

# A Review on Medicinal Plants Possessing Nephroprotector Activity

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## ABSTRACT

Nephrotoxicity is the most common adverse effect when the body is exposed to a drug or a toxin. Therapeutic agents of natural, synthetic and semisynthetic can adversely affect the kidney resulting in acute renal failure, chronic interstitial nephritis, and nephritic syndrome.<sup>1</sup> The main therapeutic agents which causes nephrotoxicity are aminoglycoside antibiotics, chemotherapeutic agents and NSAIDs. Exposure to chemical agents like ethylene glycol, carbon tetra chloride, sodium oxalate and heavy metals like lead, mercury, arsenic and cadmium also induces nephrotoxicity. Dietary factors such as carbohydrate, lipid, and protein intake alter renal function and the presence of contaminants and natural toxicants may add to the toxic burden of the kidney.

Kidney is a complex and dynamic organ. Excretion of wastes and maintaining homeostasis is the primary function of kidney. Regulation of extracellular volume, control of electrolyte and acid balance are also important functions of kidney. Any toxicological insult to kidney will be reflected as failure of the excretory function of the kidney. This results in the retention of the nitrogenous waste of metabolism in the blood. In addition to these, there is failure of regulation of fluid and electrolyte balance along endocrine dysfunction.

## INTRODUCTION

Chemicals, therapeutic agents and diagnostic agents are known to be nephrotoxic<sup>1</sup>. The following are the well known therapeutic agents which are nephrotoxic.<sup>2</sup>

A) Analgesics and non-steroidal anti-inflammatory drugs (NSAIDs)

B) Antineoplastic agents.

Alkylating agents: Cisplatin, Cyclophosphamide.

Nitrosoureas: Streptozotocin, Carmustine.

Antimetabolites: High dose Methotrexate, 5-fluorouracil.

C) Antibiotics: Gentamicin, Amikacin, Kanamycin, Cephalosporins, Tetracyclines, Pencillamine.

D) Antimicrobial Agents: Acyclovir.

E) Heavy metals: Mercury, Arsenic, Lead, Bismuth, Gold etc.

F) Chemicals: Ethylene glycol, Volatile Hydrocarbons, Chloroform, Halogenated alkenes.

## Nephropathies Caused Due To Different Mechanisms

### Cisplatin Toxicity

Cisplatin is a water soluble anticancer drug, organic complex formed by an atom of platinum surrounded by chloride and ammonium atoms. Cisplatin is a potent antitumor drug, but its clinical use is limited due to its renal toxicity. The mechanism of action include after entering the cell, the chloride ions dissociates leaving a reactive complex. This complex reacts with water and then interacts with DNA resulting in denaturation of DNA chain. Cisplatin also damages cell mitochondria, arrests cell cycle in G<sub>2</sub> phase inhibits ATPs activity, alters the cellular transport system and eventually causing apoptosis, inflammation, necrosis and death in the cells.<sup>3</sup> It is predominantly localized in S<sub>3</sub> segments of proximal tubules in the corticomedullary region.<sup>4</sup> Thus cisplatin decreases the antioxidants and antioxidant enzymes resulting in generation of reactive oxygen metabolites and lipid peroxidation due to renal toxicity.

### Gentamicin Toxicity

Gentamicin, an effective widely used antibiotic but the risk of nephrotoxicity and oxidative damage limits its long term use. Gentamicin has a relatively shorter half life in the plasma but the half life in the kidney is considerably longer, suggesting that the material is tightly bound to renal tissue. Recent evidences suggest that gentamicin is filtered and a small fraction is taken up by cells of the proximal tubule, presumably by a pinocytotic process where it accumulates to toxic concentration in lysosomes. Subsequent release of hydrolytic lysosomes then produces cell damage.<sup>5</sup>

### Acetaminophen Toxicity

Acetaminophen, known as paracetamol is a widely used NSAID for wide range of treatments. Overdose of acetaminophen causes hepatic and renal damage in humans. The different pathways of acetaminophen metabolism involves conjugation with sulphate, glucuronide and through cytochrome p450 oxidase enzyme system.<sup>6</sup> Metabolism of paracetamol involves an initial N-hydroxylation to form N-hydroxyacetaminophen and spontaneous dehydration of this N-hydroxyamide produces an N-acetyl imidoquine which is a very reactive electrophilic metabolite and is excreted by kidney. In therapeutic doses, glutathione present in the liver combines with this metabolite forming corresponding glutathione conjugate. In acetaminophen overdose, glucuronidation and sulfation pathways becomes saturated. The amount and rate of formation of reactive metabolite is greatly increased, the covalent binding of the reactive intermediate occurs with macromolecules leading to cellular necrosis and kidney dysfunction.

### General Methods of Evaluation of Nephrotoxicity

Due to complex nature and multiple functions of the kidney, no single test can detect nephrotoxicity. The nephrotoxicity assessment involves *invitro* and *invivo* studies. *Invitro* methods provide information on the mechanism of primary insult and the effect on cell viability. The *invitro* techniques can be divided into those where the anatomical relationship between cells is maintained. (perfusion, micropuncture, and slices), those where glomerular and tubular fragments are isolated and those where cells are isolated. *Invivo* experimental studies include evaluation of glomerular function and tubular functions, Proteinuria, urinary excretion of single plasma proteins, enzymuria, immunoreactive tissue constituents, urinary excretion of prostaglandins.<sup>2</sup>

Nephroprotective agents are the substances which possess protective activity against nephrotoxicity. Previous literatures have prescribed various medicinal herbs for the cure of renal disorders. Medicinal plants possess curative and protective properties due to presence of various complexes like terpenoids, flavanoids, tannins, glycosides, alkaloids etc present in the plants. Coadministration of various medicinal plants possessing nephroprotective activity along with different nephrotoxic agents had helped in reversing the nephrotoxicity.<sup>8</sup> The present review is aimed to collect the history of medicinal plants, which are proved in treating renal disorders in different animal models. The following are the review of some medicinal plants which possess nephrotoxicity.

S.No	Botanical Name	Family	Parts used	Chemical Constituents
1	<i>Aegle marmelos</i>	Rutaceae	Leaves	Aegeline, Aegelinine, Rutin, Lupeol, Sterol, Tannins, Flavanoids, Quercetin $\beta$ -sitosterol, $\beta$ -D-glucoside. <sup>9</sup>
2	<i>Aerva lanata</i>	Amaranthaceae	Whole	Botulin, $\beta$ -sitosterol, Amyrin, Campesterol, Kaempferol, Propionic acid, Aervoside, Aervolanine. <sup>10</sup>
3.	<i>Acorus calamus</i>	Araceae	Aerial parts	Monoterpene, Sesquiterpene, Phenylpropanoid, Flavanoid, Quinone, Basarone. <sup>11</sup>
4	<i>Bauhinia variegata linn</i>	Caesalpinaceae	stems	Stigmasterol, Flavone glycosides, Lupeol, Kaempferol-3-glucoside, $\beta$ -sitosterol. <sup>12</sup>
5	<i>Boehavia diffusa</i>	Nyctaginaceae	Roots	Flavanoids, Alkaloids, Triterpenoids, Proteins, Carbohydrates, Glycosides, Lipids, Lignins, Glycoproteins. <sup>13</sup>
6	<i>Carica papaya</i>	Caricaceae	Seeds	Seed Flavanoids, Phenols Alkaloids, Terpenoids, Protein, Sterols, Carbohydrates, Tannins, Glycosides, Saponins. <sup>14</sup>
7	<i>Crataeva nurvula</i>	Capparidaceae	Fruits	Kaempferol-3-O-A-D-Glycoside, Flavanoids, Glucosinolates, Steroids, Lupeol, Tannins. <sup>12</sup>
8	<i>Cassia auriculata</i>	Fabaceae	Roots	Tannins, Di-(2 ethyl)hexyl phthalate, Alkaloids, Resins, Ca <sup>2+</sup> and phosphorous <sup>15</sup> .

9	<i>Caranarium scheinfurthii</i>	Burseraceae	Stem bark	Octylacetate, Nerolidol, Protien, Starch, Cellulose, K Ca, Oleic acid, Stearic acid <sup>16</sup> .
10	<i>Cucurbita pepo</i>	Cucurbitaceae	Seeds	Flavanoids , Phenols, Alkaloids, Protein, Sterols, Terpenoids, Steroids , Carbohydrates, Tannins, Glycosides, Saponins. <sup>12</sup>
11	<i>Curcuma longa</i>	Zingiberaceae	Rhizome	Curcumin, Termeric oil, Terpenoids, Curcumen, Starch, Albumnoids. <sup>17</sup>
12	<i>Dichrostachys cinera</i>	Mimosaceae	Roots	Fixed oils, steroids, Flavanoids, n-octacosanol, , $\beta$ -sitostersol, $\beta$ -amyrin acetate, Friedelan 3-one, Friedelan 3-ol, Friedlen, $\alpha$ -amyrin. <sup>18</sup>
13	<i>Emblica officinalis</i>	Euphorbiaceae	Fruits	Vitamin C, Carotene, Nicotinic acid, Riboflavin, D-Glucose, D-fructose, Tannins, Ellagic acid, Lupeol Oleanolic acid, Fatty acids etc. <sup>12</sup>
14	<i>Euphorbia nerifolia</i>	Euphorbiaceae	leaves	Flavanoids, Tannins, Saponins. <sup>19</sup>
15	<i>Ficus religiosa L</i>	Moraceae	Latex	Aminoacids and Tannins. <sup>20</sup>
16	<i>Ginkgo biloba</i>	Ginkgoceae	Whole plant	Flavanoids, Bilobalide, Ginkgolide A, Ginkgolide B , Ginkgolide C Biflanoide. <sup>21</sup>
17	<i>Glycyrrhiza glabra</i>	Fabaceae	Rhizome	Glycyrrhizin, Glycyrrhizic acid, Glycosides, Steroids, Glucose , Sucrose, Resin, Starch, and essential oil <sup>12</sup> .
18	<i>Hygrophila spinosa</i>	Acanthaceae	Whole plant	$\beta$ -sitostersol, Lupeol, Minerals like Na, K, Ca, P and Polyphenols. <sup>22</sup>
19	<i>Indegoferabarberi L</i>	Fabaceae	Whole plant	Flavaoids, Phenolic acids, and Sterols. <sup>23</sup>
20	<i>Kigelia Africana</i>	Bignoniaceae	Matured fruits	Napthoquinones , Flavanoids, Terpenes, Tannins, Steroids, Saponins, Caffeic acid. <sup>24</sup>
21	<i>Lepidium sativum L</i>	Brassicaceae	Seed	Volatile essential aromatic oils, Fatty oils, Carbohydrate, Protien, Fatty acid, Vitamin B Carotene, Riboflavin, Niacin, Ascorbic acid, Flavanoids, Gytcosides, Isothiocynates. <sup>25</sup>
22	<i>Morinda citrifolia</i>	Rubiaceae	Fruit	Americanol A, 3-31-bis dimethyl pinosresinol, <sup>26</sup> AmericaninA, Americanoic acid A, Isoprincepin <sup>27</sup> .
23	<i>Moringa oleifera</i>	Moringaceae	Seeds	Vitamin A, Nicotinic acid, Ascorbic acid, Vitamin B, Fatty acid, Glucose, , Sucrose, Fumaric acid, Oxalic acid. Citric acid, Malic acid, Succinic acid . <sup>27</sup>
24	<i>Nigelle sativa</i>	Ranunculaceae	Whole plant	Alanine, L-Spinasterol, Arabic acid, Arginine , Aminoacid, Asparagine. Aspartic acid, Carvone, Cystine, Cholesterol, Glutamic acid, Linoleic acid, Melanthin, Myristic acid, Oleic acid, Tannins. <sup>12</sup>
25	<i>Ocimum sanctum</i>	Lamiaceae	leaves	Eugenol, Eugenol methyl ether, Carvacrol, Caryophyllene, Ursolic acid, Apigenin, Luteolin, Ascorbic acid, Carotene, Alkaloids, Gytcosides Saponins Tannins. <sup>12</sup>
26	<i>Orthosiphon stamineus</i>	Laminaceae	Whole plant	Flavanoids, Phenols, Carbohydrates, Steroids, Glycosides, Saponins , Tannins. <sup>28</sup>
27	<i>Panax qinseng</i>	Araliaceae	Root	Glycosides, Saponins Ginsenosides, Panaxosides. <sup>12</sup>
28	<i>Peladium murex Linn</i>	Pedaliaceae	Dried fruits	Flavanoids, Flavones, Alkaloids, Titerpenoids, Carbohydrates, Glycosides, Saponins. <sup>29</sup>
29	<i>Pimpinella tirupatiensis</i>	Apiaceae	Whole plant	Flavanoids, Flavones, Alkaloids, Volatile oils, Cis – Carveol, Enemol, Methylgeranate, $\Delta$ –Carveol, $\Delta$ -3-Carene. <sup>30</sup>
30	<i>Pongamia pinnata</i>	Papilionaceae	Flowers	Pongamol, Protien, Alkaloids, Tannins, Sugar, Resin, Fatty oil. <sup>12</sup>
31	<i>Punicagranatum L</i>	Puniaceae	Fruit peel	Ellagic acid, Ellagitannins, Gallic acid. <sup>31</sup>
32	<i>Rubiaccordifolia Linn</i>	Rubiaceae	Roots	Purpurin, Manjistin, Garancin, Purpuroxanthin, Resin, Glucose, Sucrose, Triterpenes, Lucidine, Anthroquinone, Fattyacids Gum. <sup>32</sup>
33	<i>Rhazya stricta</i>	Apocynaceae	Leaves	l-cabomehoxy – $\beta$ -carboline, Condyloacarpine, Vincanicine. <sup>12</sup>
34	<i>Salviae radix</i>	Lamiaceae	Whole plant	Salvianolic acid –G, Rosmarinic acid, Lithospermic acid, Isoferulic acid, Tanshinone I, IIA, IIB. <sup>12</sup>
35	<i>Solanum nigrum</i>	Solanaceae	Whole plant	Alkaloids, Reducing sugars, Steroids, Glycosides, Saponins , Leutein, Lycopene, Vitamin C, Glucose, Fructose, Caffeicolasodine, Tamatidenol, Solamargine, Solasomine, Trigogenine, Potassium, Sulphur, Calcium, Phosphorous. <sup>12</sup>
36	<i>Strychnos potatorum</i>	Loganiaceae	Seed	Flavanoids, Phenols, Steroids, Tannins, Glycosides, Saponins , Alkaloids, Lignins. <sup>33</sup>
37	<i>Tamarindus indica</i>	Caesalpinaceae	Fruit pulp	Polysaccharides, Balsamine, Catechin, Nasturtium, Tamarin, Phosphatidic acid, Phosphatidic choline, Ethanollamine, Serine, Inositol, Alkaloid, Citic acid,

				Tartaric acid, Potassium bitartrate. <sup>12</sup>
38	<i>Tectona grandis</i>	Verbanaceae	Bark	Lapachol, Dehydro- $\alpha$ -Lapachone, Methyl quinizarin, Squalene. <sup>34</sup>
39	<i>Tribulus sativus</i>	Zygophyllaceae	Fruits	Alkaloids, Harmine, Harman, Saponins, Steroidal Sapogenins, Flavanoids, Kaemferol, Fixed oil, Resin, Essential oil, Nitrates. <sup>12</sup>
40	<i>Vernonia cinerea</i>	Compositae	Aerial parts	$\alpha$ -amyrin, $\beta$ -amyrin, lupeol. Triterpenoids, Fatty acids, Steroids. <sup>35</sup>
41	<i>Vitis venifera</i>	Vitaceae	Seed	7
42	<i>Withania somnifera</i>	Solanaceae	Root	Alkaloids, Withaminon, Wasamin, Sugars, Glycosides, Aminoacids, Essential oils, Withaniol, Phytosterol, Oils. <sup>12</sup>
43	<i>Zingiber zerumbel</i> Smith	Zingiberaceae	Rhizome	Zerumbone, Afzelin, Diacetylafzelin, derivatives of kaemferol and 3-flavanol. <sup>36</sup>

## CONCLUSION

The literature collected clearly shows that the medicinal plants play a prominent role against nephrotoxicity. The nephroprotective properties of plants are due to the presence of their different biologically active chemicals like flavanoids, terpenoids, glycosides etc. These biologically active chemicals of plant contribute to their antioxidant properties which acts as a nephroprotective agent. Though the above plants vary in their chemical ingredients, they showed a good potential against kidney damage. The information of the above medicinal plants serves as valuable resource for plant based drug development programs and for designing a novel drug.

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