

## Original Research Article

### **IN VITRO ANTIBACTERIAL EFFICACY OF *Bryophyllum pinnatum* leaf EXTRACTS**

#### **ABSTRACT**

A study on the antibacterial activities of *Bryophyllum pinnatum* against multidrug resistant bacterial pathogens was carried out in this research. Air-dried and powdered *Bryophyllum pinnatum* leaves was extracted using ethanol and aqueous solvents. Five bacteria strains including *Staphylococcus aureus*, *Streptococcus pneumoniae*, *Bacillus subtilis*, *Escherichia coli* and *Pseudomonas aeruginosa* were obtained from the University of Benin Teaching Hospital and they were preliminarily identified using standard microbiological methods. Antibacterial activity was carried out using agar well diffusion method. Mean zone diameter of inhibition in aqueous extract ranged from 9.20±0.17-10.50±0.50 mm and 9.30±0.33- 10.33±0.89 mm against *Escherichia coli* and *Staphylococcus aureus* respectively at 25-100 mg/ml. In the ethanol extract, mean zone of inhibition ranged from 9.50±0.28-13.33±0.88 mm and 10.67±0.67-19.00±0.58 mm at concentration range of 6.25-100 mg/ml. Minimum inhibitory concentrations of ethanol extract ranged from 6.25-100 mg/ml against bacterial strains. While those of aqueous extract ranged from 25-100 mg/ml against bacterial isolates. Minimum bactericidal/fungicidal concentrations of ethanol extract ranged from 25-50 mg/ml. While in the aqueous extract, value was 50 mg/ml and against bacteria. The test bacterial pathogens were found to possess multiple drug resistance potential with multidrug resistance index ranging from 0.3 – 0.5. This study has shown that multidrug resistant clinical bacterial pathogens are sensitive to aqueous extract of *Bryophyllum pinnatum*

#### **Keywords**

Antibacterial, antibiotics, inhibition, resistance, pathogen, bacteria.

#### **INTRODUCTION**

*Bryophyllum pinnatum* (*calcyonium*) is a medicinal plant belonging to the crassulaceae family. *Bryophyllum pinnatum* has gained extensive recognition for its medicinal properties. The plant *Bryophyllum pinnatum* is frequently known as air plant, love plant, miracle leaf, life plant, Zakhm-e-hyat, panfutti and Ghayamari, canterbutury bells, parnabija etc. It is conventionally used as a herbal remedy in approximately all parts of the world (Gupta *et al.*, 2010). This plant

**Comment [E1]:** Use "it" in place of writing the full name of the plant at every line.

32 widely grows in hot and humid areas, around the dwelling place, along road sides and herbal  
33 garden and field. *Bryophyllum pinnatum* plant is widely used in folk medicine and it is easily  
34 found in places such as, India, Tropical Africa, Madagascar, China, Australia, Pakistan, Hawaii  
35 and Tropical America (Ojewole, 2005). (Okwu, 2006. The active ingredients of most of the  
36 commonly used conventional drugs were originally derived from plant part before their  
37 pharmaceutical mass production from synthetic chemical (Sofowara, 1993).

38 \*\*

39 *Bryophyllum pinnatum* contain appreciable amount of bioactive compounds. Medicinally, the  
40 presence of phytochemicals explains the role of this plant leaves in ethnomedicine in Nigeria  
41 (Nwali *et al.*, 2012). Phytochemical screenings of *Bryophyllum pinnatum* have yielded alkaloids,  
42 triterpenes, glycosides, flavonoids, steroids, butadienolides, lipids, and organic acids, Phenol and  
43 tannins, free amino acid and terpenoids. Arachidic acid, astragalins, behenic acid, beta amyrin,  
44 benzenoids, bersaldegenin, beta-sitosterol, bryophollenone, bryophollone, bryophyllin, caffeic  
45 acid, ferulic acid, quercetin, steroids and taraxerol. Despite the progress made in the  
46 development of drugs and antimicrobial agents, occurrence of drug resistant microbes and the  
47 emergence of unknown disease causing microbes pose an enormous public health concern (Iwu,  
48 1999). This fact has forced scientists to search for new antibiotics/antimicrobial compounds from  
49 various sources (Mann *et al.*, 2007) such as the medicinal plants to replace those that have  
50 become inactive. Traditional medicine uses numerous plants parts for the treatment of respiratory  
51 diseases among which is this plant, *Bryophyllum pinnatum* (Okwu, 2005).

52 \*\*

53 The plant has been found to possess antibacterial activity against several bacterial pathogens  
54 including *Staphylococcus aureus*, *Escherichia coli* and *Pseudomonas aeruginosa*. Different  
55 solvents such as aqueous, ethanol, methanol and n-hexane have been used for extraction and the  
56 respective extracts have shown varying degree of antibacterial actions against selected pathogens  
57 (Mudi and Ibrahim, 2008). Irrespective of the researches so far, adequate information on the  
58 antibacterial activity of the plant extract is very important. Therefore this study was designed to  
59 investigate the antibacterial potency of leaf extract of *Bryophyllum pinnatum* against multidrug  
60 resistant bacterial pathogens.

## 62 MATERIALS AND METHODS

### 63 Plant Materials

64 *Bryophyllum pinnatum* leaves were obtained from Adolor Street in Benin City and identified at  
65 the Herbarium, Department of Plant Biology and Biotechnology, University of Benin, Benin  
66 City, Edo State. The leaves were air-dried, ground using sterilized pestle and mortar. The  
67 powdered leaf was kept in a sterile bottle container until required.

### 68 Preparation of Crude Extracts

69 Fifty grams (50 g) of the grinded *Bryophyllum pinnatum* leaves was soaked in 250 ml each of  
70 distilled water and ethanol for 48 hr. The extract was filtered through a sieve with pore size of  
71 about 250µm to remove debris. The filtrate was then filtered through membrane filter paper. The  
72 final filtrate was evaporated in a water bath at 40°C to get the crude extract. The crude aqueous

**Comment [E2]:** Is there any report of use of this plant at any "antimicrobial" or related purposes by any community?  
If so, you have to add it here.  
Every plant may be antimicrobial due to evolutionary reason. That does not mean they are useable medicines.

**Comment [E3]:** This is CARDIOTOXIC as per some experiments.

**Comment [E4]:** It was converted to fine powders by using Pestle and mortar?

As the leaves are thick, the air dried leaves cannot be converted to powder by pestle and mortar!

**Comment [E5]:** Without shaking?

**Comment [E6]:** It is NOT POSSIBLE to evaporate 250 ml of water from the solution at 40°C. It is even very difficult to do in Vacuum evaporators!

73 and ethanol extracts were stored at 4°C until required. These were used for antimicrobial analysis  
74 (Abdulazeez *et al.*, 2014).

#### 75 **Preparation of concentration of plant extract**

76 One gram (1g) each of both ethanol and aqueous extract was added to 10ml of ethanol and  
77 distilled water respectively to give a concentration of 100mg/ml. Other concentrations of 50, 25  
78 and 12.5 and 6.25mg/ml were prepared by double dilution method (Aneja, 2003) .

**Comment [E7]:** That means you got the crude extract at SOLID form by only evaporation at 40°C? Is it possible?

#### 79 **Test microorganisms**

80 Three Gram positive bacteria, *Staphylococcus aureus*, *Streptococcus pneumoniae*, *Bacillus*  
81 *subtilis* and two Gram negative bacteria, *Escherichia coli*, *Pseudomonas aeruginosa*. The  
82 microorganisms were obtained from the Microbiology Laboratory stocks in University of Benin  
83 Teaching Hospital. The bacteria were then identified in the laboratory based on their cultural,  
84 morphological and biochemical characteristics.

**Comment [E8]:** How do you come to know that these are "multidrug resistant bacterial pathogens?".

#### 85 **Bacteria Inoculum Preparation**

86 The inocula were prepared by inoculating the test organisms in nutrient broth and incubating  
87 them for 24 hours at 37°C for the bacteria. After incubation, 0.2 milliliter of the diluted cultures  
88 in normal saline was inoculated onto solidified nutrient agar at 45°C using a Pasteur pipette.

#### 89 **Agar Well Diffusion Technique**

90 The ability of the various extracts to inhibit the growth of the clinical test organisms was  
91 determined using the agar well technique. The inoculated nutrient agar plates were allowed to  
92 dry. After which, wells were bored on the surface of inoculated agar plates using 4mm cork  
93 borer. Zero point two millilitres 0.2ml of the different concentration of each extracts was  
94 transferred into the well using Pasteur pipette. The wells were sufficiently spaced to prevent the  
95 resulting zones of inhibition from overlapping. The plates were incubated at 37°C for 24hr. The  
96 experiment was performed in triplicate and the resulting zones of inhibition were recorded as  
97 mean ± standard error (Jorgensen and Ferraro, 2009).

#### 98 **Determination of Minimum Inhibitory Concentration (MIC) and Minimum** 99 **Bacteriocidal Concentration (MBC)**

100 The minimum inhibitory concentration (MIC) of the extracts was determined for each of the test  
101 organisms at varying concentrations of 100, 50, 25, 12.5 and 6.25mg/ml. 1ml of various  
102 concentrations was added into different test tubes, 1 ml of nutrient broth was added and then a  
103 loopful of the test organism previously diluted to 0.5 McFarland turbidity standard was  
104 introduced to the tubes. A tube containing nutrient broth only was seeded with the test organism  
105 to serve as control. All the tubes were then incubated at 37°C for 24 h and then examined for  
106 growth by observing for turbidity. The minimum bactericidal concentration (MBC) of the plant  
107 extract on the clinical isolates were carried out according to Akinyemi *et al.* (2005). Briefly, 1 ml  
108 each of bacterial cultures were pipetted from the mixture obtained in the determination of MIC  
109 tubes which did not show any growth and subcultured on to nutrient agar. Nutrient agar plates  
110 were incubated at 37°C for 24 h. After incubation the concentration at which there was no single  
111 growth of bacteria was taken as MBC (Akinyemi *et al.* (2005).

#### 112 **Antibiotics Susceptibility Testing**

113 Antimicrobial disc tests of the isolates were performed according to the recommendations of  
 114 the National Committee Laboratory Standards (NCCLS) using the following antibiotic discs:  
 115 tetracycline (20µg), ampiclox (30µg), zinnacef (20µg), amoxicillin (30µg), rocephin (25µg),  
 116 ciprofloxacin (10µg), Nitrofurantin (20µg), streptomycin (30µg), erythromycin (10µg),  
 117 gentamycin (10µg), septrin (30µg), chloramphenicol (25µg), perfloxacin (10µg), and ofloxacin  
 118 (30µg) and antibiotics resistance was interpreted by diameter of inhibition zones around  
 119 the antibiotic discs (Jorgensen and Ferraro, 2009).

Comment [E9]: ??? Are you using his result?

120  
121  
122

## RESULTS

123 Table 1: zone of inhibition of aqueous extract of *Bryophyllum pinnatum* (mm) against bacterial  
 124 isolates

Comment [E10]: Where is the CONTROL?  
 You are performing the experiment without control?  
 The susceptibility pattern may be known, but you have to check it in your own system  
 In such experiment, control should be any antibiotic. Disked impregnated with antibiotics are commercially available. Plain disks may be soaked in liquid antibiotic to prepare control.  
 But you did nothing!

Test organisms	Concentrations (mg/ml)				
	100	50	25	12.5	6.25
<i>S. pneumonia</i>	9.33±0.33	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0
<i>B. subtilis</i>	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0
<i>P. aeruginosa</i>	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0
<i>E. coli</i>	10.50±0.50	9.80±0.76	9.2±0.17	0.0±0.0	0.0±0.0
<i>S. aureus</i>	10.33±0.89	10.0±0.29	9.3±0.33	0.0±0.0	0.0±0.0

125 The zones of inhibition (mm) of aqueous extract of *Bryophyllum pinnatum* against bacterial  
 126 isolates is shown on table 1. No antimicrobial activity of aqueous extract against *Bacillus subtilis*  
 127 and *Pseudomonas aeruginosa* while a low antibacterial activity was observed against  
 128 *Streptococcus pneumoniae* (100mg/ml). High antibacterial activity was observed against  
 129 *Escherichia coli* and *Staphylococcus aureus* at concentration of 25mg/ml.

130 Table 2: zone of inhibition of ethanolic extract of *Bryophyllum pinnatum* (mm) against bacterial  
 131 isolates

Comment [E11]: Where is the CONTROL?  
 The susceptibility pattern may be known, but you have to check it in your own system.  
 You are performing the experiment without control?  
 In such experiment, control should be any antibiotic. Disked impregnated with antibiotics are commercially available. Plain disks may be soaked in liquid antibiotic to prepare control.  
 But you did nothing!

Test organisms	Concentration (mg/ml)				
	100	50	25	12.5	6.25
<i>S. pneumoniae</i>	14.33±0.33	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0
<i>B. subtilis</i>	12.00±0.58	0.0±0.0	0.0±0.0	0.0±0.0	0.0±0.0
<i>P. aeruginosa</i>	19.33±0.33	16.83±0.44	16.5±1.25	0.0±0.0	0.0±0.0
<i>E. coli</i>	19.00±0.58	15.33±0.33	14.33±0.33	11.33±0.33	10.67±0.67
<i>S. aureus</i>	13.33±0.88	12.50±0.29	11.33±0.33	10.83±0.44	9.50±0.28

Comment [E12]: The effects may be due to the Ethyl Alcohol present in the solution.  
 In such experiments, the diluents (here- Ethyl alcohol) is also tested as another control to exclude the effect of the diluents.

132 Antibacterial activity of the ethanolic extract of *B. pinnatum* on the bacteria isolates is shown in  
 133 table 2 with the lowest activity observed against *Streptococcus pneumoniae* and *Bacillus subtilis*  
 134 at 100mg/ml. A slightly higher antimicrobial activity was observed on *Pseudomonas aeruginosa*  
 135 at 25mg/ml while the highest was observed on *Escherichia coli* and *Staphylococcus aureus* at  
 136 6.25mg/ml.  
 137

138 Table 3: Minimum inhibitory concentration and Minimum bactericidal concentration of ethanolic  
 139 and aqueous extract of *Bryophylum pinnatum*

Test organisms	MIC(mg/ml)		MBC (mg/ml)	
	Ethanol	Aqueous	Ethanol	Aqueous
<i>E. coli</i>	6.25	25	25	50
<i>S. aureus</i>	6.25	25	25	50
<i>P. aeruginosa</i>	25	ND	50	ND
<i>B. subtilis</i>	100	ND	ND	ND
<i>S. pneumonia</i>	100	100	ND	ND

140 KEY

141 ND- Not determined

142 The minimum inhibitory concentration (MIC) of ethanolic extract against bacterial isolates is  
 143 shown in table 3 and they ranged from 6.25-100mg/ml while that of aqueous extract ranged from  
 144 25-100mg/ml. Minimum bactericidal concentration (MBC) of ethanolic ranged from 25-  
 145 50mg/ml and that of aqueous extract was 50mg/ml.  
 146  
 147

148 Table 7: Antibiotic susceptibility pattern of bacterial isolates

Gram +ve	CPX	St	SXT	E	PEF	CN	APX	Z	AM	Ro	MDR
<i>Streptococcus pneumoniae</i>	S	S	S	R	S	R	R	S	R	S	0.4
<i>Bacillus subtilis</i>	S	R	S	S	R	S	S	S	R	S	0.3
<i>Staphylococcus aureus</i>	R	S	S	R	S	S	R	S	R	S	0.4
Gram -ve	CH	SP	AU	OFX	SXT	PEF	AM	St	CN	CPX	
<i>Pseudomonas aeruginosa</i>	R	S	R	S	R	S	R	S	S	S	0.4
<i>Escherichia coli</i>	S	R	R	R	S	R	S	S	R	S	0.5

**Comment [E13]:** VERY MUCH DOUBTFUL RESULT!  
 If any extract fail to show any noticeable effect at agar well test, HOW can it show effects in MIC tests?  
 It required 100 mg/ml to show a little effect in Well diffusion and having MIC at 25 mg/ml concentration?

**Comment [E14]:** What is the source of these data?  
 Simple name of the university is not acceptable. You have to add detail regarding such data.

149 **KEY:** CPX-Ciprofloxacin, Ro-Rocephin, St-Streptomycin, AU-Augmentin, SXT-Septrin, SP-  
150 Sparfloxacin, E-Erythromycin, CH-Chloramphenicol, PEF-Pefloxacin, CPX- ciprofloxacin,  
151 CN-Gentamicin, APX-Ampiclox, AM-Amoxicillin, Z-Zinnace.

152

## DISCUSSION

153 The antibacterial properties of plants in general have been attributed to the presence of  
154 phytochemicals such as flavonoid, alkaloids, tannins, saponins and terpenes, in plants.  
155 Flavonoids are known to be synthesized by plants in response to microbial attack. Their activity  
156 is probably due to their ability to react with extracellular and soluble proteins and to complex  
157 with bacterial cell walls leading to the death of the bacterium (Okwu and Nnamdi, 2011).  
158 Tannins are also reported to have various physiological effects like anti-irritant, antisecretolytic,  
159 antiphlogistic, antimicrobial and antiparasitic effects. Phyto-therapeutically, tannin containing  
160 plants are used to treat non-specific diarrhoea, inflammations of mouth and throat and slightly  
161 injured skins (Mudi and Ibrahim, 2008)). This study revealed moderate *in vitro* antibacterial  
162 activity against test bacterial isolates at higher concentrations while at lower concentrations  
163 ranging from 25.0 to 6.25mg/ml, no inhibition zone was observed. The test bacterial isolates  
164 exhibited variation in their susceptibility to *B. pinnatum* extract. The lower susceptibility  
165 observed at lower concentrations could be due to inability of the extract to permeate the cell wall  
166 of the organisms or possession of drug inactivating enzymes mediated by plasmid or  
167 chromosomes on the bacterium.

168 Minimal antibacterial activity was observed against bacterial isolates in the aqueous extract.  
169 Mean zone diameter of inhibition ranged from  $9.20\pm 0.17$ - $10.50\pm 0.50$ mm and  $9.30\pm 0.33$ -  
170  $10.33\pm 0.89$ mm against *Escherichia coli* and *Staphylococcus aureus* respectively at 25-  
171 100mg/ml. At lower concentrations, there were no zones of inhibition recorded.

172 In the ethanol extract, mean zone of inhibition ranged from  $9.50\pm 0.28$ - $13.33\pm 0.88$ mm and  
173  $10.67\pm 0.67$ - $19.00\pm 0.58$ mm at concentration range of 6.25-100mg/ml. Higher antibacterial  
174 activities were observed at higher concentration compared to lower concentrations of the ethanol  
175 extract. It was observed that the antibacterial activity of the plant extract was dependent on the  
176 solvent used for extraction and also on the concentration of the extract used. Plants have been  
177 reported to be vast repertoire of bioactive phytochemical compound. These compounds which  
178 include flavonoids, alkaloids, tannins etc., are usually responsible for the various biologic  
179 properties of the plant, including antimicrobial and other medicinal properties. It has been  
180 reported that organic solvent such as ethanol, usually extract more of the bioactive  
181 phytochemical component of the plant compared to aqueous solvent, hence the reason for higher  
182 antibacterial activity in the ethanolic fraction of the leaf extract ( Ufelle *et al.*, 2011).

183 Minimum inhibitory concentrations of ethanol extract ranged from 6.25- 50mg/ml against  
184 bacteria. While those of aqueous extract ranged from 25-100 mg/ml against bacteria. Minimum  
185 bactericidal concentrations of ethanol extract ranged from 25-50 mg/ml. While in the aqueous  
186 extract, value was 50mg/ml.

187 Antibiotics sensitivity of the bacterial isolates revealed multidrug resistance of the bacterial  
188 pathogens. *Escherichia coli* had the highest multidrug resistance index (0.5) while *Bacillus*  
189 *subtilis* had the lowest (0.3).

190 **Conclusion**

191 This work has shown that *Bryophyllum pinnatum* ethanol and aqueous extracts have potent  
192 antimicrobial activities against multidrug resistant clinical bacterial isolates. The antibacterial  
193 activity was observed to be dependent on the solvent for extraction and concentration of the  
194 extract used.

Comment [E15]:

Comment [E16]: Where it is proved?  
Not in your experiment, I think.

## 195 Competing Interests

196 All authors have declared that no competing interests exist.

197

## 198 REFERENCES

199 Abdulazeed AA, Hassan AO, Adewole AA and Fadairo JK. Synergistic effect of combined  
200 extract of *Bryophyllum pinnatum* and *Aloe barbadensis* enhances antimicrobial activity *in-vitro*.  
201 *Global Advanced Research Journal of Medicine and Medical Science* 2014; 3(1): 26-32.

202 Akinyemi KO, Oladapo O, Okwara CE, Ibe CC and Fasura KA. Screening of crude extracts of  
203 six medicinal plants used in Southwest Nigerian unorthodox medicine for anti-methicillin  
204 resistant *Staphylococcus aureus* activity. *BMC Complementary and Alternative Medicine* 2005;  
205 5: 6-13

206 Gupta R, Lohani M and Arora S. Anti-Inflammatory activity of the leaf extracts/fractions of  
207 *Bryophyllum pinnatum* Saliv. *International Journal of Pharmaceutical Sciences Review and*  
208 *Research* 2010; 3 (1): 1-3.

209 Iwu MW. New antimicrobials of plant origin. **In:** Perspectives on new crops and their uses.  
210 Janick, J. (ed). ASHS Press, Alexandria, Virginia. 1999; p457- 462

211 Mann A, Amupitan JO, Oyewale AO, Okogun JI and Ibrahim K. Antimicrobial activity and  
212 phytochemical analysis of two Nigerian medicinal plant used for treatment of respiratory  
213 diseases. A paper presented at the 5<sup>th</sup> ChemClass conference, Ahmadu Bello University, Zaria.  
214 2007.

215 Mudi SY and Ibrahim H. Activity of *Bryophyllum pinnatum* s. kurz extracts on respiratory tract  
216 pathogenic bacteria. *Bayero Journal of Pure and Applied Sciences* 2008; 1(1): 43 – 48.

217 Nwali BU, Okaka ANC, Ibiam UA and Aja PM. Phytochemical composition of *Bryophyllum*  
218 *pinnatum* leaves. *International Journal of Advanced Biological Research* 2012; 2(4): 614-616.

219 Ojewole JAO. Antinociceptive, anti-inflammatory and anti-diabetic effects of *Bryophyllum*  
220 *pinnatum* (Crassulaceae) leaf aqueous extract. *Journal of Ethnopharmacology* 2005; 99:13-19

221 Okwu DE and Josiah C. Evaluation of the chemical composition of two Nigerian medicinal  
222 plants. *African Journal of Biotechnology* 2006; 5(4):357-361

223 Okwu DE and Nnamdi FU. Two novel flavonoids from *Bryophyllum pinnatum* and their  
224 antimicrobial activity. *Pharmaceutical Chemistry Journal* 2011; 3(2):1-10.

225 Ufelle SA, Ukaejiofo EO, Neboh EE, Achukwu PU, Ghasi S, Ikekpeazu EJ and Maduka IC. The  
226 effect of crude methanolic leaf extract of *Bryophyllum pinnatum* on some haematological  
227 parameters in Wistar rats. *Asian Journal of Medical Sciences* 2011; 3(3): 121-124.

228

UNDER PEER REVIEW