



Istanbul Journal of Pharmacy

Biochemical constituents and antioxidant activities of some mushrooms from Turkey: *Agaricus* spp., *Pleurotus* spp., *Morchella esculenta* and *Terfezia boudieri*

Mehmet Akyüz, Ayşe Dilek Özşahin Kireççi, Zehra Gökçe, Sevda Kırbağ, Ökkeş Yılmaz

Qualitative and quantitative phytochemical analysis and *in-vitro* biological activity of *Rheum ribes* L. different parts

Turgut Taşkın, Gizem Bulut

PPAR γ Pro12Ala and C161T polymorphisms, but not PPAR α L162V, are associated with osteoporosis risk in Turkish postmenopausal women

Özlem Kurt Şirin, Hülya Yılmaz Erdoğan, Mehmet Uyar, Ayşe Can

Deontological violations of community pharmacies in Turkey

Bülent Kıran, Elif Gizem Karaca

Real time monitoring of cytotoxicity of *Callistemon citrinus* against Colo-205 cell line

Alim Hüseyin Dokumacı, Peter Olutope Fayemi, Mukerrem Betül Yerer



Istanbul Journal of Pharmacy

OWNER

Erdal CEVHER, Department of Pharmaceutical Technology, İstanbul University, Turkey

EDITOR in CHIEF

Emine AKALIN URUŞAK, Department of Pharmaceutical Botany, İstanbul University, Turkey

EDITORIAL ASSISTANTS

Bahar GÜRDAL, Department of Pharmaceutical Botany, İstanbul University, Turkey

LANGUAGE EDITOR

Dorian Gordon BATES, Istanbul University, Turkey

Alan James NEWSON, Istanbul University, Turkey

EDITORS

Nuriye AKEV, Department of Biochemistry, İstanbul University, Turkey

Nilgün KARALI, Department of Pharmaceutical Chemistry, İstanbul University, Turkey

Yıldız ÖZSOY, Department of Pharmaceutical Technology, İstanbul University, Turkey

B.Sönmez UYDEŞ DOĞAN, Department of Pharmacology, İstanbul University, Turkey

STATISTICAL EDITOR

Abdulbari Bener, Department of Biostatistics & Medical Informatics, İstanbul University, Turkey

EDITORIAL BOARD

Afife MAT, Department of Pharmacognosy, İstanbul University, Turkey

Berna ÖZBEK-ÇELİK, Department of Pharmaceutical Microbiology, İstanbul University, Turkey

Bilge ŞENER, Department of Pharmacognosy, Gazi University, Turkey

Carsten EHRHARDT, Panoz Institute, Trinity College Dublin, Ireland

Claudio T. SUPURAN, Neurofarba Department, University of Florence, Italy

Erden BANOĞLU, Department of Pharmaceutical Chemistry, Gazi University, Turkey

Fatma AKAR, Department of Pharmacology, Gazi University, Turkey

Gianniantonio DOMINA, University of Palermo, Italy

İlkyay KÜÇÜKGÜZEL, Department of Pharmaceutical Chemistry, Marmara University, Turkey

Johan Van de VOORDE, Department of Pharmacology, Ghent University, Belgium

Melih ALTAN, Department of Pharmacology, Bezmialem University, Turkey

Meral ÖZALP, Department of Pharmaceutical Microbiology, Hacettepe University, Turkey

Müberra KOŞAR, Department of Pharmacognosy, Eastern Mediterranean University, Northern Cyprus

Nilüfer YÜKSEL, Department of Pharmaceutical Technology, Ankara University, Turkey

Nurşen BAŞARAN, Department of Pharmaceutical Toxicology, Hacettepe University, Turkey

Oya ALPAR, Department of Pharmaceutical Technology, Altınbaş University, Turkey and Department of Pharmaceutical Technology, UCL, UK

Özlem Nazan ERDOĞAN, Department of Pharmacy Management, İstanbul University, Turkey

Sıdıka TOKER, Department of Analytical Chemistry, İstanbul University, Turkey

Sibel ÖZDEN, Department of Pharmaceutical Toxicology, İstanbul University, Turkey

Stephen R. DOWNIE, Department of Plant Biology, University of Illinois, USA

Tao CHEN, Soochow University, China

Ufuk KOLAK, Department of Analytical Chemistry, İstanbul University, Turkey

Zeliha YAZICI, Department of Pharmacology, Biruni University, Turkey

İstanbul Üniversitesi Eczacılık Fakültesi adına sahibi / Owned by on behalf of the İstanbul University Faculty of Pharmacy : Emine Akalin Uruşak • Sorumlu Yazı İşleri Müdürü / Responsible Manager: Münevver Bahar Gürdal • Yayın türü / Publication Type: Yerel süreli / Local Periodical • Basım yeri / Printed at: İlbey Matbaa Kağıt Reklam Org. Múc. San. Tjç. Ltd. Şti., 2. Matbaacılar Sitesi 3NB 3 Topkapı/ Zeytinburnu, İstanbul, Turkey • Basım tarihi / Printing Date: Nisan 2019 / April 2019 • İstanbul Üniversitesi Eczacılık Fakültesi tarafından yayınlanmaktadır. / Published by İstanbul University Faculty of Pharmacy, İstanbul Üniversitesi Eczacılık Fakültesi Dekanlığı, Beyazıt Kampüsü, Fatih, İstanbul, Turkey



Publisher
İbrahim KARA

Publication Director
Ali ŞAHİN

Editorial Development
Gizem KAYAN

Finance and Administration
Zeynep YAKIŞIRER ÜREN

Deputy Publication Director
Gökhan ÇİMEN

Publication Coordinators
Betül ÇİMEN
Özlem ÇAKMAK
Okan AYDOĞAN
İrem DELİÇAY
Arzu YILDIRIM

Project Coordinators
Sinem KOZ
Doğan ORUÇ

Graphics Department
Ünal ÖZER
Deniz DURAN
Beyzanur KARABULUT

Contact
Address: Büyükdere Cad. No:
105/9 34394
Mecidiyeköy, Şişli-İstanbul,
Turkey
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
E-mail: info@avesyayincilik.com



Istanbul Journal of Pharmacy

AIMS AND SCOPE

Istanbul Journal of Pharmacy (Istanbul J Pharm) is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The journal is the official publication of İstanbul University Faculty of Pharmacy and it is published triannually on April, August, and December. The publication language of the journal is English.

Istanbul Journal of Pharmacy aims to contribute to the literature by publishing manuscripts at the highest scientific level on all fields of pharmaceutical sciences. The journal publishes original articles, short reports, letters to the editor and reviews.

The target audience of the journal includes specialists and professionals working and interested in all disciplines of pharmaceutical, also medicinal, biological and chemical sciences.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

Istanbul Journal of Pharmacy is currently indexed in Web of Science-Emerging Sources Citation Index and TUBITAK ULAKBIM TR Index.

Processing and publication are free of charge with the journal. No fees are requested from the authors at any point throughout the evaluation and publication process. All manuscripts must be submitted via the online submission system, which is available at <http://ijp.istanbul.edu.tr>. The journal guidelines, technical information, and the required forms are available on the journal's web page.

All expenses of the journal are covered by the İstanbul University Faculty of Pharmacy. Potential advertisers should contact the Editorial Office. Advertisement images are published only upon the Editor-in-Chief's approval.

Statements or opinions expressed in the manuscripts published in the journal reflect the views of the author(s) and not the opinions of the İstanbul University Faculty of Pharmacy, editors, editorial board, and/or publisher; the editors, editorial board, and publisher disclaim any responsibility or liability for such materials.

All published content is available online, free of charge at <http://ijp.istanbul.edu.tr>. Printed copies of the journal are distributed, free of charge.

Istanbul University Faculty of Pharmacy holds the international copyright of all the content published in the journal.



Editor in Chief: (Prof. Dr.) Emine AKALIN URUŞAK

Address: İstanbul University, Faculty of Pharmacy, Department of Pharmaceutical Botany, Beyazıt, 34116, Fatih İstanbul

Phone: +90 212 440 02 75

Fax: +90 212 440 02 52

E-mail: akaline@istanbul.edu.tr

Publisher: AVES

Address: Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com

Web page: avesyayincilik.com



INSTRUCTIONS TO AUTHORS

Istanbul Journal of Pharmacy (Istanbul J Pharm) is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The journal is the official publication of İstanbul University Faculty of Pharmacy and it is published triannually on April, August, and December. The publication language of the journal is English.

Istanbul Journal of Pharmacy aims to contribute to the literature by publishing manuscripts at the highest scientific level on all fields of pharmaceutical sciences. The journal publishes original articles, short reports, letters to the editor and reviews.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal conforms to the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

Manuscripts submitted to İstanbul Journal of Pharmacy will go through a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their fields in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation processes of manuscripts submitted by editors or by the editorial board members of the journal. The Editor in Chief is the final authority in the decision-making process for all submissions.

An approval of research protocols by the Ethics Committee in accordance with international agreements (World Medical Association Declaration of Helsinki "Ethical Principles for Medical Research Involving Human Subjects," amended in October 2013, www.wma.net) is required for experimental, clinical, and drug studies. If required, ethics committee reports or an equivalent official document will be requested from the authors. For manuscripts concerning experimental research on humans, a statement should be included that shows that written informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. Information on patient consent, the name of the ethics committee, and the ethics committee approval number should also be stated in the Materials and Methods section of the manuscript. It is the authors' responsibility to carefully protect the patients' anonymity. For photographs that may reveal the identity of the patients, signed releases of the patient or of their legal representative should be enclosed.

All submissions are screened by a similarity detection software (iThenticate by CrossCheck).

In the event of alleged or suspected research misconduct, e.g., plagiarism, citation manipulation, and data falsification/fabrication, the Editorial Board will follow and act in accordance with COPE guidelines.

Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE - www.icmje.org). The ICMJE recommends that authorship be based on the following 4 criteria:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.



Istanbul Journal of Pharmacy

In addition to being accountable for the parts of the work he/she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors.

All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged in the title page of the manuscript.

Istanbul Journal of Pharmacy requires corresponding authors to submit a signed and scanned version of the authorship contribution form (available for download through <http://ijp.istanbul.edu.tr>) during the initial submission process in order to act appropriately on authorship rights and to prevent ghost or honorary authorship. If the editorial board suspects a case of "gift authorship," the submission will be rejected without further review. As part of the submission of the manuscript, the corresponding author should also send a short statement declaring that he/she accepts to undertake all the responsibility for authorship during the submission and review stages of the manuscript.

Istanbul Journal of Pharmacy requires and encourages the authors and the individuals involved in the evaluation process of submitted manuscripts to disclose any existing or potential conflicts of interests, including financial, consultant, and institutional, that might lead to potential bias or a conflict of interest. Any financial grants or other support received for a submitted study from individuals or institutions should be disclosed to the Editorial Board. To disclose a potential conflict of interest, the ICMJE Potential Conflict of Interest Disclosure Form should be filled in and submitted by all contributing authors. Cases of a potential conflict of interest of the editors, authors, or reviewers are resolved by the journal's Editorial Board within the scope of COPE and ICMJE guidelines.

The Editorial Board of the journal handles all appeal and complaint cases within the scope of COPE guidelines. In such cases, authors should get in direct contact with the editorial office regarding their appeals and complaints.

When needed, an ombudsperson may be assigned to resolve cases that cannot be resolved internally. The Editor in Chief is the final authority in the decision-making process for all appeals and complaints.

When submitting a manuscript to Istanbul Journal of Pharmacy, authors accept to assign the copyright of their manuscript to Istanbul University Faculty of Pharmacy. If rejected for publication, the copyright of the manuscript will be assigned back to the authors. Istanbul Journal of Pharmacy requires each submission to be accompanied by a Copyright Transfer Form (available for download at <http://ijp.istanbul.edu.tr>). When using previously published content, including figures, tables, or any other material in both print and electronic formats, authors must obtain permission from the copyright holder. Legal, financial and criminal liabilities in this regard belong to the author(s).

Statements or opinions expressed in the manuscripts published in Istanbul Journal of Pharmacy reflect the views of the author(s) and not the opinions of the editors, the editorial board, or the publisher; the editors, the editorial board, and the publisher disclaim any responsibility or liability for such materials. The final responsibility in regard to the published content rests with the authors.

MANUSCRIPT PREPARATION

The manuscripts should be prepared in accordance with ICMJE-Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (updated in December 2017 - <http://www.icmje.org/icmje-recommendations.pdf>). Authors are required to prepare manuscripts in accordance with the CONSORT guidelines for randomized research studies, STROBE guidelines for observational original research studies, STARD guidelines for studies on diagnostic accuracy, PRISMA guidelines for systematic reviews and meta-analysis, ARRIVE guidelines for experimental animal studies, and TREND guidelines for non-randomized public behavior.

Manuscripts can only be submitted through the journal's online manuscript submission and evaluation system, available at <http://ijp.istanbul.edu.tr>. Manuscripts submitted via any other medium will not be evaluated.



Manuscripts submitted to the journal will first go through a technical evaluation process where the editorial office staff will ensure that the manuscript has been prepared and submitted in accordance with the journal's guidelines. Submissions that do not conform to the journal's guidelines will be returned to the submitting author with technical correction requests.

Authors are required to submit the following:

- Copyright Transfer Form,
- Author Contributions Form, and
- ICMJE Potential Conflict of Interest Disclosure Form (should be filled in by all contributing authors)

during the initial submission. These forms are available for download at <http://ijp.istanbul.edu.tr>.

The manuscript should be prepared in MS Word format by using Times New Roman font (12 pt) and double-spaced on one side of the paper with adequate margins (2.5 cm).

Preparation of the Manuscript

Title page: A separate title page should be submitted with all submissions and this page should include:

- The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
- Name(s), affiliations, and highest academic degree(s) and ORCID ID(s) of the author(s),
- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

Abstract: An unstructured abstract should be submitted with Original Articles and Reviews. Please check Table 1 below for word count specifications.

Keywords: Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords

should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

Manuscript Types

Original Articles: This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Materials and Methods, Results, Discussion, and Conclusion subheadings. Results and Discussion sections can be combined under "Result and Discussion" heading. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7; 1489-93). Information on statistical analyses with specified statistical software and descriptive details of the chemical used should be provided with a separate subheading under the Materials and Methods section.

Units should be prepared in accordance with the International System of Units (SI).

Editorial Comments: Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

Review Articles: Reviews prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may even be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. Please check Table 1 for the limitations for Review Articles.



Short Papers: Please check Table 1 for the limitations for Short Papers.

Letters to the Editor: This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a "Letter to the Editor." Readers can also present their comments on the published manuscripts in the form of a "Letter to the Editor." Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

Tables

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the "insert table" command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

Figures and Figure Legends

Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged

to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100x100 mm). Figure legends should be listed at the end of the main document.

All acronyms, abbreviations, and symbols used in the manuscript must follow international rules and should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

For plant materials, herbarium name (or acronym), number, name and surname of the person who identified the plant materials should be indicated in the Materials and Methods section of the manuscript.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Table 1. Limitations for each manuscript type

Type of manuscript	Word limit	Abstract word limit	Table limit	Figure limit
Original Article	3500	250 (Structured)	6	7 or total of 15 images
Review Article	5000	250	6	10 or total of 20 images
Short Paper	1000	200	No tables	10 or total of 20 images
Letter to the Editor	500	No abstract	No tables	No media



Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

References

While citing publications, preference should be given to the latest, most up-to-date publications. If an ahead-of-print publication is cited, the DOI number should be provided. Authors are responsible for the accuracy of references. In the main text of the manuscript, references should be cited by the author(s) surname and the publication date. When there are more than two authors, the first author should be listed followed by "et al." Please see below for examples:

One author: (Ergenç 2000)

Two authors: (Ergenç and Rollas 2000)

More than two authors: (Ergenç et al. 2000)

More than one paper in the same year by the same author(s): (Ergenç and Rollas 2000a, b)

Listed by the earliest year first for multiple citations: (Ergenç and Rollas 2000; Ergenç et al. 2001; Ergenç 2005)

The references must be listed alphabetically in the references section. The names of the journals should be written in italics and volume numbers should be indicated in bold letters. Journal titles should be abbreviated in accordance with the ISSN List of Title Word Abbreviations.

The reference styles for different types of publications are presented in the following examples.

Journal Article: Orlacchio A, Campos-Cavieles M, Pashiev I, Munn EA (1979) Some kinetic and other properties of the isoenzymes of aspartate aminotransferase isolated from sheep liver. *Biochem J* **177**: 583-593.

Book Section: Benn MH, Jacyno JM (1983) The toxicology and pharmacology of diterpenoid alkaloids. In: Pelletier SW (ed./eds.) *Alkaloids: Chemical and Biological Perspectives*, Vol. 1, John Wiley & Sons, New York, pp. 153-210.

Books with a Single Author: Bremer K (1994) *Asteraceae: Cladistics and Classification*. 1st ed, Timber Press, USA.

Editor(s) as Author: Huizing EH, de Groot JAM, editors (2003) *Functional reconstructive nasal surgery*. Stuttgart-New York: Thieme.

Conference Proceedings: Bengissson S, Sothemin BG, (1992) Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics*; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; pp.1561-5.

Scientific or Technical Report: Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, Ferris FL 3rd; Early Treatment Diabetic Retinopathy Study Research Group. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study *Kidney Int*: 2004. Report No: 26.

Dissertation (Thesis): Gürdal B (2010) *Ethnobotanical Study in Marmaris District (Muğla)*. Unpublished MSc Thesis, İstanbul University, Institute of Health Science, İstanbul.

Manuscripts Accepted for Publication, Not Published Yet: Slots J (1974) The microflora of black stain on human primary teeth. *Scand J Dent Res*.

Article by DOI: Ermut G, Karalı N, Özsoy N, Can A (2014) New spiroindolinones bearing 5-chlorobenzothiazole moiety. *J Enzyme Inhib Med Chem* doi: 10.3109/14756366.2013.800058.

Manuscripts Published in Electronic Format: (2014) World Nuclear Association. *Radioisotopes in Medicine*, <http://www.world-nuclear.org/info/inf55.html>, www.world-nuclear.org/info/inf55.html. Accessed 13.10.2014.

Treglia G, Ceriani L, Sadeghi R, Giovacchini G, Giovanella L. (2014) Relationship between prostate-specific antigen kinetics and detection rate of radiolabelled choline PET/CT in restaging prostate cancer patients: A meta-analysis, *Clin Chem Lab Med*. <http://www.reference-global.com/toc/cclm/current> Accessed 16.09.2014.



Istanbul Journal of Pharmacy

REVISIONS

When submitting a revised version of a paper, the author must submit a detailed "Response to the reviewers" that states point by point how each issue raised by the reviewers has been covered and where it can be found (each reviewer's comment, followed by the author's reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be cancelled. If the submitting author(s) believe that additional time is required, they should request this extension before the initial 30-day period is over.

Accepted manuscripts are copy-edited for grammar, punctuation, and format. Once the publication process of a manuscript is completed, it is published online on

the journal's webpage as an ahead-of-print publication before it is included in its scheduled issue. A PDF proof of the accepted manuscript is sent to the corresponding author and their publication approval is requested within 2 days of their receipt of the proof.

Editor in Chief: Emine AKALIN URUŞAK

Address: İstanbul University Faculty of Pharmacy,
İstanbul, Turkey

Phone: +90 212 440 02 75

Fax: +90 212 440 02 52

E-mail: akaline@istanbul.edu.tr

Publisher: AVES

Address: Büyükdere Cad. 105/9 34394
Mecidiyeköy, Şişli, İstanbul, Turkey

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com
avesyayincilik.com



CONTENTS

ORIGINAL ARTICLES

Biochemical constituents and antioxidant activities of some mushrooms from Turkey: Agaricus spp., Pleurotus spp., Morchella esculenta and Terfezia boudieri 1

Mehmet Akyüz, Ayşe Dilek Özşahin Kireççi, Zehra Gökçe, Sevda Kırbağ, Ökkeş Yılmaz

Qualitative and quantitative phytochemical analysis and in-vitro biological activity of rheum Rheum ribes L. in different parts 7

Turgut Taşkın, Gizem Bulut

PPAR γ Pro12Ala and C161T polymorphisms, but not PPAR α L162V, are associated with osteoporosis risk in Turkish postmenopausal women 14

Özlem Kurt Şirin, Hülya Yılmaz Erdoğan, Mehmet Uyar, Ayşe Can

Deontological violations of community pharmacies in Turkey 20

Bülent Kıran, Elif Gizem Karaca

Real time monitoring of cytotoxicity of Callistemon citrinus against Colo-205 cell line 25

Alim Hüseyin Dokumacı, Peter Olutope Fayemi, Mukerrem Betül Yerer

REVIEW

Plants used in traditional treatment against diarrhea in Turkey 33

Seçil Karahüseyin, Aynur Sarı

Biochemical constituents and antioxidant activities of some mushrooms from Turkey: *Agaricus* spp., *Pleurotus* spp., *Morchella esculenta* and *Terfezia boudieri*

Mehmet Akyüz^{1*} , Ayşe Dilek Özşahin Kireççi¹ , Zehra Gökçe² , Sevda Kırbağ³ , Ökkeş Yılmaz³ 

¹Department of Biology, Bitlis Eren University, Faculty of Arts & Science, 13000 Bitlis, Turkey

²Department of Health Administration, Kilis 7 Aralık University, Yusuf Serefoglu Faculty of Health Sciences, 79090 Kilis, Turkey

³Department of Biology, Fırat University, Faculty of Science, 23119 Elazığ, Turkey

ORCID IDs of the authors: M.A. 0000-0003-3986-3498; A.D.Ö.K. 0000-0002-1832-7082; Z.G. 0000-0001-7855-2700; S.K. 0000-0002-4337-8236; Ö.Y. 0000-0002-8276-4498.

Cite this article as: Akyüz M, Özşahin Kireççi AD, Gökçe Z, Kırbağ S, Yılmaz Ö (2019). Biochemical constituents and antioxidant activities of some mushrooms from Turkey: *Agaricus* spp., *Pleurotus* spp., *Morchella esculenta* and *Terfezia boudieri*. Istanbul J Pharm 49 (1): 1-6.

ABSTRACT

In this study, the vitamin, sugar, protein, fatty acid, total flavonoid, phenolic contents, and antioxidant activities (ABTS [2,2'-azinobis(3-ethylbenzothiazoline-6-sulfonic acid)], DPPH [2,2-diphenyl-1-picrylhydrazyl], and MDA [malondialdehyde] speciality of edible wild, cultured and commercial mushrooms (*Pleurotus* spp., *L. sajor-caju*, *Agaricus* spp., *Morchella esculenta* and *Terfezia boudieri*) from Turkey were researched. The levels of vitamins were 0.00-60.85 K1 (phyllloquinone), 0.00-1.50 K2 (menaquinone), 1.35-7.20 D2 (ergocalciferol), 0.60-3.45 D3 (cholecalciferol), 8.35-68.20 α -tocopherol, 90.45-491.75 ergosterol, 0.00-110.45 stigmaterol, 0.00-1.30 β -sitosterol, 0.05-0.70 retinol and 0.05-0.15 retinolast (mg/kg) of dry weight. It was observed that *P. ostreatus* and *A. campestris* have a higher amount of glucose, sucrose and maltose, when compared with the other species. Furthermore, sugars such as maltose and arabinose were not detected in *Pleurotus* spp. It was determined that the amount of total flavonoid, total phenolic and protein were higher in *A. bisporus*, *A. campestris* and *L. sajor-caju* than other mushroom species according to literature. Unsaturated fatty acids, especially linoleic (C18:2) and oleic (C18:1) acids, were predominant (37.08-76.72% and 2.91-39.43%, between) whereas, other fatty acids were in smaller fractions. In addition, ABTS, DPPH and MDA were found to be 12.36-99.68% at 25-200 μ L, 22.97-91.89% at 50-800 μ L and 3.12-8.41 nmol/mL, respectively.

Keywords: Nutritive value, antioxidant activities *Pleurotus* spp., *Agaricus* spp., *M. esculenta*, *T. boudieri*

INTRODUCTION

Edible mushrooms are appreciated for their nutritional value and medical properties as well as their texture and flavor. They are considered healthy because they are low in fat and calories but rich in dietary fibre, vitamins, minerals and also protein. The nutritive components and taste properties of various mushrooms have been thoroughly studied (Barros et al. 2008; Grangeia et al. 2011; Reis et al. 2012; Kalogeropoulos et al. 2013; Heleno et al. 2015). In terms of their nutritional qualities, they have become increasingly important in the human diet; this may be explained by their antioxidant capacity to clear free radicals, which are responsible for the oxidative damage of lipids, proteins and nucleic acids of mushrooms (Wong and Chye 2009).

Oxidative stress caused by free radicals may be related to diseases such as aging, diabetes, cancer, cirrhosis and atherosclerosis etc. Organisms have developed antioxidant defenses and repair systems to protect against oxidative stress, but these systems are not sufficient to prevent damage completely (Wasser 2010; Wasser 2014; Sanchez 2017). However, antioxidant supplements or foods containing antioxidants can be used to help reduce the oxidative stress of the human body. Carotenoids, α -tocopherol,

Address for Correspondence :

Mehmet AKYÜZ, e-mail: makyuz@beu.edu.tr

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 12.04.2018

Accepted: 04.10.2018

ascorbic acid and polyphenols are well protected against free radical damage by some oxidative enzymes (Tadhani et al. 2007). Epidemiological studies showed that the consumption of vegetable and fruits is associated with reduced risks of some diseases. Mushrooms accumulate a variety of tocopherols, steroids, phenols, polyketides, flavonoids, terpenes etc. (Wasser 2010; Vaz et al. 2011; Taofiq et al. 2016; Sanchez 2017). Nowadays, the use of edible mushrooms as nutrients have become more important due to the increase in diseases such as diabetes, fatty liver, obesity, heart disease, high blood pressure, cancer, immune systems etc. (Barros et al. 2008; Wasser 2014; Rathore et al. 2017).

Recently, it has been found that mushrooms are medically active in various treatments and used for diet therapy. Herein, we report the phenol, flavonoid, vitamin, fatty acid and sugar contents of mushrooms and their antioxidant capacity. For the identification of antioxidant properties, we also evaluated their DPPH, ABTS and MDA features.

MATERIAL AND METHODS

Collection of Mushroom Samples

The mushrooms used in the present study were obtained from different cultural studies, collected from field work and purchased from a local grocery. Wet *Pleurotus eryngii* (DC. ex Fr.) Quel. var. *ferulae* Lanzi, *Pleurotus eryngii* (DC. ex Fr.) Quel. var. *eryngii*, *Pleurotus ostreatus* (Jacq.) P. Kumm., *Lentinus sajor-caju* (Fr.) Fries. (syn. *Pleurotus sajor-caju* (Fr.) Sing.), and *Pleurotus floridanus* Singersamples were obtained from the Cultured Mushroom Laboratory of Bitlis Eren University, Bitlis - Turkey. In addition, commercial samples of *Agaricus bisporus* (J.E. Lange) Imbach were purchased from Bitlis - Turkey, wild samples of *Morchella esculenta* (L.) Pers. from Antalya, *P. ostreatus* and *Agaricus campestris* L. from Elazığ, and *Terfezia boudieri* Chatin from Şanlıurfa were collected and purchased from Turkey, respectively. The samples were dried at 25 °C for 15-20 days, and then used in the study.

Methods

One gram of dry mushroom samples was homogenised with 10 ml of 80% methanol using a blender, and then the residues were filtered. After centrifugation (5000 rpm, 5 min.), the supernatant was separated from the residue, and the solvent removed with a rotary vacuum evaporator. The evaporated residue was dissolved in DMSO and stored until analysis.

Selected biochemical components and antioxidant activities were determined with appropriate methods, as described below: Flavonoid (DAD detector following RP-HPLC) by the chromatographic analysis and total phenolic contents (The absorbance of the mixture was measured spectrophotometrically at 765 nm) (Singleton and Rossi 1965; Zu et al. 2006; Barros et al. 2007; Song et al. 2010), fatty acids (Methyl esters were analyzed with the SHIMADZU GC 17 Ver. 3 gas chromatography (Kyoto, Japan)) by modified by Hara and Radin (1978), Christie (1992), 2,2-diphenyl-1-picrylhydrazyl (DPPH) (The absorbance of the mixture was measured spectrophotometrically at 517 nm), 2,2'-azino-bis(3-ethylbenzothiazoline-6-sulfonic acid (ABTS) (The absorbance of the mixture was measured spectrophotometrically at 734 nm), and malondialdehyde (MDA) (The equipment consisted of a pump (LC-10 ADVP), a UV-visible detector (SPD-10AVP), a column oven (CTO-10ASVP), an autosampler (SIL-10ADVP) a degasser unit (DGPU-14A) and a computer system with class VP software (Shimadzu, Kyoto Japan) according to the method of Shimoi et al. (1994), Brand-Williams et al. (1995) and Re et al. (1999), free sugars (high performance liquid chromatography (HPLC) with a refractive index detector (RID) and vitamins (DGPU-14A and Class VP software (Shimadzu, Kyoto Japan) were determined by HPLC based on the method used by Sánchez-Machado et al. (2004) and Lopez-Cervantes et al. (2005), and the content of proteins was analysed according to Lowry procedure (The absorbance of the mixture was measured spectrophotometrically at 750 nm) (Lowry et al. 1951).

metrically at 734 nm), and malondialdehyde (MDA) (The equipment consisted of a pump (LC-10 ADVP), a UV-visible detector (SPD-10AVP), a column oven (CTO-10ASVP), an autosampler (SIL-10ADVP) a degasser unit (DGPU-14A) and a computer system with class VP software (Shimadzu, Kyoto Japan) according to the method of Shimoi et al. (1994), Brand-Williams et al. (1995) and Re et al. (1999), free sugars (high performance liquid chromatography (HPLC) with a refractive index detector (RID) and vitamins (DGPU-14A and Class VP software (Shimadzu, Kyoto Japan) were determined by HPLC based on the method used by Sánchez-Machado et al. (2004) and Lopez-Cervantes et al. (2005), and the content of proteins was analysed according to Lowry procedure (The absorbance of the mixture was measured spectrophotometrically at 750 nm) (Lowry et al. 1951).

RESULTS AND DISCUSSION

Vitamin A, D, E and K are essential micronutrients that have a wide variety of functions throughout the human body; the first helps the eyes adjust to light changes (blindness), in gene expression, cell division, reproduction, bone growth, tooth development, antioxidant, and regulation of the immune system; the second plays a critical role in the body's use of Ca²⁺ and P in the maintenance of healthy bones and teeth; the third one benefits the body by acting as an antioxidant, protecting red blood cells, and essential fatty acids from destruction; and the fourth plays an essential role in promoting bone health, normal blood clotting, and other functions (Combs 2008). While there is a wealth of literature data regarding studies on the vitamin A, E, and C contents of mushroom species, those studies devoted to vitamin K, D and sterol contents are limited. Mushrooms rich in vitamins A, D, E and K along with ergosterol content are thought to be the only vegetarian source for vitamin D (Rathore et al. 2017). It has been well established as critical for bone health, in immune function and the prevention of certain types of cancer (Bischoff-Ferrari et al. 2006; Holick 2007; Urashima et al. 2010).

Vitamin (K1, K2, D2, D3, α-tocopherol, retinol and retinolast) and sitosterol (ergosterol, stigmasterol and β-sitosterol) contents of *Pleurotus* spp., *L. sajor-caju*, *Agaricus* spp., *M. esculenta* and *T. boudieri* samples are shown in Table 1. The highest vitamin K1, K2, D2, D3, α-tocopherol, ergosterol and stigmasterol contents were 60.85 µg/g in *T. boudieri*, 1.50 µg/g in *P. floridanus*, 7.20 µg/g in *L. sajor-caju*, 3.45 µg/g in *M. esculenta*, 68.20 µg/g in *T. boudieri*, 491.75 µg/g in *M. esculenta* and 110.45 µg/g in *M. esculenta* as shown in Table 1. The presence of sterols in mushrooms has previously been reported. The predominance of ergosterol and the presence of the minor related sterols in *Russula delica* (0.07-12.51 µg/100 g fw), *Suillus bellinii* (0.05-12.31 µg/100 g fw) and *Lactarius* species (0.02-18.0 µg/100 g fw) was reported by Kalogeropoulos et al. (2013). Mushrooms contain several primary vitamins such as vitamin D, riboflavin, niacin, thiamine and tocopherol (Cheung, 2010). For various species, the niacin, ascorbic acid, thiamine and riboflavin content can vary (Zhu et al. 2007; Yin and Zhou 2008; Zhou and Yin 2008; Xu et al. 2012). The reported vitamin contents were 19.16-400.36 µg/100 g

dw ascorbic acid and tocopherol in wild edible mushroom (Grangeia et al. 2011; Vaz et al. 2011), 0.18-10.65 µg/g dw tocopherol in commercial and wild mushrooms (Barros et al. 2008), 1.81-11.16 µg/100 g fw in *Flammulina velutipes*, *A. bisporus*, *Pleurotus* spp. and *Lentinula edodes* (Reis et al. 2012), 0.70-5.1 mg/100 g ascorbic acid in *Terfezia* and *Tirmania* species (Sawaya et al. 1985; Hussain and Al-Ruqaie 1999), 4.7-194 mg/100 g dm tocopherol and vitamin D2 in *Boletus* species and *Thelephora ganbajun* (Wu et al. 2005; Zhou and Yin 2008). The wide variation in vitamin contents in edible wild, culture and commercial mushrooms might arise from the variety of the growing areas, stage of ripening, sample preparation, methods of analysis, as well as other factors (climate condition, sample collection, transportation, host plant) as stated in the aforementioned studies.

The sugar, total flavonoid, phenol and protein contents of the studied mushrooms, expressed on a dry weight basis, are presented in Table 2. It was observed that *P. ostreatus* and *A. camp-*

estris have a higher amount of glucose, sucrose and maltose, when compared with the other species. Furthermore, sugars such as maltose and arabinose were not detected in *Pleurotus*-species (see Table 2). The accumulation of arabinose, mannitol, fructose, sucrose, trehalose, mannose, glucose in the fruit bodies of other species were already reported. The observed sugar values can vary within those considered as typical for culture, commercial and edible wild mushrooms (Barros et al. 2008; Grangeia et al. 2011; Vaz et al. 2011; Reis et al. 2012; Heleno et al. 2015). These differences might have been dependent on growing habitats, mushroom types and geographical areas as stated in the aforementioned reports.

It was determined that the amount of total flavonoid and phenol that *Agaricus* spp. (*A. bisporus* and *A. campestris*) contain are higher than the amount that other mushroom species (*Pleurotus* spp., *L. sajor-caju*, *T. boudieri* and *M. esculenta*) see Table 2. It has also been suggested that the antioxidant properties contribute to their vitamin, flavonoid and phenolic compounds

Table 1. Vitamin contents of some edible mushrooms from Turkey (dry weight)

Mushrooms	Vitamin (µg/g)					Sitosterol (µg/g)				
	K1	K2	D2	D3	α-tocopherol	Retinol	Retinolast	Ergosterol	Stigmasterol	β-sitosterol
<i>P. eryngii</i> var. <i>ferulae</i> *	-	1.00	4.50	0.85	25.15	0.30	0.10	259.10	5.10	-
<i>P. eryngii</i> var. <i>eryngii</i> *	2.65	0.15	2.90	1.15	8.35	0.10	0.10	90.45	1.35	1.30
<i>L. sajor-caju</i> *	0.95	-	7.20	1.45	19.70	0.05	0.10	431.10	2.60	-
<i>P. floridanus</i> *	1.70	1.50	3.55	0.70	28.45	0.15	0.15	372.25	-	0.20
<i>P. ostreatus</i> *	0.90	-	3.95	0.60	34.60	0.10	0.05	448.65	5.55	-
<i>P. ostreatus</i> ^{b, **}	2.60	-	5.05	0.75	31.20	0.05	0.05	374.80	6.40	0.10
<i>A. bisporus</i> ^{d, *}	2.00	-	4.85	1.10	56.35	0.70	0.05	403.65	16.95	0.45
<i>A. campestris</i> ^{b, **}	20.75	1.15	1.35	1.05	24.90	0.20	0.10	169.75	3.10	0.15
<i>T. boudieri</i> ^{a, **}	60.85	0.60	3.95	0.60	68.20	0.55	0.05	103.70	36.30	1.10
<i>M. esculenta</i> ^{c, **}	21.05	0.95	6.75	3.45	43.65	0.10	0.05	491.75	110.45	-

*: culture, **: wild,
^a: Şanlıurfa, ^b: Elazığ, ^c: Antalya, ^d: Bitlis
 K1 : phylloquinone, K2 : menaquinone, D2 : ergocalciferol, D3 : cholecalciferol

Table 2. Sugar, flavonoid, phenol and protein contents of some edible mushroom from Turkey (dry weight)

Mushrooms	Sugar (µg/g)					Total Flavonoid (µg/g)	Total Phenol (µg/mL)	Protein (mg/g)
	Glucose	Sucrose	Fructose	Maltose	Arabinose			
<i>P. eryngii</i> var. <i>ferulae</i> *	5.58	0.92	-	-	-	199.00	1.87±0.10	82.82
<i>P. eryngii</i> var. <i>eryngii</i> *	1.77	5.17	0.42	-	-	88.00	1.88±0.13	96.05
<i>L. sajor-caju</i> *	-	-	-	-	-	2.00	1.39±0.18	138.60
<i>P. floridanus</i> *	27.57	-	-	-	-	4.00	1.11±0.04	137.37
<i>P. ostreatus</i> *	266.03	11.00	1.61	-	-	-	1.24±0.13	137.36
<i>P. ostreatus</i> ^{b, **}	207.72	17.19	0.64	-	-	43.00	2.09±0.12	114.21
<i>A. bisporus</i> ^{d, *}	-	1.42	0.48	31.16	-	611.00	2.11±0.07	95.78
<i>A. campestris</i> ^{b, **}	-	28.63	-	230.97	-	18.00	3.78±0.46	101.15
<i>T. boudieri</i> ^{a, **}	39.30	4.66	-	-	3.99	39.00	1.88±0.20	81.05
<i>M. esculenta</i> ^{c, **}	74.27	1.01	-	52.98	1.79	6.00	2.02±0.26	107.10

*: culture, **: wild,
^a: Şanlıurfa, ^b: Elazığ, ^c: Antalya, ^d: Bitlis

Table 3. Fatty acid composition of some edible mushroom from Turkey (dry weight)

Mushrooms	Fatty acids (% dry weight)																		
	C14:0	C15:0	C15:1	C16:0	C16:1	C17:0	C18:0	C18:1	C18:2	C18:3	C20:1	C20:2	C20:3	C20:5	C21:0	C22:0	C22:6	C23:0	C24:0
<i>P. eryngii</i> var. <i>ferulae</i> ^a *	-	1.31	0.13	13.55	1.78	-	2.77	39.43	37.08	0.32	0.18	1.60	-	-	0.23	0.55	-	0.40	0.67
<i>P. eryngii</i> var. <i>eryngii</i> ^a *	-	1.43	0.15	12.83	2.11	-	3.01	35.07	43.58	0.18	-	0.68	-	-	0.22	0.36	-	0.28	0.11
<i>L. sajor-caju</i> ^a *	-	-	-	10.49	1.19	-	1.96	13.75	70.04	-	-	-	-	1.62	-	0.95	-	-	-
<i>P. floridanus</i> ^a *	-	1.67	-	13.07	1.97	-	1.62	14.70	65.20	-	-	-	-	0.77	-	-	-	-	0.98
<i>P. ostreatus</i> ^a *	-	-	-	8.94	0.99	-	1.32	11.33	76.72	-	-	-	-	0.70	-	-	-	-	-
<i>P. ostreatus</i> ^{b, **}	-	1.68	-	11.01	1.97	-	1.34	12.69	69.85	-	-	-	-	1.05	-	-	-	-	0.42
<i>A. bisporus</i> ^{d, *}	-	1.16	-	10.64	1.75	0.53	5.53	2.91	71.98	2.12	-	-	0.35	-	1.14	1.21	-	-	0.67
<i>A. campestris</i> ^{b, **}	-	-	-	18.14	3.59	-	4.43	4.09	59.02	1.61	-	-	-	0.63	1.10	2.95	-	2.98	1.47
<i>T. boudieri</i> ^{a, **}	-	-	-	16.35	3.40	-	2.89	21.42	53.88	0.52	0.15	0.28	0.13	-	0.15	0.61	0.10	0.12	-
<i>M. esculenta</i> ^{c, **}	-	-	-	12.54	3.49	-	2.51	8.31	71.41	0.45	-	0.28	-	-	0.99	-	-	-	-

*: culture, **: wild,

^a: Şanlıurfa, ^b: Elazığ, ^c: Antalya, ^d: Bitlis

C14:0 myristic acid, C15:0 pentadecanoic acid, C15:1 pentadecenoic acid, C16:0 palmitic acid, C16:1 palmitoleic acid, C17:0 margaric acid, C18:0 stearic acid, C18:1 oleic acid, C18:2 linoleic acid, C18:3 linolenic acid, C20:1 eicosenoic acid, C20:2 eicosadienoic acid, C20:3 eicosatrienoic acid, C20:5 eicosapentaenoic acid, C21:0 heneicosanoic acid, C22:0 behenic acid, C22:6 docosahexaenoic acid, C23:0 tricosanoic acid, C24:0 lignoserinic acid

Previous studies suggested a strong correlation between the vitamin, phenolic compounds and flavonoid in mushrooms and their antioxidant activity ((2,2-diphenyl-1-picrylhydrazyl (DPPH), 2,2-azinobis (3-ethyl-benzothiazoline-6-sulfonic acid (ABTS), ferric reducing antioxidant power (FRAP) assay, oxygen radical absorbance capacity (ORAC) assay, antiradical, reducing power, chelating ability etc. (Grangeia et al. 2011; Vaz et al. 2011; Kalogeropoulos et al. 2013; Sanchez 2017). The total flavonoid and phenolic contents of the mushrooms was determined by growing conditions, time and manner of harvesting, maturity, variety and species. Even after harvest, many factors may affect composition. These include, variation in analytical methods, sample preparation, storage time and conditions and processing procedures as shown by others.

L. sajor-caju, *P. floridanus* and *P. ostreatus* (culture) were the mushrooms with the highest amounts of protein (137.3-138.6 mg/g), while *T. boudieri*, *P. eryngii* var. *ferulae*, *A. bisporus* and *P. eryngii* var. *eryngii* were had relatively lower protein contents (81.0-96.0 mg/g) than the other samples in our study as seen in Table 2. Mushroom protein was reported to vary according to especially analytical methods, the genetic structure of the species and the chemical and physical differences in growing habitat. It seems that the quantity of crude protein values are different to those reported by other researchers (Barros et al. 2008; Vaz et al. 2011; Reis et al. 2012; Heleno et al. 2015; Rathore et al. 2017).

The results for fatty acid composition of edible wild, culture and commercial mushrooms are shown in Table 3. Up to 18 fatty acids were found in mushroom lipids. The analysis of the obtained profiles showed that linoleic (37.08-76.72%), oleic (2.91-39.43%), palmitic (8.94-18.14%), stearic (1.32-5.53%) and palmitoleic acid (0.99-3.59%) were the main fatty acids in the species studied (Table 3). Other fatty acids were present in only low levels. The studied species revealed that linoleic acid was an important fatty acid. It was the preponderant fatty acid in *P. ostreatus*, *A. bisporus*, *M. esculenta*, *L. sajor-caju*, *P. floridanus*, *A. campestris*, *T. boudieri*, while oleic acid was the main component in *P. eryngii* var. *ferulae*, *P. eryngii* var. *eryngii* and *T. boudieri* species. *Agaricus* species were the mushroom with the highest amounts of stearic acid, while *A. campestris* and *T. boudieri* were the mushrooms with the highest amounts of palmitic acid. The fatty acid profiles of the different mushroom species appeared to be distinct. An abundance of these essential fatty acids in other edible wild, culture and commercial mushrooms has been described (Barros et al. 2008; Vaz et al. 2011; Reis et al. 2012; Kalogeropoulos et al. 2013). Regarding the species described above, their qualitative and quantitative fatty acids profiles have, to some extent, been found to be different from those described in literature. These are consistent with the observation that, in mushrooms, the unsaturated fatty acids predominate over the saturated, in the total fatty acids contents.

Table 4. Antioxidant activities of some edible mushroom from Turkey (dry weight)

Mushrooms	ABTS				DPPH					MDA (nmol/mL)		
	25µL	50 µL	100 µL	200 µL	50µL	100 µL	200 µL	400 µL	800 µL	MDA	FeCl	Control
<i>P.eryngii</i> var. <i>ferulae</i> *	55.71	72.92	92.95	99.53	36.48	30.88	40.13	79.92	91.89	3.12±0.11		
<i>P.eryngii</i> var. <i>eryngii</i> *	44.33	70.26	95.77	97.96	54.05	70.65	64.67	80.50	91.69	4.23±0.22		
<i>L. sajor-caju</i> *	45.38	77.93	92.48	97.65	57.14	76.44	77.60	80.30	91.69	5.95±0.46		
<i>P.floridanus</i> *	64.47	90.29	97.33	99.21	68.53	87.06	83.39	79.15	90.34	7.21±0.34		
<i>P.ostreatus</i> *	44.60	74.33	93.11	98.59	48.84	63.89	70.84	80.30	91.89	4.94±0.67		
<i>P.ostreatus</i> ^{b, **}	42.09	67.91	78.56	96.40	25.86	22.97	70.84	65.63	91.50	7.09±0.37 1.104±0.06		
<i>A. bisporus</i> ^{d, *}	12.36	88.41	96.87	99.53	47.10	71.81	45.94	77.99	85.32	5.93±1.47		
<i>A. campestris</i> ^{b, **}	73.86	94.83	98.12	99.16	77.41	90.92	76.44	78.37	86.87	8.41±0.94		
<i>T. boudieri</i> ^{a, **}	74.80	69.32	84.50	97.18	42.47	42.85	44.98	72.00	86.29	7.04±0.54		
<i>M. esculenta</i> ^{c, **}	76.21	96.71	91.70	92.33	40.92	42.08	37.83	73.93	83.39	6.79±0.37		

*: culture, **: wild,
^a: Şanlıurfa, ^b: Elazığ, ^c: Antalya, ^d: Bittlis
 ABTS: 2,2'-azinobis[3-ethylbenzothiazoline-6-sulfonic acid], DPPH: 2,2-diphenyl-1-picrylhydrazyl, MDA: malondialdehyde

It was determined that their effect (*A. bisporus*, *P. eryngii* var. *ferulae*, *P. ostreatus* and *P. eryngii* var. *eryngii*) to remove the ABTS and DPPH radical was more efficient in groups to which samples of 25-200 µL (12.36-99.53%) ABTS and 50-800 µL (36.48-91.89%) DPPH were dose dependent (see Table 4). The present findings reveal that the extract of *A. bisporus*, *L. sajor-caju*, *P. eryngii* var. *eryngii*, *P. ostreatus* and *P. eryngii* var. *ferulae* possesses a profound antioxidant effect as seen in Table 4. Several studies suggested a strong correlation between the vitamin, flavonoid and phenolic compounds in mushrooms and their antioxidant activity (DPPH, ABTS, FRAP, ORAC, antiradical, reducing power, chelating ability etc. (Grangeia et al. 2011; Vaz et al. 2011; Kalogeropoulos et al. 2013; Sanchez 2017). Our data (see Table 4) is different to that reported by other researchers. Large quantitative differences (probably due to the analytical methods used), and the heterogeneity of the samples analysed were found to be so in the cited studies. The geographic effect, climatic conditions, growing habitats and species are thought to be responsible for these differences. Our findings were supported by previous findings in the aforementioned studies.

In conclusion, the study results generally show that mushrooms can be a good antioxidant source to help an organism increase its overall antioxidant capacity and protect it against lipid peroxidation.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – M.A., S.K.; Design – M.A.; Supervision – M.A.; Resource – M.A.; Materials – M.A., S.K.; Data Collection and/or Processing – M.A., S.K.; Analysis and/or Interpretation – A.D.Ö.K., Z.G., Ö.Y.; Literature Search – M.A., S.K.; Writing – M.A.

Conflict of Interest: The authors have no conflict of interest to declare.

Financial Disclosure: The authors declared that this study has received no financial support.

REFERENCES

- Barros L, Calhella C, Vaz J, Ferreira I, Baptista P, Estevinho L (2007). Antimicrobial activity and bioactive compounds of Portuguese wild edible mushrooms methanolic extracts. *Eur Food Res Tech* **225**: 151-156. [CrossRef]
- Barros L, Cruz T, Baptista P, Estevinho LM, Ferreira IC (2008). Wild and commercial mushrooms as source of nutrients and nutraceuticals. *Food Chem Toxicol* **46**: 2742-2747. [CrossRef]
- Bischoff-Ferrari HA, Giovannucci E, Willett WC, Dietrich T, Dawson-Hughes B (2006). Estimation of optimal serum concentrations of 25-hydroxyvitamin D for multiple health outcomes. *Am J Clin Nutr* **84**: 18-28. [CrossRef]
- Brand-Williams W, Cuvelier ME, Berset C (1995). Use of a free radical method to evaluate antioxidant activity. *Lebensm Wiss Technol* **28**: 25-30. [CrossRef]
- Christie WW (1992). Gas chromatography and lipids. The Oil Press, Glaskow.
- Combs GF (2008). The vitamins: fundamental aspects in nutrition and health. Third Edition, Elsevier Academic Press, USA.
- Grangeia C, Heleno SA, Barros L, Martins A, Ferreira IC (2011). Effects of trophism on nutritional and nutraceutical potential of wild edible mushrooms. *Food Res Inter* **44**: 1029-1035. [CrossRef]
- Hara A, Radin NS (1978). Lipid extraction of tissues with a low-toxicity solvent. *Anal Biochem* **90**: 420-426. [CrossRef]
- Heleno SA, Barros L, Martins A, Morales P, Fernández-Ruiz V, Glamoclija J, Ferreira IC (2015). Nutritional value, bioactive compounds, antimicrobial activity and bioaccessibility studies with wild edible mushrooms. *LWT-Food Sci Tech* **63**: 799-806. [CrossRef]
- Holick MF (2007). Vitamin D deficiency. *New Engl J Med* **357**: 266-281. [CrossRef]
- Hussain G, Al-Ruqaie IM (1999). Occurrence, chemical composition, and nutritional value of truffles: an overview. *Pakistan J Biol Sci* **2**: 510-514. [CrossRef]
- Kalogeropoulos N, Yanni AE, Koutrotsis G, Aloupi M (2013). Bioactive microconstituents and antioxidant properties of wild edible mushrooms from the island of Lesvos, Greece. *Food Chem Toxicol* **55**: 378-385. [CrossRef]
- López-Cervantes J, Sánchez-Machado DI, Ríos-Vázquez NJ (2006). High-performance liquid chromatography method for the simultaneous quantification of retinol, -tocopherol, and cholesterol in shrimp waste hydrolysate. *J Chrom A* **1105**: 135-139. [CrossRef]

- Lowry OH, Rosenbrough NJ, Farr AL, Randall RJ (1951). Protein measurement with the Folin-phenol reagent. *J Biochem* **193**: 265-277.
- Rathore H, Prasad S, Sharma S (2017). Mushroom nutraceuticals for improved nutrition and better human health: a review. *Pharma Nutr* **5**: 35-46. [\[CrossRef\]](#)
- Re R, Pellegrini N, Proteggente A, Pannala A, Yang M, Rice-Evans C (1999). Antioxidant activity applying an improved ABTS radical cation decolorization assay. *Free Radic Biol Med* **26**: 1231-1237. [\[CrossRef\]](#)
- Reis FS, Barros L, Martins A, Ferreira IC (2012). Chemical composition and nutritional value of the most widely appreciated cultivated mushrooms: an inter-species comparative study. *Food Chem Toxicol* **50**: 191-197. [\[CrossRef\]](#)
- Sánchez C (2017). Reactive oxygen species and antioxidant properties from mushrooms. *Synthetic Syst Biotechnol* **2**: 13-22. [\[CrossRef\]](#)
- Sánchez-Machado DI, López-Hernández J, Paseiro-Losada P, López-Cervantes J (2004). An HPLC method for the quantification of sterols in edible seaweeds. *Biomed Chromatogr* **18**: 183-190. [\[CrossRef\]](#)
- Sawaya WN, Al-Shalhat A, Al-Sogair A, Mohammad M (1985). Chemical composition and nutritive value of truffles of Saudi Arabia. *J Food Sci* **50**: 450-453. [\[CrossRef\]](#)
- Shimoi K, Masuda S, Furugori M, Esaki S, Kinae N (1994). Radioprotective effect antioxidative flavonoids in gamma-ray irradiated mice. *Carcinogenesis* **15**: 2669-2672. [\[CrossRef\]](#)
- Singleton VL, Rossi JA (1965). Colorimetry of total phenolics with phosphomolybdic-phosphotungstic acid reagents. *American Journal of Enology Viticulture* **16**: 144-158.
- Song FL, Gan RY, Zhang Y, Xiao Q, Kuang L, Li HB (2010). Total phenolic contents and antioxidant capacities of selected Chinese medicinal plants. *Int J Mol Sci* **11**: 2362-2372. [\[CrossRef\]](#)
- Tadhani MB, Patel VH, Subhash R (2007). In vitro antioxidant activities of *Stevia rebaudiana* leaves and callus. *J Food Compos Anal* **20**: 323-329. [\[CrossRef\]](#)
- Taofiq O, Martins A, Barreiro MF, Ferreira IC (2016). Anti-inflammatory potential of mushroom extracts and isolated metabolites. *Trends Food Sci Technol* **50**: 193-210. [\[CrossRef\]](#)
- Urashima M, Segawa T, Okazaki M, Kurihara M, Wada Y, Ida H (2010). Randomized trial of vitamin D supplementation to prevent seasonal influenza A in schoolchildren. *Am J Clin Nutr* **91**: 1255-1260. [\[CrossRef\]](#)
- Vaz JA, Barros L, Martins A, Santos-Buelga C, Vasconcelos MH, Ferreira IC (2011). Chemical composition of wild edible mushrooms and antioxidant properties of their water soluble polysaccharidic and ethanolic fractions. *Food Chem* **126**: 610-616. [\[CrossRef\]](#)
- Wasser SP (2010). Medicinal mushroom science: history, current status, future trends, and unsolved problems. *Int J Med Mushrooms* **12**: 1-16. [\[CrossRef\]](#)
- Wasser SP (2014). Medicinal mushroom science: Current perspectives, advances, evidences, and challenges. *Biomed J* **37**: 345-356. [\[CrossRef\]](#)
- Wong JY, Chye FY (2009). Antioxidant properties of selected tropical wild edible mushrooms. *J Food Compos Anal* **22**: 269-277. [\[CrossRef\]](#)
- Wu SX, Wang BX, Guo SY, Li L, Yin JZ (2005). Yunnan wild edible *Thelephora ganhajun* Zang nutrients analysis. *Mod Prev Med* **32**: 1548-1549.
- Xu DX, Lin J, Duan ZM, Wan YP, Bai B, Sun C (2012). Detection of chemical compositions of wild *Lactarius volemus* from Yunnan province. *Edible Fungi* **4**: 60-61.
- Yin JZ, Zhou LX (2008). Analysis of nutritional components of 4 kinds of wild edible fungi in Yunnan. *Food Res Dev* **29**: 133-136.
- Zhou LX, Yin JZ (2008). Yunnan wild edible *Boletus* nutrition analysis and evaluation. *Edible Fungi* **4**: 61-62.
- Zhu XQ, Wang XJ, Xiong Z (2007). Nutrient analysis of the wild *Lentinula edodes*. Forest by-product and speciality in China **2**: 9-11.
- Zu Y, Li C, Fu Y, Zhao C (2006). Simultaneous determination of catechin, rutin, quercetin kaempferol and isorhamnetin in the extract of sea buckthorn (*Hippophae rhamnoides* L.) leaves by RPHPLC with DAD. *J Pharm Biomed Anal* **41**: 714-719. [\[CrossRef\]](#)

Qualitative and quantitative phytochemical analysis and *in-vitro* biological activity of *Rheum ribes* L. different parts

Turgut Taşkın^{1*} , Gizem Bulut²

¹Department of Pharmacognosy, Marmara University, Faculty of Pharmacy, Istanbul, Turkey

²Department of Pharmaceutical Botany, Marmara University, Faculty of Pharmacy, Istanbul, Turkey

ORCID ID of the author: T.T. 0000-0001-8475-6478.

Cite this article as: Taşkın T, Bulut G (2019). Qualitative and quantitative phytochemical analysis and *in-vitro* biological activity of *Rheum ribes* L. different parts. Istanbul J Pharm 49 (1): 7-13.

ABSTRACT

The methanol extracts from different parts of *Rheum ribes* were subjected to qualitative and quantitative phytochemical and *in vitro* biological activity (antioxidant, anti-urease, anticholinesterase). Qualitative phytochemical tests were performed using standard analysis methods and these studies revealed the presence of phenolics and tannins. Following this, a quantitative determination of total phenolics and tannins contents was carried out. The antioxidant activity of the extracts were assayed using DPPH, FRAP, TEAC/ABTS and CUPRAC techniques. In addition, the anti-urease and anticholinesterase activity of the extracts were examined using indophenol and Ellman methods, respectively. In this study, it was determined that the macerated flowers extract contained higher total phenolic and tannins contents than the other extracts. According to the results obtained from the antioxidant experiment, the macerated extract of flowers showed the strongest ABTS.+ scavenging and ferric reducing antioxidant power activity. The macerated leaves and Soxhlet radix extracts exhibited the strongest DPPH. scavenging and cupric reducing antioxidant activity, respectively. The young shoots extracts obtained using the Soxhlet methods showed the highest anticholinesterase activity. All extracts obtained from different parts of the plant were found to have very low anti-urease activity when compared to the anti-urease activity of standard compound. Therefore, methanol extracts from plant's flowers, leaves and young shoots can be used as a natural antioxidant and anticholinesterase agent respectively, for the pharmaceutical and food industry in the future.

Keywords: *Rheum ribes*, antioxidant, anti-uresae, anticholinesterase, phytochemical analysis

INTRODUCTION

Free radicals are produced continuously in our bodies (naturally or due to environmental impacts), and play a role in many diseases (cancer, Parkinson's disease, Alzheimer's disease, aging etc). Antioxidants are agents that clear free radicals and prevent them from doing damage. Because of the side effects of synthetic antioxidants, it has been more meaningful to use natural antioxidant sources such as fruits, vegetables, and grain foods (Baskar et al. 2011). It is widely known today that gastric and duodenal ulcers a usually caused by *Helicobacter pylori*. This organism releases urease that converts urea into ammonia and the released ammonia protects it from the acidic environment of the stomach. For this reason, the natural source compounds that inhibit urease activity are very important (Amin et al. 2013).

Rheum ribes L. (Rhubarb) belonging to Polygonaceae family is an annual species that is distributed across the temperate and subtropical regions of the world. This species is grown between 2300 and 2700 altitude in the rocky countryside of Turkey and known as "Işgın, Işkın, Uşgun and Uçgun". The edible parts of the plant are the young shoots and petiols, which were eaten raw or cooked (Davis and Cullen, 1967; Bulut et al. 2016). *Rheum* species are valuable to the pharmaceutical industry due to the presence of phytochemical contents (anthracene derivatives, tannins and phenolic compounds). R.

Address for Correspondence :

Turgut Taşkın, e-mail: turguttaskin@marmara.edu.tr

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 22.10.2018

Accepted: 06.03.2019

ribes's young shoots and petioles are used against diarrhea and vomiting. The roots of the plant have been used in the treatment of diabetes, hypertension, ulcer and diarrhea. *Rheum ribes* contains vitamins (A, B1, B2 and C), some elements (potassium, magnesium and calcium) organic acids (citric acid and malic acid), anthraquinones (chrysophanol, physcion and emodin), flavonoid compounds (quercetin, 5-desoxyquercetin, quercetin 3-*O*-rhamnoside, quercetin 3-*O*-galactoside and quercetin 3-*O*-rutinoside), and tannins (Tosun and Kızılay, 2003; Andiç et al. 2009; Sindhu et al. 2010; Shafaghat et al. 2014; Polat et al. 2015; Shahi et al. 2016).

In recent years, the number of studies on plant extracts showing antioxidant, anticholinesterase and anti-urease activity has increased. In addition, it is known that extraction methods are very important in biological activities. Therefore, the aim of this study was to analyse qualitative and quantitative phytochemicals and to determine the antioxidant, anticholinesterase and anti-urease activities of *R.ribes* extracts obtained using different extraction methods.

MATERIAL AND METHODS

Plant material and extract preparation: The *R. ribes* was collected on 20th May 2016 from Van-Gürpınar, Turkey and identified by Dr. Gizem Bulut from Marmara University. The voucher specimen was deposited in the Pharmacy Faculty Herbarium (MARE) and the voucher specimen number was MARE 18817. The young shoots, leaves, radix and flowers of the plant were cut into small pieces. The small pieces (10 g) were extracted using the maceration, Soxhlet and ultrasonic bath methods with a methanol solvent. After extraction was complete, the samples were filtered through filter paper, the solvents were evaporated with a rotary evaporator and the crude extracts were stored in a refrigerator at 4 °C.

Preliminary qualitative phytochemical analysis: Phytochemical analysis of *R. ribes* was carried out using standard procedure to identify the possible bioactive compound(s) (Trease and Evans, 2002; Sharma and Agarwal, 2015). The qualitative results are expressed as (+) for the presence and (-) for the absence of phytochemicals (Table 1).

Table 1. Preliminary qualitative phytochemical analysis of different parts of *R. ribes*

Phytochemicals	Radix	Flower	Leaves	Young shoots
Alkaloids	-	-	-	-
Glycosides	-	-	-	-
Saponins	-	-	-	-
Tannins	+	+	+	-
Cardiac glycosides	-	-	-	-
Phenols	+	+	+	+

+: Presence of the phytochemical, -: absence of the phytochemical from the extract

Quantitative determination of chemical constituents

Extract yield percentage and total phenolic contents:

The extraction yield was calculated to determine the effectiveness of the solvents in extracting the active compounds from the plant material. The total phenolic contents of the 12 different plant extracts were determined using the FCR method (Ozsoy et al. 2008). The total phenolic contents in the extracts were given as μg gallic acid equivalents/mg extract.

Determination of tannins content: The amount of tannin contained in the different extracts was determined using the Folin-Ciocalteu method (Vijay and Rajendra, 2014). The tannin contents in the extracts were expressed as μg tannic acid equivalents in microgram per milligram of extract ($\mu\text{gTAE}/\text{mg}$ extract).

In vitro evaluation of antioxidant assays

DPPH radical scavenging activity: The free radical scavenging ability of 12 different extracts was examined with the DPPH \cdot method. The results obtained in the DPPH radical experiment were given as $\text{IC}_{50} = \mu\text{g}/\text{mL}$ (Wei et al. 2010).

Trolox equivalent antioxidant activity: The ABTS $^+$ scavenging activity of the different extracts from the plant was evaluated using the TEAC/ABTS method. The standard curve was prepared using trolox and the data obtained in the experiment was expressed as mM trolox/mg extract (Re et al. 1999).

Ferric reducing/antioxidant power (FRAP) assay: The ferric reducing/antioxidant power of the different extracts was evaluated using the FRAP method. The standard curve was prepared using $\text{FeSO}_4 \cdot 7\text{H}_2\text{O}$ and the data obtained in the experiment was expressed as mM Fe^{2+}/mg extract (Benzie and Strain, 1996).

Cupric reducing antioxidant capacity (CUPRAC): The cupric reducing antioxidant capacity of the different extracts was evaluated using the CUPRAC method. The CUPRAC values of the plant extracts were reported as trolox equivalents (mM trolox/mg extract) (Taskin et al. 2017).

In vitro anti-urease activity: In this study, the anti-urease activities of 12 different extracts obtained from the plant were evaluated according to the method of Ghouss et al., 2010 and the results were given as a percentage of enzyme inhibition (Ghouss et al. 2010).

Anticholinesterase activity of extracts: Inhibition of cholinesterases was evaluated using a 96-well microplate reader based on the method of Ellman et al. with some modifications (Ellman et al. 1961). The experiments were performed in triplicate in each case and the results were given as a percentage of enzyme inhibition. Galantamine was used as a reference.

Statistical analysis

The antioxidant, anticholinesterase and anti-urease experiments were done in triplicate and all the data was shown as mean \pm SD. The data was analyzed using the Graphpad Prism 5 program. Statistical differences between the experimental groups were analyzed using one-way analysis of variance (ANOVA) followed by Tukey's Multiple Comparison test. Mean values were considered statistically significant when $p < 0.05$.

Table 2. Extract yield percentage, total phenolic and total tannins contents of different parts of *R.ribes*

Samples	Total phenolic (µgGAE/mg extract)			Extract yield (%)			Tannins (µgTAE/mg extract)			Maceration
	Ultrasonic bath	Soxhlet	Maceration	Ultrasonic bath	Soxhlet	Maceration	Ultrasonic bath	Soxhlet	Maceration	
Radix	135.00±0.007 ^a	122.00±0.003 ^a	83.00±0.008 ^a	5.21 ^a	20.46 ^a	18.44 ^a	123.00±0.003 ^a	109.00±0.005 ^a	61.00±0.010 ^a	
Flowers	105.00±0.003 ^b	140.00±0.001 ^b	167.00±0.002 ^b	10.72 ^b	17.44 ^b	11.82 ^b	184.00±0.005 ^b	140.00±0.018 ^b	229.00±0.005 ^b	
Leaves	163.00±0.007 ^c	158.00±0.004 ^c	139.00±0.005 ^c	12.62 ^c	65.03 ^c	55.80 ^c	210.00±0.007 ^c	141.00±0.006 ^{c,b}	178.00±0.014 ^c	
Young shoots	58.00±0.002 ^d	67.00±0.001 ^d	53.00±0.004 ^d	8.74 ^d	30.79 ^d	19.62 ^d	ND	ND	ND	

Values are mean of triplicate determination (n=3) ± standard deviation
Means with different superscripts (a-d) are significantly different, p<0.05
GAE-Gallic acid equivalents.
TAE-Tannic acid equivalents
ND: Not determined

RESULTS AND DISCUSSION

Qualitative phytochemical analysis of *R. ribes*

The phytochemical screening of different parts of a plant exhibited negative test for alkaloids, glycosides, saponins, cardiac glycosides (Table 1). Although all the plant's different parts showed positive test for phenols, and tannins, only young shoots showed negative test for tannins. It was known that the phytochemical compounds (phenols, tannins) that were qualitatively analyzed in *R. ribes* were medically important. Tannin-containing drugs have traditionally been used to protect inflamed surfaces of the mouth and throat. In addition, recent studies have shown that tannins are effective as antitumor and anti-HIV agents. Phenols are important compounds of some medicinal plants, and are used as coloring agents, flavored aromatizers and antioxidants (Trease and Evans, 2002; Buzzini et al. 2008). The phenols and tannins compounds identified in the methanol extract from *R.ribes'* different parts may be responsible for the biological activities. It is known that *R. ribes* contain tannins and phenol compounds (Amiri et al. 2015). The results of our study are consistent with the literature.

Quantitative phytochemical analysis of *R. ribes*

Extract yield percentage, total tannins and total phenolic contents: The total phenolic, tannins contents and yield percentage of methanol extracts from different parts of plant were analysed and are presented in Table 2. Leaf extracts obtained using ultrasonic bath and Soxhlet (163.00 µgGAE/mg extract, 158.00 µgGAE/mg extract) showed higher total phenolic contents than the macerated leaves extract (139.00 µgGAE/mg extract), respectively. In addition, it was found that the flowers extract (167 µgGAE/mg extract) obtained using the maceration method exhibited the highest total phenolic contents. When compared to all the data obtained in this study, the young shoots extracts obtained from the three methods were found to exhibit the lowest total phenolic contents. When the yields percentage of the different extracts were compared, the leaf extract obtained using the Soxhlet method was found to have a higher recovery over the other extracts. The total phenolic contents of the chloroform and methanol extracts from the roots and stems of *R. ribes* have been reported before (Öztürk et al. 2007). In this study, it was found that the roots's chloroform extract (48.66±1.23 µg pyrocatechol equivalent/mg extract) had higher phenolic contents than the others, while the one containing least phenolics was the stems's chloroform extract (22.68 ±1.10 µg pyrocatechol equivalent/mg extract). When we compared our study with data in literature, we found that methanol extract of radix (83.00 µgGAE/mg extract) showed higher total phenolic contents than radix's chloroform extract (48.66 µg pyrocatechol equivalent/ mg extract).

The amounts of tannins contained in different parts of the plant were ascertained in the following order: macerated flower extract (229.00±0.005 µgTAE/mg extract)>ultrasonic bath leaves extract (210.00±0.007 µgTAE/mg extract)>Soxhlet leaves extract (141.00±0.006 µgTAE/mg extract). The results from the total tannins assay showed that the macerated flowers extract had the highest amount of tannins. According to

Table 3. Effects of extracting solvents/methods on the antioxidant activity of *R. ribes* extracts

Samples	DPPH (IC ₅₀ : µg/mL)			ABTS (mM trolox/mg extract)			FRAP assay (mM Fe ²⁺ /mg extract)			CUPRAC assay (mM trolox/mg extract)		
	Ultrasonic bath	Maceration	Soxhlet	Ultrasonic bath	Maceration	Soxhlet	Ultrasonic bath	Maceration	Soxhlet	Ultrasonic bath	Maceration	Soxhlet
Radix	28.00±0.01 ^a	75.00±0.02 ^a	36.00±0.02 ^b	51.70±0.01 ^a	48.80±0.2 ^a	51.60±0.02 ^a	0.13±0.08 ^a	0.18±0.1 ^a	0.15±0.03 ^a	0.78±0.11 ^a	0.62±0.06 ^a	0.91±0.02 ^a
Flowers	5.00±0.02 ^b	4.80±0.05 ^b	23.00±0.02 ^b	51.10±0.02 ^{ba}	51.90±0.1 ^b	51.40±0.01 ^{ba}	0.15±0.04 ^{ba}	0.29±0.6 ^b	0.17±0.02 ^{ba}	0.62±0.05 ^{ba}	0.61±0.02 ^{ba}	0.62±0.07 ^b
Leaves	7.00±0.02 ^{cb}	3.00±0.01 ^{cb}	20.00±0.02 ^{cb}	51.40±0.03 ^{ca,b}	49.10±0.1 ^{ca}	50.80±0.03 ^{ca,b}	0.15±0.02 ^{ca,b}	0.21±0.2 ^{ca}	0.22±0.04 ^{ca,b}	0.67±0.02 ^{ca,b}	0.71±0.02 ^{ca,b}	0.72±0.05 ^{cb}
Young shoots	144.00±0.09 ^d	98.00±0.03 ^d	85.00±0.05 ^d	13.10±0.01 ^d	12.80±0.4 ^d	12.70±0.03 ^d	0.28±0.08 ^d	0.14±0.3 ^{da,c}	0.16±0.01 ^{d,a,b,c}	0.58±0.17 ^{da,b,c}	0.27±0.07 ^d	0.74±0.01 ^{dc}
Ascorbic acid	6.00±0.01 ^{eb,c}	6.00±0.01 ^{eb,c}	6.00±0.01 ^e		1.10±0.12 ^e							
BHT												
BHA		52.63±0.01 ^{ea}	52.63±0.01 ^{ea,b}					1.62±0.12 ^e				

Values are mean of triplicate determination (n=3) ± standard deviation
Means with different superscripts (a-e) are significantly different, p<0.05

the obtained results, it was determined that young shoots obtained using all extraction methods did not contain tannin compounds and also the radix extracts obtained using all extraction methods contained the lowest tannin compounds. To the best of our knowledge, there have been no reports in literature on the total tannins contents of methanol extract from a plant's different parts. Therefore, for the first time in this study, the amount of tannins contained in the different parts of plant was determined and the effects of this compound on biological activity were examined.

In vitro antioxidant activity assays: The DPPH[•] scavenging activity of different extracts from *R. ribes* different parts are shown in Table 3. Ascorbic acid was used as a positive control. According to the results obtained from the DPPH experiment, the flowers and leaves extracts obtained using the three extraction methods were very close to each other and had a stronger DPPH scavenging activity than the other extracts. Ultrasonic bath (IC₅₀ 5.00 µg/mL), maceration (IC₅₀ 4.80 µg/mL) flowers and maceration leaves (IC₅₀ 3.00 µg/mL) extracts exhibited a stronger DPPH radical scavenging activity than ascorbic acid (IC₅₀ 6.00 µg/mL). When comparing extractions methods, it was found that the maceration and ultrasonic bath methods were more suitable methods for the DPPH activity of *R. ribes*. In addition, the young shoots extracts obtained using the three extraction methods exhibited the lowest free radical scavenging activity. The DPPH method was usually applied to measure the activity of polar compounds. The obtained results showed that flowers and leaves extracts were rich in polar compounds. Since these extracts exhibited the highest phenolic contents and DPPH radical scavenging activity, it was found that there was a linear relationship between phenolic compounds and free radical scavenging activity.

The TEAC/ABTS was a widely used method for measuring the activity of polar and nonpolar compounds in plants. The maceration extract of flowers (51.90 mM trolox/mg extract) exhibited the strongest ABTS^{•+} scavenging activity. In addition, the radix, flowers and leaves extracts obtained using all the extraction methods showed antioxidant activity close to each other and BHA, but the young plant shoots exhibited lower antioxidant activity than BHA and other extracts. When comparing extractions methods, it was found that the all extraction methods were a suitable method for the TEAC/ABTS activity of this species.

In the ultrasonic bath method, the young shoots extract (0.28 mM Fe²⁺/mg extract) showed a stronger ferric reducing/antioxidant power activity than the other extracts. In the maceration method, the flowers extract (0.29 mM Fe²⁺/mg) had the highest FRAP values. In addition, the leaves extract (0.22 mM Fe²⁺/mg extract) obtained using the Soxhlet method showed a stronger ferric reducing activity than the other extracts. According to the obtained results, the macerated flowers and ultrasonic bath young shoots extracts were found to have stronger ferric reducing activity than the other extracts. The radix extract (0.13 mM Fe²⁺/mg extract) obtained using the ultrasonic bath method exhibited the lowest ferric reducing/antioxidant power activity. All the extracts from the plant's dif-

Table 4. The anti-urease inhibitory activity of different parts of *R. ribes*

Samples	Urease inhibition (%) (12.5 µg/mL)		
	Ultrasonic bath	Maceration	Soxhlet
Radix	2.33±0.1 ^a	12.46±1.06 ^a	7.57±0.13 ^a
Flowers	6.61±2.4 ^b	5.76±0.9 ^b	4.33±0.4 ^b
Leaves	17.90±0.5 ^c	10.79±0.07 ^c	16.83±0.4 ^c
Young shoots	NA	9.26±0.7 ^d	6.12±1.5 ^d
Thiourea	78.54±0.60 ^d	78.54±0.60 ^e	78.54±0.60 ^e

Values are mean of triplicate determination (n=3) ± standard deviation
 NA: not activity
 Means with different superscripts (a-e) are significantly different, p<0.05

Table 5. The anticholinesterase activity of different parts of *R. ribes*

Samples	Acetylcholinesterase inhibition (%)		
	Ultrasonic bath	Maceration	Soxhlet
Radix (500 µg/mL)	45.97±1.3 ^a	36.05±0.83 ^a	37.43±1.53 ^a
Flowers (500 µg/mL)	71.90±1.14 ^b	65.39±0.25 ^b	61.13±0.76 ^b
Leaves (500 µg/mL)	64.90±0.35 ^c	14.95±2.33 ^c	55.32±1.09 ^c
Young shoots (200 µg/mL)	84.19±1.82 ^d	63.95±0.5 ^d	87.98±1.01 ^d
Galantamine (500 µg/mL)	93.35±0.06 ^e		

Values are mean of triplicate determination (n=3) ± standard deviation
 Means with different superscripts (a-e) are significantly different, p<0.05

ferent parts had lower FRAP values than BHT compound (1.10 mM Fe²⁺/mg). The results obtained from this study showed that both maceration and Soxhlet extraction techniques (excluding ultrasonic bath young shoots extract) was the most suitable method to get the most powerful ferric reducing/antioxidant activity.

In the ultrasonic bath method, radix (0.78 mM trolox/mg extract) and leaves (0.67 mM trolox/mg extract) extracts showed a stronger cupric reducing antioxidant activity than other extracts, respectively. In the maceration method, the leaves (0.71 mM trolox/mg extract) and radix (0.62 mM trolox/mg extract) extracts had higher CUPRAC values than the other extracts, respectively. In the Soxhlet method, the radix extract (0.91 mM trolox/mg extract) exhibited the strongest cupric reducing antioxidant activity. It was also found that young shoots (0.74 mM trolox/mg extract) and leaves (0.72 mM trolox/mg extract) extracts showed very close cupric reducing antioxidant results to each other. According to the results obtained from CUPRAC

experimental, the radix extracts obtained using Soxhlet and ultrasonic bath methods showed the highest cupric reducing antioxidant activity. When the antioxidant activity of all the extracts was compared to the standard compound, all extracts were found to have lower activity than the BHA (1.62 mM trolox/mg).

Shahi et al. (2016) investigated the antioxidant activity of maceration methanol extract from *R. ribes* flowers. According to the results obtained, flowers extracted with the concentration of 200 ppm and 300 ppm showed a higher inhibitory activity of free radicals than the BHT compound (Shahi et al. 2016). When we compared our study with this study, it was found that parallel to this study, maceration methanol extract from plant's flowers (IC₅₀ 4.80 µg/mL) exhibited stronger DPPH· scavenging activity than ascorbic acid (IC₅₀ 6.00 µg/mL). Shafaghat et al. (2016) investigated the free radical scavenging of Soxhlet hexane extract and essential oils from plant and plant's hexane extract (IC₅₀ 325.00 µg/mL) and essential oils (IC₅₀ 565.00 µg/mL) showed lower DPPH radical scavenging activity compared to the synthetic antioxidant of vitamin C (IC₅₀ 26.00 µg/mL). In addition, the plant's essential oils and hexan extract composition were analyzed using GC-GC/MS. The main components of the hexane extract were 9-octadecenoic acid(ω-9), 9, 12- octadecadienoic acid (linoleic acid or ω- 6), hexadecanoic acid, (palmitic acid) , 1,2-benzenedicarboxylic acid diisooctyl, dodecane and γ- linolenic acid. The germacrene-d, α-pinene, terpinolene, p-cymene, bicyclogermane and limonene compounds were analysed as major components in the essential oils of the plant (Shafaghat et al. 2014). The antioxidant activities of chloroform and methanol extracts of the roots and stems of *R.ribes* have been reported before (Öztürk et al. 2007). This study reported that both methanol extracts obtained using the maceration method showed stronger free radical scavenging capacity than the corresponding chloroform extracts, moreover, the stems's methanol extract exhibited better activity than BHT. In addition, both roots extracts exhibited more potent superoxide anion radical scavenging activity than BHT. Except for the roots's extract, the other three extracts showed better metal chelating activity than quercetin. Unlike this study, the antioxidant activity of methanol extracts from different parts of the plant were examined with DPPH, FRAP, ABTS/TEAC and CUPRAC methods and it was determined that the maceration radix extract showed lower DPPH scavenging activity than ascorbic acid.

Anti-urease inhibitory activity: The results for the assessment of urease inhibitory activity of *R. ribes* methanol extracts (12.50 µg/mL) obtained using the three extraction methods are shown in Table 4. In the ultrasonic bath method, the leaves extract (17.90%) showed stronger ureae inhibitory activity than the other extracts. It was also found that the radix extract (2.33%) showed the lowest anti-urease activity. In addition, the young shoots extract didn't show any anti-urease activity. In the maceration method, the radix (12.46%), leaves (10.79%) and young shoots (9.26%) extracts exhibited a stronger anti-urease activity than the flowers extract (5.76%). In the Soxhlet method, the leaves extract (16.83%) showed the strongest anti-urease activity. It was also found that the radix (7.57%) and

young shoots (6.12%) extracts showed close anti-urease activity and that extracts exhibited stronger activity than the flowers extract (4.33%). In this study, among the extracts obtained from three different extraction methods, the leaves extracts obtained using the ultrasonic bath and Soxhlet method exhibited the strongest anti-urease activity. When the anti-urease activities of the extract and standard were compared, it was found that all the extracts from the plant had lower anti-urease activity than standard thiourea (78.54%). The anti-urease activity of the 50% methanol extract of *R.ribes* roots has been previously reported (Nabati et al. 2012). This study showed that the 50% methanol extract had a 98.93% anti-urease activity at a concentration of 10 mg/mL. In our study, the anti-urease activity of methanol extracts from the radix at a concentration of 12.5 µg/mL was investigated and found that maceration radix extract had 12.46% anti-urease activity.

Anticholinesterase activity: The results for the assessment of cholinesterase inhibitory activity of plant's different extracts are shown in Table 5. In the ultrasonic bath method, young shoots (84.19%) and flowers (71.9%) extracts exhibited stronger cholinesterase inhibitory activity than other extracts. In the maceration method, the young shoots (63.95%) and flowers (65.39%) extracts exhibited stronger cholinesterase inhibitory activity than other extracts. It was also found that the leaves extract (14.95%) had the lowest anticholinesterase activity. In the Soxhlet method, the young shoots (87.98%) and flowers (61.13%) extracts exhibited the strongest anticholinesterase activity. According to the results obtained from activity assay, the radix extract (37.43%) showed lower anticholinesterase activity than the other extracts. As a result of this experiment, it was found that the young shoots extracts obtained using the three extraction methods exhibited the strongest anticholinesterase activity. It was also found that the young shoots extracts obtained using the ultrasonic bath (84.19%) and Soxhlet (87.98%) methods showed close anticholinesterase activity to the galantamine compound (93.35%). In the present study, the Soxhlet and ultrasonic bath methods were the most extraction methods to get the strongest anticholinesterase activity. In Gholamhoseini et al., the *in vitro* anticholinesterase activity of the methanol extract from the rhizomes of the plant was investigated and it was found that this extract showed 72.4% activity at a concentration of 8 mg /mL (Gholamhoseini et al. 2009). In another study, it was clearly demonstrated that the treatment with 50% methanol extract from *R.ribes* roots and rhizomes could significantly recover the spatial and passive avoidance memory disorders caused by the destruction of the NBM nucleus in male-wistar rats (Zahedi et al. 2015). In our study, anticholinesterase activities of different parts (radix, flowers, leaves and young shoots) of the plant were investigated and it was found that these parts (especially the young shoots) showed significant activity in accordance with the literature.

CONCLUSION

Rheum ribes is mainly used in medicines and foods in Turkey. Therefore, it was very important to examine the biological activities (antioxidant, anti-urease, and anticholinesterase) of

this plant. In this study, the biological activities and chemical contents of different parts of the plant were qualitatively and quantitatively determined. In this study, it was determined that the macerated extract of flowers contained higher total phenolic and tannins contents than other extracts. According to the results obtained, the macerated flowers extract showed the strongest ABTS radical scavenging and ferric reducing activity. The macerated leaves and Soxhlet radix extracts showed the highest DPPH radical scavenging and cupric reducing antioxidant activity, respectively. The young shoots extracts obtained using the Soxhlet methods showed the highest anticholinesterase activity. All extracts obtained from different parts of the plant were found to have very low anti-urease activity when compared to the anti-urease activity of standard compound. Therefore, the methanol extract from the plant's flowers, leaves and young shoots can be used as a natural antioxidant and anticholinesterase agent respectively for the pharmaceutical and food industry in the future.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – T.T., G.B.; Design - T.T., G.B.; Supervision - T.T., G.B.; Materials - T.T., G.B.; Data Collection and/or Processing - T.T., G.B.; Analysis and/or Interpretation - T.T.; Literature Search - T.T., G.B., Writing - T.T., G.B.; Critical Reviews - T.T., G.B.

Conflict of Interest: The authors have no conflict of interest to declare.





Financial Disclosure: The authors declared that this study has received no financial support.

REFERENCES

- Amin M, Anwar F, Naz F, Mehmood T, Saari N (2013). Anti-*Helicobacter pylori* and urease inhibition activities of some traditional medicinal plants. *Molecules* **18**: 2135-2149. [CrossRef]
- Amiri N, Shafaghat A, Salimi F (2015). Screening of the essential oil, hexane extract, chemical composition, antioxidant activity, and antimicrobial activity of the flower *Rheum ribes* L. from Iran. *J Essent Oil Bear Pl* **18**: 1108-1115. [CrossRef]
- Andiç S, Tunçtürk Y, Ocak E, Köse S (2009). Some chemical characteristics of edible wild rhubarb species (*Rheum ribes* L.) Res. *J Agric Biol Sci* **5**: 973-977.
- Baskar R, Shrisakthi S, Sathyapriya B, Shyampriya R, Nithya R, Poonodi P (2011). Antioxidant potential of peel extracts of banana varieties (*Musa sapientum*). *Food Nutr Sci* **2**: 1128-1133. [CrossRef]
- Benzie IF, Strain JJ (1996). The ferric reducing ability of plasma (FRAP) as a measure of "antioxidant power": the FRAP assay. *Anal Biochem* **239**: 70-76. [CrossRef]
- Bulut G, Biçer M, Tuzlacı E (2016). The folk medicinal plants of Yüksekova (Hakkâri-Turkey). *J Fac Pharm Istanbul* **46**: 115-124.
- Buzzini P, Arapitsas P, Goretti M, Branda E, Turchetti B, Pinelli P, Leri F, Romani A (2008). Antimicrobial and antiviral activity of hydrolysable tannins. *Mini Rev Med Chem* **8**: 1179-1187. [CrossRef]
- Davis PH, Cullen J (1967). The Flora of Turkey, Vol 2, Edinburgh university press, Edinburgh, pp. 268-269.
- Ellman GL, Courtney KD, Andress V, Featherstone RM (1961). A new and rapid colorimetric determination of acetylcholinesterase activity. *Biochem Pharmacol* **7**: 88-95. [CrossRef]
- Gholamhoseini A, Moradi MN, Sharifi-far F (2009). Screening the methanol extracts of some Iranian plants for acetylcholinesterase inhibitory activity. *Res Pharm Sci* **4**: 105-112.

- Ghous T, Akhtar K, Nasim FUH, Choudhry MA (2010). Screening of selected medicinal plants for urease inhibitory activity. *Biol Med* **2**: 64-69.
- Nabati F, Mojab F, Habibi-Rezaei M, Bagherzadeh K, Amanlou M, Yousefi B (2012). Large scale screening of commonly used Iranian traditional medicinal plants against urease activity. *Daru* **20**: 72. [CrossRef]
- Ozsoy N, Can A, Yanardağ R, Akev N (2008). Antioxidant activity of *Smilax excels* L. leaf extracts. *Food Chem* **110**: 571-583. [CrossRef]
- Öztürk M, Öztürk FA, Duru ME, Topçu G (2007). Antioxidant activity of stem and root extracts of Rhubarb (*Rheum ribes*): An edible medicinal plant. *Food Chem* **103**: 623-630. [CrossRef]
- Polat R, Cakilcioglu U, Uluhan MD, Paksoy MY (2015). Survey of wild food plants for human consumption in Elazığ (Turkey). *IJTK* **1**: 69-75. [CrossRef]
- Re R, Pellegrini N, Proteggente A, Pannala A, Yang M, Evans CR (1999). Antioxidant activity applying an improved ABTS radical cation decolorization assay. *Free Radical Bio Med* **26**: 1231-1237. [CrossRef]
- Shafaghat A, Amiri N, Salimi F (2014). Screening of flowers essential oil and hexane extract of *Rheum ribes* L. from Iran- Chemical composition, antioxidant and antimicrobial activities. *JPHS* **2**: 115-123.
- Shahi MMN, Rad AHE, Shahi NN, Amin MRB (2016). Study of antioxidant activity and free radical scavenging power of *Rheum ribes* flower extract. *J Fundam Appl Sci* **8**: 1164-1174. [CrossRef]
- Sharma V, Agarwal A (2015). Physicochemical and antioxidant assays of methanol and hydromethanol extract of arial parts of *Indigofera tinctoria* Linn. *Indian J Pharm Sci* **77**: 729-734. [CrossRef]
- Sindhu R, Kumar P, Kumar J, Kumar A, Arora S (2010). Investigations into the anti-ulcer activity of *Rheum ribes* Linn leaves extracts. *Int J Pharm Pharm Sci* **12**: 90-93.
- Taskin D, Alkaya BD, Dölen E (2017). HPLC-DAD/ESI-Q-TOF LC/MS Analysis of major phenolic compounds in flowers, leaves and stems of *Achillea grandifolia* and evaluation of their individual antioxidant properties. *Chiang Mai J Sci* **44**: 1-12.
- Tosun F, Kızıla, AÇ (2003). Anthraquinones and flavonoids from *Rheum ribes*. *J Fac Pharm* **32**: 31-35.
- Trease GE, Evans WC (2002). Pharmacognosy. 15th Ed. London: Saunders Publishers; pp. 391-393.
- Vijay DT, Rajendra SB (2014). Estimation of total phenol, tannin, alkaloid and flavonoid in *Hibiscus tiliaceus* L. wood extracts. research and review. *J. Pharmacog Phytochem* **2**: 41-47.
- Zahedi M, Hojjati MR, Fathpour H, Rabiei Z, Alibabaei Z, Basim A (2015). Effect of *Rheum ribes* hydro-alcoholic extract on memory impairments in rat model of Alzheimer's disease. *Iran J Pharm Res* **14**: 1197-1206.
- Wei F, Jinglou C, Yaling C, Yongfang L, Liming C, Lei P (2010). Antioxidant, free radical scavenging, anti-inflammatory and hepatoprotective potential of the extract from *Parathelypteris nipponica* (Franch. et Sav.) Ching. *J Ethnopharmacol* **130**: 521-528. [CrossRef]

PPAR γ Pro12Ala and C161T polymorphisms, but not *PPAR α* L162V, are associated with osteoporosis risk in Turkish postmenopausal women

Özlem Kurt Şirin^{1,*} , Hülya Yılmaz Aydoğan² , Mehmet Uyar³ , Ayşe Can¹ 

¹Department of Biochemistry, Faculty of Pharmacy, Istanbul University, 34116, Istanbul, Turkey

²Department of Molecular Medicine, Aziz Sançar Institute of Experimental Medicine, 34390, Istanbul University, Istanbul, Turkey

³Department of Physical Medicine and Rehabilitation, Uskudar State Hospital, 34662, Istanbul, Turkey

ORCID IDs of the authors: O.K.S. 0000-0001-9532-6609, H.Y.A. 0000-0002-8837-6664, M.U. 0000-0003-4376-0256, A.C. 0000-0002-8538-663X.

Cite this article as: Kurt Şirin Ö, Yılmaz Aydoğan H, Uyar M, Can A (2019). *PPAR γ* Pro12Ala and C161T polymorphisms, but not *PPAR α* L162V, are associated with osteoporosis risk in Turkish postmenopausal women. Istanbul J Pharm 49 (1): 14-19.

ABSTRACT

Stimulation of peroxisome proliferator-activated receptors (*PPARs*) causes mesenchymal stem cells of the human bone marrow differentiate into adipocytes instead of osteoblasts leading to a decreased number of osteoblasts and a decrease in bone mineral density (BMD). Thus, *PPARs* may have impacts on bone metabolism. 224 postmenopausal women (171 osteoporotic and osteopenic, 53 healthy control) were included in this study. Polymerase chain reaction-restriction fragment length polymorphism (PCR-RFLP) and agarose gel electrophoresis techniques were performed to detect *PPAR α* L162V and *PPAR γ* Pro12Ala/C161T polymorphisms. The distribution of *PPAR γ* Pro12Ala genotype and allele frequencies was not statistically different in control and patient (osteopenic+osteoporotic) groups ($p>0.05$). However, in the patient group, subjects with "Pro12Pro" genotype had lower lumbar spine (L1-L4) BMD values than those with "Ala" allele ($p<0.05$). The frequency of *PPAR γ* C161T "CC" genotype was higher in the patient group when compared with that in the control group ($p<0.05$). There were no significant associations between the genotype and allele frequencies of *PPAR γ* C161T/ *PPAR α* L162V and BMD values ($p>0.05$). We suggested that *PPAR γ* Pro12Ala and C161T gene variants might be contributing factors in the development of osteoporosis.

Keywords: Peroxisome proliferator-activated receptor, bone mineral density, osteoporosis, polymorphism

INTRODUCTION

Peroxisome proliferator-activated receptors (*PPARs*) belong to the superfamily of nuclear receptors which are ligand-activated transcription factors. Three different *PPAR* subtypes have been identified; *PPAR α* , *PPAR β* (also called *PPAR δ*), and *PPAR γ* (Abbot 2009). *PPAR α* is found in tissues such as heart, muscle, liver and kidney where fatty acid catabolism is important and so regulates genes involved in lipid metabolism. *PPAR α* is activated by natural ligands (polyunsaturated fatty acids, lipolytic products of lipoproteins, oxidized phospholipids) and by synthetic ligands (gemfibrozil and fenofibrate) (Touyz and Schiffrin 2006). Fenofibrate which is currently used for the treatment of hypercholesterolemia and hypertriglyceridemia, also maintains bone mass. Whole body and femoral bone mineral density (BMD) values were higher in ovariectomized rats given fenofibrate, compared to controls (Stunes et al. 2011).

PPAR γ is heavily expressed in adipose tissue and controls adipocyte differentiation and lipid storage. *PPAR γ* regulates the action of insulin through its effects on adipose tissue and skeletal muscle (Touyz and Schiffrin 2006). Natural agonists (eicosanoids and oxidized, polyunsaturated fatty acids) and synthetic agonists (thiazolidinediones; a family of antidiabetic drugs-rosiglitazone and

Address for Correspondence :

Özlem Kurt Şirin, e-mail: ozlemk@istanbul.edu.tr

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 11.10.2018

Accepted: 06.12.2018

pioglitazone) for *PPAR γ* decrease peripheral insulin resistance and thereby reduce blood glucose levels in type 2 diabetic patients (Touyz and Schiffrin 2006; Harsløf et al. 2011). After activation of *PPAR γ* by rosiglitazone, mesenchymal stem cells differentiate into adipocytes instead of osteoblasts leading to increased number of adipocytes and decreased number of osteoblasts and decreased BMD in mouse bone marrow (Rzonca et al. 2004; Ali et al. 2005).

To date, several polymorphisms within the human *PPAR α* gene have been identified. Of these, a C→G transversion at position 484 in exon 5, leading to a substitution of valine for leucine (L162V) at codon 162, has functional effects on *PPAR α* activity (Flavell et al. 2002; Do et al. 2009). Some studies have found associations between *PPAR α* L162V polymorphism and plasma lipids and atherosclerosis development, however, the effects of this polymorphism on bone metabolism haven't been investigated so far.

Cytosine-guanine exchange in exon B (codon12) is the most common gene mutation in human *PPAR γ* gene resulting proline (Pro) to alanine (Ala) substitution in the protein (Temelkova-Kurktschiev et al. 2004). C161T substitution in exon 6 of the *PPAR γ* gene was also described (Meirhaeghe et al. 1998). *PPAR γ* was found to be related with cardiovascular diseases (Takano and Komuro, 2009), diabetes mellitus (Cho et al. 2008), carcinogenesis (Elrod and Sun 2008) and inflammation (Kapoor et al. 2007a; 2007b; Szanto and Nagy 2008) in some studies. *PPAR γ* was also associated with bone mineral density, osteoporosis, osteoarthritis and non-traumatic hip fracture risk in various populations (Ogawa et al. 1999; Harslof et al. 2010; Tamaki et al. 2010; Fahmi et al. 2011; Dragojević et al. 2011; Wang et al. 2013). However, no association was found between *PPAR γ* and bone mineral density variation in Chinese nuclear families (Yue et al. 2010) and in Japanese postmenopausal women (Wang et al. 2013).

To the best of our knowledge, there is no study regarding the association of *PPAR α* polymorphisms with BMD and osteoporosis. Little is known about the association of the *PPAR γ* polymorphism with the osteoporosis risk and also the results are controversial. Therefore, we aimed to investigate the relation between *PPAR α* and *PPAR γ* gene variants and osteoporosis in Turkish postmenopausal women.

MATERIALS AND METHODS

Subjects

224 Turkish postmenopausal women (171 osteoporotic and osteopenic, 53 healthy control), attending the Uskudar State Hospital in Istanbul were recruited in this study. World Health Organization (WHO) definitions and criteria for osteopenia and osteoporosis were used during ascertainment (World Health Organization Study Group, 1994). The patients received a standardized questionnaire including questions regarding the osteoporosis risk factors (age, menopausal status, smoking, family history of osteoporosis), medication use and other medical conditions. Demographic and morphometric characteristics were also recorded. Subjects with a clinical diagnosis of osteopenia/osteoporosis and those with normal BMD values were included in the study group. Exclusion criteria were conditions, diseases, and/or treatments known to interfere with bone metabolism, such

as malignancies, severe liver or gastrointestinal diseases, endocrinologic disorders (hypo-hyperparathyroidism, hyperthyroidism, Cushing's syndrome), skeletal diseases (rheumatoid arthritis, osteomalacia, osteogenesis imperfecta and Paget's disease) and current pharmacological treatment with anabolic androgenic steroids, estrogens or estrogen-related molecules, corticosteroids and anticonvulsants before enrollment. Menopause was defined as amenorrhoea of at least one year duration. The study protocol was approved by the Local Ethical Committee of Istanbul University, Istanbul Medical Faculty (Protocol No: 2006/2145). All participants signed written, informed consent forms prior to giving their blood sample.

BMD measurement

Dual energy X-ray absorptiometry (DXA; Lunar DPX (GE Lunar Corporation, Madison, WI, USA) was used to determine BMD of the lumbar spine (L1-L4) and hip (femoral neck and total hip). All DEXA scans were analyzed according to software (encore version 2005, 9.30.044) provided by the manufacturer. BMD was expressed as grams per centimeter square (g/cm²).

Genotype study

Genomic DNA samples were extracted from whole blood with salting out procedure (Miller et al. 1988). Polymerase chain reaction-restriction fragment length polymorphism (PCR-RFLP) analysis were used to detect *PPAR α* L162V and *PPAR γ* Pro12Ala/C161T polymorphisms as previously reported (Yen et al. 1997; Flavell et al. 2002).

Statistical analysis

The statistical analysis was performed using Statistical Package for Social Sciences (SPSS) software package programme version 20.0 (IBM Corp., Armonk, NY, USA). Categorical variables are presented as frequencies, while continuous variables are presented as means (\pm standard deviation-S.D.). Chi-square (χ^2) test was used for genotype and allele frequencies comparison and Hardy-Weinberg Equilibrium (HWE). BMD values of different genotypes and alleles were compared by Student's t-test. Allele frequencies were calculated by gene counting method. Values of $p < 0.05$ were considered statistically significant.

RESULTS

Demographic characteristics and BMD status

The baseline characteristics of the study population were presented in Table 1. As expected, the body mass index (BMI), BMD values of lumbar spine (L1-L4), femoral neck and total hip showed significant differences between control and patient (osteopenic+osteoporotic) groups ($p < 0.001$), whereas no significant differences were detected in age, age of menopause, smoking and family history of osteoporosis ($p > 0.05$).

PPAR γ Pro12Ala/C161T and *PPAR α* L162V genotypes and allele distribution

The genotypic and allelic frequencies of *PPAR γ* Pro12Ala/C161T and *PPAR α* L162V polymorphisms were shown in Table 2. *PPAR γ* C161T "CC" genotype frequency was found to be higher in the patient group when compared to that in the control group ($p = 0.028$). No significant differences were found in the frequencies of *PPAR γ* Pro12Ala and *PPAR α* L162V

genotypes and alleles within two groups ($p > 0.05$). "Ala12Ala", "TT" and "VV" genotypes were not observed in the control group.

The association of *PPAR γ* and *PPAR α* polymorphisms with BMD values

The association of *PPAR γ* Pro12Ala/C161T and *PPAR α* L162V genotypes with BMD values were presented in Table 3. In the patient group, subjects with "Pro12Pro" genotype had lower lumbar spine (L1-L4) BMD values than those with "Ala" allele ($p < 0.05$). No significant association was found between *PPAR γ* C161T and *PPAR α* L162V genotypes and BMD values in the study groups ($p > 0.05$).

DISCUSSION

The present study is the first one in Turkish population showing an association between *PPAR γ* gene and the risk of the development of osteoporosis. Subjects with *PPAR γ* "Pro12Pro" genotype had lower lumbar spine BMD values than those with "Ala" allele in our patient group. Similarly, in a study with

β -thalassemia major patients, the risk of osteopenia was significantly higher in subjects with "Pro12Pro" genotype than the carriers of the rare alleles (Sahmani et al. 2013). In contrast to our results, postmenopausal women with "Pro12Pro" genotype had higher BMD of lumbar spine than that of subjects with "Pro12Ala" genotype (Yue et al. 2010). *PPAR γ* Pro12Ala gene variants were not associated with BMD in elderly and young Swedish women (Herlin et al. 2015). Also, *PPAR γ* Pro12Ala was not independently associated with BMD values in postmenopausal Japanese women, either (Wang et al. 2013). We think

Table 1. The baseline characteristics of the study population

	Control n=53	Patient n=171
Age	55.55±6.99	57.24±5.99
Age of menopause	46.47±5.17	46.50±5.13
BMI (kg/m ²)	33.22±5.11	29.52±4.83 *
Smoking (n, %)	5 (9.4 %)	17 (9.9 %)
Family history of osteoporosis (n, %)	24 (47.1 %)	74 (43.3 %)
Lumbar spine (L1-L4) BMD (g/cm ²)	1.183±0.110	0.940±0.113 *
Femoral neck BMD (g/cm ²)	0.966±0.101	0.827±0.088 *
Total hip BMD (g/cm ²)	1.044±0.099	0.882±0.093 *

n: number of subjects, BMI: Body mass index, BMD: Bone mineral density.
 Values are means±SD except where noted.
 * $p < 0.001$ vs. control group.

Table 2. The distribution of *PPAR γ* Pro12Ala/C161T and *PPAR α* L162V genotypes and allele frequencies in the study groups

Genotypes / Alleles	Control n, (%)	Patient n, (%)
<i>PPARγ</i> Pro12Ala		
Pro12Pro	42 (79.2%)	149 (87.1%)
Pro12Ala	11 (20.8%)	20 (11.7%)
Ala12Ala	0 (0 %)	2 (1.2%)
Pro	95 (89.6%)	318 (93%)
Ala	11 (10.4%)	24 (7%)
<i>PPARγ</i> C161T		
CC	37 (69.8%)	142 (83%)*
CT	16 (30.2%)	24 (14%)
TT	0 (0 %)	5 (3%)
C	90 (84.9%)	308 (90.1%)
T	16 (15.1%)	34 (9.9%)
<i>PPARα</i> L162V		
LL	39 (73.6%)	116 (67.8%)
LV	14 (26.4%)	50 (29.2%)
VV	0 (0%)	5 (2.9%)
L	92 (86.8%)	282 (82.5%)
V	14 (13.2%)	60 (17.5%)

n: number of subjects, *PPAR γ* : Peroxisome proliferator activated receptor gamma, *PPAR α* : Peroxisome proliferator activated receptor alpha
 * $p < 0.05$ vs. control group.

Table 3. Association of *PPAR γ* and *PPAR α* genotypes with BMD values in study population

Groups/BMD	<i>PPARγ</i> Pro12Ala		<i>PPARγ</i> C161T		<i>PPARα</i> L162V	
	Pro12Pro	Pro12Ala +Ala12Ala	CC	CT+TT	LL	LV+VV
Control						
Lumbar spine	1.190±0.115	1.160±0.087	1.190±0.119	1.170±0.089	1.170±0.075	1.230±0.171
Femoral neck	0.974±0.110	0.934±0.049	0.976±0.116	0.943±0.053	0.968±0.103	0.960±0.101
Total hip	1.064±0.101	0.990±0.048	1.062±0.107	1.006±0.069	1.038±0.091	1.061±0.124
Patient						
Lumbar spine	0.940±0.114*	0.990±0.082	0.940±0.114	0.950±0.103	0.940±0.111	0.940±0.115
Femoral neck	0.825±0.084	0.850±0.091	0.828±0.084	0.833±0.093	0.822±0.088	0.841±0.079
Total hip	0.883±0.090	0.892±0.094	0.882±0.089	0.895±0.095	0.881±0.094	0.890±0.082

BMD: Bone mineral density, *PPAR γ* : Peroxisome proliferator activated receptor gamma, *PPAR α* : Peroxisome proliferator activated receptor alpha
 * $p < 0.05$ vs. ProAla+Ala12Ala genotypes

that these results differ depending on geographic background and number of subjects in the studies.

In our study, *PPAR γ* C161T“CC” genotype frequency was found to be higher in the patient group when compared with the control group, however, no association was found between the C161T genotypes and BMD values. In contrast, Z scores of the lumbar and total body BMD was found to be higher in Japanese postmenopausal women with *PPAR γ* C161T“CC” genotype than those in the subjects with “CT+TT” genotype. It was suggested that there is an association between *PPAR γ* gene and BMD and the possible involvement of C161T polymorphism in the cause of postmenopausal osteoporosis in Japanese women (Ogawa et al. 1999). Femoral neck and total hip BMD values were significantly higher in Japanese premenopausal women with “CC” genotype than the values in subjects with “CT/TT” genotypes (Tamaki et al. 2010). Similar to our results, no association was found between *PPAR γ* C161T genotypes and BMD of lumbar spine/femoral neck in healthy Korean pre- and postmenopausal women (Rhee et al. 2005).

An association was found between polymorphisms in *PPAR γ* , BMD and fracture risk in Danish population indicating that the effect may be modified by environmental factors (Harsløf et al. 2011). Besides, *PPAR γ* Pro12Ala and C161T polymorphisms did not have any significant relation with the non-traumatic hip fracture risk in the elderly Slovenian population (Dragojevič et al. 2011).

In the present study, the frequencies of “Ala” allele were 10.4% and 7% in the control and in the patient groups, respectively. C161T“rare allele (T)”frequency was 15.1% in the control group versus 9.9% of the patient group. “Ala12Ala” and “TT” genotypes were not observed in the control group (0%) whereas the frequencies of them were 1.2% and 3% in the patient group, respectively. The genotype populations of *PPAR γ* Pro12Ala/C161T were in accordance with those in Turkish patients with inflammatory bowel disease, coronary heart disease and gastric cancer (Atug et al. 2008; Yilmaz-Aydogan et al. 2011; Canbay et al. 2012). Similar to our results, Erdogan et al. (2007) reported the frequency as 0% for “Ala12Ala” genotype in the control group and in diabetic patients with and without diabetic nephropathy. However, in their study, the frequency for “Ala” allele was found as 0% and 0.5% in control group and in diabetic group, respectively. A remarkable difference was observed in their study in terms of “Ala” allele distribution. This observed difference may be based on the different number of healthy controls and patients in these two studies. Also the different patient group of Erdogan’s study consisting diabetic subjects may affect the allelic differences between the two studies. Similar to our results, “T” allele frequencies were found as 11.5 and 9.3 in control and patient group in Erdogan’s study.

Pro12Ala and C161T frequencies in our study are similar to those in Slovenian population (Dragojevič et al. 2011) and those in Chinese postmenopausal women (Yue et al. 2010). The genotype and allelic frequencies of Pro12Ala was also found to be similar to our results in a meta-analysis study with European Caucasian population (Zhang et al. 2012) and in studies with

Japanese postmenopausal women (Ogawa et al. 1999; Wang et al. 2013). Pro12Ala genotype and allelic frequencies in two studies with Iranian population are similar to the frequencies in the present study, however, they could not find any subjects with “Ala12Ala” genotype in their study (Namvaran et al. 2011; Sahmani et al. 2013). C161T frequencies in Japanese women (Tamaki et al. 2010) and Korean women (Rhee et al. 2005) are in accordance with our results.

As of now, there isn’t any study showing a relation between *PPAR α* L162V polymorphism, BMD and the risk of osteoporosis. However, no significant association was found between *PPAR α* L162V genotype and allele frequencies and BMD values in our study population. The genotype and allele frequencies of *PPAR α* L162V are similar to those in a previous Turkish study with coronary heart disease based on the presence of diabetes (Yilmaz-Aydogan et al. 2013) and to those in another study with Turkish subjects (Koytak et al. 2008). Besides, our frequencies differ from those found in Spanish Mediterranean, Brazilian and Croatian populations (Francès et al. 2008; Chen et al. 2010; Nadalin et al. 2014). “VV” genotype was not found in Croatian population (Nadalin et al. 2014) and in multi-ethnic Malaysian population (Chia et al. 2015). Similarly we found no subjects with “VV” genotype in our control group whereas we found only five subjects in our patient group.

The frequencies of Pro12Ala-Ala12Ala genotype, C161T-TT genotype and L162V-VV genotype are very rarely observed in the present study. Therefore, ANOVA statistical test couldn’t be used for the comparison of genotypes and BMD values. Furthermore, this report was comprised of a relatively small study population. These represents the limitations of the study. We think that further studies with higher number of subjects may be necessary to conclude with greater certainty of the relation between *PPAR γ* Pro12Ala/C161T polymorphisms and decreased BMD status.

CONCLUSION

The present study suggests that *PPAR γ* Pro12Ala and C161T polymorphisms may contribute to the development of osteoporosis in Turkish postmenopausal women.

Ethics Committee Approval: The study protocol was approved by the Local Ethical Committee of Istanbul University, Istanbul Medical Faculty (Protocol No: 2006/2145).

Informed Consent: All participants signed written, informed consent forms prior to giving their blood sample.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – O.K.S., H.Y.A.; Design – O.K.S., H.Y.A., M.U.; Supervision – O.K.S., H.Y.A., A.C.; Resource – O.K.S., H.Y.A., M.U.; Materials – O.K.S., H.Y.A., M.U.; Data Collection and/or Processing – O.K.S., H.Y.A., M.U.; Analysis and/or Interpretation – O.K.S., H.Y.A., M.U., A.C.; Literature Search – O.K.S., H.Y.A.; Writing – O.K.S., H.Y.A., A.C.; Critical Reviews – O.K.S., H.Y.A., A.C.

Conflict of Interest: The authors have no conflict interest to declare.

Financial Disclosure: This study was funded by Scientific Research Projects Coordination Unit of Istanbul University (Project No: 17622).

REFERENCES

- Abbott BD (2009). Review of the expression of peroxisome proliferator-activated receptors alpha (PPAR alpha), beta (PPAR beta), and gamma (PPAR gamma) in rodent and human development. *Reprod Toxicol* **27**: 246-257. [CrossRef]
- Ali AA, Weinstein RS, Stewart SA, Parfitt AM, Manolagas SC, Jilka RL (2005). Rosiglitazone causes bone loss in mice by suppressing osteoblast differentiation and bone formation. *Endocrinology* **146**: 1226-1235. [CrossRef]
- Atug O, Tahan V, Eren F, Tiftikci A, Imeryuz N, Hamzaoglu HO, Tozun N (2008). Pro12Ala polymorphism in the peroxisome proliferator-activated receptor-gamma (PPARGgamma) gene in inflammatory bowel disease. *J Gastrointest Liver Dis* **17**: 433-437.
- Canbay E, Kurnaz O, Canbay B, Bugra D, Cakmakoglu B, Bulut T, Yamaner S, Sokucu N, Buyukuncu Y, Yilmaz-Aydogan H (2012). PPAR-gamma Pro12Ala polymorphism and gastric cancer risk in a Turkish population. *Asian Pac J Cancer Prev* **13**: 5875-5878. [CrossRef]
- Chen ES, Mazzotti DR, Furuya TK, Cendoroglu MS, Ramos LR, Araujo LQ, Burbano RR, Smith Mde A (2010). Association of PPAR-Alpha gene polymorphisms and lipid serum levels in a Brazilian elderly population. *Exp Mol Pathol* **88**: 197-201. [CrossRef]
- Chia PP, Fan SH, Say YH (2015). Screening of Peroxisome Proliferator-Activated Receptors (PPARs) α , γ and α Gene Polymorphisms for Obesity and Metabolic Syndrome Association in the Multi-Ethnic Malaysian Population. *Ethn Dis* **25**: 383-390. [CrossRef]
- Cho MC, Lee K, Paik SG, Yoon DY (2008). Peroxisome Proliferators-Activated Receptor (PPAR) Modulators and Metabolic Disorders. *PPAR Res* **2008**: 679137. [CrossRef]
- Do HQ, Nazih H, Luc G, Arveiler D, Ferrières J, Evans A, Amouyel P, Cambien F, Ducimetière P, Bard JM (2009). Influence of cholesteryl ester transfer protein, peroxisome proliferator-activated receptor α , apolipoprotein E, and apolipoprotein A-I polymorphisms on high-density lipoprotein cholesterol, apolipoprotein A-I, lipoprotein A-I, and lipoprotein A-I:A-II concentrations: the Prospective Epidemiological Study of Myocardial Infarction study. *Metabolism* **58**: 283-289. [CrossRef]
- Dragojević J, Ostanek B, Mencej-Bedrač S, Komadina R, Preželj J, Marc J (2011). PPARG gene promoter polymorphism is associated with non-traumatic hip fracture risk in the elderly Slovenian population: a pilot study. *Clin Biochem* **44**: 1085-1089. [CrossRef]
- Elrod HA, Sun SY (2008). PPARgamma and apoptosis in cancer. *PPAR Res* **2008**: 704165. [CrossRef]
- Erdogan M, Karadeniz M, Eroglu Z, Tezcanli B, Selvi N, Yilmaz C (2007). The relationship of the peroxisome proliferator-activated receptor-gamma 2 exon 2 and exon 6 gene polymorphism in Turkish type 2 diabetic patients with and without nephropathy. *Diabetes Res Clin Pract* **78**: 355-359. [CrossRef]
- Fahmi H, Martel-Pelletier J, Pelletier JP, Kapoor M (2011). Peroxisome proliferator-activated receptor gamma in osteoarthritis. *Mod Rheumatol* **21**: 1-9. [CrossRef]
- Flavell DM, Jamshidi Y, Hawe E, Torra IP, Taskinen MR, Frick MH, Nieminen MS, Kesäniemi YA, Pasternack A, Staels B, Miller G, Humphries SE, Talmud PJ, Miller G (2002). Peroxisome proliferator-activated receptor alpha gene variants influence progression of coronary atherosclerosis and risk of coronary artery disease. *Circulation* **105**: 1440-1445. [CrossRef]
- Francès F, Verdú F, Portolés O, Castelló A, Sorlí JV, Guillen M, Corella D (2008). PPAR-alpha L162V and PGC-1 G482S gene polymorphisms, but not PPAR-gamma P12A, are associated with alcohol consumption in a Spanish Mediterranean population. *Clin Chim Acta* **398**: 70-74. [CrossRef]
- Harsløf T, Tofteng CL, Husted LB, Nyegaard M, Børglum A, Carstens M, Stenkjær L, Brixen K, Eiken P, Jensen JE, Mosekilde L, Rejnmark L, Langdahl BL (2011). Polymorphisms of the peroxisome proliferator-activated receptor γ (PPAR γ) gene are associated with osteoporosis. *Osteoporos Int* **22**: 2655-2666. [CrossRef]
- Herlin M, McGuigan FE, Luthman H, Åkesson K (2015). Polymorphisms in inflammation associated genes ALOX15 and IL-6 are associated with bone properties in young women and fracture in elderly. *Bone* **79**: 105-109. [CrossRef]
- Kapoor M, Kojima F, Qian M, Yang L, Crofford LJ (2007a). Microsomal prostaglandin E synthase-1 deficiency is associated with elevated peroxisome proliferator-activated receptor gamma: regulation by prostaglandin E2 via the phosphatidylinositol 3-kinase and Akt pathway. *J Biol Chem* **282**: 5356-5366. [CrossRef]
- Kapoor M, Kojima F, Yang L, Crofford LJ (2007b). Sequential induction of pro- and anti-inflammatory prostaglandins and peroxisome proliferators-activated receptor-gamma during normal wound healing: a time course study. *Prostaglandins Leukot Essent Fatty Acids* **76**: 103-112. [CrossRef]
- Koytak ES, Mizrak D, Bektaş M, Verdi H, Ergül AA, Idilman R, Çınar K, Yurdaydin C, Ersöz S, Karayalçın K, Uzunalımoğlu Ö, Bozkaya H (2008). PPAR-alpha L162V polymorphism in human hepatocellular carcinoma. *Turk J Gastroenterol* **19**: 245-249.
- Meirhaeghe A, Fajas L, Helbecque N, Cotel D, Lebel P, Dallongeville J, Deeb S, Auwerx J, Amouyel P (1998). A genetic polymorphism of the peroxisome proliferator-activated receptor gamma gene influences plasma leptin levels in obese humans. *Hum Mol Genet* **7**: 435-440. [CrossRef]
- Miller SA, Dykes DD, Polesky HS (1998). Simplex salting out procedure for extracting DNA from human nucleated cells. *Nucleic Acids Res* **16**: 1215. [CrossRef]
- Nadalin S, Giacometti J, Buretić-Tomljanović A (2014). PPAR α -L162V polymorphism is not associated with schizophrenia risk in a Croatian population. *Prostaglandins Leukot Essent Fatty Acids* **91**: 221-225. [CrossRef]
- Namvaran F, Rahimi-Moghaddam P, Azarpira N (2011). Genotyping of peroxisome proliferator-activated receptor gamma (PPAR- γ) polymorphism (Pro12Ala) in Iranian population. *J Res Med Sci* **16**: 291-296.
- Ogawa S, Urano T, Hosoi T, Miyao M, Hoshino S, Fujita M, Shiraki M, Orimo H, Ouchi Y, Inoue S (1999). Association of bone mineral density with a polymorphism of the peroxisome proliferator-activated receptor gamma gene: PPARgamma expression in osteoblasts. *Biochem Biophys Res Commun* **260**: 122-126. [CrossRef]
- Rhee EJ, Oh KW, Lee WY, Kim SY, Oh ES, Baek KH, Kang MI, Kim SW (2005). The effects of C161-->T polymorphisms in exon 6 of peroxisome proliferator-activated receptor-gamma gene on bone mineral metabolism and serum osteoprotegerin levels in healthy middle-aged women. *Am J Obstet Gynecol* **192**: 1087-1093. [CrossRef]
- Rzonca SO, Suva LJ, Gaddy D, Montague DC, Lecka-Czernik B (2004). Bone is a target for the antidiabetic compound rosiglitazone. *Endocrinology* **145**: 401-406. [CrossRef]
- Sahmani M, Gholami A, Azarkeivan A, Darabi M, Ahmadi MH, Sabet MS, Najafpour R (2013). Peroxisome proliferator-activated receptor- γ Pro12Ala polymorphism and risk of osteopenia in β -thalassemia major patients. *Hemoglobin* **37**: 564-573. [CrossRef]
- Stunes AK, Westbroek I, Gustafsson BI, Fossmark R, Waarsing JH, Eriksen EF, Petzold C, Reseland JE, Syversen U (2011). The peroxisome proliferator-activated receptor (PPAR) alpha agonist fenofibrate maintains bone mass, while the PPAR gamma agonist

- pioglitazone exaggerates bone loss, in ovariectomized rats. *BMC Endocr Disord* **11**: 11. [\[CrossRef\]](#)
- Szanto A, Nagy L (2008). The many faces of PPARgamma: anti-inflammatory by any means? *Immunobiology* **213**: 789-803. [\[CrossRef\]](#)
 - Takano H, Komuro I (2009). Peroxisome proliferator-activated receptor gamma and cardiovascular diseases. *Circ J* **73**: 214-220. [\[CrossRef\]](#)
 - Tamaki J, Iki M, Morita A, Ikeda Y, Sato Y, Kajita E, Kagamimori S, Kagawa Y, Yoneshima H. (2010). Peroxisome proliferator-activated receptor gamma polymorphism is related to peak bone mass: the JPOS study. *Osteoporos Int* **21**: 321-329. [\[CrossRef\]](#)
 - Temelkova-Kurktschiev T, Hanefeld M, Chinetti G, Zawadzki C, Haulon S, Kubaszek A, Koehler C, Leonhardt W, Staels B, Laakso M (2004). Ala12Ala genotype of the peroxisome proliferator-activated receptor gamma2 protects against atherosclerosis. *J Clin Endocrinol Metab* **89**: 4238-4242. [\[CrossRef\]](#)
 - Touyz RM, Schiffrin EL (2006). Peroxisome proliferator-activated receptors in vascular biology-molecular mechanisms and clinical implications. *Vascul Pharmacol* **45**: 19-28. [\[CrossRef\]](#)
 - Wang XL, Oosterhof J, Duarte N (1999). Peroxisome proliferator-activated receptor gamma C161→T polymorphism and coronary artery disease. *Cardiovasc Res* **44**: 588-594. [\[CrossRef\]](#)
 - Wang Y, Sugita N, Yoshihara A, Iwasaki M, Miyazaki H, Nakamura K, Yoshie H (2013). Peroxisome proliferator-activated receptor (PPAR) γ polymorphism, vitamin D, bone mineral density and periodontitis in postmenopausal women. *Oral Dis* **19**: 501-506. [\[CrossRef\]](#)
 - World Health Organization Study Group (1994). Assessment of fracture risk and its application to screening for postmenopausal osteoporosis. *World Health Organ Tech Rep Ser* **843**: 1-129.
 - Yen CJ, Beamer BA, Negri C, Silver K, Brown KA, Yarnall DP, Burns DK, Roth J, Shuldiner AR (1997). Molecular scanning of the human peroxisome proliferator activated receptor gamma (hPPAR gamma) gene in diabetic Caucasians: identification of a Pro12Ala PPAR gamma 2 missense mutation. *Biochem Biophys Res Commun* **241**: 270-274. [\[CrossRef\]](#)
 - Yilmaz-Aydogan H, Kurnaz O, Kucukhuseyin O, Akadam-Teker B, Kurt O, Eronat AP, Tekeli A, Bugra Z, Ozturk O (2013). Different effects of PPARA, PPARG and ApoE SNPs on serum lipids in patients with coronary heart disease based on the presence of diabetes. *Gene* **523**: 20-26. [\[CrossRef\]](#)
 - Yilmaz-Aydogan H, Kurnaz O, Kurt O, Akadam-Teker B, Kucukhuseyin O, Tekeli A, Isbir T (2011). Effects of the PPARG P12A and C161T gene variants on serum lipids in coronary heart disease patients with and without Type 2 diabetes. *Mol Cell Biochem* **358**: 355-363. [\[CrossRef\]](#)
 - Yue H, He JW, Zhang H, Hu WW, Hu YQ, Li M, Liu YJ, Wu SH, Zhang ZL (2010). No association between polymorphisms of peroxisome [corrected] proliferator-activated receptor-gamma gene and peak bone mineral density variation in Chinese nuclear families. *Osteoporos Int* **21**: 873-882. [\[CrossRef\]](#)
 - Zhang ZF, Yang N, Zhao G, Zhu L, Wang LX (2012). Association between the Pro12Ala polymorphism of peroxisome proliferator-activated receptor gamma 2 and inflammatory bowel disease: a meta-analysis. *PLoS One* **7**: e30551. [\[CrossRef\]](#)

Deontological violations of community pharmacies in Turkey

Bülent Kiran* , Elif Gizem Karaca 

Department of Pharmacy Management, Faculty of Pharmacy, Ege University, 35100, Izmir, Turkey

ORCID IDs of the authors: B.K. 0000-0001-8734-6095; E.G.K. 0000-0001-9432-7888.

Cite this article as: Kiran B, Karaca EG (2019). Deontological violations of community pharmacies in Turkey. Istanbul J Pharm 49 (1): 20-24.

ABSTRACT

Deontological violations are important in terms of reputation of public health, pharmacy profession, and protection of public finance. The aim of this study is to determine types and prevalence of deontological crimes reflected in records of High Honor Court (HHC) in Turkish Pharmacists' Association (TPA), to develop proposals on corrective and preventive occupational policies. Crime types in disciplinary files were classified according to classification method of deontological crimes in 3-groups, and results were evaluated by frequency and percentage distributions.

In the study, 32 deontological crime types and 112 criminal cases were detected. Accordingly, it was found that deontological crimes due to competition are in the first rank with 51 cases, TPA, Drug-Pharmacy Legislation violations in the second with 50 cases and Social Security Institution protocol provisions violations in the last rank with 11 cases, and in all types of crime, "collusion" is in the first rank (30.4%). It is thought that "collusion" crime being in the first rank increasing its share from 18.6% to 30.4% in all crimes despite increasing punishments.

Persistence of crime despite punitive sanctions aggravated by recent regulations suggests that it is not possible to solve only by punitive sanctions, and it must be get to the bottom of the problem.

Keywords: Pharmacy, community pharmacies, deontological violations, deontological crimes

INTRODUCTION

Prevention of deontological violations committed in community pharmacies is important for the protection of public health, the reputation of pharmacy profession and public finance. It has been shown that these deontological violations increase during periods of liberalization policies applied in the healthcare field and economic crises (Kiran 2009; Kiran and Mandraccioğlu 2013).

There are many laws and regulations related to pharmacy, mainly the Deontology Regulation of the Turkish Pharmacist's Association (TPA), as well as binding provisions in agreements of Social Security Institution (SSI) in order to prevent community pharmacists in Turkey to be getting involved in deontological violations. In recent years, "Regulation on the Establishment of the Collusion Evaluation Commissions and its Working Rules and Principles" issued by the Turkish Ministry of Health, Turkish Medicines and Medical Devices Agency which entered into force on 14.03.2016 is also an important legislative regulation. In Article 4/d of this Regulation; "Collusion is defined as; business activity jointly or individually by someone other than the pharmacist who appears as the owner and responsible manager of the pharmacy, whether or not he/she is in line of duty, through confidential or open, written or oral agreements as well as all such activities" (TİTCK Circular 2016).

This research was presented as a poster presentation at the 12th International Symposium on Pharmaceutical Sciences (ISOPS) in Ankara, Turkey, on June 2018.

Address for Correspondence :

Bülent Kiran, e-mail: kiran.bulent@gmail.com

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 22.10.2018

Accepted: 06.12.2018

In addition, according to Article 48-(4) of the Regulation on Pharmacists and Pharmacies held in 2014, in case of the detection of the establishment of pharmacies opened as col-lusive, the license will be cancelled, and penal sanctioning have been set as these pharmacists will not be able to open a pharmacy for five years" (Official Gazette 2014). Despite these regulations that have been issued in recent years and contain severe punitive sanctions, there is little research in-vestigating the deontological violations in Turkey.

In this context, this study was conducted in order to deter-mine the types and prevalence of deontological violations

reflected in the records of High Honor Court (HHC) in the TPA, and to develop proposals on corrective and preventive occupational policies.

MATERIALS AND METHODS

The research is cross-sectional. Crime types in disciplinary files in TPA Period-40 Working Report between 10.12.2015-30.09.2017 of HHC in TPA and submitted from 54 Regional Pharmacists Chamber in Turkey were classified accord-ing to classification method of deontological violations in 3-groups, and results were evaluated by frequency and per-centage distributions (Kiran and Mandiracioğlu 2013; Turk-ish Pharmacist's Association 2015; Turkish Pharmacist's As-sociation 2017). Some files have been discussed more than once in the High Honor Court for various reasons. Therefore, although the total number of files is 99, it is reflected as 112 in the study report.

RESULTS

32 deontological violation types and a total of 112 deon-tological violation cases were detected from 54 Regional Pharmacists Chamber in Turkey submitted to High Honor Court in TPA between 2015-2017 years. These violations were classified in 3-groups according to classification meth-od used in the first and only study on deontological viola-tions committed in Turkey's community pharmacies (Kiran

Table 1. Grouped Distribution of High Honor Court Cases According to Types of Violation

* Violation Type of HHC Cases 2015-2017 Years	%	n
1. Competition-Based Deontological Violations	51	45.6
2.TPA, Drug-Pharmacy Legislation Violations	50	44.6
* 2.1. Collusion	*(34)	*(68)
3.SSI Protocol Provisions Violations	11	9.8
Total	112	100
* Collusion	*(34)	*(30,4)

*HHC: High Honor Court

Table 2. Detailed Distribution of Violations Submitted in High Honor Court Cases (2015-2017)

Violations	n=112	%
Operating collusive pharmacy	34	30.4
Prescription collection and transfer	19	17.0
Violation of night-pharmacy, failure to comply with opening and closing times	12	10.7
Over-the-counter and wholesale drug sales	10	8.9
Advertisement, Promotion	3	2.7
Not taking patient share and price difference	2	1.8
Creating a website	2	1.8
Over-the-counter and wholesale of controlled medicines and narcotic drugs	2	1.8
Invoicing of drugs to the Institution, which are not delivered to patients	2	1.8
Not delivery of drugs to patients	2	1.8
Having drugs not delivered to patients	2	1.8
Having expired drugs	1	0.9
Not giving the documents requested by the auditor pharmacists	1	0.9
Not appointing responsible manager during departures over 24 h	1	0.9
Recording a prescription to SSI Medula system to prevent drug purchase from other pharmacies	1	0.9
Failure to comply with cold chain rules	1	0.9
Having products with uncertain content and manufacturer	1	0.9

Not covering the prescription despite the institution prescription line is available	1	0.9
Absentee	1	0.9
Prescribing drugs outside patient knowledge	1	0.9
Disruptive behavior for the functioning of chamber departments	1	0.9
Not giving information and documents requested by the board of directors	1	0.9
Invoicing of fake prescription, report, drug bar code and 2-d barcode	1	0.9
Establishing business relationship that does not conform to occupational ethics	1	0.9
Lack of illuminated and current night- pharmacy boards	1	0.9
Keeping drugs with impaired original package	1	0.9
Over-the-counter sale of unlicensed and illegal drugs	1	0.9
Having drugs without complete 2-d barcode	1	0.9
Improper action against the chamber president in terms of professional norms and dignity	1	0.9
Injection in pharmacy	1	0.9
Preventing the patient's access to drugs and purchase the drug from the preferred pharmacy by recording trial prescription to the Medula Provisioning System	1	0.9
Sales via internet	1	0.9
Irregular agreement	1	0.9

Table 3. Distribution of deontological violations according to regional pharmacy chambers(2015-2017)

Regional Chamber of Pharmacists	n=99	%
1. İstanbul Chamber of Pharmacists	33	33.3
2. Ankara Chamber of Pharmacists	16	16.2
3. Adana Chamber of Pharmacists	7	7.1
4. Mersin Chamber of Pharmacists	7	7.1
5. Kocaeli Chamber of Pharmacists	6	6.1
6. Balıkesir Chamber of Pharmacists	5	5.1
7. Şanlıurfa Chamber of Pharmacists	3	3.0
8. Konya Chamber of Pharmacists	3	3.0
9. İzmir Chamber of Pharmacists	3	3.0
10. Manisa Chamber of Pharmacists	2	2.0
11. Bursa Chamber of Pharmacists	2	2.0
12. Antalya Chamber of Pharmacists	2	2.0
13. Erzurum Chamber of Pharmacists	1	1.0
14. Eskişehir Chamber of Pharmacists	1	1.0
15. Tekirdağ Chamber of Pharmacists	1	1.0
16. Isparta Chamber of Pharmacists	1	1.0
17. Trabzon Chamber of Pharmacists	1	1.0
18. Kırklareli Chamber of Pharmacists	1	1.0
19. Uşak Chamber of Pharmacists	1	1.0
20. Gaziantep Chamber of Pharmacists	1	1.0
21. Giresun Chamber of Pharmacists	1	1.0
22. Batman Chamber of Pharmacists	1	1.0

and Mandiracıoğlu 2013; Turkish Pharmacist's Association 2015; Turkish Pharmacist's Association 2017).

Accordingly, it was found that "competition-based deontological violations" are in the first rank with 51 cases (45.6%), TPA, "Drug-Pharmacy Legislation violations" in the second with 50 cases (44.6%) and "Social Security Institution (SSI) protocol provisions violations" in the last rank with 11 cases (9.8%). It was found that collusion evaluated under the scope of TPA, Drug-Pharmacy Legislation violations consist of 68% of the violations in this group with 34 cases and in all types of violation it is in the first rank with 30.4%. Groups according to the type of violation are shown in Table 1, and the detailed distribution of all violations is shown in Table 2.

The most intensive deontological violations during 2015-2017 are determined in İstanbul (33.3%), Ankara (16.2%), Adana (7.1%) and Mersin (7.1%). Distributions of deontological violations for the years of 2015-2017 according to Regional Pharmacy Chambers are shown in Table 3.

During 2015-2017, disciplinary punishments given by the High Honor Court are defined as temporary prohibit from practice (42.4%), penalty fine (21.2%), written warning (3%) and files returned with various reasons (33.4%). Distribution of punishments given to violations by the High Honor Court is shown in Table 4.

Table 4. Distribution of punishments given by the High Honor Court (2015-2017)

Punishments Given To Violations By The High Honor Court	n=99	%
Ostracized from profession for 180 days	21	21.2
Penalty fine for 15 times the yearly chamber contribution	16	16.2
Ostracized from profession for 3 days	15	15.2
Returned due to lack of evidence	12	12.1
Returned	8	8.1
Penalty fine for 10 times the yearly chamber contribution	3	3.0
Written warning	3	3.0
Returned due to finalization since it is not appealed in given time	3	3.0
Returned due to make decision according to the outcome of litigation	3	3.0
Penalty fine for 5 times the yearly chamber contribution	2	2.0
Waiting to be discussed after completing notification	2	2.0
Ostracized from profession for 5 days	2	2.0
Ostracized from profession for 30 days	2	2.0
Ostracized from profession for 15 days	1	1.0
Ostracized from profession for 20 days	1	1.0
Returned due to lack of procedure	1	1.0

Table 5. Comparative Distribution of Deontological Violation Types by Years

Violation Types	1987-2010		2013-2015		2015-2017	
	%	n	%	n	%	n
1. Competition-Based Deontological Violations	53	165	50.8	64	45.6	51
2. TPA Drug-Pharmacy Legislation Violations	24.6	77	35.7	45	44.6	50
* 2.1. Collusion	76.3	*58	*48.7	*22	*68	*34
3. SSI Protocol Provisions Violations	22.4	70	13.5	17	9.8	11
Total	100	312	100	126	100	112

*Collusion rate in TPA Drug-Pharmacy Legislation Violations.

Since the records of the last four years of the High Honor Court (2013-2015) and (2015-2017) were examined together with the first study records examined deontological violations in Turkey, it is understood that the order of prevalence of violation (case) types has not changed (Table 5).

DISCUSSION AND CONCLUSION

When compared, Turkey's first study based on long term records with 2015-2017 Report of HHC Period-40 with the Working Report of HHC for 2013-2015; it was seen that competition-based deontological violations in the first rank with 53% decreased to 50.8% during 2013-2015 years and to 45.6% during 2015-2017 years (Kiran and Mandiracioğlu 2013; Turkish Pharmacist's Association 2015; Turkish Pharmacist's Association 2017). On the other hand; it was determined that TPA Drug-Pharmacy Legislation Violations with 24.6% increased to 35.7% during 2013-2015 years and this upward trend has continued during 2015-2017 years reaching up to 44.6% and one of the most important main factors in this trend was collusion violations. In addition, SSI violations with 22.4% decreased to 17% and then 9.8% within the years and it is thought that the SSI has played a role in this decrease with severe penalties imposed on community pharmacies (Kiran 2015).

The most common violation types; prescription collection and transfer (17%), violation of night-pharmacy, failure to comply with opening and closing times (10.7%), over-the-counter and wholesale drug sales (8.9%), advertisement and promotion activities (2.7%) among competition-based deontological violations, and not delivering drugs to patients and invoicing drugs to the institution (3.6%) among SSI violations.

In TPA Drug-Pharmacy Legislation Violations; it is thought-provoking that "collusion" violation in the past (76.3%) is still the most common violation (68%) and in the first rank increasing its share from 18.6% to 30.4% in all violations despite increasing punishments (Kiran and Mandiracioğlu 2013; Turkish Pharmacist's Association 2015; Turkish Pharmacist's Association 2017).

Persistence of violation despite punitive sanctions aggravated by recent regulations suggests that it is not possible to solve only by punitive sanctions, and it must be get to the bottom of the problem (Higuchi and Kodama 2011; Panitch and Leys 2009; Wiberg 2011).

Suggestions

It is thought that it is necessary to work together with all stakeholders for solution of economic and educational problems in pharmacy, especially for the payment of sufficient salary during the retirement of community and public pharmacists and for creation of adequate and new employment areas in all fields of public, universities, pharmaceuticals and pharmacy according to the number of beds in hospitals and the production capacity of the indus-

try, other than community pharmacy for pharmacists who have graduated from more than fifty pharmacy faculties in order to prevent collusion violation that endangers community health care, causes illegal events and harms the public economy and makes unreparable damages to the reputation of the pharmacy profession.

Ethics Committee Approval: Ege University Scientific Research and Publication Ethics Committees does not require the application of the ethics committee for the data collected from the working reports.

Informed Consent: The authors used the TPA Period-40 Working Report between 10.12.2015-30.09.2017 of HHC.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – B.K.; Design - B.K.; Supervision - B.K. Resource - B.K. Materials - B.K., E.G.K.; Data Collection and/or Processing - B.K., E.G.K. Analysis and/or Interpretation - B.K., E.G.K. Literature Search - B.K., E.G.K.; Writing - B.K., E.G.K. Critical Reviews B.K.

Acknowledgements: The authors, would like to thank Turkish Pharmacists' Association for publishing the TPA Period-40 Working Report between 10.12.2015-30.09.2017 of HHC.

Conflict of Interest: The authors have no conflict of interest to declare.



Financial Disclosure: The authors declared that this study has received no financial support.

REFERENCES

- Higuchi N, Kodama Y (2011). Scheme of reeducation and administrative punishment to pharmacist, investigation commission on administrative punishment to pharmacist. Japan Pharmaceutical Association. 1st ed, JPA Press, Tokyo. p. 127-215.
- Kiran B (2009). The study of the relationship of the health policies and economic crises and deontological violations in community pharmacies in İzmir city. *J Fac Pharm Ankara* **38**: 269-283.
- Kiran B (2015). Problems Arising from Protocols of Social Security Institution with Community Pharmacists. *Türkiye Klinikleri J Med Ethics Law Hist-Special Topics* **1**: 23-31.
- Kiran B, Mandiracioğlu A (2013). Deontological Crimes of the Community Pharmacies in İzmir. *Türkiye Klinikleri j Med Sci* **33**: 635-647. [CrossRef]
- Panitch L, Leys C (2009). Socialist register 2010. Morbid Symptoms: Health Under Capitalism. 1st ed, Merlin Press, London. p. 143-15.
- Official Gazette (2014). <http://www.resmigazete.gov.tr/main.aspx?home=http://www.resmigazete.gov.tr/eskiler/2014/04/20140412.htm&main=http://www.resmigazete.gov.tr/eskiler/2014/04/20140412.htm> Accessed on: 15.03.2018
- TİTCK Circular (2016). <https://www.titck.gov.tr/PortalAdmin/Uploads/UnitPageAttachment/uFkZP17P.pdf> Accessed on: 15.03.2018
- Turkish Pharmacist's Association (2015) Period-39 Working Report, Section 7, Mattek Matbaacılık Basım Yayın Tanıtım Tic. San. Ltd. Şti. Ankara, p. 227-237.

- Turkish Pharmacist's Association (2017) Period-40 Working Report, Section 6 Fersa Matbaacılık Ltd. Şti. Ankara, p. 409-418. [\[CrossRef\]](#)
- Wiberg C (2011). Pharmacy and pharmacists Law, licensing and operation regulations. Minnesota Board of Pharmacy. 1st ed, Minnesota's Bookstore, Minnesota p. 21-136.

Real time monitoring of cytotoxicity of *Callistemon citrinus* against Colo-205 cell line

Alim Hüseyin Dokumacı^{1*} , Peter Olutope Fayemi^{2,3} , Mukerrem Betül Yerer¹ 

¹Department of Pharmacology, Erciyes University, Faculty of Pharmacy, Kayseri, 38039, Turkey

²Department of Food Engineering, Erciyes University, Kayseri, 38039, Turkey

³Department of Livestock and Pasture Science, University of Fort Hare, 5700 Alice, South Africa

ORCID IDs of the authors: A.H.D. 0000-0003-0035-1479; P.O.F. 0000-0002-2466-2223; M.B.Y. 0000-0002-4503-8032.

Cite this article as: Dokumacı AH, Fayemi PO, Aycan Yerer B. (2019). Real time monitoring of cytotoxicity of *Callistemon citrinus* against Colo-205 cell line. Istanbul J Pharm 49 (1): 25-32.

ABSTRACT

Callistemon citrinus is a member of Myrtaceae family that thrives under different ecological conditions. The leaves, flowers, stem backs and roots of the plant contain various phytochemicals that are useful in folk medicine for different remedies such as antimicrobial, anti-nociceptive, fungicide and anti-inflammatory purposes. In this study, we investigated the cytotoxic effect of *Callistemon citrinus* leaf and flower methanolic extracts against human Colo-205 Cell Line using real time cell analyzer device for monitoring in time-dependent manner. To determine the mechanism of cytotoxicity of the extracts, Western blotting assay was used for measuring evocation of Akt pathway. Extracts were found to exert cytotoxic effect at a dose dependent manner. IC₅₀ values of leaves and flowers extract were 6.49 µg/mL and 5.22 µg/mL, respectively. At the early stages of the experiment, Akt pathway was triggered at high extract concentrations. Although, high extract concentrations showed proliferative effect at early stages, this effect reversed after 5 and 8 h resulting in low cell viability. Findings from this study therefore showed that extracts of leaf and flower from *Callistemon citrinus* demonstrated cytotoxic effect against Colo-205 but seems not to be related Akt signaling pathway.

Keywords: Akt/p-Akt, *Callistemon citrinus*, colon cancer, xCELLigence

INTRODUCTION

Colon cancer is a one of the major causes of mortality and morbidity all over the World. According to a recent epidemiological report, intestinal cancers (colon and rectum) death rate was 13% of total cancer deaths from 172600 reported mortalities which was second order after the lung cancer (Malvezzi et al. 2015). Currently, therapeutic approaches for treating human colorectal include radiotherapy, chemotherapy and surgery. In addition to conventional treatment of colon carcinoma, there are a lot of alternative medicine in use from natural products. One of such natural products include phytochemicals from ornamental plants. *Callistemon citrinus* is one of the medicinal ornamental plants from Myrtaceae family (Brophy et al. 1998). Different parts of the plant contain alkaloids, polyphenols, flavonoids, tannins, steroids, aliphatic acids, monoterpenoids, triterpenoids, sesquiterpenes and several phytochemicals. The leaf oils of *C. citrinus* are known to have antimicrobial, antifungal, antinociceptive and anti-inflammatory activities (Sudhakar et al. 2004; Oyedeji et al. 2009). In folk medicine, various parts of this herb are used in making traditional pills for treating dysentery, cough, bronchitis, hemorrhoids and rheumatism (Paluri et al. 2012). In our previous study, the *in vitro* cytotoxic effects of leaf and flower extracts from *C. citrinus* has recently been reported against MCF-7 breast cancer cell line by our group (Fayemi et al. 2015).

Although, reports on bioactivities of *Callistemon* are available yet information on *in vitro* cytotoxicity of this plant is limited against colon cancer. *In vitro* cytotoxicity tests are prerequisites for describing intrinsic toxicodynamics of phytochemicals in any potential

Address for Correspondence :

Alim Hüseyin Dokumacı, e-mail: ahuseyindokumaci@gmail.com

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 26.04.2018

Accepted: 04.10.2018

medicinal plant (Sutar et al. 2014). Therefore, monitoring cell viability and toxicity is crucial for preclinical screening of a new compound in order to ascertain its bioactivity in aiding cell proliferation or causing apoptosis. In this study however, cytotoxic effect of extracts from *Callistemon citrinus* species' flower (CF) and leaves (CL) against colon cancer cell line was investigated by monitoring its effects in a real time manner using Real Time xCELLigence system. In addition, we also investigated the mechanism of action in relation to Akt/phosphorylated Akt pathway. Because of the potential anti-apoptotic effects of plant materials, this pathway was selected which is activated by several natural products. Akt protein is one of the key proteins in Wnt signaling that evoked at the beginning of the apoptosis pathway (Koseoglu et al. 2007; Brahmachari 2012). Akt is Ser/Thr kinase which is also referred to as protein kinase B (PKB) in mammalian genomes have three Akt genes namely: Akt1 (Protein kinaseB α), Akt2 (Protein kinaseB β) and Akt3 (Protein kinaseB γ) and they are extensively expressed in various tissues. Akt1 is most abundantly expressed in the heart, lung, brain and colon. Akt2 is predominantly expressed in the skeletal muscle and embryonic brown fat and Akt3 is expressed most abundant in embryonic heart, kidney and also brain (Coffer et al. 1992; Altomare et al. 1995; Altomare et al. 1998; Brodbeck et al. 1999). Akt1, Akt2 and Akt3 genes are located on 14q32, 19q13.1-13.2 and 1q44 respectively (Staal et al. 1988; Cheng et al. 1992; Murthy et al. 2000). The phosphatidylinositol 3-kinase(PI3K)-Akt signaling pathway is evoked by many types of cell stimuli or toxic reagents and regulates fundamental cellular functions such as proliferation, transcription, translation, cell survival and growth (Datta et al. 1999; Vivanco et al. 2002).

The Akt/protein kinase B (PKB) kinase is an effector of phosphoinositide 3-kinase (PI3K) that plays important roles in the pathogenesis of human cancers (Blume-Jensen et al. 2001). Previous studies have reported that PI3K/Akt pathway plays a critical role in cell survival or apoptosis in various human cancer cells such as lung (Brognard et al. 2001), prostate (Kreisberg et al. 2004), pancreas (Grille et al. 2003), and breast carcinoma (Sun et al. 2001). Colon carcinoma is characterized by different morphological, genetic and cellular events. There are some occasion which causes to cancer formation such as over expression of Akt1 and its activation level (phosphorylated Akt) and site is link to development and progression of colon cancer (Roy et al. 2002). In order to activate Akt, it requires that the phosphorylation of Thr308 in the activation loop by the phosphoinositide-dependent kinase 1 (PDK1) and Ser473 within the

carboxyl-terminal (Figure 1). Phosphorylation of Akt is promoted by phosphatidylinositol-3-OH kinase (PI3K) products, which subsequently facilitate transmembrane signaling by serving as membrane-localization molecule. It has been reported that phosphorylation of Akt was apparently detected at high level in normal colorectal cells mucosa. They also performed PI3K/Akt pathway related apoptosis mechanisms which are caspase 3, EGF (endothelial growth factor) and TNF α (Tumor necrosis factor α) (Itoh et al. 2002). To the best of our knowledge, cytotoxicity of *C. citrinus* on colon cancer cell line and its mechanism of action over Akt/p-Akt pathway was investigated. The aim of this study was investigate the dynamic monitoring of cytotoxic effect of CF and CL extract on Colo-205 cell line. In addition we existed if the Akt pathway was evoked by extracts for evaluating the mechanism of action.

MATERIALS AND METHODS

Chemicals

Dimethyl sulfoxide (DMSO; Sigma Aldrich, Steinheim, Germany), Tris base (Sigma-Aldrich, Steinheim, Germany), Dulbecco's Modified Eagle's Medium (DMEM, Sigma-Aldrich, Steinheim, Germany), Trypsin-EDTA (Sigma-Aldrich, Steinheim, Germany), Fetal Bovine Serum (FBS; Sigma-Aldrich, Steinheim, Germany) were used. Akt (Cell Signalling Technology (CST), 92725, Leiden, Netherlands), Phospho-Akt (Ser473) antibody (CST 4060S, Leiden, Netherlands), β -Actin Antibody (CST 4967, Leiden, Netherlands) antibodies were used for western blotting.

Plant materials

Fresh leaves and flowers of *C. citrinus* were harvested, air dried and grounded into coarse powder. 40 g of plant material from leaves was diluted in 960 mL deionized water and 40 g of extract from flowers in a mixture of 480 mL methanol with 480 mL deionized water, and then distilled using Heidolph rotary evaporator (Hei-VAP HL/G3; Heidolph Instruments GmbH, Schwabach, Germany). The distillates from leaves and flowers were lyophilized for 24 h, then stored in plastic vials at -80°C until analysis. HPLC grade water (18.2M Ω -cm) was prepared using a Millipore Simplicity 185 Direct-Q water purification system (Millipore Corp., Bedford, USA).

Cell culture

Colo-205 cell line was purchased from the American Type Culture Collection (ATCC, Manassas, VA, USA) The cells were grown in DMEM with 10% fetal bovine serum, 2 mM L-glutamine and 1% penicillin/streptomycin and incubated in a humidified at-

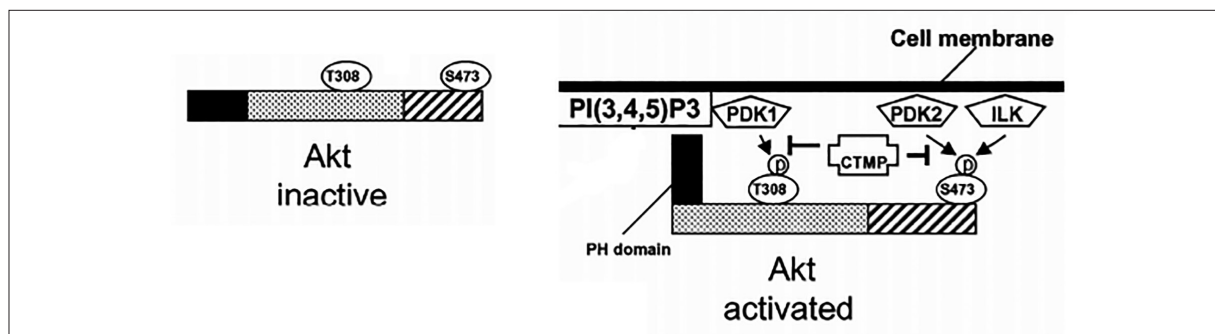


Figure 1. Akt phosphorylation sites and activating with cellular bioactive molecules

mosphere containing 5% CO₂ at 37°C. When the confluence nearly reached 80%, the cells were washed with Dulbecco's Phosphate-Buffered Saline (DPBS) solution and detached from the flasks with trypsin/EDTA. The cells were centrifuged with the Universal 320R (Hettich, Zentrifugen, 1406; Kirchleugern, Germany) at 1000rpm for 5 mins at 25°C, seeded on 6 wells plate and 96 wells E-plate for western blot and xcelligence analysis, respectively.

Western blotting

Western blot analysis was carried out using crude lysates of Colo-205 human colon cancer cells. Cells were treated with CL and CF extract at 400, 200, 100 and 50 µg/mL concentrations for 12 h both. Cells were lysed in commercial ripa lysis buffer (SC-24948; Santa cruz; CA, USA). The lysate was centrifuged at 4 °C for 30 min at 12000 rpm. The clear supernatant was collected and the total protein amount was determined by Lowry method. 30 µg protein lysates were resolved on 8% sodium dodecyl sulphate (SDS)-polyacrylamide gels. Then electro-transferred onto polyvinylidenedifluoride (PVDF) membrane. After blocking with 5% non-fat milk in Tris-buffered saline (TBS,

0.1 M, pH 7.4). Membrane were incubated with primary antibodies anti-phospho-Akt (Ser473) (1:500 dilution, Cell Signaling Technology), anti- Akt (1:1000 dilution), anti-pAkt (1:1000 dilution), and anti-tubulin (1:2000 dilution). β-actin protein was assigned as a control for protein loading. After overnight incubation at 4 °C conditions, membranes were incubated with secondary antibody, HRP-conjugated goat/rabbit anti-IgG, for 1 h at room temperature. After each step blots were washed three times with Tween (0.2%)-Tris-buffer saline (TBST). Protein bands were detected by enhanced chemiluminescence method (ECL; Santa Cruz Biotechnology, CA, USA) on XO-MAT film. The blots were scanned and analyzed using ImageJ software.

Real Time Cell Analyzer (RTCA) system for cellular monitoring against Colo-205

The xCELLigence system was used for monitoring the real time effect of extracts from *C. citrinus* against Colo-205 cells following manufacturer's instructions (Ke et al. 2011a). The xCELLigence system has got four main units: RTCA analyzer, the RTCA SP station, the RTCA computer with integrated software and disposable E-plate 96 (Figure 2). The RTCA SP station was

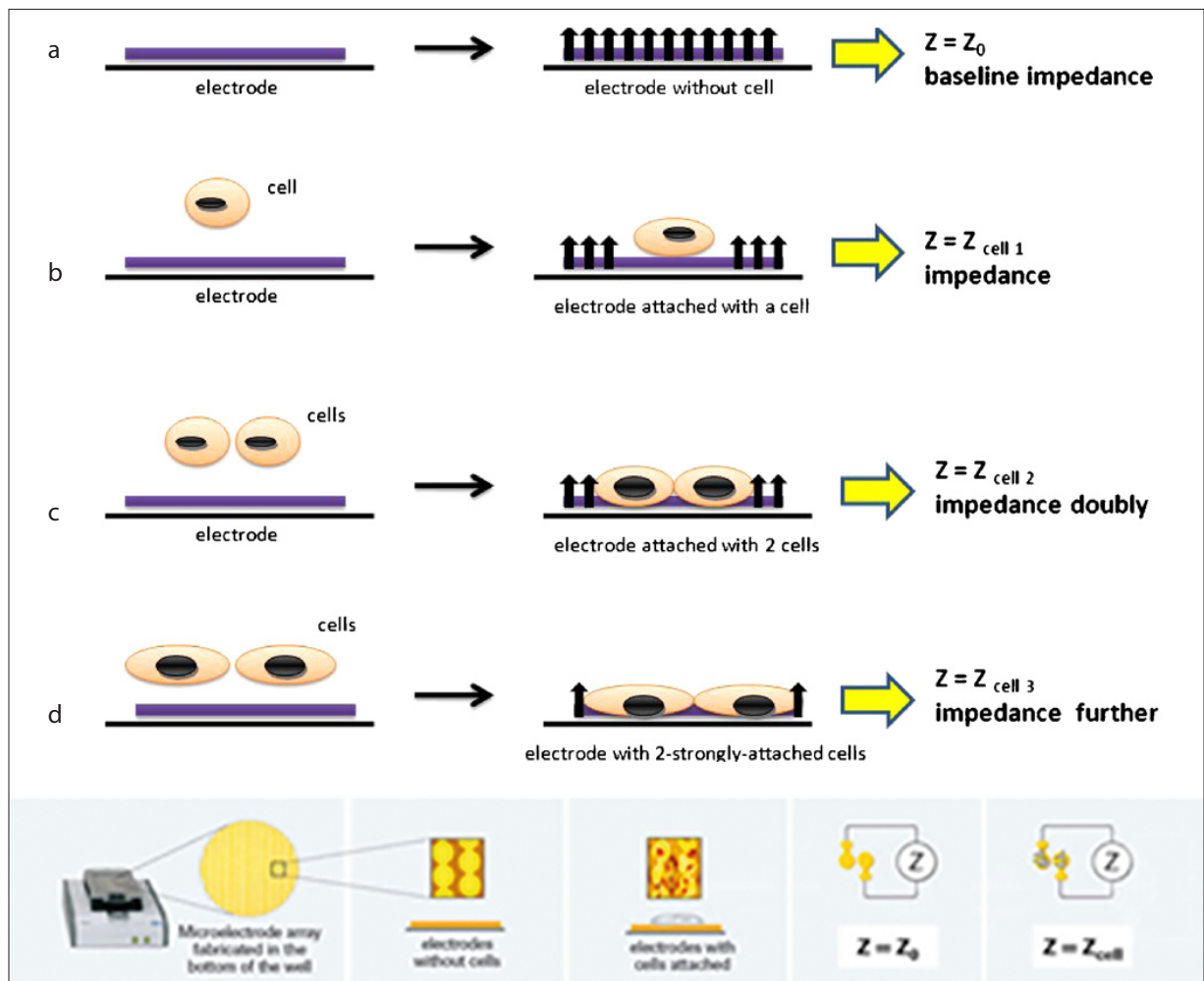


Figure 2. a-d. 96 well E- plate bottom includes golden electrodes which is sensitive to cell adhesion, proliferation and enlargement. Absence of cell (a) at the bottom of the well impedance will be 0 ($Z=Z_0$). Presence of adhesive cell can alter impedance (b) and more cells (c) increase this impedance. Also cell enlargement effects impedance (d), when cells enlarge without mitosis division, impedance alters and cell index increases.

placed inside incubator, while an analyzer and laptop computer with software are on the outside. E-plate 96 is a single use, disposable device used for performing cell-based assays on the RTCA SP instrument. However the E-plate 96 differs from standard 96-well microtiter plates vastly with its incorporated gold cell sensor arrays in the bottom, which contributes cells inside each well to measure alterations on impedance (Bird et al. 2009; Ke et al. 2011b). Electronic impedance alterations can be measured at least every 2 minutes to allow monitoring and detection of physiological changes on the cells. The impedance measured between electrodes in an individual well depends on electrode geometry, the number of the cells in the well and whether the cells are attached to the electrodes or not. In the presence of cells, cells attached to the electrode sensor surfaces and thereby alter the local ion environment at the electrode/solution interface, leading to an increase in impedance. Cell index is related with cell adhesion, cellular morphology alterations also cell detachment via cellular death. So we can evaluate the cytotoxic effect of any material with cell index alterations (Ke et al. 2011b).

Colo 205 cells were grown on cell culture flasks and after reaching approximately 80% confluence, the cells were detached and seeded inside E-plate and incubated for 30 min incubation at room temperature. E-plate 96 was placed into the cell culture incubator different cell numbers (50 000, 25 000, 12 500, 6250 and 3125) to assign optimal seeding concentration. We decided to seed 12500 cell/well for optimal seeding because of log growth phase achieved on this cell number. Cell proliferation, attachment and spreading were monitored every 15mins via the alterations impedance of E-plate wells.

Cytotoxicity assay using Xcelligence system

To determine the cytotoxic effect of CF and CL on Colo-205 cell line, RTCA (xcelligence) was used. A total of 12500 cells/well were seeded in the E-plate 96 wells and approximately 46h post-seeding when the cells were in the log growth phase, cells were treated with extracts and only medium control. Controls received medium and treated groups (CF and CL at 400, 200, 100, 50, 10, 1 $\mu\text{g}/\text{mL}$ concentrations) were replicated 4-times and the experiments were run for 97 h. All calculations were done with the RTCA-integrated software of the xcelligence system.

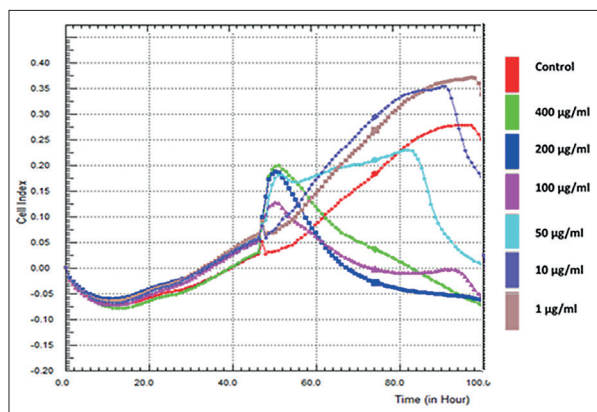


Figure 3. Cell index profiles of Colo 205 cell line treated with different concentrations of leaves extracts from *Callistemon citrinus*

The RTCA software performs the curve-fitting of selected "sigmoidal dose-response equation" and calculated logarithmic half maximum effect of concentration [$\log(\text{IC}_{50})$] values at a given time point based on log concentration producing 50% reduction of cell index (CI) value relative to the control CI value (100%). Cell index value represents the alteration of cell viability, cell attachment and cellular growth rate. Likewise, when the cell index data obtained during the experiment at the particular time points, dynamic monitoring of the cells' response can be elucidated.

Statistical analysis

For each group, data were derived from at least three independent experiments. One-way analysis of variance (ANOVA) followed by Bonferroni post hoc analysis was used for all the data analysis. Standard deviation (SD) was calculated with the same method. Statistical significance between the collection methods were assessed as $p < 0.05$ and was calculated using the same program. Results were presented as the mean \pm SD.

RESULTS

Effects of *Callistemon citrinus*'s leaves and flowers on cell viability

The results of IC_{50} values calculated for CL and CF using RTCA software were 6.49 $\mu\text{g}/\text{mL}$ and 5.22 $\mu\text{g}/\text{mL}$ at 24 h post treatment, respectively. At higher concentrations of 400, 200 and 100 $\mu\text{g}/\text{mL}$ for CL extract, cell index increased for about 5 h after the treatment time. Shortly after the treatment, it was observed that cell index decreased and continued decreasing until the end of experiment. At lower concentrations of 10 and 1 $\mu\text{g}/\text{mL}$ for CL (Figure 3), cell index profiles were parallel to control and did not affect cells after the treatment time. Interestingly, 50 $\mu\text{g}/\text{mL}$ dose initially increased the cell index rapidly and continued the increment gradually but was observed to decrease at 85 h. 400 and 200 $\mu\text{g}/\text{mL}$ concentrations of CF increased cell index (Figure 4) after the post treatment and continued this increment about 8 h different from the CL high dose concentrations, than cell index decreased consistently. 50 $\mu\text{g}/\text{mL}$ dose firstly increased cell index as the high concentrations but cell index did not decrease after 5 h,

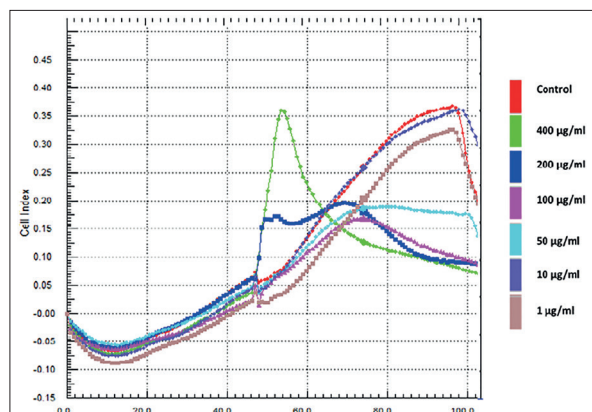


Figure 4. Cell index profiles of Colo 205 cell line treated with different concentrations of flower extracts from *Callistemon citrinus*

it showed cytostatic effect after 14 h post treatment, than it decreased cell index rapidly after about 32 h post treatment interestingly its cell response profile was similar CL. When we look at other concentrations (10, 1 µg/mL) there was no apparent difference in comparison with control (Figure 3).

Effects of *Callistemon citrinus*'s leaves and flowers on the Cell Index Alterations

All the statistical analysis were performed with two way ANOVA and groups were compared to control as presented in Table 1. The cell index alterations (CIA) of the groups that were treated with CL extract gave an idea about cell proliferation, adhesion and enlargement getting increase or decrease. Cell index alterations were calculated as difference at 6th, 12th, 24th and 48th time points compared to the first treatment point (time 0). High dose of 400, 200 and 100 µg/mL, respectively for CL extract, CIA levels decreased significantly (p<0.05) at 24th and 48th h in a time dependent manner (Figure 5). On the contrary, the CIA for at 50 µg/mL dose decreased but it was slower in comparison to high concentrations and only 48th h value was significant (Table 1). Control and low concentrations (10, 1 µg/mL) CIA increased depending on experimental time schedule. But only 10 µg/mL decreased CIA level at 48th h. It was an expected situation for control group because cell index of healthy cell increases due to proliferation and culture medium efficiency.

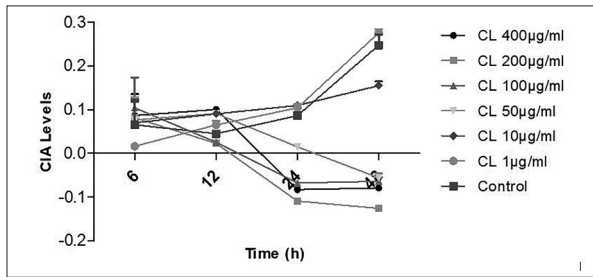


Figure 5. CIA of *Callistemon citrinus*' Leaves at 6th, 12th, 24th and 48th h compared to the first treatment time point. CIA values were given mean±SD.

CF extract treated groups showed different CIA profiles comparing to CL. 400 and 200 µg/mL concentrations CIA was higher than control because of high cell index at 6 h but this values decreased and get lower than control at 24 h. 100 and 50 µg/mL concentrations CIA was increased slightly and consistently (Table 2). 10, 1 µg/mL concentrations were similar profiles to control (Figure 6).

Western blot results

The role of PI3K-Akt pathway in initiating cell survival and proliferation has been extensively reported in scientific literatures. Although from previous studies, a lot of substrates have been discovered for manipulating Akt activity and yet some questions are still waiting to be answered. In our study, Akt and pAkt protein expression levels were investigated to understand Akt activity. When we look at activated Akt level at 12th h for CL extracts, p-Akt levels were increased in higher concentrations particularly for 400, 200 and 100 µg/mL concentrations in a dose dependent manner but none of those increments were statistically significant (p>0.05). In comparison with the control, the value of p-Akt was low for 50 µg/mL dose for CL extract but did not have significant difference (p>0.05) (Figure 7). Results obtained from CF at 400, 200 and 100 µg/ml concentrations also increased p-Akt slightly but those increments were not significant (p>0.05) in comparison to the control. Akt protein expression were increased by 200 and 100 µg/mL concentrations of CL and 400

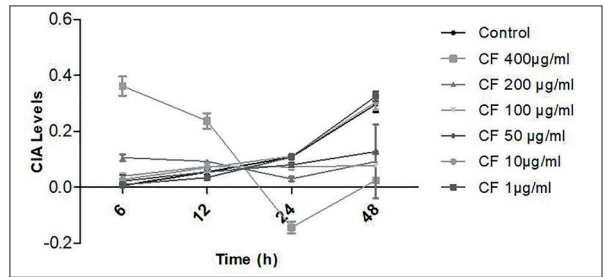


Figure 6. CIA of *Callistemon citrinus*' flowers at 6th, 12th, 24th and 48th h compared to the first treatment time point. CIA values were given mean±SD.

Table 1. CIA values of CL were analyzed comparing to control with two way ANOVA.

	6 th h	12 th h	24 th h	48 th h
CL 400 µg/mL vs Control	2.1±1.1	5.5±3.1	16.9±9.1	32.7±17.7
		* p=0.0174	*** p=0.0001	*** p=0.0001
CL 200 µg/mL vs Control	1.6±0.8	2.2±1.2	19.5±10.6	34.3±20.3
			*** p=0.0001	*** p=0.0001
CL 100 µg/mL vs Control	3.9±2.1	1.9±1.1	15.3±8.3	31.1±16.9
			*** p=0.0001	*** p=0.0001
CL 50 µg/mL vs Control	1.1±0.5	4.6±2.5	7.09±3.8	30.3±16.5
				*** p=0.0001
CL 10 µg/mL vs Control	0.4±0.2	4.5±2.4	2.3±1.2	9.2±5.1
				*** p=0.0001
CL 1 µg/mL vs Control	4.9±2.6	2.1±1.1	1.4±0.9	2.8±1.5
				*** p=0.0001

* p=0.0456

statistically significance assigned p<0.05 (*), p<0.01 (**), p<0.001 (***).

Percent alterations±SD values given in the table.

Table 2. CIA values of CF were analyzed comparing to control with two way ANOVA.

	6 th h	12 th h	24 th h	48 th h
CF 400 µg/mL vs Control	35.6±7.45 *** p=0.0001	18.2±8.9 *** p=0.0001	25.1±1.2 *** p=0.0001	27.1±1.3 *** p=0.0001
CF 200 µg/mL vs Control	10.1±2.9 *** p=0.0001	3.8±1.8	7.7±0.3 ** p=0.0015	20.4±1.5 *** p=0.0001
CF 100 µg/mL vs Control	3.4±1.6	1.9±0.9	3.5±0.7	21.6±4.5 *** p=0.0001
CF 50 µg/mL vs Control	1.6±0.7	0.6±0.1	2.7±1.1	16.9±0.8 *** p=0.0001
CF 10 µg/mL vs Control	2.1±1	16.1±0.78	0.3±0.1	0.7±0.1
CF 1 µg/mL vs Control	0.3±0.1	2.1±0.2	0.2±0.1	2.8±0.6

Statistically significance assigned p<0.05 (*), p<0.01 (**), p<0.001 (***). Percent alterations±SD values given in the table.

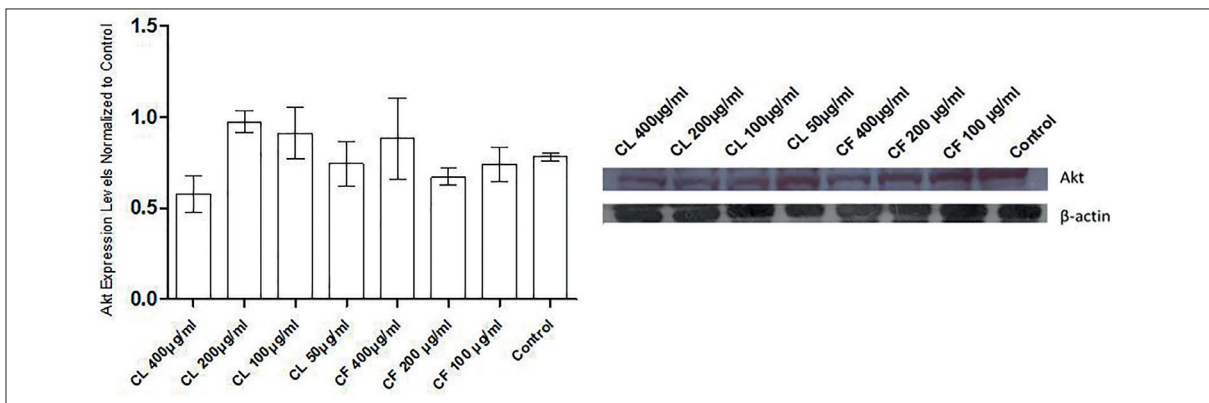


Figure 7. Expressed levels of Akt1 and β-actin by western blot analysis after 12 h treatment with flowers and leaves extract of *Callistemon citrinus*

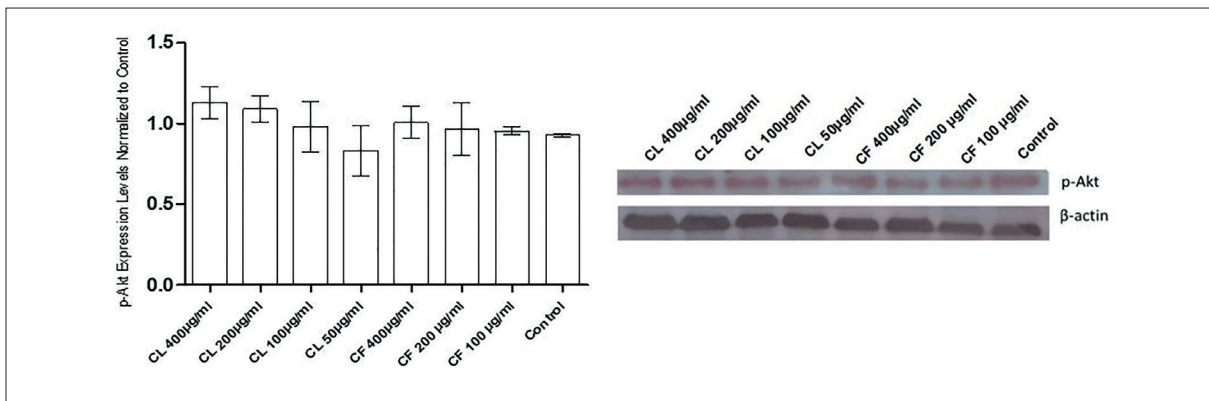


Figure 8. Expressed levels of p-Akt1 (Ser473) and β-actin by western blot analysis after 12 h treatment with flowers and leaves extract of *Callistemon citrinus*

µg/mL dose of CF. The other concentrations of CL and CF extracts decreased Akt comparing to control (Figure 8).

DISCUSSION

The aim of this study was to investigate the cytotoxic effects of CF and CL extracts on COLO-205 cell line.

Akt activity mainly plays a role in apoptosis pathway on cancer and normal physiological conditions. Therefore we investigated

Akt and p-Akt levels for understanding if Akt pathway evoked or not evoked by CL and CF extracts. In this study we captured a statistically significant increment after 5 h of treatment for CL and 8 h of treatment for CF at the highest concentrations. In 2015 Kumar et al. investigated essential oils of this plant and they found that essential oils induced apoptosis on human lung cancer (A549 cell line) and rat glioma (C-6 cell line) cells. Also they reported growth inhibition effect of essential oils on Colo-205 cell line. Hydrodistillation product of *Callistemon citrinus*

contains essential oils which is response for its major effect (Kumar et al. 2015). However extraction method is so important for evaluating the effect of plant material. In addition to our results on Colo-205 cell line, this data give us an idea about extracts of CF and CL essential oils might be a hope for alternative or supplement cancer therapy in addition to conventional cancer therapy. Supporting this increase in cell proliferation, the Akt levels decreased and p-Akt levels increased at 400 µg/mL for CL, revealing that the Akt is phosphorylated triggered the cell proliferation at this dose. In addition, real time monitoring made it possible to catch relevant time points for the induction of cell proliferation. For the colon cancer cell line it was important for us to show when this cytotoxic effect starts and which dose would be the best dose for treatment. Although this increase in proliferation at high concentrations followed by a decrease, this dose was decided not to be relevant concentration for treatment, since it was triggering Akt and p-Akt pathway at the beginning. For the following concentrations 200, 100 and 50 µg/mL Akt/p-Akt both decreased reflecting this pathway inactivated at these concentrations. Our findings also supported real time monitoring results for CL extracts. For the CL extracts the IC₅₀ level was 6.49 µg/mL. For the CF extracts, the real time monitoring results were approximately similar to CL results at all concentrations. CF extracts did not affect the Akt phosphorylation significantly, revealing that the action of mechanism might depend on another pathway of extract of CF. IC₅₀ level for extract of CF were 5.22 µg/mL and the relevant treatment time should be at least 24 h to see its effect.

CONCLUSION

There is limited report on potential cytotoxic effect of *Callistemon citrinus* plant material. Compared to conventional endpoint cell-based assays, dynamic monitoring of cell response, such as cell adhesion, proliferation, and cell survival is one of the advantages of the xcelligence system to optimize the cell concentration for *in vitro* and *in vivo* assays and also allows both cell and assay conditions to be constantly obtained before and during the time of the experimentation.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – A.H.D., P.O.F., M.B.Y.; Design – A.H.D., P.O.F., M.B.Y.; Supervision – A.H.D., P.O.F., M.B.Y.; Resource – A.H.D., M.B.Y.; Materials – A.H.D., M.B.Y.; Data Collection and/or Processing – A.H.D., M.B.Y.; Analysis and/or Interpretation – A.H.D., M.B.Y.; Literature Search – A.H.D., P.O.F., M.B.Y.; Writing – A.H.D., M.B.Y.; Critical Reviews – M.B.Y.

Acknowledgements: Thanks to Hadiye Kilicer Laboratory Instructors and head of this laboratory chief Mukerrem Betül Aycan.

Conflict of Interest: The authors have no conflict of interest to declare.



Financial Disclosure: There is no financial support except Hadiye Kilicer Laboratory equipments/chemicals.

REFERENCES

- Altomare DA, Guo K, Cheng JQ, Sonoda G, Walsh K, Testa JR. (1995). Cloning, chromosomal localization and expression analysis of the mouse Akt2 oncogene. *Oncogene* **11**: 1055-1060.
- Altomare DA, Lyons GE, Mitsuuchi Y, Cheng JQ, Testa JR. (1998). Akt2 mRNA is highly expressed in embryonic brown fat and the AKT2 kinase is activated by insulin. *Oncogene* **16**: 2407-2411. [\[CrossRef\]](#)
- Bird C, Kirstein S. (2009). Real-time, label-free monitoring of cellular invasion and migration with the xCELLigence system. *Nat Methods* **6**: 121-135 [\[CrossRef\]](#)
- Blume-Jensen P, Hunter T. (2001). Oncogenic kinase signalling. *Nature* **411**: 355-365. [\[CrossRef\]](#)
- Brahmachari G. (2012). Natural products in drug discovery: impacts and opportunities—an assessment *Opportunities and Challenges in Medicinal Chemistry* **11**: 1-190. [\[CrossRef\]](#)
- Brodbeck D, Cron P, Hemmings BA. (1999). A human protein kinase B with regulatory phosphorylation sites in the activation loop and in the C-terminal hydrophobic domain. *J Biol Chem* **274**: 9133-9136. [\[CrossRef\]](#)
- Brognaud J, Clark AS, Ni Y, Dennis PA. (2001). Akt/protein kinase B is constitutively active in non-small cell lung cancer cells and promotes cellular survival and resistance to chemotherapy and radiation. *Cancer Res* **61**: 3986-3997.
- Brophy JJ, Goldsack RJ, Forster PI, Craven LA, Lepschi BJ. (1998). The leaf essential oils of the Australian members of the genus *Callistemon* (Myrtaceae). *JEOR* **10**: 595-606. [\[CrossRef\]](#)
- Cheng JQ, Godwin AK, Bellacosa A, Taguchi T, Franke TF, Hamilton TC, Tschlis PN, Testa JR. (1992). AKT2, a putative oncogene encoding a member of a subfamily of protein-serine/threonine kinases, is amplified in human ovarian carcinomas. *Proc Natl Acad Sci U S A* **89**: 9267-9271. [\[CrossRef\]](#)
- Coffer P, Woodgett J. (1992). Molecular cloning and characterization of a novel putative protein-serine kinase related to the cAMP-dependent and protein kinase C families. *Eur J Biochem* **205**: 1217-1217.
- Datta SR, Brunet A, Greenberg ME. (1999). Cellular survival: a play in three Akts. *Genes Dev* **13**: 2905-2927. [\[CrossRef\]](#)
- Fayemi PO, Ahhmed A, Birisik C, Ceylan D, Muchenje SOV, Ozturk I, Cam M, Dokumacı AH, Yerer-Aycan MB, Yetim H. (2015). *Scientific programme: 1st International Conference on Natural Products for Cancer Prevention and Therapy 31 August-2 September 2015 Istanbul, Turkey*. Paper presented at the *Anti-Cancer Drugs*. [\[CrossRef\]](#)
- Grille SJ, Bellacosa A, Upson J, Klein-Szanto AJ, Van Roy F, Lee-Kwon W, Donowitz M, Tschlis PN, Larue L. (2003). The protein kinase Akt induces epithelial mesenchymal transition and promotes enhanced motility and invasiveness of squamous cell carcinoma lines. *Cancer Res* **63**: 2172-2178.
- Itoh N, Semba S, Ito M, Takeda H, Kawata S, Yamakawa M. (2002). Phosphorylation of Akt/PKB is required for suppression of cancer cell apoptosis and tumor progression in human colorectal carcinoma. *Cancer* **94**: 3127-3134. [\[CrossRef\]](#)
- Ke N, Wang X, Xu X, Abassi YA. (2011a). The xCELLigence system for real-time and label-free monitoring of cell viability *Mammalian Cell Viability* (pp. 33-43): Springer. [\[CrossRef\]](#)
- Ke N, Wang X, Xu X, Abassi YA. (2011b). The xCELLigence system for real-time and label-free monitoring of cell viability. *Mammalian Cell Viability: Methods and Protocols* **740**: 33-43. [\[CrossRef\]](#)
- Koseoglu S, Lu Z, Kumar C, Kirschmeier P, Zou J. (2007). AKT1, AKT2 and AKT3-dependent cell survival is cell line-specific and knockdown of all three isoforms selectively induces apoptosis in 20 human tumor cell lines. *Cancer Biol Ther* **6**: 755-762. [\[CrossRef\]](#)
- Kreisberg JI, Malik SN, Prihoda TJ, Bedolla RG, Troyer DA, Kreisberg S, Ghosh PM. (2004). Phosphorylation of Akt (Ser473) is an excellent predictor of poor clinical outcome in prostate cancer. *Cancer Res* **64**: 5232-5236. [\[CrossRef\]](#)
- Kumar D, Sukapaka M, Babu GK, Padwad Y. (2015). Chemical composition and *in vitro* cytotoxicity of essential oils from leaves and

- flowers of *Callistemon citrinus* from western Himalayas. *PLoS One* **10**: e0133823. [\[CrossRef\]](#)
- Malvezzi M, Bertuccio P, Rosso T, Rota M, Levi F, La Vecchia C, Negri E. (2015). European cancer mortality predictions for the year 2015: does lung cancer have the highest death rate in EU women. *Ann Oncol* **26**: 779-786. [\[CrossRef\]](#)
 - Murthy S, Tosolini A, Taguchi T, Testa JR. (2000). Mapping of AKT3, encoding a member of the Akt/protein kinase B family, to human and rodent chromosomes by fluorescence in situ hybridization. *Cytogenet Genome Res* **88**: 38-40. [\[CrossRef\]](#)
 - Oyedele OO, Lawal OA, Shode FO, Oyedele AO. (2009). Chemical composition and antibacterial activity of the essential oils of *Callistemon citrinus* and *Callistemon viminalis* from South Africa. *Molecules* **14**: 1990-1998. [\[CrossRef\]](#)
 - Paluri V, Ravichandran S, Kumar G, Karthik L, Rao K. (2012). Phytochemical composition and in vitro antimicrobial activity of methanolic extract of *Callistemon lanceolatus* DC. *Int J Pharm Pharm Sci* **4**: 699-692.
 - Roy HK, Olusola BF, Clemens DL, Karolski WJ, Ratashak A, Lynch HT, Smyrk TC. (2002). AKT proto-oncogene overexpression is an early event during sporadic colon carcinogenesis. *Carcinogenesis* **23**: 201-205. [\[CrossRef\]](#)
 - Staal SP, Huebner K, Croce CM, Parsa NZ, Testa JR. (1988). The AKT1 proto-oncogene maps to human chromosome 14, band q32. *Genomics* **2**: 96-98. [\[CrossRef\]](#)
 - Sudhakar M, Rao CV, Rao AL, Ramesh A, Srinivas N, Raju D, Murthy BK. (2004). Antinociceptive and anti-inflammatory effects of the standardized oil of Indian *Callistemon lanceolatus* leaves in experimental animals. *East and Central African Journal of Pharmaceutical Sciences* **7**: 10-15. [\[CrossRef\]](#)
 - Sun M, Paciga JE, Feldman RI, Yuan Zq, Coppola D, Lu YY, Shelley SA, Nicosia SV, Cheng JQ. (2001). Phosphatidylinositol-3-OH kinase (PI3K)/AKT2, activated in breast cancer, regulates and is induced by estrogen receptor α (ER α) via interaction between ER α and PI3K. *Cancer Res* **61**: 5985-5991.
 - Sutar N, Sutar R, Kumar M. (2014). *Callistemon citrinus* (bottle brush) an important medicinal plant: a review of its traditional uses, phytoconstituents and pharmacological properties. *Ind Res J Pharm & Sci* **1**: 68-77.
 - Vivanco I, Sawyers CL. (2002). The phosphatidylinositol 3-kinase-AKT pathway in human cancer. *Nat Rev Cancer* **2**: 489-501. [\[CrossRef\]](#)

Plants used in traditional treatment against diarrhea in Turkey

Seçil Karahüseyin^{1,2} , Aynur Sarı^{1*} 

¹Department of Pharmacognosy, İstanbul University, Faculty of Pharmacy, İstanbul, Turkey

²Department of Pharmacognosy, Çukurova University, Faculty of Pharmacy, Adana, Turkey

ORCID IDs of the authors: A.S. 0000-0001-8116-7053; S.K.0000-0002-3515-2974.

Cite this article as: Karahüseyin S, Sarı A (2019). Plants used in traditional treatment against diarrhea in Turkey. Istanbul J Pharm 49(1): 33-44.

ABSTRACT

Turkey is one of the richest countries in the world in terms of flora with its extraordinary plant diversity. Its flora consists of about 10,000 vascular plants and approximately one third of them (34.4 %) are endemic to the country. In recent years, the use of ethnobotanical information obtained from medicinal plant research has gained attention all around the world. For this reason, numerous ethnobotanical studies have recently been published and much has been written about medicinal plants in our country. This study deals with 133 taxa used in traditional treatments against diarrhea in Turkey and it aims to give information about scientific and local names of these taxa, families, used parts and usage in diarrhea.

Keywords: Diarrhea, medicinal plants, traditional treatment, Turkey

INTRODUCTION

Diarrhea is defined as loose stools, increased stool frequency, or urgency by patients. Although most patients use this term to describe changes in consistency (loose or watery stool), diarrhea can be considered as urgency or high stool frequency. In fact, with normal consistency, frequent defecation is often referred to as pseudodiarrhea; for this reason, an abnormal stool form and frequency should not be used to describe diarrhea. Most diarrheal episodes in developed countries are acute and self-limited and are usually caused by infections. In immunocompetent patients, acute contagious diarrhea typically resolves within 4 weeks (most often within 1 week). Therefore, chronic diarrhea is defined as that lasting longer than 4 weeks. It is estimated that 1%-5% of adults suffer from chronic diarrhea. In immunocompetent patients in developed countries, chronic diarrhea is not usually contagious (Lawrence et al. 2017).

Acute bloody diarrhea in children and adults is a difficult diagnostic problem. Acute bloody stools have different spectra between adults and children, but there are overlapping causes (infectious colitis and less frequently intussusception). Identification of patients with infectious causes is mandatory, so that they are suitably treated with antimicrobials and so that infection control measures can be fulfilled (Lori et al. 2009).

Detection of the cause of this disorder may be a problem, because there are many enteric pathogens that cause acute bloody diarrhea and several noninfectious gastrointestinal disorders; these are interpreted as loose, bloody stools, mostly diarrhea (Lori et al. 2009).

There is a battle between the host microbiology of normal flora and the exterminating microbes. Symptomatic infections for the host when invaded can alter the bowel barrier and absorptive functions, or can quickly cause a number of problems that can

Address for Correspondence :

Aynur Sarı, e-mail: aynur@istanbul.edu.tr

This work is licensed under a Creative Commons Attribution 4.0 International License.



Received: 11.03.2018

Accepted: 12.02.2019

lead to lethal dehydration, diarrhea, toxic megacolon or shock. Asymptomatic infections may go unnoticed, but they have durable results for children's growth and development. Most are acquired through contaminated food or water; however, only few pathogens (such as Shigella, Cryptosporidium, Giardia, rotaviruses, or noroviruses) can cause infection (Pawlowski et al. 2009).

Rotavirus is the leading cause of diarrhea hospitalization among children in the world. In 2003, a world-wide estimate of rotavirus-related deaths was published, based on a review of published literature on deaths from diarrhea and rotavirus hospitalizations in children from 1986 to 1999. Studies published between 1986 and 1999 showed that rotavirus causes ≈22% (range 17%-28%) of diarrheal hospitalizations in childhood. From 2000 to 2004, this rate increased to 39% (range 29%-45%). Application of this ratio to the recent World Health Organization estimates of diarrhea-related childhood deaths gave a predicted 611,000 (range 454,000-705,000) rotavirus-related deaths (Parashar et al. 2006).

In mass tourism, traveler's diarrhea is one of the most common health problems in long-distance journeys. Globally, there are 40 million cases per year. For this reason, travelers to risky areas should be informed in advance of what measures they should take in case of acute diarrhea and which medicines to include in the first aid kit (Jelinek et al. 2017).

The first choice of treatment of acute uncomplicated traveler's diarrhea - more than 90% of all cases - is the secretion inhibitor racecadotril. Usual practice, which recommends the antitility drug loperamide as the first option, should be rethought in favor of the last active ingredient racecadotril. Antibiotics should be used only in complicated cases. Generally, anticipation of a large number of passengers demanding antibiotic treatment should be impaired. Other therapeutic measures currently available for the treatment of acute diarrhea while traveling play a minor role (Jelinek et al. 2017).

Several studies have shown that antibiotics can reduce the rates of diarrhea in travelers to resource-limited countries. However, preventive antibiotic therapy is not recommended because of its side effects and so, if necessary, rapid-acting, single-dose antimicrobial therapy is used. In some studies, probiotics have shown benefit (Pawlowski et al. 2009).

There are a lot of kinds of diarrhea shown in this study and the drugs used for the treatment of diarrhea have many side effects. Medicinal plants have traditionally been used for the treatment of diarrhea for many decades.

In this study, we have compiled 133 taxa used in traditional treatments of diarrhea in Turkey. The aim is to give information about scientific and local names of these taxa, families, used parts and usage in diarrhea (Table 1).

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Achillea aleppica</i> DC. subsp. <i>aleppica</i>	Asteraceae	Civanperçemi	Aerial parts	Dec., Int.	(Doğan 2014)
^a <i>Achillea wilhelmsii</i> C. Koch.	Asteraceae	Ayvadere, Kedicirnağı, Kedi Tırnağı, Tilki otu	Aerial parts	+Milk, Dec. or Inf., Int Crushed, Ext. Dec., Int. Inf., Int.	(Oral 2007) (Şenkardeş 2014) (Tuzlacı 2016)
<i>Ailanthus altissima</i> (P. Mill.) Swingle	Simaroubaceae	Ossuruk ağacı	Branches	Dec., Int.	(Güneş et al. 2017)
<i>Alchemilla</i> sp.	Rosaceae	Aslanpençesi, Dutya	Aerial parts, Flower	Inf., Int.	(Karagöz and Serteser 2017)
<i>Alhagi maurorum</i> Medik.	Fabaceae	Xirnuf	Fruit	Raw, Int.	(Dalar et al. 2018)
<i>Alhagi pseudoalhagi</i> (Bieb.) Desv.	Fabaceae	Hurnif, Çeti, Çoban çalısı	Fruit	Dried Fruits Eaten Crushed, Int.	(Korkut 2006; Gençay 2007) (Tuzlacı 2016)
<i>Allium sativum</i> L.	Liliaceae	Sarımsak	Bulb	+Yoghurt, Fac.	(Uysal 2008)
<i>Alyssum pateri</i> Nyár. subsp. <i>pateri</i>	Brassicaceae	Keselmahmut	Aerial parts	Dec., Int.	(Kaval et al. 2014; Tuzlacı 2016)
<i>Anacamptis pyramidalis</i> (L.) Rich.	Orchidaceae	Sahlep, Salep çiçeği	Root	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Anthemis cretica</i> L. subsp. <i>pontica</i> (Willd.) Grierson	Asteraceae	Papatya	Capitulum	Inf., Int.	(Tütenocaklı 2014)
<i>Artemisia absinthium</i> L.	Asteraceae	Acı yavşan	Leaf	Take as a pill, Int.	(Yıldırım 2015)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Arum conophalloides</i> Kotschy ex Schott	Araceae	Yılan bıçağı	Seed	Raw, Swallowed	(Güneş et al. 2017)
<i>Arum dioscoridis</i> SM.	Araceae	İlan purçulağı, Kabargan, Ölüm körü, Yılan purçulağı		Cooked, Int.	(Yıldırım 2015)
<i>Berberis crataegina</i> DC.	Berberidaceae	Karamuk, Karamık, Kızılıcık	Flowering and Fruity Branches Fruit	Dec., Int. Raw, Int.	(Özkan 2002; Tuzlacı 2016) (Yeşil and Akalın 2009; Vural 2008)
<i>Berberis vulgaris</i> L.	Berberidaceae	Karamuk, Kadıntuzluğu	Fruit	Raw, Int.	(Korkmaz and Karakuş 2013)
<i>Camellia sinensis</i> (L.) Kuntze	Theaceae	Siyah çay	Leaf	Inf., Int. Raw or Inf., Int.	(Saraç et al. 2013; Tuzlacı 2016) (Uysal 2008)
<i>Capparis spinosa</i> L. var. <i>aegyptia</i> (Lam.)Boiss.	Capparaceae	Gebere, Kebere	Gemma	Swallowed	(Kazan 2007)
<i>Cardiospermum helicacabum</i> L.	Sapindaceae	Balon sarmaşığı, Japon feneri	Young Shoots	Dec., Int.	(Güzel et al 2015)
<i>Celtis tournefortii</i> Lam.	Ulmaceae	Derdoğan	Fruit	Raw, Int.	(Doğan 2014; Tuzlacı 2016)
<i>Centaurea pterocaula</i> Trautv.	Asteraceae	Şermnik	Leaf	Dec., Int.	(Kaval et al. 2014)
<i>Centaurea solstitialis</i> L. subsp. <i>solstitialis</i>	Asteraceae	İshal dikeneni	Aerial parts	Inf., Int.	(Şenkardeş 2014; Tuzlacı 2016)
<i>Cerasus avium</i> (L.) Moench	Rosaceae	Kiraz	Stem and Branch Bark	Dec., Int.	(Kural 2012; Tuzlacı 2016)
<i>Ceratonía siliqua</i> L.	Fabaceae	Buynuz, Harıp, Harnup, Keçiboynuzu, Keçibuynuzu	Fruit	Raw, Int. Jam, Int. Mac., Int.	(Bulut 2006; Tuzlacı 2016; Gürdal and Kültür 2013; Yıldırım 2015)
<i>Ceterach officinarum</i> DC.	Aspleniaceae	Altın otu, Mayasıl otu	Aerial parts	Cooked, Int. Dec., Int.	(Güzel et al. 2015) (Bulut 2006; Tuzlacı 2016)
<i>Chenopodium foliosum</i> Aschers	Chenopodiaceae	Kedi üzümü, Kuş üzümü	Aerial parts	Inf., Int.	(Doğan 2014; Şenkardeş 2014; Tuzlacı and Şenkardeş 2011; Tuzlacı 2016)
<i>Cicer arietinum</i> L.	Fabaceae	Nohut	Seed	Cooked, Int.	(Uysal 2008; Tuzlacı 2016)
<i>Cistus creticus</i> L.	Cistaceae	Pamuk otu	Leaf	Dec., Int.	(Onar 2006; Tuzlacı 2016)
<i>Citrus limon</i> L.	Rutaceae	Limon, Limon ağacı	Fruit	Juice, Int.	(Sargın et al. 2013)
<i>Convolvulus arvensis</i> L.	Convolvulaceae	Basırık (Bağırsak) otu, Mahmude otu	Branches and Leaves	Dec., Int.	(Güneş et al. 2017)
<i>Cornus mas</i> L.	Cornaceae	Kızılıcık, Kiren, Zaye	Fruit	Raw, Int. Syrup, Int. Dec., Int. Inf., Int.	(Koçyiğit and Özhatay 2006; Ayan 2015; Tuzlacı 2016) (Polat 2010; Korkmaz and Karakurt 2014) (Karcı 2013) (Güler et al. 2015)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Crataegus monogyna</i> Jacq. subsp. <i>monogyna</i>	Rosaceae	Alıç, Ekşi muşmula, Keçi alıcı, Kız elması, Kocakarı hurması	Fruit, Leaf, Flower	Eaten, Inf., Int.	(Sargin et al. 2013) (Furkan 2016)
<i>Cupressus sempervirens</i> L.	Cupressaceae	Mezarlık selvisi, Selvi	Cone	Dec., Int.	(Uysal 2008; Tuzlacı 2016)
<i>Cydonia oblonga</i> Miller	Rosaceae	Ayva	Leaf, Seed, Flower	Inf., Int., Dec., Int., Dec., Int., Inf., Int.	(Sargin et al. 2013) (Güneş et al. 2017; Uysal 2008; Metin 2009; Kayabaşı 2011; Deniz 2008; Kıncal 2018; Tuzlacı 2016) (Uysal 2008; Yüzbaşıoğlu 2010; Tuzlacı 2016) (Yıldırım 2015)
<i>Cyperus rotundus</i> L.	Cyperaceae	Topalak otu	Root	Crushed, Ext.	(Uysal 2008)
<i>Diospyros lotus</i> L.	Ebenaceae	Laz hurması, Kara hurma	Leaf	Inf., Int.	(Saraç et al. 2013; Tuzlacı 2016)
<i>Elaeagnus angustifolia</i> L.	Elaeagnaceae	İğde	Seed, Fruit, Leaf	Dec., Int., Eaten, Inf., Int.	(Altundağ 2009) (Güzel et al. 2015; Korkmaz and Karakurt 2014) (Polat 2010)
<i>Erica manipuliflora</i> Salisb.	Ericaceae	Funda, Püren, Süpürge otu	Young Shoots	Dec., Int.	(Bulut 2006)
<i>Eriobotrya japonica</i> (Thunb.) Lindly	Rosaceae	Malta eriği, Muşmula	Leaf	Inf., Int., Dec., Int.	(Uysal 2008) (Tuzlacı 2016)
<i>Euphorbia denticulata</i> Lam.	Euphorbiaceae	Hekletis, Sütleğen otu	Latex	Int.	(Kaval et al. 2014; Tuzlacı 2016)
<i>Fagus orientalis</i> Lipsky	Fagaceae	Doğu kayını	Stem Bark	Dec., Int.	(Kural 2012)
<i>Ficus carica</i> L. subsp. <i>carica</i>	Moraceae	İncir	Leaf	Raw, Int., Dec., Int.	(Alkaç 2013) (Tuzlacı 2016)
<i>Glaucium leiocarpum</i> Boiss.	Papaveraceae	Gelincik	Flower	Inf., Int., Dec., Int.	(Doğan 2014) (Tuzlacı 2016)
<i>Gundelia tournefortii</i> L.	Asteraceae	Kenger	Root	Latex, Eaten	(Hayta et al. 2014; Çakılcıoğlu and Türkoğlu 2010)
<i>Helichrysum arenarium</i> (L.) Moench.	Asteraceae	Altın otu	Capitulum, Leaf	Inf., Int., 2015)	(Akan and Sade 2015)
<i>Helichrysum plicatum</i> DC. subsp. <i>plicatum</i>	Asteraceae	Arı Çiçeği, Ölmez Çiçek, Yayla Çiçeği	Aerial parts, Flowering Branches	Inf., Int., Inf., Int.	(Arısan 2010) (Altundağ 2009)
^b <i>Helleborus orientalis</i> L.	Ranunculaceae	Bohça, Bohça otu, Çöp otu, Çöpleme	Leaf, Rhizome	Eaten	(Kızılarstan and Özhatay 2012)
<i>Hordeum vulgare</i> L.	Poaceae	Arpa	Spike, Whole plant	Inf., Int., Inf., Int.	(Sargin et al. 2013) (Korkmaz and Karakurt 2014)
<i>Hypericum cerastoides</i> (Spach) N. Robson	Hypericaceae	Kantaron, Küçük Kantaron	Aerial parts	Dec., Int.	(Kızılarstan and Özhatay 2012; Tuzlacı 2016)
<i>Hypericum scabrum</i> L.	Hypericaceae	Mide otu, Yara otu	Aerial parts	Inf., Int.	(Doğan 2014; Tuzlacı 2016)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
^b <i>Inula viscosa</i> (L.) Aiton	Asteraceae	Khişkeş, Mıcvce, Yerce, Zimbit	Leaf	Eaten	(Güzel et al. 2015)
<i>Juglans regia</i> L.	Juglandaceae	Ceviz	Seed Leaf Fruit Bark	Inf., Int. Dec., Int. Dec., Int.	(Aktan 2011) (Şenkardes 2014; Tuzlacı 2016) (Sargın et al. 2013)
<i>Juniperus drupacea</i> L.	Cupressaceae	Andız	Tar	+Water, Int.	(Orhan 2011)
<i>Juniperus oxycedrus</i> L.	Cupressaceae	Ardıç	Leaf, Branches		(Orhan 2011)
<i>Jurinella moschus</i> (Habl.) Bobrov subsp. <i>pinnatisecta</i> (Boiss.) Danin and P.H.Davis	Asteraceae	Gazangulpu, Kazankulpu	Whole plant	Dec., Int.	(Altundağ 2009)
<i>Lysimachia vulgaris</i> (L.) Pohl	Primulaceae	Giya baluk	Leaf	Dec., Int.	(Dalar et al. 2018)
<i>Malva neglecta</i> Wallr.	Malvaceae	Ebegümece, Ebemkömece	Aerial parts	Dec., Int.	(Altundağ 2009)
<i>Matricaria chamomilla</i> L. var. <i>recutita</i> (L.) Grierson	Asteraceae	Papatya	Aerial parts (Without Flower)	Inf., Int.	(Sargın et al. 2013)
<i>Melissa officinalis</i> L.	Lamiaceae	Oğul otu	Leaf and Young Shoots	Inf., Int.	(Bulut 2006; Tuzlacı 2016)
<i>Mentha longifolia</i> (L.) Hudson subsp. <i>longifolia</i>	Lamiaceae	Bung, Pung, Yarpız, Yarpuz	Leaf	Inf., Int.	(Altundağ 2009; Tuzlacı 2016)
<i>Mentha x piperita</i> L.	Lamiaceae	Bünk, Mentol nane, Kedi nanesi, Tıbbi nane	Aerial parts	Dec., Int.	(Akan and Sade 2015)
<i>Mespilus germanica</i> L.	Rosaceae	Beşbiyık, Döngel, Muşmula, Töngel	Leaf Fruit	Inf., Int. Dec., Int. Eaten	(Karcı 2013) (Onar 2006; Tuzlacı 2016) (Bulut 2006; Kural 2012; Güler et al. 2015; Tuzlacı 2016)
<i>Morus alba</i> L.	Moraceae	Akdut, Beyaz dut, Dut	Leaf	Inf., Int.	(Sargın et al. 2013)
<i>Musa sapientum</i> L.	Musaceae	Muz	Fruit	Eaten	(Uysal 2008; Tuzlacı 2016)
<i>Myrtus communis</i> L.	Myrtaceae	Mersin, Murt	Leaf	Dec., Int. Inf., Int.	(Güneş et al. 2017) (Tuzlacı 2016)
<i>Olea europaea</i> L. var. <i>sylvestris</i> (Mill.) Lehr.	Oleaceae	Zeytin	Leaf and Stem Bark	Inf., Int.	(Bulut 2006)
<i>Opuntia ficus-indica</i> (L.) Mill.	Cactaceae	Frenk inciri, Kaynana dili, Tin sabır	Fruit	Eaten	(Güzel et al 2015; Güler et al. 2015)
<i>Orchis coriophora</i> L.	Orchidaceae	Sahlep	Root	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Orchis palustris</i> Jacq.	Orchidaceae	Sahlep	Root	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Orchis punctulata</i> Steven ex Lindley	Orchidaceae	Sahlep	Root	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Origanum onites</i> L.	Lamiaceae	Beyaz kekik, Deli kekik, Eşek kekiği, Güve otu, Karakekik, Kekik	Aerial parts Leaf	Cooked with +Monk's pepper, Thyme, Flour, Water, Ext. Inf. or Dec., Int. Aromatic Water, Int. Inf., Int.	(Uysal 2008) (Gürdal and Kültür 2013; Tuzlacı 2016) (Tütenocaklı 2014)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Paliurus spina-christi</i> Miller	Rhamnaceae	Çaltı	Fruit	Inf., Int.	(Bulut and Tuzlacı 2009)
<i>Papaver somniferum</i> L.var. <i>somniferum</i>	Papaveraceae	Afyon, Afyon çiçeği, Haşhaş, Haşhaş kozağı, Yeleğen mavi	Fruit Bark	Dec., Int.	(Sargin et al. 2013; Tuzlacı 2016)
^a <i>Parietaria judaica</i> L.	Urticaceae	Duvar reyhanı, Yapışık ot	Aerial parts	Inf., Int. Eaten	(Tuzlacı and Şenkardes 2011)
^b <i>Phlomis pungens</i> Willd.var. <i>hirta</i> Velen	Lamiaceae	Ayıkulağı, Calba	Aerial parts	Eaten	(Vural 2008)
^b <i>Pinus brutia</i> Ten.	Pinaceae	Çam, Kızılçam	Dried Stem Bark and Mastic	Crushed, Int.	(Güneş et al. 2017)
<i>Pinus nigra</i> Aiton subsp. <i>pallasiana</i> (Lamb.) Holmboe	Pinaceae	Çam gıdısı, Karaçam	Tar	Ext.	(Arısan 2010)
<i>Pinus pinea</i> L.	Pinaceae	Fıstık çamı	Branches	Dec., Int.	(Kökçü 2015)
<i>Pistacia eurycarpa</i> Yalt.	Anacardiaceae	Menengeç	Fruit	Eaten	(Doğan 2014; Tuzlacı 2016)
<i>Pistacia terebinthus</i> L.	Anacardiaceae	Menengiç	Fruit		(Akan and Sade 2015)
<i>Pistacia vera</i> L.	Anacardiaceae	Kaliki-fıstığı	Fruit Bark	Dec., Int.	(Dağlı 2015)
<i>Plantago lanceolata</i> L.	Plantaginaceae	Sinir otu, Sinirli ot	Seed	Int. Dec., Int.	(Genç and Özhatay 2006) (Kolaç 2018)
<i>Plantago major</i> L. subsp. <i>major</i>	Plantaginaceae	Damar otu, Kara kabarcık, Siğilli ot, Sinir otu, Sinirli ot	Flower Seed	Dec., Int. Dec., Int. +Yoghurt, Int.	(Genç and Özhatay 2006) (Karataş 2007) (Kızıllarslan and Özhatay 2012)
<i>Platanus orientalis</i> L.	Platanaceae	Çınar, Kavak	Fruit Leaf Stem Bark	Dec., Int. Inf., Int. Dec., Int. Dec., Int.	(Bulut and Tuzlacı 2009; Kökçü 2015; Tuzlacı 2016) (Koçyiğit and Özhatay 2006) (Vural 2008) (Polat 2010)
<i>Populus tremula</i> L.	Salicaceae	Bodur kavak	Stem Bark	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Potentilla recta</i> L.	Rosaceae	Acı hayıt, Beşparmak otu	Root	Dec., Int.	(Deniz 2008)
<i>Potentilla reptans</i> L.	Rosaceae	Beşparmak otu	Leaf	Dec., Int.	(Yılmaz 2011; Öztürk 2006; Tuzlacı 2016)
<i>Prosopis farcta</i> (Banks and Sol.) J.F.Macbr.	Fabaceae	Çeti, Hışhaş	Fruit Root	Eaten Dec., Int.	(Gençay 2007; Tuzlacı 2016) (Balos and Akan 2007)
<i>Prunus cerasus</i> L.	Rosaceae	Vişne	Fruit	Juice, Int. Eaten	(Korkmaz and Karakurt 2014) (Metin 2009)
<i>Prunus divaricata</i> Ledeb.	Rosaceae	Dağ eriği, Gakka, Kuş eriği	Fruit	Juice, Int.	(Korkmaz and Karakurt 2014)
<i>Prunus x domestica</i> L.	Rosaceae	Erik	Fruit	Boiled with Turkish Coffee, Int.	(Kolaç 2018)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Prunus persica</i> (L.) Batsch.	Rosaceae	Şeftali	Fruit Flower	Eaten Inf., Int.	(Korkmaz and Karakuş 2013; Metin 2009; Kolaç 2018) (Kolaç 2018)
<i>Prunus spinosa</i> L.	Rosaceae	Dağ eriği	Fruit	Eaten	(Eşen 2008)
^a <i>Punica granatum</i> L.	Punicaceae	Hennar, Hınar, Nar	Fruit Seed Fruit Bark	Juice, Int. Cooked in Cinder, Ext. Eaten Crushed, Int.	(Gençay 2007) (Uysal 2008) (Güzel et al 2015) (Balos and Akan 2007)
<i>Pyrus amygdaliformis</i> Vill. subsp. <i>amygdaliformis</i>	Rosaceae	Ahlat, Çakal armudu, Çördük armudu, Deli armut, Yaban armudu	Leaf Fruit	Dec., Int. Eaten	(Uysal 2008) (Deniz 2008; Tuzlacı 2016)
<i>Pyrus elaeagnifolia</i> Pall. subsp. <i>elaeagnifolia</i>	Rosaceae	Dağ armudu, Yabani armut	Fruit	Eaten	(Tuzlacı and Şenkardes 2011; Tsetsekos 2006; Gültaş 2009; Keskin 2011)
<i>Pyrus elaeagnifolia</i> Pall. subsp. <i>kotschyana</i> (Boiss.) Browicz.	Rosaceae	Ahlat, Ahlet, Deli armut, Taş armut	Immature Fruit Flower	Raw, Eaten Inf., Int.	(Korkmaz and Karakurt 2014; Tuzlacı 2016) (Yıldırım 2015)
<i>Pyrus syriaca</i> Boiss. var. <i>syriaca</i>	Rosaceae	Çakal armut, Dağ armudu, Yaban armudu	Fruit	Eaten	(Furkan 2016; Tuzlacı 2016)
<i>Quercus coccifera</i> L.	Fagaceae	Kermes meşesi, Piyınar	Gall	Dec., Int.	(Metin 2009; Çilden 2011)
<i>Quercus ithaburensis</i> subsp. <i>macrolepis</i> (Kotschy) Hedge and Yalt.	Fagaceae	Meşe palamudu	Gall	Eaten	(Akan and Sade 2015; Tuzlacı 2016)
<i>Rhus coriaria</i> L.	Anacardiaceae	Sımak, Sumak	Fruit Seed Leaf	Eaten Inf., Int. Dec., Int. Dec., Int. Mac., Int.	(Gültaş 2009) (Balos and Akan 2007) (Metin 2009) (Metin 2009) (Furkan 2016)
<i>Rosa canina</i> L.	Rosaceae	İtburnu, İtgülü, Kuşburnu, Öküzgözü	Fruit	Dec., Int. Inf., Int. Eaten Marmalade, Int.	(Sargin et al. 2013; Karataş 2007) (Güneş et al. 2017) (Karagöz and Serteser 2017) (Karagöz and Serteser 2017; Keskin 2011; Tuzlacı 2016)
<i>Rosa damascena</i> Mill.	Rosaceae	Gül	Flower	Inf., Int.	(Güler et al. 2015; Tuzlacı 2016)
^a <i>Rubus canescens</i> DC. var. <i>glabratus</i> (Gordon) Davis and Meikle	Rosaceae	Böğürtlen, Kapına, Karamık	Root	Dec., Int. Eaten	(Genç and Özhatay 2006; Tuzlacı 2016) (Kayabaşı 2011)
<i>Rubus sanctus</i> Schreb.	Rosaceae	Böğürtlen	Root	Dec., Int.	(Uysal 2008)
<i>Rumex acetosella</i> L.	Polygonaceae	Ekşilik, Kuzukulağı	Leaf	Eaten	(Güler et al. 2015)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Rumex crispus</i> L.	Polygonaceae	Ekşi ot, Gırgırcır, Labada	Root Leaf Seed	Dec., Int. Inf., Int. Eaten	(Oral 2007) (Oral 2007) (Kökçü 2015)
<i>Rumex patientia</i> L.	Polygonaceae	Ebelik, Kalmuk çayı, Labada, Tırşık karan, Yılıkülak	Leaf Root	Dec., Int. Inf., Int.	(Uysal 2008) (Yeşil and Akalın 2009)
<i>Salvia tomentosa</i> Mill.	Lamiaceae	Boğaç otu, Boşçapula, Ellik otu, Sancı otu, Şabıla, Şalpa, Yakı otu	Aerial parts	Inf., Int.	(Sargin et al. 2013)
<i>Sanguisorba minor</i> Scop. subsp. <i>magnolii</i> (Spach) Briq.	Rosaceae	Amel otu, Çayır düğmesi, Kara gömdürme, Kelek otu	Aerial parts	Raw, Eaten	(Furkan 2016)
<i>Scolymus hispanicus</i> L.	Asteraceae	Altın diken, Sarıdiken	Leaf, Capitulum	Dec. Int.	(Metin 2009)
<i>Secale cereale</i> L.	Poaceae	Çavdar	Seed	Inf., Int.	(Yıldırım 2015)
<i>Sideritis tmolea</i> PH. Davis	Lamiaceae	Sarı çiçekli yakı otu	Aerial parts with Flower	Inf., Int.	(Sargin et al. 2013)
<i>Silene vulgaris</i> (Moench) Garcke. var. <i>vulgaris</i>	Caryophyllaceae	Cırvınık	Aerial parts	Dec., Int.	(Doğan 2014; Tuzlacı 2016)
<i>Solanum nigrum</i> L.	Solanaceae	Köpek sirkeni	Fruit	Cooked with +Thyme, Monk's pepper, Flour, Water, Ext.	(Uysal 2008)
<i>Solanum tuberosum</i> L.	Solanaceae	Gumpir, Kitola, Kumpir, Patates, Patati	Tuber	Cooked, Int.	(Uysal 2008; Korkmaz and Karakuş 2013; Karakurt 2014; Ayandın 2010; Saday 2009; Yıldırım 2015; Tuzlacı 2016; Kınal 2018; Kolaç 2018)
<i>Sorbus aucuparia</i> L.	Rosaceae	Kuş üvezi	Fruit	Jam	(Kural 2012)
<i>Sorbus domestica</i> L.	Rosaceae	Hüvez	Fruit	Eaten	(Kökçü 2015)
^b <i>Taraxacum androssovii</i> Schischk.	Asteraceae	Acıgıcı, Hapşuruk otu, Zeze	Capitulum	Dec., Int.	(Altundağ 2009)
<i>Taraxacum farinosum</i> Hausskn. and Bornm. ex Hand.-Mazz.	Asteraceae	Hindiba, Karahindiba	Leaf	Inf., Int.	(Güneş et al. 2017)
^b <i>Taraxacum fedtschenkoi</i> Hand.-Mazz.	Asteraceae	Acıgıcı, Hapşuruk otu, Zeze	Capitulum	Dec., Int.	(Altundağ 2009)
^b <i>Taraxacum macrolepium</i> Schischk.	Asteraceae	Acıgıcı, Hapşuruk otu, Zeze	Capitulum	Dec., Int.	(Altundağ 2009)
<i>Teucrium chamaedrys</i> L. subsp. <i>chamaedrys</i>	Lamiaceae	Bodur Mahmut, Bodurca Mahmut, Cüce Mahmut	Aerial parts Leaf	Dec., Int. Inf., Int. Dec., Int.	(Oral 2007) (Oral 2007) (Alkaç 2013)

Table 1. List of the plants used in traditional treatment against diarrhea in Turkey (continued)

Botanical name	Family	Local name	Plant parts used	Preparation, administration and use	Reference
<i>Teucrium polium</i> L.	Lamiaceae	Acı Yavşan, Egzama otu, Kırmızı ballıbababa, Mayasıl otu, Meryemkot, Oğlan otu	Aerial parts Leaf and Flower Leaf	Dec., Int. Inf., Int. Boiled with Molasses, Ext. Inf., Int. Inf., Int.	(Han and Bulut 2015) (Akan and Sade 2015; Tuzlacı 2016) (Metin 2009) (Bulut 2006) (Tetik et al. 2013)
<i>Tribulus terrestris</i> L.	Zygophyllaceae	Çakır diken, Çoban çökerten, Demir diken, Deve çökerten	Fruit	Dec., Int. Inf., Int.	(Doğan 2014; Tuzlacı 2016) (Tetik et al. 2013)
<i>Trifolium pratense</i> L.	Fabaceae	Yonca	Aerial Parts	Dec., Int.	(Hayta et al. 2014; Tuzlacı 2016)
<i>Triticum</i> sp.	Poaceae	Buğday	Seed	Flour, Int.	(Günbatan et al. 2016)
<i>Urtica dioica</i> L.	Urticaceae	Isırgan otu	Leaf with Seed	Dec., Int.	(Uysal 2008)
<i>Vaccinium arctostaphylos</i> L.	Ericaceae	Ayı üzümü, Lifos, Likarba	Leaf	Dec., Int.	(Kural 2012)
<i>Viburnum lantana</i> L.	Caprifoliaceae	Germeşo, Germişek	Fruit	Dec., Int.	(Altundağ 2009; Tuzlacı 2016)
<i>Vicia faba</i> L.	Fabaceae	Bakla, Pakla	Seed	Eaten	(Yıldırım 2015)
^b <i>Viscum album</i> L.	Loranthaceae	Ökse otu	Leaf	Dec., Int.	(Saraç et al. 2013)
^a <i>Vitex agnus-castus</i> L.	Verbenaceae	Hayıt	Seed Branches	Dec., Int. Swallowed, Int. Crushed, Int. Poultice, Ext.	(Sargin et al. 2013) (Polat 2010; Tuzlacı 2016) (Uysal 2008) (Gürdal and Kültür 2013)
<i>Vitis vinifera</i> L.	Vitaceae	Üzüm, Asma, Tevek	Fruit	Juice, Int.	(Furkan 2016)

Int: Internal, Dec: Decoction, Ext: External, Fac: Fruits are crushed, Inf: Infusion, Mac: Maceration

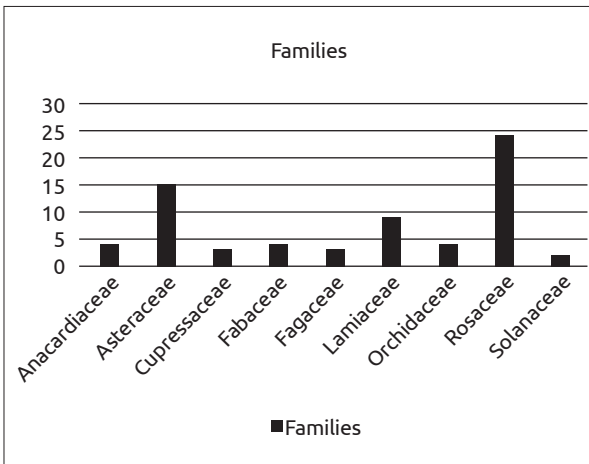


Figure 1. Graph of main families used in traditional treatment against diarrhea in Turkey

MATERIALS AND METHODS

In this study, a thesis search was carried out at the National Higher Education Center alongside an analysis of ethnobotanical studies conducted in various parts of Turkey with selecting regional plants used for the treatment of diarrhea.

RESULTS AND DISCUSSION

Plants have always been an important source for not only nutrition but also therapeutic use against a considerable number of human diseases. Recent phytochemical studies on medicinal plants have supported the effectiveness of folkloric medicines. Since ancient times, plants have been used for curing various diseases and infections (Singh et al. 2017).

Turkey has an extraordinary plant diversity and varies by region. Its flora consists of about 10,000 vascular plants and approximately one third of its flora (34.4 %) is endemic to the country (Demirci and Özhatay 2012; Gürdal and Kültür 2013). Recently, the use of ethnobotanical information obtained from medicinal plant research has gained attention all around the world. For this reason, numerous ethnobotanical studies have recently been published and much has been written about medicinal plants in our country (Gürdal and Kültür 2013). Since these medicinal plants have been used in folk medicine by the public for many years, the information about how to use these plants in the treatment of illnesses has been passed down for generations.

In this study, we compiled 133 plant species used in folk medicine for the treatment of diarrhea in Turkey from the ethnobo-

tanical studies and the theses published at the National Higher Education Center between the years of 2002-2018.

Accordingly, this study reveals that *Achillea wilhelmsii* C. Koch., *Parietaria judaica* L., *Punica granatum* L., *Rubus canescens* DC. var. *glabratus* (Godron) Davis and Meikle, *Vitex agnus-castus* L, shown as *a* in the table, are used for the treatment against diarrhea in both humans and animals.

Moreover, some species such as *Helleborus orientalis* L., *Inula viscosa*(L.) Aiton, *Phlomis pungens* Willd. var. *hirta* Velen, *Pinus brutia* Ten., *Taraxacum androssovii* Schischk., *Taraxacum fedtschenkoi* Hand.-Mazz., *Taraxacum macrolepium* Schischk., *Viscum album* L. which are marked as *b* in the Table 1 are only used for the treatment of diarrhea in animals.

In Figure 1, there is a graph of the main families used in the treatment of diarrhea in Turkey. The plants used for the treatment of diarrhea are mainly from Rosaceae, Asteraceae, Lamiaceae, Fabaceae, Anacardiaceae, Orchidaceae, Cupressaceae, Fagaceae and Solanaceae families (Figure 1). The plants of these families mainly take bioactive molecule groups in their different parts such as fruit, seed, root, aerial parts (Bilaloğlu and Harmanar 1999).

Phytomedicines have a significant role, both as traditional home remedies and as galenic preparations, in the symptomatic treatment of diarrhea. Three groups of preparations are particularly important: tannin-containing herbs, pectins, and a special strain of live dried yeast (Schulz et al. 2004).

Since diarrhea may occur because of fungal, bacterial, viral, and non-infectious causes and many of the plants reported in this study contain pharmaceutically bioactive compounds, including flavones, flavonoids, phenolic acids, tannins, anthocyanin compounds, volatile oil, minerals, vitamins, and polysaccharides (Bilaloğlu and Harmandar 1999). In these molecule groups, tannins especially are medicinally significant because of their astringent properties. Inwardly tannins are administered in cases of diarrhea, intestinal catarrh and as an antidote in cases of heavy metal poisoning (Adhikari and Kundu 2017). They can provide short-term healing and anti-inflammatory effects on the gut wall, though they are likely to rapidly reduce in transit through the tract unless they are in a slowly dispersing solid form. Effects on the bowel, can be significant if the symptom is a reflex consequence of irritation in the gastric or upper enteric passages. The use of tannins is not to be recommended as a long-term solution. Because when they are used as long-term therapy, they can cause constipation, iron deficiency anemia and malnutrition. Therefore long-term therapy with high doses of tannins is to be avoided (Bone and Mills 2013). In this study, *Potentilla*, *Quercus*, *Camellia*, *Vaccinium* and *Alchemilla* sp. are known as plant remedies traditionally used for tannin constituents (Schulz et al. 2004; Bone and Mills 2013).

For centuries, physicians have used preparations containing flavonoids as basic physiologically active components and lay healers attempt to treat human diseases (Cushnie and Lamb 2005). Up till today, plant-derived flavonoids have showed nu-

merous biological activities, including antiallergic, antibacterial, antidiabetic, antiinflammatory, antiviral, anti-proliferative, antimutagenic, antithrombotic, anticarcinogenic, hepatoprotective, oestrogenic, insecticidal, and antioxidant activities (Cushnie and Lamb 2005; Orhan et al. 2010). Flavonoid containing poultices, infusions, spices and balms have been used in many cultures based on ethnomedicinal use for centuries (Cushnie and Lamb 2011). As stated above, there are many kinds of diarrhea and some are caused by infections. In this way, flavonoids in terms of having antimicrobial activities might show a strong ability to cure the pathogenesis. As a result, flavonoids can also be used as a drug to treat diarrhea.

Consequently, these compounds should be investigated in order to determine the main component which is effective against diarrhea and produce natural-based and effective drugs used for this common disease with fewer side effects than chemical drugs. We assume that this study would lead to the development and optimization of new antidiarrheal drugs with no side effects.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept – S.K., A.S.; Design – S.K., A.S.; Supervision – A.S.; Resource – S.K., A.S.; Materials – S.K., A.S.; Data Collection and/or Processing – S.K., A.S.; Analysis and/or Interpretation – S.K., A.S.; Literature Search – S.K.; Writing – S.K., A.S.; Critical Reviews – S.K., A.S.

Conflict of Interest: The authors have no conflict of interest to declare.

Financial Disclosure: The authors declared that this study has received no financial support.

REFERENCES

- Adhikari S, Kundu S (2017). A review on crude drugs containing Tannins. *International Journal of Current Research in Health and Biological Sciences*, **2**: 82-100.
- Akan H, Sade Bakır Y (2015). Investigation of The Ethnobotanical Aspects The Town Kâhta and Village of Narince. *BEU Journal of Science*, **4**: 219-248. [CrossRef]
- Aktan T (2011). Yenişehir (Bursa) Köylerinin Etnobotanik Özellikleri. Unpublished Msc Thesis, Celal Bayar University, Manisa.
- Alkaç SA (2013). Alaçam Dağları (Balıkesir) Bigadiç İlçesi Bölümündeki Ekonomik Önemi Olan Bazı Bitkiler ve Etnobotanik Özellikleri. Unpublished Msc Thesis, Balıkesir University, Balıkesir.
- Altundağ E (2009). Iğdır İlinin (Doğu Anadolu Bölgesi) Doğal Bitkilerinin Halk Tarafından Kullanımı. Unpublished PhD Thesis, İstanbul University, İstanbul.
- Arısan Mumcu Ö (2010). Işık Dağı ve Çevresinde Yetişen Bitkiler Üzerinde Farmasötik Bitanik Yönünden Araştırmalar. Unpublished PhD Thesis, Ankara University, Ankara.
- Ayan Ö (2015). Kastamonu Yöresinde Etnobotanik Açısından Yenilebilen Bazı Bitki Taksonlarının Gıda Patojeni Olan Mikroorganizmalar Üzerine Antimikrobiyal Etkileri. Unpublished Msc Thesis, Kastamonu University, Kastamonu.
- Ayandın H (2010). Avşar, Şabanözü ve Çile Dağı (Polatlı/Ankara) Arasında Kalan Bölgenin Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Balos MM, Akan H (2007). Zeytinbahçe ile Akarçay (Birecik-Şanlıurfa) Arasında Kalan Bölgenin Etnobotanik Özellikleri. *SD Fen Ed Fak Fen Derg* **29**: 155-171.

- Bilaloğlu GV, Harmandar M (1999). Flavonoidler, Aktif Yayınevi, İstanbul.
- Bone K, Mills S (2013). Principles and Practice of Phytotherapy. Churchill Livingstone Elsevier.
- Bulut Y (2006). Manavgat (Antalya) Yöresinin Faydalı Bitkiler. Unpublished Msc Thesis, Süleyman Demirel University, Isparta.
- Bulut Emre G, Tuzlacı E (2009). Folk medicinal plants of Bayramiç (Çanakale-Turkey). *J Fac Pharm İstanbul* **40**: 87-99.
- Cushnie TPT, Lamb AJ (2005). Antimicrobial activity of Flavonoids. *Int J Antimicrob Agents* **26**: 343-356. [CrossRef]
- Cushnie TPT, Lamb AJ (2011). Recent advances in understanding the antibacterial properties of flavonoids. *Int J Antimicrob Agents* **38**: 99-107. [CrossRef]
- Çakılciöğlü U, Türkoğlu İ (2010). An Ethnobotanical Survey of Medicinal Plants in Sivrice (Elazığ-Turkey). *J Ethnopharmacol* **132**: 165-175. [CrossRef]
- Çılden E (2011). Paşayaylası (Aydın) Florası ve Etnobotanik Özellikleri. Unpublished Msc Thesis, Hacettepe University, Ankara.
- Dağlı M (2015). Şanlıurfa Merkez ve Bağlı Köylerde Etnobotanik Bir Araştırma. Unpublished Msc Thesis, Harran University, Şanlıurfa.
- Dalar A, Mükemre M, Ünal M, Özgökçe F (2018). Traditional Medicinal Plants of Ağrı Province, Turkey. *J Ethnopharmacol* **226**: 56-72. [CrossRef]
- Demirci S, Özhatay N (2012). An Ethnobotanical Study in Kahramanmaraş (Turkey); Wild Plants Used for Medicinal Purpose in Andırın, Kahramanmaraş. *Turk J Pharm Sci* **9**: 75-92.
- Deniz L (2008). Uşak Üniversitesi 1 Eylül Kampüsü (Uşak) Florası ve Etnobotanik Açısından Değerlendirilmesi. Unpublished Msc Thesis, Afyon Kocatepe University, Afyon.
- Doğan A (2014). Pertek (Tunceli) Yöresinde Etnobotanik Araştırmalar. PhD Thesis, Marmara University, İstanbul.
- Eşen B (2008). Aydınlar Köyü ve Çevresinin (Erdemli/Mersin) Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Furkan MK (2016). Adıyaman İlinde Yetişen Bazı Bitkilerin Etnobotanik Özellikleri. Unpublished Msc Thesis, Adıyaman University, Adıyaman.
- Genç Ecevit G, Özhatay N (2006). An ethnobotanical study in Çatalca (European part of İstanbul) II. *Turk J Pharm Sci* **3**: 73-89.
- Gençay A (2007). Cizre (Şırnak)'nin Etnobotanik Özellikleri. Unpublished Msc Thesis, Yüzüncü Yıl University, Van.
- Gültaş N (2009). Adıyaman İlinde Etnobotanik Değeri Olan Bazı Bitkilerin Kullanım Alanlarının Tespiti. Unpublished Msc Thesis, Fırat University, Elazığ.
- Güler B, Kümüştekin G, Uğurlu E (2015). Contribution to the Traditional Uses of Medicinal Plants of Turgutlu (Manisa-Turkey). *J Ethnopharmacol* **176**: 102-108. [CrossRef]
- Günbatan T, Gürbüz İ, Gençler Özkan AM (2016). The Current Status of Ethnopharmacobotanical Knowledge in Çamlıdere (Ankara-Turkey). *Turk J Bot*, **40**: 241-249. [CrossRef]
- Güneş S, Savran A, Paksoy MY, Koşar M, Çakılciöğlü U (2017). Ethnopharmacological survey of medicinal plants in Karaisalı and its surrounding (Adana-Turkey). *J Herb Med* **8**: 68-75. [CrossRef]
- Gürdal B, Kültür Ş (2013). An ethnobotanical study of medicinal plants in Marmaris (Muğla, Turkey). *J Ethnopharmacol* **146**: 113-126. [CrossRef]
- Güzel Y, Güzelşemme M, Miski M (2015). Ethnobotany of medicinal plants used in Antakya: A multicultural district in Hatay province of Turkey. *J Ethnopharmacol* **174**: 118-152. [CrossRef]
- Han Mİ, Bulut G (2015). The folk medicinal plants of Kadışehri (Yozgat-Turkey). *Acta Soc Bot Pol* **84**: 237-248. [CrossRef]
- Hayta Ş, Polat R, Selvi S (2014). Traditional Uses of Medicinal Plants in Elazığ (Turkey). *J Ethnopharmacol* **154**: 613-623. [CrossRef]
- Jelinek VT, Nothdurft HD, Haditsch M, Weinke T (2017). Consensus paper treatment of acute traveler's diarrhea-Practice recommendation for travel advice. *MMW-Fortschritte der Medizin* **159**: 4-11. [CrossRef]
- Karagöz Kurnaz F, Serteser A (2017). Evaluation of medical plant diversity in Suşehri and its environment. *I. International Congress on Medicinal and Aromatic Plants* 354-365.
- Karataş H (2007). Ilgaz (Çankırı)'nın Etnobotaniği. Unpublished Msc Thesis, Gazi University, Ankara.
- Karcı E (2013). Bafra (Samsun) Halk İlaçları. Unpublished Msc Thesis, Gazi University, Ankara.
- Kaval İ, Behçet L, Çakılciöğlü U (2014). Ethnobotanical study on medicinal plants in Geçitli and its surrounding (Hakkari-Turkey). *J Ethnopharmacol* **155**: 171-184. [CrossRef]
- Kayabaşı Poyraz N (2011). Manyas ve Köylerinde Etnobotanik Bir Çalışma. Unpublished Msc Thesis, Balıkesir University, Balıkesir.
- Kazan D (2007). Ortaca (Muğla) İlçesinin Etnobotaniği. Unpublished Msc Thesis, Muğla University, Muğla.
- Keskin L (2011). Kadınhanı (Konya) ve Çevresinde Yetişen Bitkilerin Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Kınal S (2018). Ula (Muğla) İlçesinin Etnobotaniği. Unpublished Msc Thesis, Muğla Sıtkı Koçman University, Muğla.
- Kızıllarslan Ç, Özhatay N (2012). Wild plants used as medicinal purpose in the South part of İzmit (Northwest Turkey). *Turk J Pharm Sci* **9**: 199-218.
- Koçyiğit M, Özhatay N (2006). Wild plants used as medicinal purpose in Yalova (Northwest Turkey). *Turk J Pharm Sci* **3**: 91-103.
- Kolaç T (2018). Malatya (Konak) Yöresi Halk İlaçları. Unpublished Msc Thesis, İnönü University, Malatya.
- Korkmaz M, Karakurt E (2014). Kelkit (Gümüşhane) Aktarlarında Satılan Tıbbi Bitkiler. *SDÜ Fen Bilimleri Enstitüsü Dergisi* **18**: 60-80.
- Korkmaz M, Karakuş S (2013). Traditional uses of medicinal plants of Üzümlü district, Erzincan, Turkey. *Pak J Bot* **47**: 125-14.
- Korkut MM (2006). Arat Dağı (Şanlıurfa) Florası ve Etnobotanik Özellikleri. Unpublished Msc Thesis, Harran University, Şanlıurfa.
- Kökçü B (2015). Lapseki (A1/A, Çanakale, Türkiye) ve Çevresinin Etnobotaniği. Unpublished Msc Thesis, Çanakale Onsekiz Mart University, Çanakale.
- Kural K (2012). Trabzon Çevresinde Yayılış Gösteren Faydalı Bitkiler Üzerinde Ekonomik Botanik Yönünden Araştırmalar. Unpublished Msc Thesis, İstanbul University, İstanbul.
- Lawrence RS, Darrell SP, Joseph HS (2017). Chronic Diarrhea: Diagnosis and Management. *Clin Gastroenterol Hepatol* **15**: 182-193. [CrossRef]
- Lori RH, Marguerite AN, Phillip IT (2009). Acute Bloody Diarrhea: A Medical Emergency for Patients of All Ages. *Gastroenterology* **136**: 1887-1898. [CrossRef]
- Metin A (2009). Mut ve Çevresinde Yetişen Bitkilerin (Mersin) Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Onar S (2006). Bandırma (A1(A), Balıkesir) ve Çevresinin Etnobotaniği. Unpublished Msc Thesis, Çanakale Onsekiz Mart University, Çanakale.
- Oral DÇ (2007). Konya İlinde Kullanılan Halk İlaçları Üzerinde Etnobotanik Araştırmalar. Unpublished Msc Thesis, Gazi University, Ankara.
- Orhan DD, Özçelik B, Özgen S, Ergun F (2010). Antibacterial, antifungal, and antiviral activities of some flavonoids. *Microbiol Res* **165**: 496-504. [CrossRef]
- Orhan N (2011). Şeker Hastalığına Karşı Halk İlacı Olarak Kullanılan Juniperus Türleri Üzerinde Farmakognozik Araştırmalar. Unpublished PhD Thesis, Gazi University, Ankara.

- Özkan AM (2002). Pınarbaşı (Kayseri) Florası Üzerinde Farmasötik Botanik Yönünden Araştırmalar. Unpublished PhD Thesis, Ankara University, Ankara.
- Öztürk M (2006). Nizip Bölgesinin (Aksaray) Florası ve Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Parashar UD, Gibson CJ, Bresee JS, Glass RI (2006). Rotavirus and Severe Childhood Diarrhea. *Emerg Infect Dis* **12**: 304-306. [CrossRef]
- Pawlowski SW, Warren CA, Guerrant R (2009). Diagnosis and Treatment of Acute or Persistent Diarrhea. *Gastroenterology* **136**: 1874-1886. [CrossRef]
- Polat R (2010). Havran ve Burhaniye (Balıkesir) Çevresinde Tarımsal Biyoçeşitlilik ve Etnobotanik Araştırmaları. Unpublished PhD Thesis, Balıkesir University, Balıkesir.
- Saday H (2009). Güzeloluk Köyü ve Çevresinin (Erdemli/Mersin) Etnobotanik Özellikleri. Unpublished Msc Thesis, Selçuk University, Konya.
- Saraç DU, Özkan ZC, Akbulut S (2013). Etnobotanic features of Rize/Turkey province. *Bio Biodivers Conserv* **6**: 57-66.
- Sargin SA, Akçiçek E, Selvi S (2013). An ethnobotanical study of medicinal plants used by the people of Alaşehir (Manisa) in Turkey. *J Ethnopharmacol* **150**: 860-874. [CrossRef]
- Schulz V, Hansel R, Blumenthal M, Tyler VE (2004). Rational Phytotherapy-A Reference Guide for Physicians and Pharmacists. Springer-Verlag Berlin Heidelberg. [CrossRef]
- Singh G, Passari AK, Singh BP, Kumar NS (2017). Medicinal plants and its therapeutic uses. In: Traditionally Used Medicinal Plants Belongs to Family Asteraceae for the Treatment of Cancer in Mizoram, Northeast India, 2nd Chapter, OMICS International, p. 8-20.
- Şenkardeş İ (2014). Nevşehir'in Güney İlçelerinde (Acıgöl, Derinkuyu, Gülşehir, Nevşehir-Merkez, Ürgüp) Etnobotanik Araştırmalar. Unpublished PhD Thesis, Marmara University, İstanbul.
- Tetik F, Civelek Ş, Çakılcıoğlu U (2013). Traditional uses of some medicinal plants in Malatya (Turkey). *J Ethnopharmacol* **146**: 331-346. [CrossRef]
- Tsetsekos Erkal A (2006). The Ethnobotany of Wild Food Plant Use in the Konya Basin: A Quantitative and Ethnoarchaeological Approach. Unpublished Msc Thesis, Middle East Technical University, Ankara.
- Tuzlacı E (2016). Türkiye Bitkileri Geleneksel İlaç Rehberi. 1st ed, İstanbul Tıp Kitabevleri, Turkey.
- Tuzlacı E, Şenkardeş İ (2011). Turkish folk medicinal plants, X: Ürgüp (Nevşehir). *Marmara Pharm J* **15**: 58-68. [CrossRef]
- Tütenocaklı T (2014). Yenice (Çanakkale) ve Çevresinde Tarımsal Bitki Biyoçeşitliliği ve Etnobotanik Araştırmalar. Unpublished PhD Thesis, Çanakkale Onsekiz Mart University, Çanakkale.
- Uysal G (2008). Köyceğiz (Muğla) İlçesinin Etnobotaniği. Unpublished Msc Thesis, Muğla University, Muğla.
- Vural G (2008). Honaz Dağı ve Çevresindeki Bazı Doğal Bitkilerin Etnobotanik Özellikleri. Unpublished Msc Thesis, Afyon Kocatepe University, Afyon.
- Yeşil Y, Akalın E (2009). Folk medicinal plants in Kürecik area (Akçadağ/Malatya-Turkey). *Turk J Pharm Sci* **6**: 207-220.
- Yıldırım Hİ (2015). Alanya ve Gazipaşa (Antalya)'da Halk Tarafından Kullanılan Bazı Doğal Bitkilerin Etnobotanik Özellikleri. Msc Thesis, Afyon Kocatepe University, Afyon.
- Yılmaz Uzun Y (2011). Beşikdüzü Yöresinde Gıda Amaçlı Kullanılan Bitkiler. Unpublished Msc Thesis, Karadeniz Technical University, Trabzon.
- Yüzbaşıoğlu E (2010). Reşadiye (A6, Tokat, Türkiye) ve Çevresinin Etnobotaniği. Unpublished Msc Thesis, Çanakkale Onsekiz Mart University, Çanakkale.