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J O # F O J O

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Abstract

Diarrheal and infectious diseases are the leading causes of morbidity and mortality worldwide. With the emergence of multidrug resistant bacteria, the treatment of these diseases is problematic. This situation stresses the need to search for alternative antibacterial sources notably medicinal plants. The present study aimed to assess the antibacterial activity of three leafy vegetables commonly used to treat diarrheal diseases. Therefore, aqueous and hydro-ethanolic extracts of the leaves of *Crateva adansonii*, *Vernonia amygdalina* and *Sesamum radiatum* were prepared and tested against 12 clinical isolates and 4 reference strains. The antibacterial activities were measured using a microdilution method to determine the Minimal Inhibitory Concentration, Minimal Bactericidal Concentration and the antibiotic power. Susceptibility tests of the extracts were carried out using well diffusion method.

The hydro-ethanolic extracts of the leaves of *S. radiatum* and *C. adansonii* and the aqueous extract of *S. radiatum* had an effective antibacterial effect on the clinical and reference strains isolates. This was supported by Minimal Inhibitory Concentration values ranging between 0.3125 and 5 mg/ml, Minimal Bactericidal Concentration between 0.3125 and 10 mg/ml, a bactericidal power on *S. aureus* ATCC 25923, *Pseudomonas mirabilis* A 24974 (reference strains); *Staphylococcus aureus*, *Vibrio cholera* and *Salmonella Typhi* (clinical isolates). For the active extracts, the LQKLELWLRQ JRQH GLDPHWHUV ZHUH VLJQL ÿ FDQW O\ GLIIHUHQW SS. radiatum showed the best antibacterial effects on the clinical and reference strains isolates, although reference strains and most of the clinical isolates still more sensitive to antibiotics.

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Keywords: Antibacterial activity; Well diffusion; *S. radiatum*; *C. adansonii*; *V. amygdalina*

Introduction

In developing countries, infectious diarrhoeas represent a serious public health challenge because of their frequency and gravity. They are responsible for over 17 million deaths every year across the world with more than half of this burden occurring in Africa [1]. This is a problem affecting all age groups but particularly (a) - but generally (b) 7-3 (y) 7 (b) -7 (er 17 mf i) 11. nsipen 11. uap(e) d g-6 (hsf i) 11. r (d g) 5

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ey were constituted of 12 clinical strains isolated from diarrheal faeces used to compare the means of the inhibition zone diameters between samples: *Escherichia coli*, *Staphylococcus aureus*, *Salmonella Typhimurium*, two extracts of the same plant, between the aqueous extracts of the *Salmonella choleraesuis*, *Shigella* spp, *Shigella exneri*, *Vibrio cholerae*, *Citrobacter* spp, *Proteus mirabilis*, *Proteus vulgaris*, *Klebsiella pneumoniae*, *Klebsiella rhinoscleromatis* and 4 reference strains (*Escherichia coli* ATCC 25922, *Staphylococcus aureus* ATCC 25923, *Pseudomonas aeruginosa* ATCC 27853 and *Proteus mirabilis* ATCC 24974).

Methods

a) Preparation of the extracts: 100 g of the vegetables' powder was boiled for 30 minutes in 1000 ml of distilled water. The brew was cooled and filtered once using absorbent cotton and once with Whatman N°1 filter paper. The obtained filtrate was then dried at 50°C in an incubator and served as the aqueous extract (AE).

To make the hydro-ethanolic extract (HE), 100 g of powder was agitated for 72 hours in 1000 ml of 70% diluted ethanol. It was then filtered once on absorbent cotton and once on Whatman N°1 filter paper. The hydro-ethanolic phase was lastly dried at 50°C.

The aqueous and hydro-ethanolic extracts of the vegetables were reconstituted in distilled water at a concentration of 20 mg/ml. The prepared solutions were sterilized by filtration using filter-syringes on 0.22 µm Millipore membrane. The sterility of the stock solutions was verified by culturing aliquots of each solution on Mueller Hinton II media and incubated at 37°C for 24 to 48 hours.

b) Preparation of bacterial suspension: A pure 24 hours colony of each bacteria strain was

emulsified in 5 ml of physiological water and adjusted to McFarland 0.5 standard.

c) Determination of minimal inhibitory concentration (MIC) and minimal bactericidal concentration (MBC): This was performed using 96 well plates method described by Houngbeme et al. [14]. 100 µl of the stock solution of each extract was added to 100 µl of the different bacterial suspensions in a liquid media containing 100 µl of Mueller-Hinton broth. Positive and negative controls were prepared and respectively made of, 100 µl of MH broth + 100 µl of bacterial suspension and 100 µl of MH broth + 100 µl of the stock solutions of the extracts being tested. The micro-plates were covered with parafilm paper and incubated at 37°C for 24 hours. The MIC was estimated with naked eyes compared to the controls and each well was cultured on MH II agar and incubated at 37°C for 24 hours for the determination of the MBC.

The MBC is the smallest concentration of extract at which no bacteria colony can be observed. The antibiotic power (ap) of each extract was thereafter calculated with the formula CMB/CMI .

d) Susceptibility tests: A swab of each inoculum was cultured onto Mueller-Hinton II agar plates [15]. Using the tip of sterile pasteur pipette, wells of 6 mm of diameter were dug in the agar and 50 µl of each extract was transferred to the wells. A well containing sterile distilled water served as negative control. The petri dishes were kept at ambient temperature for 30 min to 1h for a pre-diffusion of the substances before being incubated at 37°C for 24 h [16]. Meanwhile, swabs of each inoculum were cultured onto MH II plates and reference antibiotic disks were used as positive controls. The tests were repeated three times and the antibacterial activity of the extracts was determined by measuring the inhibition zone diameters around each well (Table 1).

e) Statistical analyses: Susceptibility tests were repeated thrice and the results analysed using Stata 11.0 software and presented as Mean ± standard error. An analysis of variance (ANOVA single factor) was

and *P. mirabilis* A24974 and a bacteriostatic activity on *E. coli* ATCC 25922 and *P. aeruginosa* ATCC 27853. *S. aureus* ATCC 25923 was sensitive to the aqueous extract of *S. radiatum* and the hydro-ethanolic extract of *C. adansonii* with the same MIC of 0.625 mg/ml. None of the reference strains was susceptible to the extract of *V. amygdalina*. However, a MIC of 2.5 mg/ml was recorded for these extracts on *S. aureus* ATCC 25923 (Table 2).

S. aureus, *E. coli*, *V. cholerae*, *S. Typhi* and *P. vulgaris* were the only clinical isolates susceptible to the hydro-ethanolic extract of *S. radiatum* with MIC values from 0.3125 to 1.25 mg/ml and a bactericidal effect on *S. aureus*, *V. cholerae* and *S. Typhi*. At the same MIC of 0.625 mg/ml, *S. aureus*, *V. cholerae*, *S. Typhi* and *P. vulgaris* were susceptible to the aqueous extract of *S. radiatum* with a bactericidal power of *S. aureus*. Similarly, *V. cholerae* and *P. vulgaris* were susceptible to the hydro-ethanolic extract of *C. adansonii* (MIC = 0.625 mg/ml). No MBC was recorded for the extracts of the leaves of *V. amygdalina*. Nevertheless, some MIC values were obtained for *S. aureus*, *V. amygdalina* (AE = 5 mg/ml; *V. amygdalina* HE = 1.25 mg/ml) (Table 3).

Susceptibility tests

As shown in Table 4 and Figure 1, *S. aureus* ATCC 25923 is susceptible to the hydro-ethanolic extract of the leaves of *C. adansonii* and *S. radiatum* and the aqueous extract of *S. radiatum*.

The inhibition zone diameters obtained with the hydro-ethanolic extract of the leaves of *S. radiatum* were significantly higher than ($p < 0.05$) those recorded using the aqueous extract of the same plant but also higher than those obtained with the hydro-ethanolic extracts of *C. adansonii* and *V. amygdalina*. Apart from *S. aureus* ATCC 25923, the other reference strains were only sensitive to the hydro-ethanolic extract of the leaves of *S. radiatum* with inhibition zone diameters varying from 14 to 21 mm.

Discussion

The present study aimed to assess the antibacterial activity of the aqueous and hydro-ethanolic extracts of three leafy vegetables commonly used in traditional medicine to treat infectious diarrhoeas. To this end, the extracts were tested on 12 clinical bacteria isolates obtained from diarrheal faeces samples and on 4 reference strains.

S. aureus ATCC 25923 was the most susceptible reference strain to the extracts of *C. adansonii* (aqueous extract: MIC=1.25 mg/ml; hydro-ethanolic extract: MIC=0.625 mg/ml). However, a total absence of MBC was recorded with the aqueous extract of *C. adansonii* at all the considered concentrations. Nevertheless, its hydro-ethanolic extract showed a bacteriostatic effect on *S. aureus* ATCC 25923 with a MBC of 2.5 mg/ml. Moreover, no MBC was induced by the aqueous extracts of *C. adansonii* on the clinical isolates. However, *V. cholerae* and *P. vulgaris* were susceptible to its hydro-ethanolic extract with a bacteriostatic power on these two isolates. In addition, *S. aureus* (CMI = 1.25 mg/ml) and *Shigella* spp (1.25 mg/ml) were also susceptible to this extract though without a MBC. These results are better than those reported by Lagnika et al. [19] on *S. aureus* isolated from *Trypanosoma swinderianus* (aqueous extract of the leaves of *Crateva religiosa* MIC = 10 mg/ml; ethanolic extract of the leaves of *Crateva religiosa* MIC=2.5 mg/ml). This discrepancy could be explained by the fact that the tested bacteria strains were not from the same origin and the two studies were not conducted in the same area. Furthermore, the findings of the current study are better than those obtained by Ayodeji et al. [20] on *E. coli* (12.5 mg/ml), *S. Typhi* (12.5 mg/ml), *S. aureus* (12.5 mg/ml) and *K. pneumoniae* (25 mg/ml). Agboke Ayodeji et al. actually carried out their study on the methanolic extract of the leaves of *C. adansonii* and the reported MIC

against a wide range of bacterial species responsible for diarrhoeal infections or diseases, especially those belonging to the family of Enterobacteriaceae. Probably, they can be used to treat diarrhoeas and food poisoning cases, as well as or enteric bacterial infections.

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