



THE EFFECT OF PHENOLIC ACTIVE FRACTION ON
Ficus deltoidea var. *kunstleri* (KING) CORNER ON
FATTY ACID-INDUCED INSULIN RESISTANCE CELL
MODELS

BY

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ABSTRACT

Type 2 diabetes mellitus (T2DM) is the commonest type of diabetes mellitus and characterized by the insulin resistance. Many literatures showed that insulin resistance in T2DM and obesity is due to oxidative stress. Most of the traditional medicinal plants that are claimed useful in treating diabetes having antioxidant activity and believe to be beneficial in preventing the oxidative stress. The study tried to relate the relationship between antioxidant and insulin resistance. The study was conducted by determining the effect of *Ficus deltoidea* phenolics fraction that having the strongest antioxidant activity on glucose uptake of the myotubes and adipocytes in insulin resistance condition. The study consists of sequential extraction of the *F. deltoidea* and followed by fractionation using DPPH guided activity. The identified fraction by UPLC-QTOF-MS/MS that had the strongest antioxidant activity was used on insulin resistance models in order to see whether the fraction is able to enhance glucose uptake. Eleven fractions were collected. The DPPH assay result showed methanol extracts and F1 fraction (ethyl acetate fraction) was the strongest antioxidant active fraction. The identified components from the negative mode of UPLC-QTOF-MS/MS were euparin, dihydroresveratrol, feralolide, Moracin M-3'-O- β -D- glucopyranoside, cinchonain Ia, piceatannol, 3,5,4'- trihydroxystillbene, protosappanin A, cearoin, procyanidin C-1, protosappanin C, smilaxin, ceasalpins J, ceasalpins P, moracin F, protosappanin A, neosappanone A, 1-(4-hydroxybenzyl)-4-methoxy-2,7-dihydroxyphenanthrene, 1,5-Bis(4-hydroxy-3-methoxyphenyl)-1,4-pentadien-3-one, albaspidin AA, moracin O and moracin C. The identified components from the positive mode of UPLC-QTOF-MS/MS were epicatechin gallate, populnin, catechin, kaempferol, chlorogenic acid, 4-O- β -D Glucopyranosyl-trans-cinnamic acid and kaempferol-7-O- α -L-rhamnoside. For the cell culture, palmitate was able to induce insulin resistance in C2C12 myotubes but not in 3T3-L1 adipocytes. None of the strength of the fraction able to improve the insulin resistance. 10 $\mu\text{g/mL}$ and 100 $\mu\text{g/mL}$ of ethyl acetate fraction significantly reduced glucose uptake in C2C12 myotubes at concentration of $17.92 \mu\text{M} \pm 2.53$ and $7.40 \mu\text{M} \pm 3.92$ whereas in 3T3-L1 adipocytes, all concentration of ethyl acetate fraction reduced glucose uptake but significant at 100 $\mu\text{g/mL}$ ($18.6286 \mu\text{M} \pm 1.18$). Further investigation is needed to be done on the other possible mode of action by *F. deltoidea* in reconciling its anti-diabetic claims. The finding implies that not all antioxidants rich medicinal plants can reverse the insulin resistance and their beneficial effects on T2DM need detail elaboration. It is suggested that palmitate induced insulin resistance in skeletal muscle is a useful screening tool in searching a potential remedy for T2DM particularly in considering the disease pathophysiological aspect.

خلاصة البحث

يعتبر النوع الثاني من داء السكري أكثر أنواع السكري شيوعاً، ويتميز بقدرته على مقاومة الإنسولين. أظهرت العديد من الدراسات أن مقاومة الإنسولين في النوع الثاني من داء السكري والبدانة يرجع إلى الجهد التأكسدي. الكثير من النباتات الطبية التقليدية تعتبر مفيدة لعلاج السكري لاحتوائها على أنشطة مضادة للأكسدة ونؤمن أنها مفيدة في تفادي الجهد التأكسدي. سعت هذه الدراسة إلى الربط بين مضاد الأكسدة ومقاومة الإنسولين. تم تطبيق هذه الدراسة عن طريق تحديد تأثير جزء من فينول الـ *Ficus deltoidea* ، والتي لديها أقوى نشاط مضاد للأكسدة يعمل على امتصاص الجلوكوز، على النيبب العضلي والخلية الدهنية في حالة مقاومة الإنسولين. تتكون هذه الدراسة من استخراج متسلسل للـ *F. deltoidea* و تم يُتبع بتجزئته باستخدام النشاط الموجّه بـ DPPH . تم استخدام الجزء المحدد عن طريق الـ UPLC-MS/MS-QTOF والذي حمل أقوى نسبة للأنشطة المضادة للأكسدة في نماذج مقاومة للإنسولين للتأكد مما إذا كان الجزء قادراً على تحسين امتصاص الجلوكوز. تم تجميع 11 جزءاً. أشارت نتائج فحص DPPH أن مستخرجات الميثانول و جزء ethyl acetate كانا أقوى الأجزاء النشيطة المضادة للأكسدة. المكونات المحددة من الوضع السلي للـ UPLC-QTOF-MS/MS كانت اليوبارين، دي هيدرو ريسفيراترول، فيرالولايد، موراسين-ام-3-أو-بيتا-دي-جلوكوبيرانوسايد، سينوكونانين إي.أ، بيسيتانول، 3,5,4-تراهيدروكسيسيتيلين، بروتوسابانين أ، سيرونين، بروكيانيدين سي-1، بروتوسابانين سي، سمبلاكسين، سيسالينز جي، سيسالينز بي، موراسين إ، بروتوسابانين أ، نيوسابانول أ، 1-4-هيدروكسيسينزل-4-ميثوكسي-2، 7-ديهيدروكسيسيفينانثرين، 1,5-بيس-4-هايدروكسي-3-ميثوكسيسينزل-1، 4-بينتادين-3-واحد، أباسبيدين أ.أ، موراسين أو و موراسين سي. أما المكونات المحددة من الوضع الإيجابي للـ UPLC-QTOF-MS/MS فهي إبيكاتيكين جالات، بوبولين، كاتيكن، كيمبفيرول، حمض الكلوروجينيك، 4-أو-بيتا-دي جلوكوبيرانوسايد-ترانس-حمض السيناميك و كيمبفيرول-7-أو-ألف-إل-رهامنوسايد. بالنسبة لثقافة الخلية، فإن البالميتيت قد استطاع أن ينتج مقاومة الإنسولين في النيبب العضلي سي2 سي12، ولكن ليس في الخلية الدهنية 3 تي3-إل1. م تستطع قوة الأجزاء أن تُحسّن من مقاومة الإنسولين. 10مج/مل و 100مج/مل من جزء أسيتيت الإيثيل قلل من نسبة امتصاص الجلوكوز في كُّل من النيبب العضلي سي3 سي23 في تركيزة $17.92 \mu\text{M} \pm 2.53$ و $7.40 \mu\text{M} \pm 3.92$ ، أما في الخلية الدهنية 3 تي3-إل1، فإن كل تركيزة جزءة الأسيتيت الإيثيل قللت من نشية امتصاص الجلوكوز بنسبة $18.6286 \mu\text{M} \pm 1.18$ $100 \mu\text{g/mL}$. هناك احتياج لمزيدٍ من التحقيق فيما يخص طريقة الأعمال الأخرى الممكنة للـ *F. deltoidea* في مصالحة إدعائها المضادة للسكري. أظهرت النتائج أنه لا تستطيع كل النباتات الطبية الغنية بمضادات الأكسدة عكس مقاومة الإنسولين ، وأن تأثيرها المفيد على النوع الثاني من داء السكري يحتاج إلى تفصيل دقيق. تم اقتراح ان البالميتيت يولد مقاومة الإنسولين في العضلة الهيكلية وهو أداة فحص مفيدة في البحث عن علاج محتمل للنوع الثاني من داء السكري خاصة عند النظر في الجانب الفيزيولوجي للمرض.

APPROVAL PAGE

I certify that I have supervised and read this study and that in my opinion, it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a thesis for the degree of Master in Pharmaceutical Sciences (Pharmacology).

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DECLARATION

I hereby declare that this thesis is the result of my own investigations, except where otherwise stated. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at IIUM or other institutions.

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LIST OF ABBREVIATIONS

µg	Microgram
µL	Microlitre
µmol	Micromolar
2-DG	2-Deoxyglucose
2-DG6P	2-Deoxyglucose-6-phosphate
4-HNE	4-hydroxy-2-nonenal
ABTS	2,2'-azino-bis (3-ethylbenzothiazoline-6-sulphonic acid)
AMPK	5' adenosine monophosphate-activated protein kinase
ANOVA	One-way Variance Analysis
ATP	Adenosine triphosphate
BMI	Body Mass Index
BSA	Bovine Serum Albumin
BSC	Biosafety Cabinet
C	Carbon
CK-2	Ceasein kinase-2
cm	Centimeter
cm ²	Centimeter square
CO ₂	Carbon Dioxide
Da	Dalton
DM	Diabetes Mellitus
DMEM	Dulbecco's Modified Eagle Medium
DMSO	Dimethyl Sulfoxide
DPPH	1,1-diphenyl-2-picrylhydrazyl radical scavenging activity
ESI	Electrospray Ionization
et al.	and others.
F	Fraction

FBS	Fetal Bovine Serum
FFAs	Free Fatty Acids
FRAP	Ferric reducing antioxidant potential
g	gram
GACP	Good Agricultural and Collection Practices
GLUT4	Glucose Transporter Type
GS	Gas Chromatography
h	hour
HPLC	High Performance Liquid Chromatography
IBMX	3-isobutyl-1-methylxanthine
IC ₅₀	Inhibition Concentration
IDF	International Diabetes Federation
Ins	Insulin
IRS-1	Insulin receptor substrate-1
JNK	c-Jun N-terminal kinase
LC-QTOF-MS/MS	Liquid Chromatography-Quadruple Time of Flight-Tandem Mass spectrometry
MAPK	Mitogen-activated protein kinase
Min	Minute
mL	Milliliter
mM	Millimolar
MS	Mass Spectrometry
MS/MS	Tandem Mass Spectrometry
MTT	3-(4,5-Dimethylthiazol-2-yl)-2,5-Diphenyltetrazolium Bromide
NADPH	Nicotinamide adenine dinucleotide phosphate
NEFAs	Non-Esterified Fatty Acids
NF-κB	Nuclear Factor kappa light chain enhancer
No	Number
NOX-4	NADPH oxidase 4

OD	Optical Density
ORAC	Oxygen Radical Absorbance Capacity
P38 MAPK	P38 mitogen-activated protein kinases
PBS	Phosphate Buffer Saline
PDA	Photo Diode Array detector
PI3-kinase	Phosphatidylinositol-4,5-bisphosphate 3-kinase
PIP ₂	Phosphatidylinositol 4,5-bisphosphate
PKB/Akt	Protein Kinase B
QTOF	Quadruple Time of Flight
R	Regression
RNS	Reactive Nitrogen Species
ROS	Reactive Oxygen Species
rpm	Revolutions per minute
<i>R_t</i>	Retention Time
SEA	South East Asia
SEM	Standard Error Mean
STZ	Streptozotocin
T2DM	Type 2 diabetes Mellitus
TCM	Traditional and Complementary Medicine
UPLC	Ultra-performance Liquid Chromatography Mass Spectrometry
USA	United State of America
var.	Varieties
VLC	Vacuum Liquid Chromatography
WHO	World Health Organization

LIST OF SYMBOLS

*	statistically significant denotation
±	confidence interval or error
®	Registered trademark
°C	degree Celsius
μ	micro
<i>P</i>	probability
™	Trademark
α	alpha
β	beta
κ	kappa

CHAPTER ONE

INTRODUCTION

1.1 RESEARCH BACKGROUND

Diabetes mellitus is one of the epidemic diseases which affect globally. Asia is the most affected region with China and India as the top two countries where the people with diabetes (Zheng et al., 2018). About 415 million of adults have suffered from diabetes and 90% of cases are type 2 diabetes mellitus (T2DM). The International Diabetes Federation (IDF) reported about 6.8% of global mortality equivalent to 3.96 million deaths are due to diabetes mellitus in year 2010 and was raised to 5.0 million deaths in year 2015 (Zheng et al, 2018). Factors affect this rapid emerging epidemic are due to sedentary lifestyle and unhealthy diet aside from genetic predisposition. Further complication of T2DM can leads to heart disease, stroke, impaired in vision, foot ulcer and kidney damage (Jain, 2010). Among all of the complications, mortality and morbidity of the patients are mainly due to cardiovascular complication and in Asia, kidney damage in diabetes mellitus are more prevalence (Zheng et al., 2018). T2DM is a metabolic syndrome which affects the proper production of insulin and the decrease in sensitivity of cells towards the insulin stimulation. The essential precursor of the development of T2DM is insulin resistance and both T2DM and obesity linked to the development of insulin resistance especially in peripheral tissues (Al-Goblan, Alfi & Khan, 2014). Oxidative stress is one of the pathways which leads to insulin resistance in obesity and T2DM patient. Studies has discovered insulin resistance has related with obesity due to the high fat intake and glucose intake which provide extra subtract for the body to produce reactive oxygen species (ROS) and causes oxidative stress.

Oxidative stress further damage cells and signaling pathway thus leads to insulin resistance. Recently, antioxidant therapy has been introduced in preventive and management of T2DM (Bajaj, 2012). There are studies that showed antioxidant is capable as anti-diabetic especially the dietary polyphenols (Mazumder et al., 2012). Many commercial herbal medicines with antioxidant properties have anti-diabetic effects. This study is to investigate the antioxidant containing plant *Ficus deltoidea* var. *kunstleri* (King) Corner and its antioxidant active phenolic fraction on palmitate induced insulin resistance in C2C12 myotubes and 3T3-L1 adipocyte.

1.2 RESEARCH PROBLEM STATEMENT

Insulin resistance in obesity and T2DM are related to oxidative stress. High amount of free fatty acids and glucose increases ROS production and create oxidative stress due to the imbalance of the antioxidant system and increases in ROS level. Thus, external antioxidants are needed to combat the harmful condition in T2DM and obesity patients and prevent further complications. Nowadays, the commercialized herbal medicines are claimed to have anti-diabetics effect and most of the herbals have antioxidant activity. Antioxidants have several classes according to their mode of actions. Dietary polyphenols are the phytochemicals which responsible for the antioxidants activity of herbals and some of the dietary polyphenols have dual action either as antioxidant or pro-oxidants which will further deteriorate conditions if taken without consultation or proper evaluation. Some of the dietary polyphenols also have more specific mechanism in glycemic control which involve in insulin signaling pathway either inhibition or stimulation pathway. Thus, extensive investigation needs to be done on the effect of antioxidant properties of herbals which have the anti-diabetic effects. *F. deltoidea* is one of the herbal plants traditionally used as antidiabetic which contained abundant

antioxidant compounds. Other than as α -glucosidase inhibitor, this study was trying to explore other possible pathways of *F. deltoidea* as antidiabetic. *F. deltoidea* leave was used in the study to investigate the antioxidant properties of the leaves either ameliorate or deteriorate the insulin resistance condition.

1.3 SIGNIFICANT OF STUDY

The study is important to provide better understanding on the effects of antioxidant towards glycemic control and on the relationship between obesity and insulin resistance in T2DM. The preemptive claim that all antioxidants are able to cure diabetes can be explained and reconciled. The study on the antioxidant of herbs and characterizing the type of antioxidants is important to ensure their efficacy on diabetes mellitus as well. This will avoid misleading information by the consumers and the sellers. The study also illustrates the relationship between obesity causes insulin resistance in T2DM.

1.4 OBJECTIVES

1.4.1 General Objective

To evaluate the effect of the antioxidant active fractions of *F. deltoidea* extracts on insulin-resistance in C2C12 myotubes and 3T3-L1 adipocytes cell models.

1.4.2 Specific Objective

1. To investigate the most antioxidant active fraction from *F. deltoidea* extracts by bio-assay-guided fractionation using vacuum liquid chromatography.
2. To induce and develop insulin-resistant cells in C2C12 myoblast and 3T3-L1 adipocytes cell line.

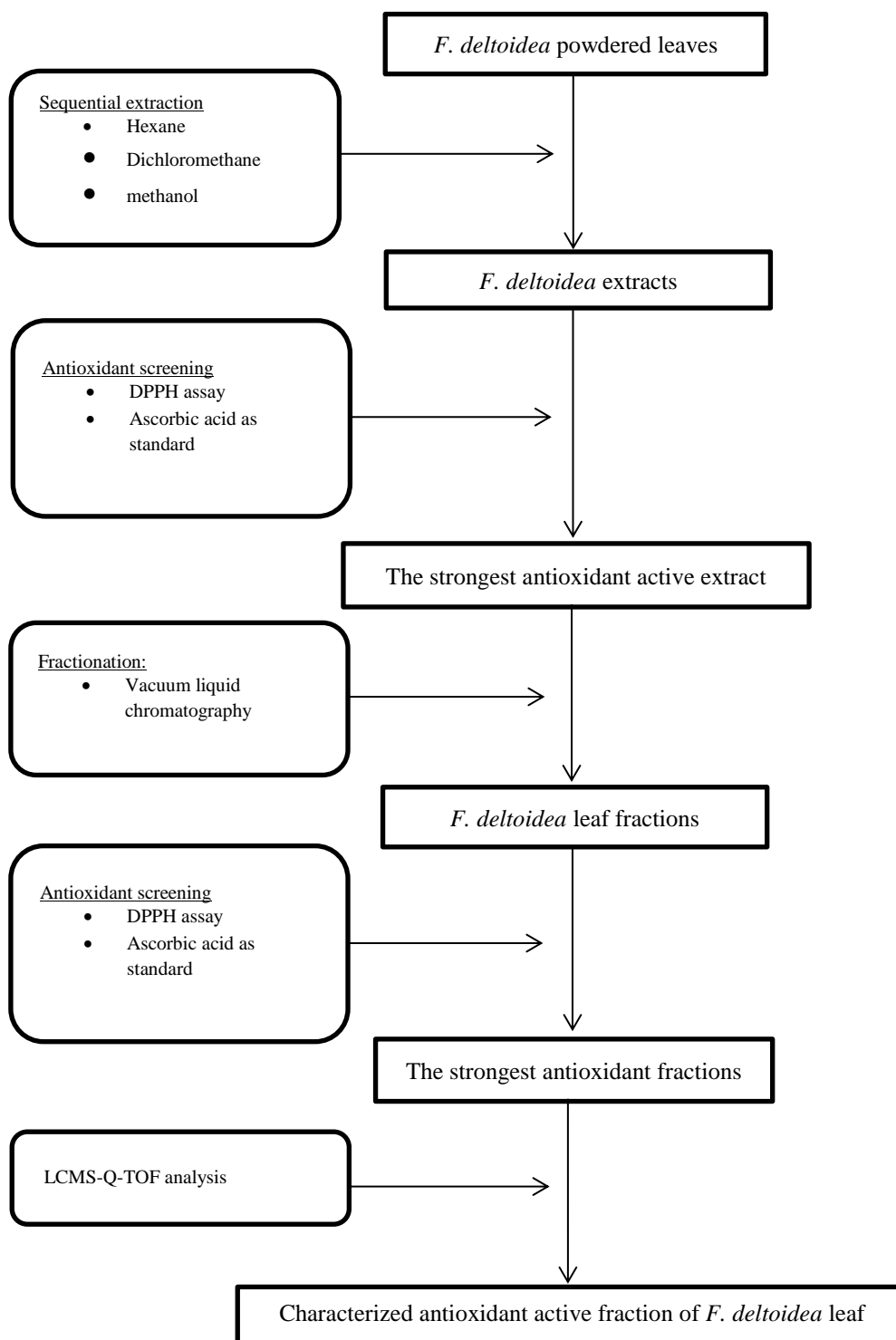
3. To evaluate the activity of the antioxidant active fraction of *F. deltoidea* leaf extract in reversing the induced-insulin resistance cell lines by glucose uptake assay.

1.5 RESEARCH HYPOTHESIS

1. Palmitate is responsible for inducing insulin resistance in C2C12 myotubes and 3T3-L1 adipocytes.
2. Phenolic compounds in *F. deltoidea* var. *kunstleri* leaves have different effects on palmitate-induced insulin resistance cell models.

1.6 STUDY FLOW

1.6.1 Phase one



1.6.2 Phase two

