

## Comparative study of invitro anticoagulant activity of turmeric,ginger and cinchona

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### ABSTRACT:

The current work examines the anticoagulant properties of cinchona bark extract, curcumin, and ginger rhizome extracts in vitro. Worldwide, rhizomes of *Zingiber officinale* (ginger), cinnamon cassia (cinnamon), and *Curcuma longa* (turmeric) are used as spices and in herbal medicine. The rhizomes and barks of *Zingiber officinale* and *Curcuma longa* were dried, ground into a powder, and then extracted in 70% ethanol to provide the complete crude extract. The extracts' phytochemical composition was ascertained. Prothrombin time (PT) was measured in vitro on blood samples from healthy individuals to evaluate their anticoagulant effect. In a dose-dependent manner (25, 50, and 75 µl), the extracts of ginger and turmeric inhibited coagulation and considerably delayed prothrombin time (PT) with approximately comparable efficacy, while cinnamon showed negligible anticoagulant effect.

**Keywords:** anticoagulants, prothrombin time, extraction, blood, coagulation time

### I. AIM AND OBJECTIVE:

**In vitro** study of the anticoagulant activity of *zingiber officinale* (ginger), *curcuma longa* (turmeric), *cassia cinnamon* (cinnamon) when measuring prothrombin time. This study compares the anticoagulant activity of curcumin rhizome, ginger rhizome bark, and cinnamon bark.

The aim of **in vitro** anticoagulant activity studies is to investigate and analyze the possible effects of ginger, turmeric and cinnamon on blood. Anticoagulants are medications that help prevent bleeding. It is given to people at high risk of infection to reduce the risk of serious complications such as stroke and heart disease.

### Introduction:

**Thrombin formation**, which is important in the conversion of fibrinogen to fibrin, is key to blood clotting. Thrombin exists in cells in an inactive form known as prothrombin and is activated by the coagulation cascade through the activation of a

complex known as **prothrombin**. *Zingiber officinale* and *Curcuma longa* are **perennial plants from the Zingiberaceae family** with rhizomes, fibrous roots and aerial shoots. The aim of this study was to evaluate the anticoagulant activity of *Zingiber officinale* and *Curcuma longa* Rhizomes and **Cinnamon officinale** in normal blood samples in vitro.

### II. METHODOLOGY:

#### Research methodology:

The experimental crossover study took place at the Al-Gofran Medical Complex in Khartoum, Sudan. The participants in this study were comprised of healthy individuals who visited Al-

#### Inclusion criteria

The study included a total of sixty individuals who are in good health and do not exhibit any indications of bleeding or thrombotic disease.

#### Exclusion criteria:

The study included individuals who have a background of bleeding, coagulation issues (either hereditary or acquired), thrombotic disorders, pregnancy, and have not utilized antithrombotic or thromboembolic medications like warfarin and aspirin in the recent past.

#### Plant material collection and preparation:

The rhizomes of *Zingiber officinale* and *Curcuma longa* were obtained from the local market. To extract the compounds, the rhizomes were fragmented, dried in the shade, and then finely powdered.

#### Phytochemical Screening:

The preparation of the extract involved boiling the powdered plant material with 70% ethanol. The resulting macerate was then purified and used for the phytochemical screening process.

**Detection of phytochemical constitution:**

To detect the phytochemical constituents (secondary metabolites) of the extracts, standard methods outlined in references 18 and 19 were followed.

**In vitro anticoagulant test:**

For the in vitro anticoagulant test, the activity of the extracts was determined by measuring prothrombin time and activated partial thromboplastin time. Each individual's plasma sample was separated into five groups. Group 1 consisted of the standard PT and APTT. The remaining four groups of plasma samples had curcumin and ginger extracts (25, 50, and 75µl) as well as distilled water (control) added to them separately. The anticoagulant effect was then assessed.

**Extraction:** To extract the desired components, the rhizomes of ginger, turmeric, and bark of cinnamon were dried and powdered. The powder was tightly packed without any leakage. The sample was placed in a thimble, which was then inserted into an extraction tube. The extraction tube was attached to a flask containing the solvent. A condenser unit was connected to the extraction tube, and water was run through it. The Soxhlet apparatus was fixed on a hot plate, and the flask containing the solvent was heated. The extraction solvent continuously cycled through the matrix, with the sample being collected in the hot solvent

**Uses of anticoagulants:**

Anti-coagulants play a crucial role in preventing blood clots from forming in the body. These medications are commonly used to treat conditions such as deep vein thrombosis, pulmonary embolism, myocardial infarction, unstable angina, rheumatic heart disease, vascular surgery, and cerebrovascular disease. Heparin is one of the most commonly prescribed anti-coagulants for the prevention and treatment of thrombosis

**III. RESULTS AND DISCUSSION:**

**Results and findings:** The current investigation delved into the impact of the aqueous ginger extract (*Zingiber officinale*) as an anticoagulant agent, utilizing the prothrombin time test principles on thirty healthy individuals. The prothrombin time results for all participants fell within the normal range (14.23±1.073 seconds). Upon the addition of aqueous extracts of *Zingiber*

*officinale* (5%), curcuma, and cinchona in varying volumes (25, 50, 75, and 100 µL) to plasma samples from healthy individuals, a significant (P = 0.001) dose-dependent prolongation in prothrombin time was observed. Specifically, the prothrombin time values were 17.35±1.25, 20.39±1.60, and 24.75±2.40 seconds for ginger; 16.05±0.25, 19.09±1.20, and 20.85±1.90 seconds for cinchona; and 16.92±1.07, 19.49±1.48, and 23.68±2.17 seconds for curcumin, respectively.

Variable	Concentrations	PT Mean ±SD
Control		13.07±0.77
Curcumin	25 µml	16.92±1.07
	50 µml	19.49±1.48
	75 µml	23.68±2.17
Ginger	25 µml	17.35±1.25
	50 µml	20.39±1.60
	75 µml	24.75±2.40
cinnamon	25 µml	16.05±0.25
	50 µml	19.09±1.20

**IV. CONCLUSION;**

The results of the in-vitro study showed that both ginger and curcumin extracts exhibited similar anticoagulant effects. However, cinnamon had a minimal impact on anticoagulation, leading to a significant prolongation of PT.

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