In Vivo Topical Wound Healing Activity of Punica Granatum Peel Extract on Rats

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ABSTRACT

Punica granatum is a well-known fruit for its antioxidant, hepatoprotective, anticancer, antibacterial potential. The methanolic extract of Punica granatum, in the form of an ointment with two different concentrations (10% and 15% w/w ointment of extract in simple ointment base) was evaluated for wound healing potential in an excision wound model in rats. The results were comparable to standard drug Nitrofurazone ointment. It was observed that the wound contracting abilities of 10% and 15% extract ointments (97.8%, 98.4%) were significantly (P < 0.05) greater than that of the control. The wound closure time was less and the percentage of wound contraction was much more with the 15%w/w extract ointment treated group. On 18th day 100% contraction was observed which was almost similar to that of the nitrofurazone ointment group. 10%w/w extract ointment group of animals showed significant wound contraction from the 18th day onwards and achieved 100% with the wound closure time of 20th days. Both concentrations of the methanolic extract of Punica granatum ointment showed significant responses when compared with the control group. Thus methanolic extract of Punica granatum proves to be a potential wound healing agent.

Keywords: Nitrofurazone, Punica granatum, antioxidant, ointment, hepatoprotective.

INTRODUCTION

The pomegranate (Punica granatum L.) fruit has been used for centuries in ancient cultures for its medicinal purposes. For a long time, pomegranate fruit is widely consumed fresh and more recently in beverage form as juice. Pomegranate juice possesses potent antioxidant activity that results in marked protection of nitric oxide.
(NO) against oxidative destruction, thereby resulting in augmentation of the biological actions of NO. PFE (pomegranate fruit extract) was found to contain anthocyanins (such as delphinidin, cyanidin, and pelargonidin) and several hydrolyzable tannins (such as punicalin, pedunculagin, punicalagin, gallagic, and ellagic acid esters of glucose), which account for 92% of the antioxidant activity of the whole fruit. Several compounds have been isolated from Punica granatum such as tannins, punicalagin, ellagic acid, hydroquinone pyridinium, delphinidin, cyanidin, and pelargonidin.

Natural products are a source of synthetic and traditional herbal medicine and are still the primary health care system. An important aspect of the use of traditional medicinal remedies and plants in the treatment of burns and wounds is the potential to improve healing and the same time to reduce the financial burden. Wound healing occurs in three stages: inflammation, proliferation, and remodeling. The proliferative phase is characterized by angiogenesis, collagen deposition, granulation tissue formation, epithelialization and wound contraction. In angiogenesis, new blood vessels grow from endothelial cells. In fibroplasias and granulation tissue formation, fibroblasts grow and form a new, provisional extracellular matrix by excreting collagen and fibronectin. Collagen, the major component which strengthens and supports extracellular tissue, contains substantial amounts of hydroxyproline, which has been used as a biochemical marker for tissue collagen. In epithelialization, epithelial cells proliferate and spread across the wound surface. Wound contraction occurs as the myofibroblasts contract. Platelets release growth factors and other cytokines. Present study was conducted to evaluate the wound healing effect of Pomegranate (Punica granatum) peel extract in Wistar rats.

MATERIALS AND METHODS

Plant material

Fresh peel of Punica granatum were collected in area free of pesticides and other contaminants from the local vendor of district Sagar, Madhya Pradesh and shed dried. The collected peels were crushed.

Preparation of Extract

The peel powder (100 g) was extracted by stirring using a magnetic stirrer with 600 ml of methanolic at 30 °C for 4 h. The extract was filtered through Whatmann filter paper no. 41 for removal of peel particles. The residue was re-extracted with 500 mL of MeOH and filtered. The extracts were pooled and concentrated under vacuum at 40°C using a Speedvac system (SC110A, Savant, USA).

Animals

Wistar rats (150-200g) were used in this study. They were given water ad libitum and fed with commercial food pellets. The study protocol was approved by institutional animal ethics committee, Pinnacle Biomedical Reasearch Institute, Bhopal, Madhya Pradesh India. Following overnight starving, animals were anesthetized with local anesthesia xylocaine and suitably wounded after shaving the area to be operated to bear excision wound. The wounds were not dressed and no systemic or local antimicrobial agents were used.

Excision Wounds

The surgical materials were sterilized and dorsal fur of the animals was shaved with an electric clipper. The rats were anesthetized with (Xylocaine®) 2% Jelly, Astra Zeneca Pharma India ltd and anticipated area of the wound to be created was outlined on the back of the animals with methylene blue using
stencil. A full thickness of the excision wound of circular area of 500mm$^2$ and 2mm depth was created along the markings using toothed forceps, scalpel and pointed scissors. Wound contraction was monitored by measuring wound area, planimetrically, on alternate days till the wounds were completely healed.

Formulation of ointment (British pharmacopoeia, 1996)
(a) Preparation of 20g simple ointment (B.P.) base. Wool fat (1g), hard paraffin (1g), cetostearyl alcohol (1g) and white soft paraffin (17g) was mixed and heated gently with stirring then cooled.
(b) 2 gm 50% methanolic extract of *Punica granatum* was added separately to 20gm of base (10% ointment).
(c) 3 gm 50% methanolic extract of *Punica granatum* was added separately to 20gm of base (15% ointment).

Drug administration

24 animals were divided into groups of four and treated as follows:
Group 1: Simple ointment base was applied once daily and served as vehicle control.
Group 2: Standard drug nitrofurazone ointment (0.2% w/w) was applied once daily served as positive control.
Group 3: *Punica granatum* 50% methanolic extract ointment (10% w/w) was applied once daily.
Group 4: *Punica granatum* 50% methanolic extract ointment (15% w/w) was applied once daily.

All the above mentioned treatments were started from the day of wound creation and continued till 20th day of healing. The wound closure rate was assessed by tracing the wounds on day 2nd, 4th, 6th, 8th, 10th, 12th, 14th, 16th, 18th and 20th. Post wounding using transparency paper and a permanent marker. The changes in healing of wound i.e. measurement of wound on graph paper was expressed as unit (mm$^2$). Wound contraction was expressed as percentage reduction of original wound size.

Statistical analysis

Results obtained from three wound models have been expressed as mean±SEM. The data was evaluated by one way ANOVA followed by Dunnett’s t-test, P < 0.05 was considered as significant.

**RESULTS & DISCUSSION**

The least rate of wound healing was seen in control group, which received simple ointment. Treatment with standard group heals the wound in a faster rate than other group, but complete healing was obtained on day 18. The upper layer of wound was surgically removed and subjected to histological studies. Histological examination of the haematoxylin and eosin stained tissue of the rat wounds treated with extract and nitrofurazone ointment have led to reduce scar formation and enhanced fibroblast proliferation, angiogenesis, keratinisation and epithelialisation as compared to vehicle-treated group or control group. The measurement of the progress of the wound healing induced by the standard, ointments and control in the excision wound model were shown in Table 1. It was observed that the wound contracting abilities of 10% and 15% extract ointments (97.8%, 98.4%) were significantly (P < 0.05) greater than that of the control. The earlier wound contraction rate of the methanolic extract may be due to stimulation of interleukin-8, an inflammatory α-chemokine which affects the function and recruitment of various inflammatory cells, fibroblasts and keratinocytes. It may increase the gap junctional intracellular communication in cultured fibroblasts and induces a more rapid maturation of granulation tissue.
CONCLUSION

Wound healing process consists of different phases such as granulation, collagenization, collagen maturation and scar maturation which are concurrent but independent to each other. Hence in this excision wound models study conclude that methanolic extract ointment at both concentrations (10%, 15%) exhibited significant wound healing activity. This was demonstrated by a significant increase in the rate of wound contraction and enhanced epithelization of excision wounds. This may be due to the effect of Punica granatum extract on increased collagen synthesis.

REFERENCES

Table 1. Evaluation of *Punica granatum* extract ointment (10% and 15% w/w) and Nitrofurazone (0.2% w/w) Ointment in wound healing by excision wound method in rats

<table>
<thead>
<tr>
<th>Post-wounding (days)</th>
<th>Wound area (mm$^2$) (mean±S.E.) and percentage of wound contraction</th>
<th>Standard nitrofurazone ointment (0.2%, w/w)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Simple ointment (control)</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>518.2±2.20</td>
<td>518.7±2.25</td>
</tr>
<tr>
<td>2</td>
<td>435.2 ±3.01 (16.13%)</td>
<td>425.6±1.65 (17.99%)</td>
</tr>
<tr>
<td>4</td>
<td>377.1±2.20 (27.20%)</td>
<td>312.4±3.1* (40.0%)</td>
</tr>
<tr>
<td>6</td>
<td>336.4±2.24 (35.35%)</td>
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</tr>
<tr>
<td>8</td>
<td>302.3±1.45 (41.72%)</td>
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</tr>
<tr>
<td>10</td>
<td>275.2±3.20 (47.03%)</td>
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</tr>
<tr>
<td>12</td>
<td>250.6±1.55 (51.43%)</td>
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<tr>
<td>14</td>
<td>227.5±2.21 (56.15%)</td>
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<tr>
<td>16</td>
<td>206.4±1.67 (60.12%)</td>
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<tr>
<td>18</td>
<td>179.2±2.22 (66.1%)</td>
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</tr>
<tr>
<td>20</td>
<td>156.3±1.61 (70.9%)</td>
<td></td>
</tr>
</tbody>
</table>

Values are expressed as Mean±SEM
*p<0.01, **p<0.001 vs control (n=6)
The values presented in the table represent percentage wound healing at 4, 8, 12, 16, 20 days for control (simple ointment B.P. treated group.), standard (nitrofurazone treated group) and the test groups viz. the methanolic extract (10% and 15%).