Solvent→ Phytochemical↓	Methanol	Water
1.	Carbohydrates	+	+
2	Proteins	+	+
3	Aminoacids	+	+
4	Steroids	+	+
5	Cardiac glycosides	+	+
6	Flavonoids	+	+
7	Alkaloids	+	+
8	Tannins	+	+

(+ Presence of constituent, - Absence of constituent)

methanol at different concentrations (5  $\mu$ g/ml - 500  $\mu$ g/ml). After thirty minutes, the absorbance was measured at 517 nm, and ascorbic acid was used as a reference standard at concentrations ranging from 5-50  $\mu$ g/ml.

The scavenging activity of the samples corresponded to the intensity of quenching DPPH. The percent inhibition was calculated from the following equation:

$$\% \text{ inhibition} = \frac{(\text{Absorbance of control} - \text{Absorbance of the test sample})}{\text{Absorbance control}} \times 100.$$

The antioxidant activity of the extracts was expressed as an inhibitory concentration (IC). IC<sub>50</sub> is defined as the concentration in  $\mu$ g/ml of extracts sufficient to obtain 50% of a maximum scavenging capacity<sup>11</sup>.

**TABLE 4: PERCENTAGE INHIBITION AND IC<sub>50</sub> VALUES OF DPPH RADICAL IN-VITRO BY ETHANOLIC EXTRACT, AQUEOUS EXTRACT OF *AMARANTHUS TRICOLOR* LEAVES AND ASCORBIC ACID**

Extracts	50	100	200	500	1000	IC <sub>50</sub>
EAT	25.6 $\pm$ 1.44	37.0 $\pm$ 0.82	46.6 $\pm$ 0.59	61.2 $\pm$ 1.74	71.8 $\pm$ 0.48	207
AEAT	4.21 $\pm$ 1.28	15.7 $\pm$ 1.07	23.8 $\pm$ 1.58	40.7 $\pm$ 1.98	57.9 $\pm$ 1.57	848
AA	37.06 $\pm$ 0.89	47.40 $\pm$ 0.69	66.22 $\pm$ 0.72	81.77 $\pm$ 1.74	93.04 $\pm$ 2.07	104

Quantity in Micrograms (Mg/ml), Mean  $\pm$ SEM: AT *A. tricolor*. L, EAT: Ethanolic extract of AT, AEAT: Aqueous extract of AT, AA: Ascorbic acid

Statistical analyses were achieved by one-way analysis of variance. The IC<sub>50</sub> values were calculated by linear regression analysis.

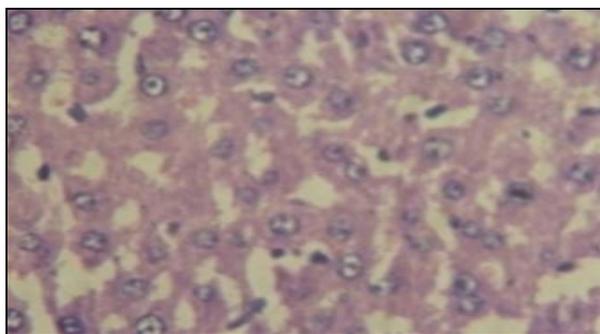
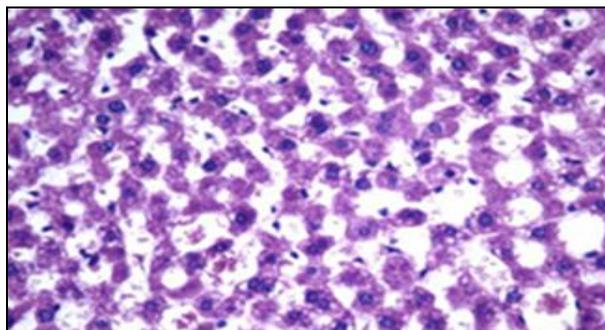
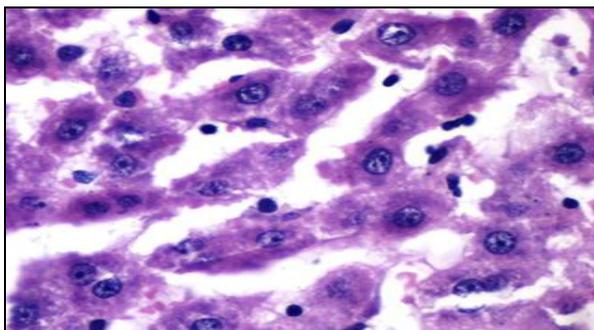
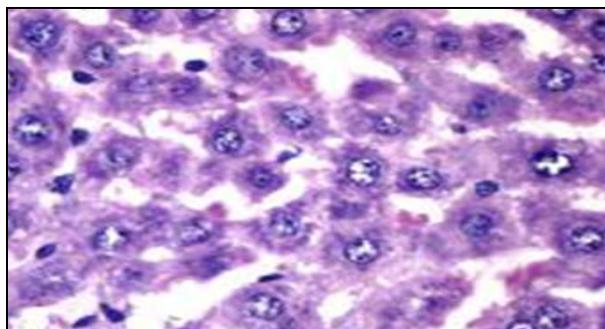
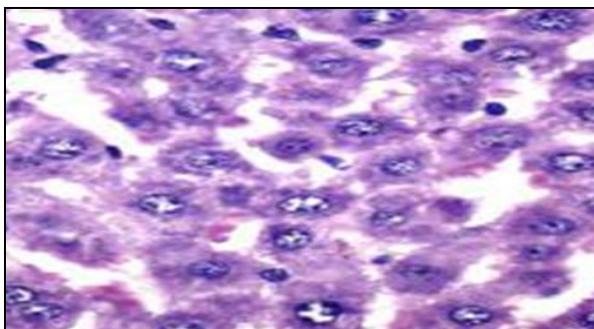
Results were calculated by employing the statistical software (Graph pad prism version 5.00 software.)

**TABLE 5: EFFECT OF ATORVASTATIN 10 mg/kg, EEAT 200 mg/kg, EEAT400 mg/kg, AEAT 200 mg/kg, AEAT 400 MG (PO) ON HEPATIC AND CARDIAC ENZYMES IN RATS UNDER DYSLIPIDEMIA CONDITION**

	Normal control	AD Diet control	Atorvastatin 10 mg/kg	EEAT 200 mg/kg	EEAT 400 mg/kg	AEAT 200 mg/kg	AEAT 400 mg/kg
SGOT	56.53±0.94***	85.58±1.54	42.25±1.72***	65.24±1.62***	58.32±1.85***	72.54±2.42***	60.34±1.42***
SGPT	51.1±1.87***	88.8±2.16	51.05±2.6***	76.82±1.62***	56.32±2.42***	78.32±1.85***	58.56±2.41***
ALP	96.3±1.62***	307.21±7.09	185.21±3.2***	226.32±3.81***	198.31±6.32***	232.41±5.2***	204.21±4.21***
LDH	276.7±45.0***	612.4±47.12	571±23.0***	582.12±4.28***	576.24±4.21***	588.14±3.21***	574.22±4.31***
CKMB	309.45±6.71***	358.7±4.81	330.41±5.38***	348.22±5.28***	335±4.62***	345±6.72***	322±4.58***

The results were expressed as mean ± S.E.M (n=8). The statistical analysis involving seven groups was performed by means analysis of variance (ANOVA) followed by Dunnett test. P-value at < 0.05 was considered as statistically significant. P-values: \*<0.05, \*\*<0.01, \*\*\*<0.001, as compared with AD control Data were processed with graph pad prism version 5.00 software.

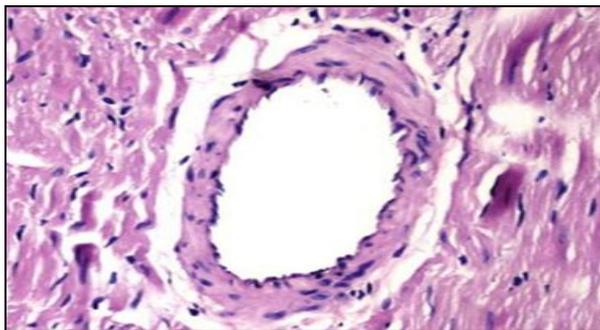
**Effect of *Amaranthus Tricolor* Leaves Extract on Liver Histopathology of Cholesterol-Rich HFD Treated Rats:** A liver section of normal rat liver showed no cellular degeneration and necrosis **Fig. 1A**. AD fed rat showing fatty granular degeneration with liver edema, altered hepatocyte architecture, and several fat globules were seen **Fig. 1B**.

**FIG. 1A: LIVER SECTION (40X) OF NORMAL FED DIET SHOWING RAT SHOWING NORMAL HEPATOCYTE ARCHITECTURE****FIG. 1B: LIVER SECTION (40X) OF AD FED RAT SHOWING FATTY GRANULAR DEGENERATION WITH LIVER EDEMA****FIG. 1C: LIVER SECTION (40X) OF ATORVASTATIN TREATED RATS SHOWING NORMAL HEPATOCYTES****FIG. 1D: LIVER SECTION (40X) OF EEAT HIGH DOSE (400 mg/kg) TREATED RAT SHOWING NORMAL HEPATOCYTE ARCHITECTURE****FIG. 1E: LIVER SECTION (40X) OF AEAT HIGH DOSE (400 mg/kg) TREATED RATS SHOWING NORMAL HEPATOCYTE ARCHITECTURE**

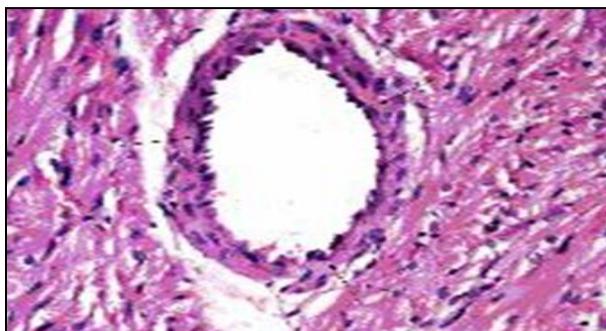
But animals treated with Atorvastatin **Fig. 1C**, EEAT 400 mg/kg **Fig. 1D** and AEAT, 400 mg/kg

**Fig. 1E** restored the normal architecture, and no fatty liver changes were seen.

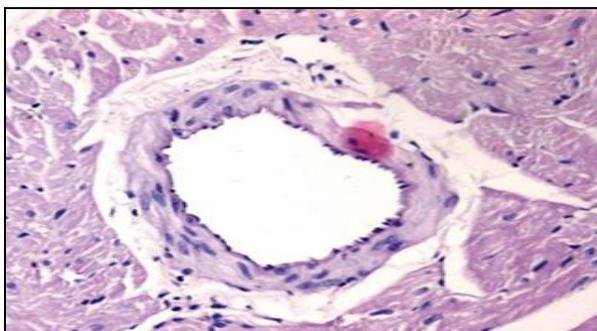
### Histopathology of Coronary Artery:



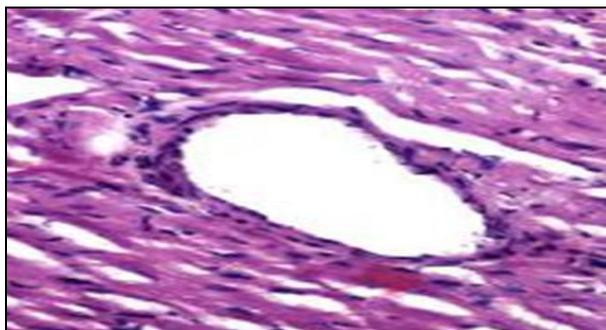
**FIG. 2A:** SECTION OF CORONARY ARTERY (20X) FOR NORMAL DIET FED RATS SHOWING NORMAL INTIMA



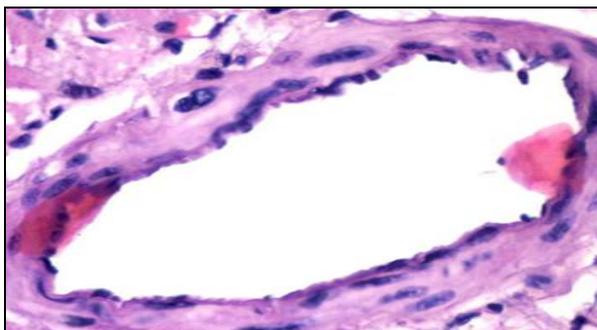
**FIG. 2B:** SECTION OF CORONARY ARTERY (20X) AD FED RAT SHOWING SWOLLEN ENDOTHELIAL CELL IN INTIMA WITH SPLITTING OF THE ELASTIC INTIMA



**FIG. 2C:** SECTION OF CORONARY ARTERY (20X) OF ATORVASTATIN TREATED RAT



**FIG. 2D:** CORONARY ARTERY SECTION (20X) OF RAT TREATED WITH EETT 400 mg/kg SHOWING NORMAL INTIMA



**FIG. 2E:** CORONARY ARTERY SECTION (20X) OF RAT TREATED WITH AEAT 400 mg/kg SHOWING FEW SWOLLEN ENDOTHELIAL CELLS

Sections of coronary artery studied in rats fed with AD indicated swollen endothelial cells in the intima of the coronary artery, and there was often a splitting of the elastica interna seen **Fig. 2B**. Whereas normal diet-fed rats did not show any of these changes, **Fig. 2A**. Atorvastatin 10 mg/kg of treated rats showed normal histology of coronary arteries without any changes. **Fig. 2C**, and **Fig. 2D**. Coronary artery of rat treated with *Amaranthus tricolor* showed a moderate number of swollen endothelial cells **Fig. 2E**.

**DISCUSSION:** Hyperlipidemia is a well-known risk factor for CVDs. Atherosclerotic CAD is one of the main causes of premature death worldwide, and it is expected to be the most important cause of mortality in India <sup>29</sup>. Statins are widely used to control hyperlipidemia, but these are not fully effective, completely safe, and free from adverse events. The complication with statins is liver failure, myopathy, rhabdomyolysis, harmful to the kidney, and often cause kidney damage. Additionally, statins may cause cardiomyopathy.

Headache, myalgia and dizziness, etc as well as Contraindicated during pregnancy, nursing mothers, children. Recent clinical trials showed that statin use had been linked to an increase in type 2 diabetes<sup>30</sup>. The leaves *Amaranthus tricolor* is traditional medicine. It has several useful pharmacological properties such as anti-inflammatory, antioxidative, hepatoprotective, anti-tumor, anti-ulcer activity, inhibitory effect on cobra venom effect, diuretic activity, etc. In the present study, we carried out experiments to investigate the antioxidant activity by free radical scavenging activity (DPPH method), and antidyslipidemic activity of ethanolic and aqueous extract of *Amaranthus tricolor* leaves in the high-fat diet (HFD) fed dyslipidemic rat model.

It has been well established that nutrition plays an important role in the etiology of hyperlipidemia and atherosclerosis<sup>31</sup>. The composition of the diet selected in this study has been based on various previous published research articles and a pilot study conducted for this study for hyperlipidemic effects. In our study, we chose the atherogenic diet (2% cholesterol, 1% choline chloride, and 2% Lard)<sup>32, 22</sup>, which contains the common ingredients as in our daily food. It has been reported that cholesterol alone does not significantly elevate serum cholesterol and TG levels therefore high levels of saturated fatty acids (SFA) for hypertriglyceridemia and cholic acid salts are essential for the development of hypercholesterolemia in a rat model of study as it amplifies the effect of dietary cholesterol<sup>33, 34</sup>. A diet containing SFA (Lard) increases the activity of HMG-CoA reductase, the rate-determining enzyme in cholesterol biosynthesis; this may be due to the higher availability of acetyl CoA, which stimulates the cholesterol genesis rate.

Moreover, this could be associated with a downregulation in LDL receptors by the cholesterol and SFA in the diet, which could also explain the elevation of serum LDL cholesterol levels or non-HDL levels either by changing hepatic LDL receptor activity, the LDL production rate or both. The activity of cholesteryl ester transfer protein (CETP), a key enzyme in reverse cholesterol transport and HDL metabolism increases in high-fat diet and mediates the transfer of cholesteryl esters from HDL cholesterol to TG rich particles in

exchange for TG. This leads to increased plasma concentrations of TGs & decreased concentrations of HDL cholesterol<sup>34</sup>. It has been reported that a series of human illness such as cancer, atherosclerosis, cerebrovascular diseases, and cardiac diseases, can be linked to the damaging action of extremely reactive free radical. Ascorbic acid is an effective free radical scavenger, so when compared to such pure component, IC<sub>50</sub> of ethanolic and aqueous extracts shows that *A. tricolor* is a potent free radical scavenger **Table 2**. Samsul et al., 2013 described that plants phenolics, in particular, phenolic acid, tannins, and flavonoids are recognized to be effective antioxidant and occur in leaves, roots, bark, nuts, seeds, fruits and vegetables.

In addition to their antioxidant effects, these compounds display a wide variety of pharmacological activities<sup>11</sup>. The data indicate that the antioxidant activity of leaf extracts of *A. tricolor* may be due to the presence of flavonoids like flavones, flavones, flavonols, and tannins. In a very recent year, potent free radical scavengers have attracted a tremendous attentiveness as possible therapeutic against free radical-mediated diseases. In the present study, the extracts of EEAT & AEAT revealed significant antihyperlipidemic activity in a cholesterol-induced hyperlipidemic model of rats. In the same manner as in the statin-treated group.

The extracts of *A. tricolor* induced an increase in serum HDL-C levels in the hyperlipidemic models but decrease in the serum TC, TG, non HDL, TC: HDL as shown in **Table 3**. During blood circulation, HDL-C mediates the transfer of excess cholesterol from the peripheral cells to the liver for its catabolism by a pathway termed as “reverse cholesterol transport” hence increased serum HDL-C levels may prove beneficial in lipid disorders and might also serve as a cardioprotective factor to prevent the gradual initiation of atherosclerotic process. Rats treated with extracts of EEAT, AEAT at 200 and 400 mg/kg as described in protocol **Table 1** and Atorvastatin 10 mg/kg caused a significant decrease in the levels of SGOT, SGPT, ALP, CKMB activities **Table 5**. When compared to the cholesterol-induced hyperlipidemic control group. Histopathology of coronary arteries from AD fed animals showed swollen endothelial cells

in the intima with often a splitting seen in elastica interna. Atorvastatin 10 mg/kg, EEAT, AEAT at 400 mg/kg treated rats showed normal histology of coronary arteries **Fig. 2A** to **Fig. 2E**. Whereas in the histopathology of lever AD fed rat showing Granular fatty degeneration with liver edema. **Fig. 1B** but rat treated with EEAT, AEAT with 400 mg/kg shows normal hepatocyte architecture in the same manner as with Atorvastatin treated rat **Fig. 1C** to **Fig. 1E**.

**CONCLUSION:** By these results, it may be confirmed that the aqueous and ethanolic leaf extracts of *A. tricolor* have antioxidant activity. The present investigation has suggested the significant protection in lowering TC, TG, non-HDL, TC: HDL ratio, SGOT, SGPT, ALP, LDH, CKMB, and increasing HDL levels.

Histopathology study shows normal hepatocyte architecture by EEAT and AEAT at 200 mg/kg, and 400 mg/kg in the same manner as with Atorvastatin treated rat and Coronary artery section of rat treated with leaf extracts of A.T showing almost normal intima.

The results of blood sample analysis strongly mention that the significant hypolipidemic activity of this medicinal plant, and finally, histopathology study supports the same. However, there is a requirement for further research to work for more insight to the possible mechanisms.

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## REFERENCES:

1. Nilsson PM, Olsen MH and Laurent S: Early vascular aging (EVA): New directions in cardiovascular protection. *J Hypertens* 2014; 32(7): 1470A7.
2. Chandrashekhar RP, Vaibhavi NG and Vilasrao JK: Antihyperlipidemic activity of *Gloriosa superba*. *Int J Pharm Sci Res* 2015; 6(11): 4835-42.
3. Schurr PE, Schultz JE and Parkinson TM: Triton induced hyperlipidemia in rats as an animal model for screening hypolipidemic drugs *Lipids* 1972; 7(1): 68-74.
4. Ghatak SB and Panchal SJ: Anti-hyperlipidemic activity of oryzanol isolated from crude rice bran oil, on triton WR1339-induced acute hyperlipidemia in the rat. *Rev Bras Farmacogn* 2012; 22(3): 642-48.
5. Scharwey M, Tatsuta T and Langer T: Mitochondrial lipid transport at a glance. *J Cell Sci* 2013; 126: 5317-23.
6. Rang HP, Dale MM, Ritter JM and Moore PK: *Pharmacology*. Elsevier India Ltd: New Delhi; Edition 8<sup>th</sup>, 2015.
7. Smith GD, Song F and Sheldon TA: Cholesterol lowering and mortality: the importance of considering the initial level of risk. *Br Med J* 1993; 306: 1367.
8. Saravanan R, Rajendra Prasad N and Pugalandi KV: Effect of *Piper betle* leaf extract on alcoholic toxicity in the rat brain. *J Med Food* 2003; 6: 261-65.
9. Qi SZ, Li N, Tuo ZD, Li JL and Xing SS: Effects of *Morus* root bark extract and active constituents on blood lipids in hyperlipidemia rats. *J Ethnopharma* 2016; 180(2): 54-59.
10. Ajiboye TO, Aliyu H, Tanimu MA, Muhammad RM and Ibitoye OB: *Dioscoreophyllum cumminsii* (Stapf) Diels leaves halt high-fructose induced metabolic syndrome: hyperglycemia, insulin resistance, inflammation, and oxidative stress. *J Ethnopharmacol* 2016; 192: 471-79.
11. Espindola PP, da Rocha Pdos S and Carollo CA: Antioxidant and antihyperlipidemic effects of *C. adamantium* O. Berg root. *Oxid Med Cell Longev* 2016; 14(7): 16.
12. Fidele N, Joseph B, Emmanuel T and Theophile D: Hypolipidemic, the antioxidant and anti-atherosclerogenic effect of aqueous extract leaves of *Cassia occidentalis* L. (Caesalpinaceae) in diet-induced hypercholesterolemic rats. *BMC Complement Altern Med* 2017; 17(1): 76.
13. Lopes RHO, Macorini LFB and Antunes KÁ: Antioxidant and hypolipidemic activity of the hydroethanolic extract of *Curatella americana* L. leaves. *Oxid Med Cell Longev* 2016; 9681425.
14. Jiang Y, Dai M, Nie WJ, Yang XR and Zeng XC: Effects of the ethanol extract of black mulberry (*Morus nigra* L.) fruit on experimental atherosclerosis in rats. *Journal Ethnopharmacol* 2017; 200: 228-35.
15. Dianita R, Jantan I, Jalil J and Amran AZ: Effects of *Labisia pumila* var. *alata* extracts on the lipid profile, serum antioxidant status and abdominal aorta of high cholesterol diet rats. *Phytomedicine* 2016; 23(8): 810-17.
16. Simran A, Manisha V, Sushma A and Satish S: Phytochemistry and hepatoprotective activity of aqueous extract of *Amaranthus tricolor* (Linn.) roots. *J. Ayurveda Integr Med* 2013; 4: 211-15.
17. Gopal VB, Subhash LB, Parag PK and Girish NZ: Antinociceptive and anti-inflammatory activity of hydroalcoholic extract of leaves of *Amaranthus tricolor* L. *Scholars Res Libr* 2013; 48-55.
18. Samsul Alam and Krupanidhi K: Evaluation of the *in-vitro* antioxidant activity of *Amaranthus tricolor* Linn. *Asian Journal of Pharmacology and Toxicology* 2013; 12-16.
19. Shukla S, Bhargava A, Chatterjee A, Srivastava J, Singh N and Singh SP: Mineral profile and variability in vegetable Amaranth (*Amaranthus tricolor*). *Plant Food Human Nutrition* 2006; 61: 21-6.
20. Khandelwal KR: *Practical pharmacognosy techniques and experiments*. Nirali Prakashan, Pune, Edition 14<sup>th</sup>, 2005: 149-56.

21. Organization of economic Co-operation and Development (OECD). The OECD Guideline for testing of chemicals: 423 Acute oral toxicity, OECD, Paris 2001; 1-14.
22. Xu L, Liu Y, Wang T, Qi Y, Han X and Xu Y: Development and validation of a sensitive and rapid non-aqueous LC-ESI-MS/MS method for measurement of diosgenin in the plasma of normal and hyperlipidemic rats: A comparative study. J Chrom B 2009; 877: 1530-6.
23. Dabhi JK, Solanki JK and Mehta A: Antiatherosclerotic activity of ibuprofen, a non-selective COX inhibitor-an animal study. Indian J Exp Biol 2008; 46: 476-81.
24. Hirunpanich V, Utaipat A, Morales NP, Bunyapraphatsara N, Sato H and Herunsale A: Hypocholesterolemic and antioxidant effects of aqueous extracts from the dried calyx of *Hibiscus sabdariffa* L. in hypercholesterolemic rats. J Ethnopharmacol 2006; 103: 252- 60.
25. Kumar V, Singh P, Chander R, Mahdi F and Singh S: Hypolipidemic activity of *Hibiscus rosa sinensis* root in rats. Indian J Biochem Biophys 2009; 46: 507-10.
26. Ohkawa H, Ohishi N and Yagi K: Assay of lipid peroxidases in animal tissues by the thiobarbituric acid reaction. Biochem 1979; 95: 351-8.
27. Tirkey N, Pilhwal S and Chopra K: Hesperidin, a citrus bioflavonoid, decreases the oxidative stress produced by carbon tetra chloride in rat liver and kidney. BMC Pharmacol 2005; 5: 1471-9.
28. Goel R, Goel A, Manocha A, Pillai KK and Shrivastava RS: Influence of nebiivolol on the anticonvulsant effect of lamotrigine. Indian J of Pharmacol 2009; 41: 41-6.
29. Verlecar XN, Jena KB, Chainy GB: Biochemical markers of oxidative stress in *Perna viridis* exposed to mercury and temperature. Chem Biol Interact 2007; 167: 219-26.
30. Mills E. J, Wu, P, Chong G, Ghement I, Singh S, Akl E. A, Eyawo O, Guyatt G, Berwanger O and Briel M: Efficacy and safety of statin treatment for cardiovascular disease: a network meta-analysis of 170, 255 patients from 76 randomized trials QJM 2011; 104(2): 109124.
31. Zulet MA, Barber A, Garcin H, Higuere PS and Marti'nez JA: Alterations in carbohydrate and lipid metabolism induced by a diet rich in coconut oil and cholesterol in a rat model. J Am Coll Nutr 1999; 18: 36-42.
32. Dabhi JK, Solanki JK, and Mehta A: Antiatherosclerotic activity of ibuprofen, a non-selective COX inhibitor-an animal study. Indian J Exp Biol 2008; 46: 476-81.
33. Shinnick FL, Ink SL and Marlett JA: Dose-response to a dietary oat bran fraction in cholesterol-fed rats. J Nutr 1990; 120: 561-8.
34. Watts GF, Jackson P, Mandalia S, Brunt JN, Lewis ES and Coltart DJ: Nutrient intake and progression of coronary artery disease. Am J Cardiol 1994; 73: 328-32.

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