

# Induced Hyperlipidemia in Adult Male Rats and Treated by using *Rosmarinus officinalis* Aqueous Extract

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## Abstract

The current work was goaled to revealed anti-hyperlipidemia activity of *R. officinalis* extract. This work utilized 20 male rats that divided to negative group; positive group was given drinking water containing 0.5% H<sub>2</sub>O<sub>2</sub> and (1%) cholesterol for 60 days. Third group: hyperlipidemia rats were treated with (50mg/kg/daily) extract. Fourth group: hyperlipidemia rats were treated with (100mg/kg/daily) extract. The outcomes revealed significant ( $P < 0.05$ ) rise in cholesterol and triglyceride and reduce the HDL in positive group compare with negative group. Malonedialdehyied (MDA) was increased with reduce in glutathione (GSH) compare with negative group. Otherwise, diameters of aorta artery show significant ( $P < 0.05$ ) rise compare with negative group. *R. officinalis* aqueous extract when used in treatment, the outcomes exhibited improvement in lipid profile, MDA, GSH and diameters of aorta artery compare with negative group. It was concluded that *R. officinalis* extract possess anti-hyperlipidemia activity.

**Keywords:** *Rosmarinus officinalis*; hyperlipidemia; lipid profile; malonedialdehyied; glutathione.

## Introduction

*R. officinalis*, arising from the Mediterranean region is describe as aromatic plant (family: Lamiaceae) [1], and is called rosemary [2]. As well as to utilize in culinary side due to the feature aroma, *R. officinalis* is widely used by indigenous people [3]. The products of *R. officinalis* are utilized in testing resulting in their low toxicity and major medicinal properties [4]. *R. officinalis* extract composed of various types of polyphenols inclusive phenolic acids and flavonoids. These molecules show strong antioxidant properties which decrease lipid peroxidation, prevent reactive oxygen species production and suppress inflammation, and comprise from terpenoids with flavonoids, phenols and volatile oil [5]. *R. officinalis* is important for its therapeutic in folk medicine utilized for example like antidepressant activity, hepatoprotector activity, antidiabetic activity, antiangiogenic activity, anti-inflammatory activity and antitumor activity [6-9]. Hyperlipidemia is defined as a heterogeneous cluster of troubles characterized by an

increase of lipids profile in the blood, hyperlipidemia also refers to elevate in concentrations triglycerides, and cholesterol in the serum [10]. Hypercholesterolemia may be occurring through high-fat diet or in persons with physiological defects like decreased of receptors number functioning LDL-cholesterol [11].

## Materials and Methods

### Animal model

In this work 20 rats, (wt 140-180 gm with age 2-4 month) were used and kept on a standard diet and normal saline until beginning the experiment.

### Aqueous extraction

The solution of 20% extract was prepared by utilizing boiling water (100 ml) with leaf powder (10 gm), then the mixture was centrifuged at 10000 rpm for 10 min, then supernatant of mixture was put in oven at 45°C to dry, after that dried powder was collected and stored until use [12].

**Experimental design**

20 rats were utilized in this work and divided in four groups (each group consist five rats):

- v Negative group: received normal saline only.
- v Positive group: drinking water containing 0.5% H<sub>2</sub>O<sub>2</sub> and (1%) cholesterol for 60 days
- v Third group: hyperlipidemia rats were treated with (50mg/kg/daily) extract for 30 days.
- v Fourth group: hyperlipidemia rats were treated with (100mg/kg/daily) extract for 30 days.

**Biochemical measurements**

Total cholesterol, triglycerides and high density lipoprotein (HDL) levels were determined using standard kits of biomereieux kit, France. Malondialdehyde (MDA) is determination based on formation of colored complex upon reaction with thiobarbutyric acid. The detection was recorded at (500 nm). Glutathione was measured according to method of [13].

**Histological study**

Aorta artery from all studied groups were fixed

by using formalin 10% , then embedded by using paraffin. After the routine processing, paraffin sections of aorta tissue were cut into 7 μm and stained by using haematoxylin and eosin [14].

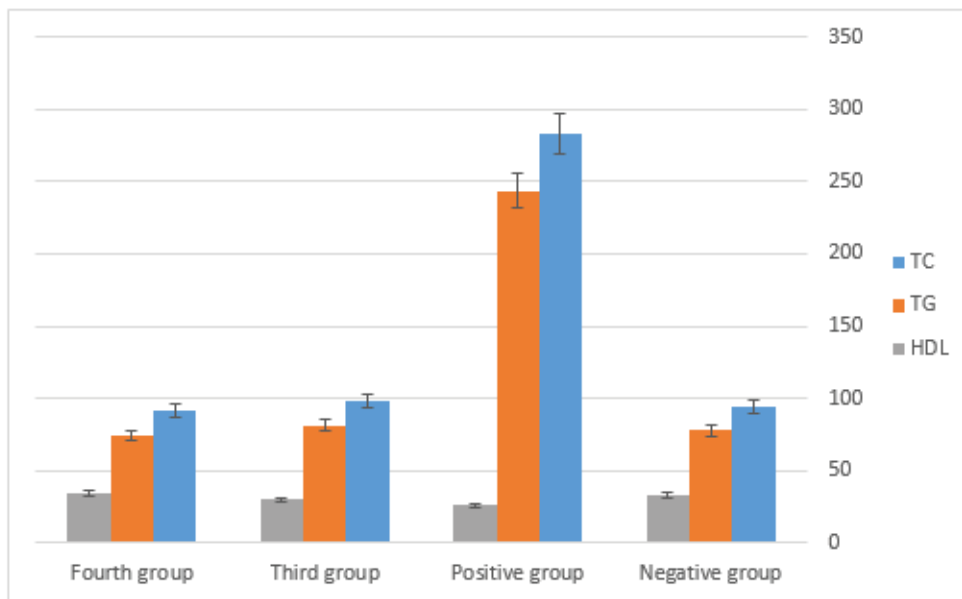
**Statistical analysis**

All data of present work were collected and analyzed by utilizing the SPSS version 12. Descriptive data was summarized using mean, standard error (SE). P values < 0.05 were considered statistically significant.

**Results**

**Lipid profile**

The levels of TC (283.1 ± 11.15), TG (243.83 ± 9.35) and HDL (25.92 ± 3.6) in second group show high significant changes (P < 0.05) compare with control group (94.1 ± 5.72; 78.03 ± 4.1 and 32.9 ± 2.62 respectively). The levels of TC (98.2 ± 8.63; 91.61 ± 6.51 respectively), TG (81.4 ± 4.8; 74.3 ± 5.17 respectively) and HDL (30.1 ± 4.2; 34.6 ± 5.39 respectively) in third and fourth groups show non-significant changes (P < 0.05) compared with control group as shown in figure (1).

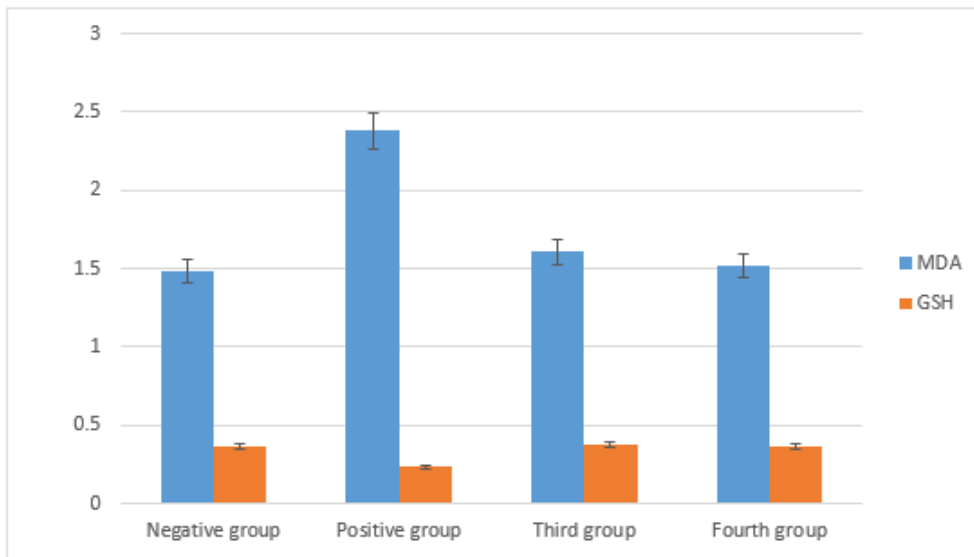


**Figure (1): levels of lipid profile in studied groups.**

**MDA and GSH**

The levels of MDA ( $2.38 \pm 0.32$ ) and GSH ( $0.235 \pm 0.028$ ) in positive group show high significant changes ( $P < 0.05$ ) compare with control group ( $1.48 \pm 0.24$  and

$0.362 \pm 0.038$  respectively). The levels of MDA ( $1.61 \pm 0.38$ ;  $1.52 \pm 0.19$  respectively) and GSH ( $0.378 \pm 0.028$ ;  $0.366 \pm 0.026$  respectively) in third and fourth groups show non-significant changes ( $P < 0.05$ ) compared with control group as shown in figure (2).

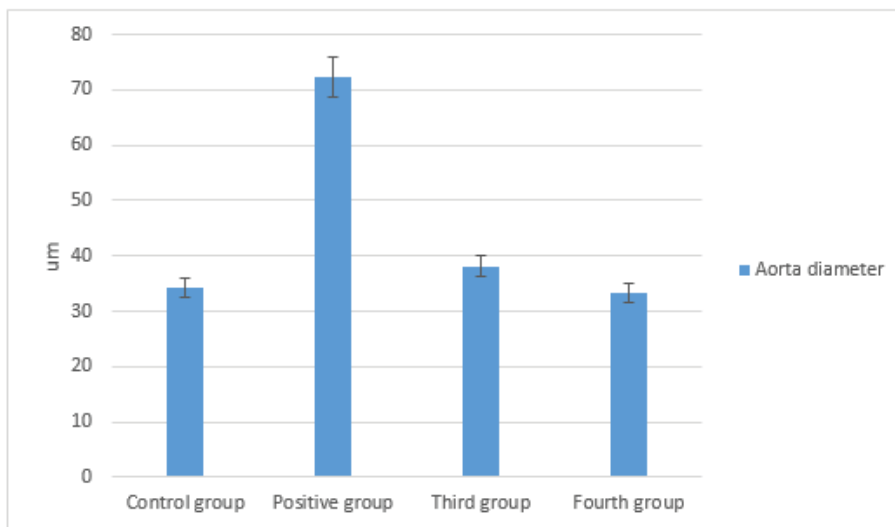


**Figure (2): levels of MDA and GSH in studied groups.**

**Aorta diameters**

Aorta diameter ( $72.2 \pm 6.1$ ) in positive group show high significant changes ( $P < 0.05$ ) compare with control

group ( $34.3 \pm 3.5$ ). Aorta diameter ( $38.17 \pm 5.63$ ;  $33.28 \pm 4.82$  respectively) in third and fourth groups show non-significant changes ( $P < 0.05$ ) compared with control group as shown in figure (3).



**Figure (3): Aorta diameter in studied groups.**

## Discussion

The current work exhibit the role of *R. officinalis* extract to reduce the levels of cholestrel and triglyceride, aorta diameters and oxidative/antioxidant factors. In study carried out by [15] referred that *R. officinalis* extract lead to reduce the elevated cholesterol in rats that feeding on the high-fat diet (HFD) that is in agreement with outcomes of present work. Al-Sheyab et al. [16] demonstrated clearly the hypolipidemic activity of *R. officinalis* species. The lipid profile (TC, HDL, LDL and TG) showed reduction in rosemary-fed mice as compared to the HC mice. Otherwise, significant elevation of the HDL was observed in rosemary-fed mice as compared to the HC mice. Otherwise, *R. officinalis* extracts have the ability to decompose free radicals by quenching active singlet oxygen and by trapping and quenching radicals before they reach a cellular target [17] that explains the role of *R. officinalis* extract to regulate the oxidative/antioxidant factors. Also, Rosemary is also capable preventing of lipid peroxidation process that is caused by oxidative stress [18]. In addition to reducing the amount of reactive species in the body, rosemary has been found to increase the activity of antioxidant enzymes [19-20]. About the thickness of aorta and the role of *R. officinalis* extract, rosemary extract prevented weight gain by limiting lipid absorption process in the intestine. This was made possible through the prevent of pancreatic lipase activity [21]. Finally, the third study found rosemary extract to inhibit and prevent lipid synthesis via the suppression of diacylglycerol acyltransferase (DGAT) [22] that may explain the ability of rosemary extract to prevent the accumulation of lipid in tissues.

**Ethical Clearance:** The Research Ethical Committee at scientific research by ethical approval of both MOH and MOHSER in Iraq

**Conflict of Interest:** Non

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