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# Antimicrobial activity of *Hibiscus sabdariffal* extract against human pathogen

# Mohamad Bokaeian<sup>1</sup>, Mousa Sheikh<sup>2</sup>, Zahra Shahi<sup>3</sup> and Saeide Saeidi<sup>3\*</sup>

1-Infectious Diseasec and Tropical Medicin Research Center Zahedan University of Medical Scienes, Zahedan, Iran

2- Department of Microbiology, Medical faculty, Kerman university of medical science, Kerman, Iran.

3-Department of Microbiology, Kerman Science and Research Branch, Islamic Azad University, Kerman, Iran.

### Abstract

The purpose of this study was to examine the evolution of antimicrobial activity of flower extract of *Hibiscus sabdariffal* against antibiotic-resistant *Escherichia coli* and *Staphylococcus aureus* that isolates from the urinary tract infection by microtiterplate method. All 42 strains 30 *E.coli* and 12 *S. aureus* isolated from urine culture of hospitalized patients in Zabol (Zabol, south-eastern Iran) suffered from urinary tract infections during the years 2011- 2012 were evaluated and the extract of *Hibiscus sabdariffal* obtained by rotary and the minimum inhibitory concentrations were investigated to characterize the antimicrobial activities of this extract. The result show that *E. coli* were resistance to 4 of the agent and more resistance to tetracyclin(63.3%), erythromycin(56.6%) and cefixime(40 %), *S.aureus* more sensitive were antibiotic resistance to vancomycin and Cefixime. The highest MIC values was found to be 20mg/ml against two *E.coli*. The leas MIC values was found to 1.25 mg/ml against three *S.aureus*.

Keyword: *Hibiscus sabdariffal*, Antibacterial activity, Human pathogen

# Introduction

Medicinal plants constitute the base of health care systems in many societies (Almeida et al., 2006; Monteiro et al., 2006). These natural products from plants including saponin, alkaloids, tannins, cardiac glycosides and anthraquinones, are synthesized for defence purpose (Aletor et al., 1993). Sorrel, *H. sabdariffa* L. (Family Malvaceae), a medicinal herb commonly uses to make drink and pickle, is used in folk medicine in the treatment of hypertension, liver diseases, and fever (Dalziel, 1973; Akindahunsi and Olaleye, 2003). *Hibiscus* anthocyanins, a group of phenolic natural pigment present in the dried flower of *H. sabdariffa* and *Hibiscus rosa-sinensis*, have been found to have cardioprotective(Jonadet et al., 1990)<sup>-</sup> hypocholesterolemic(Chen et al., 2003), antioxidative, and hepatoprotective(Wang et al., 2003) effects in animals. Although, native to India and Malaysia, *H. sabdariffa* is also widely available and must have being carried to Africa in early times (Fasoyiro et al., 2005). Phytochemical screening of the water and

alcoholic extracts of the calyces showed the presence of such biochemicals as flavonoids, phenols, reducing sugars, combined reducing sugars among others (Builders et al., 2010). *Staphylococcus aureus* is one of the main causes of human infections. It can cause diseases ranging from minor infections such as pimples and boils to serious systemic fatal infections (Evans and Brachman, 1991). Escherichia coli is a Gram negative rod( bacillus) in the family Enterobacteriaceae. Most *E.coli* are normal commensals found in the intestinal tract. Pathogenic strains of this organism are distinguished from normal flora by their possession of virulence factors such as exotoxins. The purpose of this study was to examine the evolution of antimicrobial activity of flower extract of *Hibiscus sabdariffal* against antibiotic-resistant *Escherichia coli* and *Staphylococcus aureus* that isolates from the urinary tract infection by microtiterplate method.

# Material and Method

Isolation of bacteria: All 42 strains (30 *E.coli* and 12 *Staphylococcus aureus* )isolated from urine culture of hospitalized patients in Zabol (Zabol, south-eastern Iran) suffered from urinary tract infections during the years 2011- 2012 were evaluated. Isolated bacteria were identified by Gram's stain and standard biochemical tests (Forbes et al., 2007).

#### Agar disk diffusion assay

The susceptibility of all antibiotics was carried out using disc diffusion method on Muller-Hinton agar as recommended by CLSI (CLSI, 2002). The procedure followed is briefly described here. *S. aureus* and *Ecoli* isolated plates were grown overnight on blood agar, Nutrient agar and colony suspension was prepared using the sterile salin water equivalent to a 0.5 McFarland standard. Suspension (100  $\mu$ l) was spread over the media plate and antibiotic disc was transferred aseptically on the surface of inoculated media plate. Isolated plates were tested with different antibiotics and their concentration shown in parenthesis viz. ceftazidim(30  $\mu$ g), tetracyclin (30 $\mu$ g), erythromycin (15 $\mu$ g), ceftazidime (30 $\mu$ g), trimethoprim-sulfamethoxazol (1.25+23.15  $\mu$ g), penicillin (10 $\mu$ g),oxacillin(30 $\mu$ g) and vancomycin(10  $\mu$ g).

#### Plant materials:

The flower of *Hibiscus sabdariffal*, was collection in the region of Iran (Sistan, south-eastern, Iran) and plant in Zabol university herbarium received approval and dried at room temperature .Samples were crashed and transferred into glass container and preserved until extraction procedure was performed in the laboratory.

#### Preparation of extracts:

Plants were properly dried and pulverized into a coarse powder. Each of 20 g grinded powders was soaked in 60 ml ethanol 95 %, separately for one day (shaking occasionally with a shaker). After one day of dissolving process, materials were filtered (Whatman no. 1 filter paper) .Then the filtrates were evaporated using rotary evaporator. At last, 0.97 g of dried extracts were obtained and then stored at  $4^{0}$ C in air tight screw-cap tube.

#### Minimum Inhibitory Concentration (MIC) of extract:

The broth microdilution method was used to determine MIC. All tests were performed in Mueller Hinton broth supplemented with Tween 80 at a final concentration of 0.5% (v/ v). Briefly, serial doubling dilutions of the extract were prepared in a 96-well microtiter plate ranged from 0.3mg/ml to 20 mg/ml. To each well, 10  $\mu$ l of indicator solution (prepared by dissolving a 10-mg extract in 2 ml of DMSO) and 10  $\mu$ l of Mueller Hinton Broth were added. Finally, 10  $\mu$ l of bacterial suspension (10<sup>6</sup> CFU/ml) was added to

each well to achieve a concentration of  $10^4$  CFU/ml. The plates were wrapped loosely with cling film to ensure that the bacteria did not get dehydrated. The plates were prepared in triplicates, and then they were placed in an incubator at  $37^{\circ}$ C for 18–24 hours. The color change was then assessed visually. The lowest concentration at which the color change occurred was taken as the MIC value. The average of 3 values was calculated providing the MIC values for the tested extract. The MIC is defined as the lowest concentration of the extract at which the microorganism does not demonstrate the visible growth. The microorganism growth was indicated by turbidity.

#### Statistical Analysis:

All experiments and measurement were repeated at least three times. Statistical analyses were performed using SPSS and Excel 2010 software. All experimental results were analyzed using mean descriptive statistics and the correlation-coefficient. A value of P<0.05 was regarded as statistically significant.

#### Result

The result show that *E. coli* were resistance to 4 of the agent and more resistance to tetracyclin(63.3%), erythromycin(56.6%) and cefixime(40%) and ceftazidim(26.6%), *S.aureus* more sensitive were antibiotic resistance to vancomycin and Cefixime. The highest MIC values was found to be 20mg/ml against two *E. coli*. The leas MIC values was found to 1.25 mg/ml against three *S.aureus*.

### Discussion

The result show that E. coli were more resistance to tetracyclin(63.3%), erythromycin(56.6%), ceftazidim(26.6%) and cefixime(40%). The study of Akond, 88%, 82%, 80%, 76%, 70%, 68%, 64%, 58%, 52%, and 20% of the tested Escherichia coli strains from poultry sources were found resistant respectively to penicillin, ciprofloxacin, riphampicin, kanamycin, streptomycin, cefixine, erythromycin, ampicillin, tetracyclin and chloramphenicol and neomycin(Akond et al., 2009). Tricia reported 43% isolates of E. coli were resistant to ampicillin but no isolate was found resistant to gentamicin (Tricia et al., 2006). In the study *S.aureus* more sensitive were antibiotic resistance to vancomycin and Cefixime. The study of Soltani, The overall susceptibility of isolated S. aureus strains to antimicrobial agents was 100% for vancomycin, 49.4% for amikacin, 43.8% for gentamicin, 36.8% for co-trimoxazole and tetracycline, 36.3% for cefazolin, 30.6% for cephalexin, 24.4% for oxacillin, 23.8% for erythromycin, and 3.1% for penicillin(Soltani et al., 2012). The highest MIC values was found to be 20mg/ml against two E.coli. The leas MIC values was found to 1.25 mg/ml against three S.aureus. The study of Fullerton, the findings indicated that sorrel was effective at all levels in inhibiting E. coli O157:H7 (Fullerton et al., 2011). The study of Jung, E. coli was strongly inhibited by the Roselle water extract at concentrations of 25 and 50 mg mL<sup>-1</sup> as determined by a paper disc method (Jung et al., 2013). The study of Nwachukwn, the extracts showed a significant activity on S. aureus with zones of inhibition range of 27.7 + 0.47 - 11.3+ 0.94mm and minimum inhibitory concentration range of < 5-15% (v/v) while E. coli had zones of inhibition range of 14.3 + 0.47 - 7.0 + 0.00 mm and minimum inhibitor concentration range of 15 - 50%(v/v)(Nwachukwu et al., 2009). The another study, the aqueous extract of *H. sabdariffa* showed equal inhibition ability against E. coli and S. aureus (40 mm) which was highest than Str. mutans (28 mm) and P. aeruginosa (27 mm). Alcoholic extract exhibited higher inhibition ability against E. coli (47 mm) than against S. aureus (20 mm), Str. mutans (30 mm) and P. aeruginosa (17 mm) (Al-Hashimi, 2006). Aqueous-methanolic extract of *H. sabdariffa* L. calvees have been found to exhibit antibacterial activities against S. aureus, Bacillus stearothemophilus, Micrococcus luteus, Serratia mascences, Clostridium sporogenes, E. coli, K. pneumonae, B. cereus and Pseudomonas fluorescence (Olaleve, 2007). The another study, the strongest antibacterial activity was shown by the methanol-HCl (99:1) extract 30% 435 | Page

with an average GI of 2.714 cm against both of Staphylococcus aureus and Streptococcus pyogenes(Dien, 2008). *Hibiscus sabdariffa* extract exhibited higher activity against *Salmonella* (10mm) than against *Shigella* and *Enterobacter* (9mm) (Nwaiwu et al., 2012). However, further studies about the isolation of active compounds and the absence of toxicity of plant extracts are necessary to propose these plants as alternative approaches to resistance management.

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#### References

Almeida CF, Amorim ELC, Albuquerque UP and Maia MB.2006. Medicinal plants popularly used in the Xingo region – a semi – arid location in Northeastern Brazil. *J. Arid* Environ. 63: 109-114.

Aletor VA .1993. Allelochemicals in plant food and feedstuffs:in nutritional biochemistry and physiopathological aspects in animal production.Veterinary and Human Toxicology. 35(1):57-67.

Akindahunsi AA, Olaleye MT. 2003.Toxicological investigation of aqueous methanolic extract of Hibscus sabdariffa L. J Ethnopharmacol. 89:161–164

Akond MA, Alam S, Hassan MR, Shirin M. 2009. Antibiotic Resistance of Escherichia coli Isolated From Poultry and Poultry Environment of Bangladesh. Internet Journal of food safety. 11: 19-23.

Al-Hashimi A G. 2006. Antioxidant and antibacterial activities of *Hibiscus sabdariffa* L. extracts. African Journal of Food Science. 6(21):506-511,

Builders PF, Ezeobi CR, Tarfa FD, Builders MI. 2010. Assessment of the intrinsic and stability properties of the freeze-dried and formulated extract of *Hibiscus sabdariffa* (Linn). Afr J Pharm Pharmacol. 4:304-13.

Chen CC, Hsu JD, Wang SF, Chrang HC, Yang MY, Kao ES, Ho YO, Wang CJ. 2003. Hibscus sabdariffa extract inhibit the development of atherosclerosis in cholesterol-fed rabbits. J Agric Food Chem. 51:5472–5477. [PubMed]

Clinical and Laboratory Standards Institute. Performance standards for antimicrobial susceptibility testing (2002), 16th International supplement. CLSI document M100-S12 Davis, H.R (1997)

Dalziel JM.1973. The Useful Plants of West Tropical Africa. The Crown Agents; London: 314–315.

Dien A. Limyati; Lisa Soegianto. 2008. Activitas antibakteri ekstrak kelopak rosela (Hibiscus sabdariffa L.) terhadap Staphylococcus aureus dan Streptococcus pyogenes Indonesian Scientific Journal Database. 7(1):47-53.

Evans SA, Brachman SP. 1991. Bacterial Infections of Humans: Staphylococcal Infections, Company New York and London: Plenum Medical Book.

Fasoyiro SB, Ashaye OA, Adeola A, Samuel FO. 2005. Chemical and storability of fruit-flavoured (*Hibiscus sabdariffa*) drinks. World J Agric Sci. 1:165-8.

Forbes BA, Sahm DF, Weissfeld AS. 2007.Bailey & Scott's diagnostic microbiology. 12th ed. Missouri: Mosby Co. 323-333.

<u>Fullerton</u> M, <u>Khatiwada</u> J, <u>Johnson</u> JU, <u>Davis</u> S and <u>Williams</u> LL. 2011. Determination of Antimicrobial Activity of Sorrel (*Hibiscus sabdariffa*) on *Esherichia coli* O157:H7 Isolated from Food, Veterinary, and Clinical Samples. J Med Food. 14(9): 950–956.

Jung E, Kim Y, Joo N.2013. Physicochemical properties and antimicrobial activity of Roselle (Hibiscus sabdariffa L.). J Sci Food Agric.

Jonadet M, Bastide J, Bastide P, Boyer B, Carnat AP. 1990. Lamaison JL. In vitro enzyme inhibitory and in vivo cardio-protective activities of Hibiscus sabdariffa L. J Pharmacol Belgium. 45:120–124. [PubMed]

Monteiro JM, Albuquerque UP, Lins-Neto EMF, AraujoEL and Amorim ELC.2006. Use patterns and knowledge of medicinal species among the two rural communities in Brazil's semi-arid northeastern region.J. Ethnopharmacol. 105: 173-186.

Nwachukwu MI, Uwaezuke JC, Nwachukwu IO, Ukaga CN and Anyanwu VE. 2009.Phytochemical analysis and antimicrobial activities of extracts of calyces of *Hibiscus sabdariffa* var. *altissima* on *Escherichia coli* and *Staphylococcus aureus*. Nigerian Journal of Microbiology. 23(1);1896 – 1900

Nwaiwu NE, Mshelia F and Raufu IA. 2012. Antimicrobial Activities of Crude Extracts of Moringa oleifera, Hibiscus sabdariffa and Hibiscus esculentus Seeds Against Some Enterobacteria.

Olaleye T. 2007. Cytotoxicity and antibacterial activity of methanolic extract of *Hibiscus sabdariffa*. J. Med. Plants Res. 1(1):9-13.

Soltani R, Khalili H, Rasoolinejad M, Gholami K, Abdollahi A. 2012. Antimicrobial susceptibility pattern of *Staphylococcus aureus* strains isolated from hospitalized patients in Tehran, Iran Research in Pharmaceutical Sciences. 7(5).

Tricia DM, McLaughlin W, Brown PD. 2006. Antimicrobial resistance of *Escherichia coli* isolates from broiler chickens and humans. BMC. Vet. Res. 2006; 2: 7.

Wang CJ, Wang JM, Lin WL, Chu CY, Chou FP, Tseng TH. 2000. Protective effect of Hibiscus anthocyanins against tert-butyl hydroperoxide–induced hepatic toxicity in rats. Food Chem Toxicol. 38:411–416. [PubMed]

Bacterial Cod	MIC for	Antibiotic-resistant
	Extract plant(mg/ml)	
1	5	$A_1, A_2, A_3, A_4$
2	5	A <sub>1</sub> , A <sub>3</sub>
3	10	A <sub>2</sub> , A <sub>3</sub> , A <sub>4</sub>
4	10	$A_1, A_2, A_3, A_4$
5	10	$A_1, A_2, A_3, A_4$
6	10	-
7	10	-
8	10	A <sub>4</sub>
9	10	A <sub>1</sub> , A <sub>4</sub>
10	20	A <sub>1</sub> , A <sub>4</sub>
11	10	A <sub>4</sub>
12	20	$A_1, A_2, A_3, A_4$
13	10	A <sub>3</sub> , A <sub>4</sub>
14	10	A <sub>1</sub> , A <sub>4</sub>
15	10	A <sub>4</sub>
16	10	-
17	5	$A_1, A_2, A_4$
18	10	A <sub>4</sub>
19	5	-
20	5 5 5	A <sub>1</sub> , A <sub>2</sub>
21		A <sub>1</sub> , A <sub>2</sub> , A <sub>4</sub>
22	5	$A_1, A_2, A_4$
23	10	$A_1, A_2, A_3, A_4$
24	10	-
25	10	A <sub>1</sub>
26	10	$A_1, A_2, A_4$
27	10	$A_1, A_2, A_4$
28	10	A <sub>1</sub> , A <sub>2</sub>
29	10	-
30	10	-

Table1: Antimicrobial susceptibility and MIC of extract against Ecoli

A<sub>1</sub>=Erythromycin, A<sub>2</sub>=Cefixime, A<sub>3</sub>=Ceftazidime, A<sub>4</sub>=Tetracyclin

Bacterial Cod	MIC for	Resistance pattern
	Extract plant(mg/ml)	
1	5	$A_1, A_2, A_3, A_4, A_5, A_6,$
2	20	$A_1, A_2, A_4, A_5, A_6,$
3	1.25	$A_1, A_2, A_4, A_5, A_6,$
4	10	A <sub>4</sub> , A <sub>6</sub>
5	10	A4, A6
6	5	A <sub>6</sub>
7	5	-
8	1.25	-
9	1.25	A <sub>6</sub>
10	5	A <sub>2</sub> , A <sub>4</sub> , A <sub>5</sub> , A <sub>6</sub> ,
11	5	$A_1, A_2, A_4, A_5, A_6,$
12	20	A <sub>4</sub> , A <sub>5</sub> , A <sub>6</sub> ,

Table 2: Antimicrobial susceptibility, MIC extract plant for S.aureus.

 $A_1$ = cefixime ,  $A_2$ = trimethoprim-sulfamethoxazol, , $A_3$ = Vancomycin,  $A_4$ = Ceftazidime  $A_5$ = penicillin,  $A_6$ = Oxacillin .