# เอกสารอ้างอิง

- (1) World Heatlh Organization. World Heath Statistics 2008. <a href="http://www.who.int/entity/whosis/whostat/EN\_WHS08\_Full\_pdf">http://www.who.int/entity/whosis/whostat/EN\_WHS08\_Full.pdf</a>

  1) World Heatlh Organization. World Heath Statistics 2008. <a href="http://www.who.int/entity/whosis/whostat/EN\_WHS08\_Full.pdf">http://www.who.int/entity/whosis/whostat/EN\_WHS08\_Full.pdf</a>
- (2) Murray CJ, Lopez AD. Alternative projections of mortality and disability by cause 1990-2020: Global Burden of Disease Study. Lancet 1997 May 24;349(9064):1498-504.
- (3) Yusuf S, Reddy S, Ounpuu S, Anand S. Global burden of cardiovascular diseases: part I: general considerations, the epidemiologic transition, risk factors, and impact of urbanization. Circulation 2001 Nov 27;104(22):2746-53.
- (4) Ounpuu S, Anand S, Yusuf S. The impending global epidemic of cardiovascular diseases. Eur Heart J 2000 Jun;21(11):880-3.
- (5) Unal B, Critchley JA, Capewell S. Explaining the decline in coronary heart disease mortality in England and Wales between 1981 and 2000. Circulation 2004 Mar 9;109(9):1101-7.
- (6) Levy D, Thom TJ. Death rates from coronary disease--progress and a puzzling paradox. N Engl J Med 1998 Sep 24;339(13):915-7.
- (7) Porapakkham Y, Rao C, Pattaraarchachai J, Polprasert W, Vos T, Adair T, et al. Estimated causes of death in Thailand, 2005: implications for health policy. Popul Health Metr 2010 May 18;8(1):14.
- (8) Polprasert W, Rao C, Adair T, Pattaraarchachai J, Porapakkham Y, Lopez AD. Cause-of-death ascertainment for deaths that occur outside hospitals in Thailand: application of verbal autopsy methods. Popul Health Metr 2010 May 18;8(1):13.

- (9) Pattaraarchachai J, Rao C, Polprasert W, Porapakkham Y, Pao-In W,
   Singwerathum N, et al. Cause-specific mortality patterns among hospital deaths in Thailand: validating routine death certification. Popul Health Metr 2010 May 18;8(1):12.
  - (10) Rao C, Porapakkham Y, Pattaraarchachai J, Polprasert W, Swampunyalert N, Lopez AD. Verifying causes of death in Thailand: rationale and methods for empirical investigation. Popul Health Metr 2010 May 18;8(1):11.
  - (11) Libby P. Molecular bases of the acute coronary syndromes. Circulation 1995 Jun 1;91(11):2844-50.
  - (12) Braunwald E. Evolution of the management of acute myocardial infarction: a 20th century saga. Lancet 1998 Nov 28;352(9142):1771-4.
  - (13) Maulik G, Cordis GA, Das DK. Oxidative damage to myocardial proteins and DNA during ischemia and reperfusion. Ann N Y Acad Sci 1996 Sep 30;793:431-6.
  - (14) Chi NC, Karliner JS. Molecular determinants of responses to myocardial ischemia/reperfusion injury: focus on hypoxia-inducible and heat shock factors. Cardiovasc Res 2004 Feb 15;61(3):437-47.
  - (15) Kutala VK, Khan M, Mandal R, Ganesan LP, Tridandapani S, Kalai T, et al. Attenuation of myocardial ischemia-reperfusion injury by trimetazidine derivatives functionalized with antioxidant properties. J Pharmacol Exp Ther 2006 Jun;317(3):921-8.
  - (16) Sahna E, Parlakpinar H, Turkoz Y, Acet A. Protective effects of melatonin on myocardial ischemia/reperfusion induced infarct size and oxidative changes. Physiol Res 2005;54(5):491-5.

- (17) Pombo CM, Bonventre JV, Avruch J, Woodgett JR, Kyriakis JM, Force T. The stress-activated protein kinases are major c-Jun amino-terminal kinases activated by ischemia and reperfusion. J Biol Chem 1994 Oct 21;269(42):26546-51.
  - (18) Aleshin A, Sawa Y, Ono M, Funatsu T, Miyagawa S, Matsuda H. Myocardial protective effect of FR167653; a novel cytokine inhibitor in ischemic-reperfused rat heart. Eur J Cardiothorac Surg 2004 Nov;26(5):974-80.
  - (19) Gao F, Yue TL, Shi DW, Christopher TA, Lopez BL, Ohlstein EH, et al. p38 MAPK inhibition reduces myocardial reperfusion injury via inhibition of endothelial adhesion molecule expression and blockade of PMN accumulation. Cardiovasc Res 2002 Feb 1;53(2):414-22.
  - (20) Whittaker R, Glassy MS, Gude N, Sussman MA, Gottlieb RA, Glembotski CC. Kinetics of the translocation and phosphorylation of alphaB-crystallin in mouse heart mitochondria during ex vivo ischemia. Am J Physiol Heart Circ Physiol 2009 May;296(5):H1633-H1642.
  - (21) Zhuang S, Demirs JT, Kochevar IE. p38 mitogen-activated protein kinase mediates bid cleavage, mitochondrial dysfunction, and caspase-3 activation during apoptosis induced by singlet oxygen but not by hydrogen peroxide. J Biol Chem 2000 Aug 25;275(34):25939-48.
  - (22) Borutaite V. AMPK, MAPK and Bax in the heart: some questions answered. Biochem J 2008 Jun 1;412(2):e15-e16.
  - (23) Barancik M, Htun P, Strohm C, Kilian S, Schaper W. Inhibition of the cardiac p38-MAPK pathway by SB203580 delays ischemic cell death. J Cardiovasc Pharmacol 2000 Mar;35(3):474-83.



- (24) Capano M, Crompton M. Bax translocates to mitochondria of heart cells during simulated ischaemia: involvement of AMP-activated and p38 mitogen-activated protein kinases. Biochem J 2006 Apr 1;395(1):57-64.
- (25) Clanachan AS, Jaswal JS, Gandhi M, Bottorff DA, Coughlin J, Finegan BA, et al. Effects of inhibition of myocardial extracellular-responsive kinase and P38 mitogen-activated protein kinase on mechanical function of rat hearts after prolonged hypothermic ischemia. Transplantation 2003 Jan 27;75(2):173-80.
- (26) Gorog DA, Tanno M, Cao X, Bellahcene M, Bassi R, Kabir AM, et al. Inhibition of p38 MAPK activity fails to attenuate contractile dysfunction in a mouse model of low-flow ischemia. Cardiovasc Res 2004 Jan 1;61(1):123-31.
- (27) Gysembergh A, Simkhovich BZ, Kloner RA, Przyklenk K. p38 MAPK activity is not increased early during sustained coronary artery occlusion in preconditioned versus control rabbit heart. J Mol Cell Cardiol 2001 Apr;33(4):681-90.
- (28) Khan M, Varadharaj S, Ganesan LP, Shobha JC, Naidu MU, Parinandi NL, et al. C-phycocyanin protects against ischemia-reperfusion injury of heart through involvement of p38 MAPK and ERK signaling. Am J Physiol Heart Circ Physiol 2006 May;290(5):H2136-H2145.
- (29) Kim JK, Pedram A, Razandi M, Levin ER. Estrogen prevents cardiomyocyte apoptosis through inhibition of reactive oxygen species and differential regulation of p38 kinase isoforms. J Biol Chem 2006 Mar 10;281(10):6760-7.
- (30) Koike N, Takeyoshi I, Ohki S, Tokumine M, Matsumoto K, Morishita Y. Effects of adding P38 mitogen-activated protein-kinase inhibitor to celsior solution in canine heart transplantation from non-heart-beating donors. Transplantation 2004 Jan 27;77(2):286-92.

- (31) Ma XL, Kumar S, Gao F, Louden CS, Lopez BL, Christopher TA, et al. Inhibition of p38 mitogen-activated protein kinase decreases cardiomyocyte apoptosis and improves cardiac function after myocardial ischemia and reperfusion. Circulation 1999 Apr 6;99(13):1685-91.
- (32) Mackay K, Mochly-Rosen D. An inhibitor of p38 mitogen-activated protein kinase protects neonatal cardiac myocytes from ischemia. J Biol Chem 1999 Mar 5;274(10):6272-9.
- (33) Mackay K, Mochly-Rosen D. Involvement of a p38 mitogen-activated protein kinase phosphatase in protecting neonatal rat cardiac myocytes from ischemia. J Mol Cell Cardiol 2000 Aug;32(8):1585-8.
- (34) Marais E, Genade S, Huisamen B, Strijdom JG, Moolman JA, Lochner A. Activation of p38 MAPK induced by a multi-cycle ischaemic preconditioning protocol is associated with attenuated p38 MAPK activity during sustained ischaemia and reperfusion. J Mol Cell Cardiol 2001 Apr;33(4):769-78.
- (35) Martin JL, Avkiran M, Quinlan RA, Cohen P, Marber MS. Antiischemic effects of SB203580 are mediated through the inhibition of p38alpha mitogen-activated protein kinase: Evidence from ectopic expression of an inhibition-resistant kinase. Circ Res 2001 Oct 26;89(9):750-2.
- (36) Meldrum DR, Dinarello CA, Cleveland JC, Jr., Cain BS, Shames BD, Meng X, et al. Hydrogen peroxide induces tumor necrosis factor alpha-mediated cardiac injury by a P38 mitogen-activated protein kinase-dependent mechanism. Surgery 1998 Aug;124(2):291-6.
- (37) Nagarkatti DS, Sha'afi RI. Role of p38 MAP kinase in myocardial stress. J Mol Cell Cardiol 1998 Aug;30(8):1651-64.

- (38) Rakhit RD, Kabir AN, Mockridge JW, Saurin A, Marber MS. Role of G proteins and modulation of p38 MAPK activation in the protection by nitric oxide against ischemia-reoxygenation injury. Biochem Biophys Res Commun 2001 Sep 7;286(5):995-1002.
  - (39) Sanada S, Kitakaze M, Papst PJ, Hatanaka K, Asanuma H, Aki T, et al. Role of phasic dynamism of p38 mitogen-activated protein kinase activation in ischemic preconditioning of the canine heart. Circ Res 2001 Feb 2;88(2):175-80.
  - (40) Saurin AT, Martin JL, Heads RJ, Foley C, Mockridge JW, Wright MJ, et al. The role of differential activation of p38-mitogen-activated protein kinase in preconditioned ventricular myocytes. FASEB J 2000 Nov;14(14):2237-46.
  - (41) Schneider S, Chen W, Hou J, Steenbergen C, Murphy E. Inhibition of p38 MAPK alpha/beta reduces ischemic injury and does not block protective effects of preconditioning. Am J Physiol Heart Circ Physiol 2001 Feb;280(2):H499-H508.
  - (42) Sharov VG, Todor A, Suzuki G, Morita H, Tanhehco EJ, Sabbah HN. Hypoxia, angiotensin-II, and norepinephrine mediated apoptosis is stimulus specific in canine failed cardiomyocytes: a role for p38 MAPK, Fas-L and cyclin D1. Eur J Heart Fail 2003 Mar;5(2):121-9.
  - (43) Tanno M, Bassi R, Gorog DA, Saurin AT, Jiang J, Heads RJ, et al. Diverse mechanisms of myocardial p38 mitogen-activated protein kinase activation: evidence for MKK-independent activation by a TAB1-associated mechanism contributing to injury during myocardial ischemia. Circ Res 2003 Aug 8;93(3):254-61.
  - (44) Wang M, Tsai BM, Turrentine MW, Mahomed Y, Brown JW, Meldrum DR. p38 mitogen activated protein kinase mediates both death signaling and functional depression in the heart. Ann Thorac Surg 2005 Dec;80(6):2235-41.

- (45) Wang M, Tsai BM, Reiger KM, Brown JW, Meldrum DR. 17-beta-Estradiol decreases p38 MAPK-mediated myocardial inflammation and dysfunction following acute ischemia. J Mol Cell Cardiol 2006 Feb;40(2):205-12.
- (46) Xing H, Zhang S, Weinheimer C, Kovacs A, Muslin AJ. 14-3-3 proteins block apoptosis and differentially regulate MAPK cascades. EMBO J 2000 Feb 1;19(3):349-58.
- (47) Yada M, Shimamoto A, Hampton CR, Chong AJ, Takayama H, Rothnie CL, et al. FR167653 diminishes infarct size in a murine model of myocardial ischemia-reperfusion injury. J Thorac Cardiovasc Surg 2004 Oct;128(4):588-94.
- (48) Yue TL, Wang C, Gu JL, Ma XL, Kumar S, Lee JC, et al. Inhibition of extracellular signal-regulated kinase enhances Ischemia/Reoxygenation-induced apoptosis in cultured cardiac myocytes and exaggerates reperfusion injury in isolated perfused heart. Circ Res 2000 Mar 31;86(6):692-9.
- (49) Kaiser RA, Bueno OF, Lips DJ, Doevendans PA, Jones F, Kimball TF, et al. Targeted inhibition of p38 mitogen-activated protein kinase antagonizes cardiac injury and cell death following ischemia-reperfusion in vivo. J Biol Chem 2004 Apr 9;279(15):15524-30.
- (50) Otsu K, Yamashita N, Nishida K, Hirotani S, Yamaguchi O, Watanabe T, et al. Disruption of a single copy of the p38alpha MAP kinase gene leads to cardioprotection against ischemia-reperfusion. Biochem Biophys Res Commun 2003 Feb 28;302(1):56-60.
- (51) Cook SA, Sugden PH, Clerk A. Activation of c-Jun N-terminal kinases and p38-mitogen-activated protein kinases in human heart failure secondary to ischaemic heart disease. J Mol Cell Cardiol 1999 Aug;31(8):1429-34.

- (52) Corbucci GG, Perrino C, Donato G, Ricchi A, Lettieri B, Troncone G, et al. Transient and reversible deoxyribonucleic acid damage in human left ventricle under controlled ischemia and reperfusion. J Am Coll Cardiol 2004 Jun 2;43(11):1992-9.
- (53) Cahill MA, Peter ME, Kischkel FC, Chinnaiyan AM, Dixit VM, Krammer PH, et al. CD95 (APO-1/Fas) induces activation of SAP kinases downstream of ICE-like proteases. Oncogene 1996 Nov 21;13(10):2087-96.
- (54) Force T, Kuida K, Namchuk M, Parang K, Kyriakis JM. Inhibitors of protein kinase signaling pathways: emerging therapies for cardiovascular disease. Circulation 2004 Mar 16;109(10):1196-205.
- (55) เสริมศรี วินิจฉัยกุล. กฤษณา. In: นันทวรรณ บุญยะประภัศร, อรนุช โชคชัยเจริญพร, editors. สมุนไพร ไม้ พื้นบ้าน(1).กรุงเทพมหานคร: ประชาชน; 2541. p. 135-7.
- (56) Kim YC, Lee EH, Lee YM, Kim HK, Song BK, Lee EJ, et al. Effect of the aqueous extract of Aquilaria agallocha stems on the immediate hypersensitivity reactions. J Ethnopharmacol 1997 Sep;58(1):31-8.
- (57) Okugawa H, Ueda R, Matsumoto K, Kawanishi K, Kato A. Effects of agarwood extracts on the central nervous system in mice. Planta Med 1993 Feb;59(1):32-6.
- (58) Manasi Dash, Jayanta Kumar Patra, Prasanna Priyadarshini Panda. Phytochemical and antimicrobial screening of extracts of *Aquilaria agallocha Roxb*. African Journal of Biotechnology 2008 Oct 20;7(20):3531-4.
- (59) Gunasekera SP, Kinghorn AD, Cordell GA, Farnsworth NR. Plant anticancer agents. XIX Constituents of Aquilaria malaccensis. J Nat Prod 1981 Sep;44(5):569-72.

- (60) Zhou M, Wang H, Suolangjiba, Kou J, Yu B. Antinociceptive and antiinflammatory activities of Aquilaria sinensis (Lour.) Gilg. Leaves extract. J Ethnopharmacol 2008 May 8;117(2):345-50.
- (61) Chitre T, Bhutada P, Nandakumar K, Somani R, Miniyar P, Mundhada Y, et al. Analgesic and anti-inflammatory activity of heartwood of *Aquilaria agallocha* in laboratory animals. Pharmacologyonline 2007;1:288-98.
- (62) Miniyar PB, Chitre TS, Karve SS, Deuskar HJ, Jain KS. Anti-oxidant activity of ethyl acetate extract of *Aquilaria agallocha* on nitrite-induced methemoglobin formation. International Journal of Green Pharmacy 2008 Mar;2(1):43-4.
- (63) Suvitayavat W, Tunlert S, Thirawarapan SS, Kitpati C, Bunyapraphatsara N. Actions of Ya-hom, a herbal drug combination, on isolated rat aortic ring and atrial contractions. Phytomedicine 2005 Aug;12(8):561-9.
- (64) Suvitayavat W, Tunglert S, Thirawarapan SS, Bunyapraphatsara N. Effects of Ya-hom on blood pressure in rats. J Ethnopharmacol 2005 Mar 21:97(3):503-8.
- (65) Suvitayavat W, Kodchawongs J, Thirawarapan SS, Bunyapraphatsara N. Effects of Ya-hom on the gastric secretion in rats. J Ethnopharmacol 2004 Oct;94(2-3):331-8.
- (66) BENBASSAT J, SULMAN FG, ZAITSCHEK DV. The mechanism of the hypotensive effect of Lignum aloes. Arch Int Pharmacodyn Ther 1959 Jun 1;120(2):141-51.
- (67) Miniyar P.B., Chitre T.S., Karve S.S., Deuskar H.J., Jain K.S. Anti-oxidant activity of ethyl acetate extract of *Aquilaria agallocha* on nitrite-induced methemoglobin formation. International Journal of Green Pharmacy 2008 Mar;2(1):43-4.

An in vitro anti-ischemic effect of Aquilaria crassna in isolated adult rat ventricular myocytes subjected to simulated ischemia

Short running title: An in vitro anti-ischemic effect of Agarwood

Sarawut Kumphune<sup>a,b\*</sup>, Panadda Jermsri<sup>a,b</sup>, Nitchawat Paiyabhroma<sup>a,b</sup>,

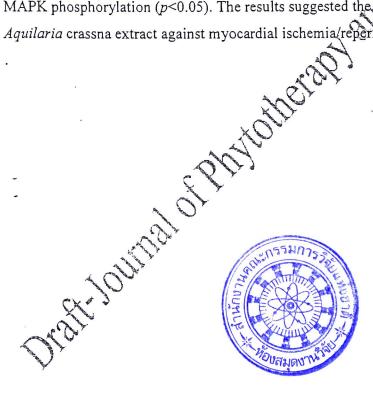
<sup>a</sup> Biomedical Research Unit in Cardiovascular Sciences (BRUCS), Health Sciences Narcourt II. Health Sciences, Naresuan University, Phitsanulok 65000, Thailand St. John C. Phytotherap <sup>b</sup>Department of Medical Technology, Faculty of Allied Health Sciences, Naresuan University, Phitsanulok 65000, Thailand

vords: Aquilaria crassna; Myocardial Ischemia; Myocardial Infarct; p38 MAPK

<sup>\*</sup> Corresponding author at: Biomedical Research Unit in Cardiovascular Sciences (BRUCS) and Department of Medical Technology, Faculty of Allied Health Sciences, Naresuan University, Phitsanulok, 65000, Thailand. Tel.: +66(0)83-960 6006; Fax: +66(0) 55 966 300 E-mail address: sarawutk@nu.ac.th

#### Abstract

To investigate the effect of ethyl acetate of Aquilaria crassana crude extract on simulated ischemia-induced cardiac cell injury, mechanism on p38 MAPK activation, in isolated Adult Rat Ventricular Myocytes (ARVMs), so as to provide some evidence for its traditional use. The ARVMs were isolated from 6-8 weeks male Wistar rat by collagenase-based enzymatic digestion and maintained in cell culture system. ARVMs were subjected to 3 hrs simulated ischemia/reperfusion, in the presence and absence of various concentrations of the extract. The cellular injury and viability were determined. Cells were pre-treated with 5 mg/ml of Aquilaria extract for 1 hour before, or at the beginning of 40 minutes simulated ischemia. Activation of p38 MAPK was measured by Western blot analysis. The results showed that 3 hr of simulated ischemia was significantly produced cellular injury and cell death, which was significantly inhibited when treated with 5 mg/ml ethyl acetate extract of Aquilaria crassna (p<0.05). Treatment 5 mg/ml of Aquilaria extract significantly reduced ischemia-induced p38 MAPK phosphorylation (p<0.05). The results suggested the eardioprotective effect of Aquilaria crassna extract against myocardial ischemia/reperfusion injury.



#### 1. Introduction

The pathophysiology of myocardial ischemia is happened when the coronary artery is occluded and lead to insufficiency of the oxygen supply to the heart, and finally progresses to cellular necrosis (Jennings and Reimer 1991). Currently, the most efficient way to reduce aggravation of the disease is to achieve rapid reperfusion (Clark et al. 2007). However, the reperfusion also known to aggravate cardiac cell injury and finally result in cardiomyocytes necro-apoptosis (Gottlieb et al. 1994). The cellular damage according to ischemia and reperfusion is referred to ischemia/reperfusion injury. Therefore, any way capable of slow down the rate of ischemia/reperfusion injury are likely to save many lives(Braunwald 1996). It has been known that myocardial ischemia/reperfusion injury is a strong stimulant of some key signaling pathway, particularly p38 MAPK (Barancik et al. 2000; Cuenda and Rousseau 2007; Gorog et al. 2004; Nagarkatti and Sha'afi 1998; Tanno et al. 2003). Evidences in preclinical investigation indicated that inhibition of p38 activation could reduce myocardial injury, suggesting the therapeutic potential of p38 inhibitors in ischemic heart disease (Kumphune et al. 2012)

Aquilaria crassna Pierre ex Leconde or agarwood is heartwood of tropical tree belongs to the family Thymelacaceae and class Magnoliosida (Dash et al. 2008), which can be found in many Asian countries (Dash, Patra, & Panda 2008;Kim et al. 1997;Miniyar et al. 2008). This plant is known to be useful in traditional medical treatment for many inflammatory diseases and also found to be used in treatment of cardiac disorders (Miniyar, Chitre, Karve, Deuskar, & Jain 2008). Interestingly, in Thailand, A crassna extract has been using as one of the major ingredients in Yahom, a traditional Thai herbal formulation for the treatment of fainting by increasing blood pressure (Suvitayavat et al. 2005), suggested the cardiovascular targeting effect of this plant. Recently, our previous experiments on the ethyl acetate extract of A. crassna suggested the potent anti-inflammatory effect inhibiting tumor necrosis factor alpha (TNF-α) expression by attenuating p38 MAPK activation (Kumphune et al. 11 A.D.). Recently, we reported that A. crassna extract could reduce cell death in cardiac myoblast cell line, H9c2, induced simulated ischemia by inhibiting p38 MAPK activation (Jermsri et.al. 2012 Article In press) and also preserve actin

cytoskeleton organization (Jermsri et.al. 2012 Article In press). Therefore, in the present study, we aim to investigate the anti-ischemic effect of A. crassna crude extract in more relevant in vitro model of isolated Adult Rat Ventricular Myocytes (ARVMs) in attempt to provide closer cardiac cell model.

#### 2. Materials and methods

#### 2.1 Plant Material and extraction

Aquilaria crassna Pierre ex Lecomte used in this experiment was obtained from Mr. Choosak Rerngrattanabhume. The plant was originally cultivated at the area in Pong Nam Ron district, Chantaburi province, Thailand and subsequently identified by Dr. Pranee Nangngam, department of biology, faculty of science, Naresuan University. The specimen voucher number 002540 was kept at department of biology herbarium, faculty of science, Naresuan University. The heartwood was sliced into small pieces. The dried plant (1Kg) was consecutively extracted with ethyl acetate (ethyl acetate) (800 ml reflux) for two days each. The resulting ethyl acetate solution was concentrated under reduced pressure to yield Ethyl acetate extract (250mg) (Kumphune, Prompun, Phaebuaw, Sriudwong, Pankla, & Thongyoo, 17 A.D.).

# 2.2 Chemicals and Reagents

All basic chemicals were purchased from Sigma (Sigma, St.Louis, MO, USA). M199 medium and fetal bovine serum (FBS) (Gibco BRL, Life Technologies, Inc., New York, USA). 3-(4,5-dimethyl-2-thiazol)-2,5- diphenyl-2*H*-tetrazolium bromide (MTT, Amereseo, USA.); For SDS-PAGE and Western blot analysis, the 30% polyacrylamide gel was from Biorad, polyvinylidenedifluoride (PVDF) membrane was from GE Healthcare Life science.. The Antibodies recognizing the dual phospho-Thr180/Tyr182 form of p38 MAPK and total p38 MAPK were from Santa Cruz Biotech. Enhanced Chemiluminsecence (ECL) and hyperfilm were from GE Healthcare Life science.

### 2.3 Isolation of Adult Rat Ventricular Myocytes(ARVM) and culture

Ventricular myocytes were isolated from the hearts of adult male Wistar rats (200-250 g by collagenase-based enzymatic digestion using an adaptation of the method (Kumphune et al. 2010). Hearts were excised and initially perfused for 5 min with modified Krebs solution (solution A) containing 130 mM NaCl, 4.5 mM KCl, 1.4 mM MgCl<sub>2</sub>, 0.4 mM NaH<sub>2</sub>PO<sub>4</sub>, 0.75 mM CaCl<sub>2</sub>, 4.2 mM HEPES, 20 mM taurine, 10 mM creatine and 10 mM glucose, pH 7.3 at 37°C). Heart were then perfused with calcium-free solution containing 100 μM EGTA for 4 min, followed by perfusion with solution A containing 100 μM CaCl<sub>2</sub> and 1 mg/ml Worthington type II collagenase for 8 min. The ventricles were then cut into small pieces, which were incubated in 10 ml of collagenase solution gassed with 100% O<sub>2</sub> for a further 7 min at 37°C, with regular triturating. Isolated myocytes were separated from undigested ventricular tissue by filtering through cell strainer. Then isolated myocytes were allowed to settle into a loose pellet and the supernatant was removed and replaced with solution A containing 1% BSA and 500 μM CaCl<sub>2</sub>. The isolated myocytes were then allowed to settle and the superhatant was removed and replaced with 10 ml of solution A containing 1 mM CaCl2. The cell pellet was washed at room temperature with M199 culture medium-containing 100 IU/ml penicillin/streptomycin. The myocytes were resuspended in modified M199 containing 2 mM creatine, 2 mM carnitine, and 5 mM taurine, and then seeded on pre-laminin coated 6-well plates (15 μg/ml laminin) and allowed to adhere for 1 hour in an incubator (37°C, 5% CO<sub>2</sub>). The culture medium was replaced with fresh modified M199 medium, prior to further experiments

# 2.4 Simulated Ischemia protocol

Simulated ischemia (sI) was induced by incubating H9c2 cell with specified modified Krebs-Henseleit buffer (137 mM NaCl, 3.8 mM KCl, 0.49 mM MgCl<sub>2</sub>, 0.9 mM CaCl<sub>2</sub>, and 4.0 mM HEPES) with 20 mM 2-deoxyglucose, 20 mM sodium lactate, and 1 mM sodium dithionite at pH 6.5. Control buffer composed of Krebs-Henseleit buffer (137 mM NaCl, 3.8 mM KCl, 0.49 mM MgCl<sub>2</sub>, 0.9 mM CaCl<sub>2</sub>, and 4.0 mM HEPES), supplemented with 20 mM D-glucose, 1 mM sodium pyruvate. After simulate ischemia was achieved, the ischemic buffer or control buffer were removed and the cells were subjected to reperfusion by the addition of 2 ml complete medium before further incubating at 37°C, 5% CO<sub>2</sub> for 24 hours.

# 2.5 Determination of Cell Viability

The measurement of ARVMs viability was performed by the reduction of MTT (3-[4,5-dimethylthiazol-2-yl]-2,5-diphenyltetrazolium bromide) by mitochondrial reductase. At the end of reperfusion period, the medium was collected for lactate dehydrogenase (LDH) activity. Cells were incubated with 0.01 g/ml MTT for 2 hours at 37°C. Then, 1 ml of 0.04 M HCl in isopropanol was added to each well. The converted dye was collected and the optical density was determined spectrophotometrically at  $\lambda$  570 nm with background subtraction at  $\lambda$ Pharmaci Cell viability was calculated as a percentage of control.

## 2.6 Determination of cellular injury

The cellular injury of ARVMs was measured based on the extracellular release of lactate dehydrogenase (LDH), according to the loss of plasma membrane integrity. The enzyme-kinetic measurement of LDH activity [LDH liquiUV test (Human, Wiesbaden, Germany)] was performed (in the supernatant of collected culture medium, after simulated ischemia/reperfusion, using a commercially available kit. Ten microlitter of collected culture medium was added to 1 ml of reaction reagent, and incubated at 37°C for 1 minute. The absorbance was measured at λ 340 nm exactly after (1,5), and 3 min. The mean absorbance change per minute (ΔA/min) was used to calculate LDH activity.

# nt of p38 MAPK activation by western blot analysis

Cells were washed twice in ice-cold PBS, before addition of 200 µl of 2x SDS-sample buffer, containing β-mercaptoethanol. Cells were scraped and the samples were taken and transferred to the new pre-cooled micro-centrifuge tubes. The samples were boiled for 10 min and stored at -80°C before analysis. The extract proteins were separated on 12% SDS-polyacrylamide gels; transferred to polyvinylidenedifluoride (PVDF) membranes, which were blocked for 1 h with 5% nonfat milk + 1% bovine serum albumin in Tris-buffered saline (pH 7.4) containing 0.1% Triton X-100; and probed overnight at 4 °C with the appropriate primary antibody as follows: total p38, diphosphop38, from Santa Cruz Biotechnology. After washing and exposure for 1 h at room temperature to horseradish peroxidase-conjugated secondary antibody, antibody-antigen complexes were visualized by enhanced chemiluminescence. Bands corresponding to the detected protein of interest were developed by autoradiographic method. The films were scanned and all band densities were quantified and compared providing information on relative abundance of the protein of interest.

# 2.8 Statistic analysis

All values are expressed as Mean ± S.D. All comparisons involving more than one group were assessed for significance using one-way analysis of variance (ANOVA), followed when appropriate by the Tukey post hoc. test. A statistical value of less than 0.05 was considered significant. were assessed for significance using one-way analysis of variance (ANOVA), followed

#### 3. Results and discussion

3.1 Simulate ischemia induce cell death and injury

The isolated ARVMs were exposed to ischemic buffer from 10 min to 180 min. The percentages of cell viability and LDH release were measured to assess the optimal condition for simulated ischemia protocol. The results showed that incubation of ARVMs with ischemic buffer for first 30 min was not cause cell death, compared to control. Incubation with ischemic buffer for 60 min to 180 min significantly reduced cell viability. The results also showed that exposure to ischemic buffer for 180 min reduced cell viability greater than 50% (Figure 1a). The release LDH activity represented cellular injury according to simulate ischemia showed that the increasing in the period of simulated ischemia enhanced the released LDH activity (Figure 1b). The duration of simulated ischemia 30-180 min showed significantly increased in released LDH activity. Therefore, simulated ischemia for 180 min was an optimal condition used in all simulated ischemia experiments for determining cell viability.

3.2 The ethyl acetate extract of Aquilaria crassna extract reduced simulate ischemia induced cell injury and death in isolated Adult Rat Ventricular Myocytes.

The effect of ethyl acetate extract of A. crassna (A.E.; Aquilaria Extract) to reduce ischemia induced cardiac cell death was performed by pre-incubation of various concentrations. 1-10 mg/ml of the ethyl acetate extract of A. crassna prior to 180 min of simulated ischemia. Pre-treatment with vehicle (0.01% DMSO) for 1 hr did not increase the cell viability of the ARVMs. Pre-treatment with 1-4 mg/ml of the ethyl acetate extract of A. crassna prior to simulated ischemia slightly, but not significantly, increased cell viability. The ethyl acetate extract of A. crassna at 5-7 mg/ml significantly prevent ischemic induced cell death. The results showed that 5 mg/ml of the Ethyl acetate extract of A. crassna gave highest percentage of cell viability to 90.51  $\pm$  6.056 %, while the extract at 6 mg/ml and 7 mg/ml gave the percentage of cell viability to 88.75  $\pm$  5.709 % and 85.75  $\pm$  2.918 %, respectively (Figure 2a). However, increasing in concentration of the extract 8-10 mg/ml failed to protect the ARVMs from cell death. Moreover, pre-treatment of H9c2 cell with 2-9 mg/ml of ethyl acetate extract of

A. crassna 1 hr prior to simulate ischemia significantly reduced released LDH activity (Figure 2b), However, the concentration of the extract greater at 5 mg/ml was the lowest concentration that gave the lowest released LDH activity. These results suggested that 5 mg/ml ethyl acetate extract of A. crassna was the optimal concentration to reduce cardiac cell injury and death.

We also tested whether the reduction of cell death and cell necrosis, when treated with the extracts, observed in our findings, was not due to the toxicity of the extract (Figure 3). In non simulate ischemic condition, pre-incubation of ARVMs with various concentrations, 1-10 mg/ml, of the *Aquilaria* extract did not significantly reduce cell viability, suggesting non toxic effect of the extract to the cells.

with various concentrations, 1-10 mg/ml, of the Aquilaria extract did not significantly reduce cell viability, suggesting non toxic effect of the extract to the cells.

3.3 The ethyl acetate extract of Aquilaria crassna reduced Adult Rat Ventricular Myocytes cell injury and death by attenuating p38 MAPK activation

Myocardial ischemia is a potent stimulant of p38 MAPK activation, which accelerates injury. Therefore, we hypothesized that the reduction of cell death, according to simulated ischemia, by the ethyl acetate extract of A. crassna, possibly resulted from an attenuation of p38 MAPK activation. To facilitate this hypothesis, cells were subjected to simulated ischemia, in the presence and absence of 5 mg/ml of the ethyl acetate extract of A. crassna. The results showed that simulated ischemia significantly enhanced p38 MAPK phosphorylation. Treatment of 5 mg/ml of the ethyl acetate extract of A. crassna, either 1 hour pre-treatment prior to 40 min simulated ischemia and for the whole period of experiment (pretreatment + during simulated ischemia), significantly inhibited p38 MAPK phosphorylation (Figure 4). These results suggested the effect of ethyl acetate extract of A. crassna could inhibit activation of p38 MAPK. Interestingly, treatment of the extract A. crassna could inhibit activation of p38 MAPK. Interestingly, treatment of the extra at the onset of simulated ischemia failed to reduced p38 MAPK phosphorylation.

#### 4. Discussion

The major findings of this manuscript demonstrate the *in vitro* anti-ischemic effect of the ethyl acetate extract of *Aquilaria crassna* in isolated Adult Rat Ventricular Myocytes (ARVMs) subjected to simulated ischemia. According to *Aquilaria crassna* has been used in many traditional therapeutic purposes and found to be one of major composition in traditional Thai herbal formulation that targeting cardiovascular system. Recently, we demonstrated that the ethyl acetate extract of *According to April Ap* 

In the present study, we demonstrated that in vitro treatment of 5 mg/ml of the Aquilaria extract prior to ischemia could protect the ARVMs from ischemic injury. This result was consistent with our finding in other cardiac cell model of adult rat cardiac myoblast cell line, H9c2 (Jermsri et all 2012 in press). In addition, with the similar concentration of the same extract also showed the cardiac protective effect in an ex vivo model of isolated murine heart perfused on Langendorff perfusion system (Suwannasing et al., 2012 in press). The results from these studies were demonstrated the cardiac protective effect of Aquilaria extract in the similar mechanism, by which the Aquilaria extract, could inhibit myocardial ischemia-induced p38 MAPK phosphorylation. The inhibitory effect of the extract on p38 activation was clearly seen either prior to ischemia or both of pre-treat and during ischemia. However, the anti-ischemic effect of this plant extract on other MAPKs need to be further investigated, in attempt to avoid the non-specificity or so called "off-target" effect.

Interestingly, it seem that the plant extract itself could possibly used without causing adverse effects to the heart cells according to exposure of the extract with most effective concentration was not cause cellular toxicity. However, the sensitivity and toxicity of the extracts, in other different tissues or organs, need to be further investigated.

In our hands, this is the first evidence showing the anti-ischemic effect of this plant extract, which was demonstrated in an *in vitro* model of primary culture of

isolated murine cardiomyocytes. However, the our experiments still have some limitations and weak points, as it may not closely related to real physiological response to myocardial ischemia in the intact heart. Therefore, the more relevant models, of an in vivo experiment in animal model, will provide some functional data, which is close to the real physiological event in the heart and could be lead to more reliable interpretation. Moreover, this report was performed using the crude extract, so identification of active compounds, together with its therapeutic applications, is a challenge and needs to be further investigated.

## 5. Conclusion

In conclusion, treatment of the Ethyl acetate extract of Aguilaria crassna exerted significant cardioprotective effect in simulated ischemia model. The ethyl acetate extract of Aquilaria crassna was found to reduced cell injury and cell death, by attenuating p38 MAPK phosphorylation. significant cardioprotective effect in simulated ischemia model. The ethyl acetate

# Acknowledgements

This work was supported by National Research Council of Thailand and Naresuan University Research Fund R2555B042 (to S.K. and T.M.), and graduate student research scholarship, Faculty of Allied Health Sciences, Naresuan University (to P.J).

Draft-Journal of Phytotherapy and Pharmacology

#### References

- BARANCIK, M., HTUN, P., STROHM, C., KILIAN, S. & SCHAPER, W. (2000) Inhibition of the cardiac p38-MAPK pathway by SB203580 delays ischemic cell death. *J.Cardiovasc.Pharmacol.*, 35, (3) 474-483.
- BRAUNWALD, E. (1996) Acute myocardial infarction--the value of being prepared. *N.Engl.J.Med.*, 334, (1) 51-52.
- CLARK, J. E., SARAFRAZ, N. & MARBER, M. S. (2007) Potential of p38-MAPK inhibitors in the treatment of ischaemic heart disease. *Pharmacol. Ther.*, 116, (2) 192-206.
- CUENDA, A. & ROUSSEAU, S. (2007) p38 MAP-kinases pathway regulation, function and role in human diseases. *Biochim.Biophys.Acta*, 1773, (8) 1358-1375.
- DASH, M., PATRA, J. K. & PANDA, P. P. (2008) Phytochemical and antimicrobial screening of extracts of Aquilaria agallocha Roxb. African Journal of Biotechnology, 7, (20) 3531-3534.
- GOROG, D. A., TANNO, M., CAO, X., BELLAHCENE, M., BASSI, R., KABIR, A. M., DIGHE, K., QUINLAN, R. A. & MARBER, M. S. (2004) Inhibition of p38 MAPK activity fails to attenuate contractile dysfunction in a mouse model of low-flow ischemia. *Cardiovasc.Res.*, 61, (1) 123-131.
- GOTTLIEB, R. A., BURLESON, K. O., KLONER, R. A., BABIOR, B. M. & ENGLER, R. L. (1994) Reperfusion injury induces apoptosis in rabbit cardiomyocytes. *J. Clin. Invest*, 94, (4) 1621-1628.
- JENNINGS, R. B. & REIMER, K. A. (1991) The cell biology of acute myocardial ischemia. Annu. Rev. Med., 42, 225-246.
- KIM, Y. C., LEE, E. H., LEE, Y. M., KIM, H. K., SONG, B. K., LEE, E. J. & KIM, H. M. (1997) Effect of the aqueous extract of Aquilaria agallocha stems on the immediate hypersensitivity reactions. *J. Ethnopharmacol.*, 58, (1) 31-38.
- KUMPHUNE, S., BASSI, R., JACQUET, S., SICARD, P., CLARK, J. E., VERMA, S., AVKIRAN, M., O'KEEFE, S. J. & MARBER, M. S. (2010) A chemical genetic approach reveals that p38alpha MAPK activation by diphosphorylation aggravates myocardial infarction and is prevented by the direct binding of SB203580. *J Biol. Chem.*, 285, (5) 2968-2975.
- KUMPHUNE, S., CHATTIPAKORN, S. & CHATTIPAKORN, N. (2012) Role of p38 inhibition in cardiac ischemia/reperfusion injury. *Eur.J Clin Pharmacol.*, 68, (5) 513-524.
- KUMPHUNE, S., PROMPUN, E., PHAEBUAW, K., SRIUDWONG, P., PANKLA, R. & THONGYOO, P. (11 A.D.) Anti-inflammatory effects of the ethyl acetate extract of *Aquilaria crassna* inhibits LPS-induced tumour necrosis factor-alpha production by attenuating P38 MAPK activation. *International journal of green pharmacy*, 5, (1) 43-48.

MINIYAR, P. B., CHITRE, T. S., KARVE, S. S., DEUSKAR, H. J. & JAIN, K. S. (2008) Anti-oxidant activity of ethyl acetate extract of Aquilaria agallocha on nitrite-induced methemoglobin formation. International Journal of Green Pharmacy, 2, (1) 43-44.

NAGARKATTI, D. S. & SHA'AFI, R. I. (1998) Role of p38 MAP kinase in myocardial stress. J.Mol.Cell Cardiol., 30, (8) 1651-1664.

SUVITAYAVAT, W., TUNGLERT, S., THIRAWARAPAN, S. S. & BUNYAPRAPHATSARA, N. (2005) Effects of Ya-hom on blood pressure in rats. J.Ethnopharmacol., 97, (3) 503-508.

TANNO, M., BASSI, R., GOROG, D. A., SAURIN, A. T., JIANG, J., HEADS, R. MARTIN, J. L., DAVIS, R. J., FLAVELL, R. A. & MARBER, M. S. (2003) Diversion mechanisms of myocardial p38 mitogen-activated protein kinase activation: evidence for MKK-independent activation by a TAB1-associated mechanism contributing to mjury during myocardial ischemia. Circ. Res., 93, (3) 254-261. MARTIN, J. L., DAVIS, R. J., FLAVELL, R. A. & MARBER, M. S. (2003) Diverse mechanisms of myocardial p38 mitogen-activated protein kinase activation: evidence for

# Figure legends

Figure 1. Optimization of simulated ischemia protocol. Cells were incubated with ischemic buffer for various periods of incubation times, e.g, 10 min, 30 min, 60 min, 120 min, and 180 min. (A) Percentage of cell viability by MTT assay. (B) The released lactate dehydrogenase activity (U/L). Each bar graph represents means ± S.D. for 3 experiments. \* p < 0.05 vs untreated group (ANOVA).

Figure 2. Effect of Aquilaria extract on cell viability and cell injury. Cells were subjected to 120 minutes simulated ischemia in the presence and absences of 1-10 mg/ml ethyl acetate extract of Aquilaria crassna, pre-treatment. (A) Percentage of cell viability by MTT assay. (B) The released lactate dehydrogenase activity (U/L). Each bar graph represents mean  $\pm$  S.D. for 3 experiments. \* p < 0.05 vs simulated ischemic group (ANOVA), # p < 0.05 vs among treated groups (ANOVA).

Figure 3. Effect of Aquilaria extract on cell viability. Cells were cultured in the presence of 1-10 mg/ml ethyl acetate extract of Aquilaria for 24 hours. Each bar graph represents mean ± S.D. of % viability by MTT assay.

Figure 4. Effect of Aquilaria extract on ischemia-induced p38 MAPK activation. Western blot analysis of phosphorylated p38 MAPK from Adult Rat Ventricular Myocytes (ARVMs) subjected to 40 minutes simulated ischemia, in the presence and absence of 5 mg/ml Aquilaria extract. Each bar graph represents fold phosphorylation of p38 MAPK. \* p < 0.05 vs vehicle control of each group (ANOVA, n=3).

Figure 1.

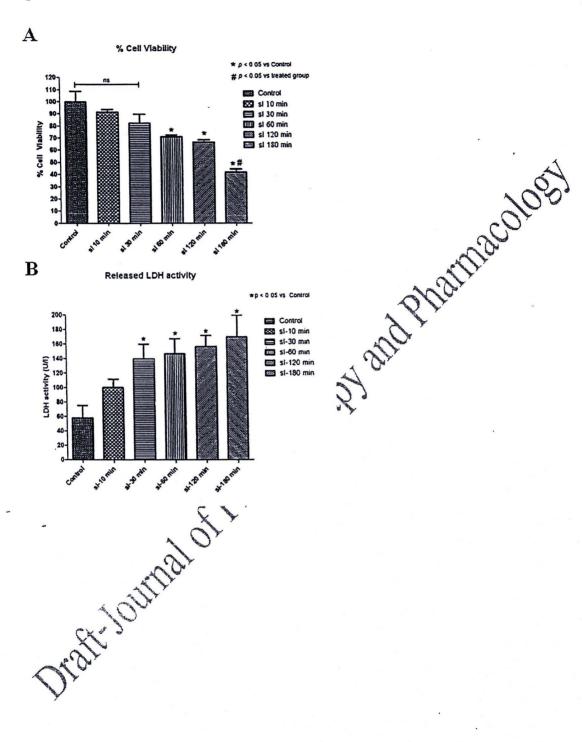


Figure 2.

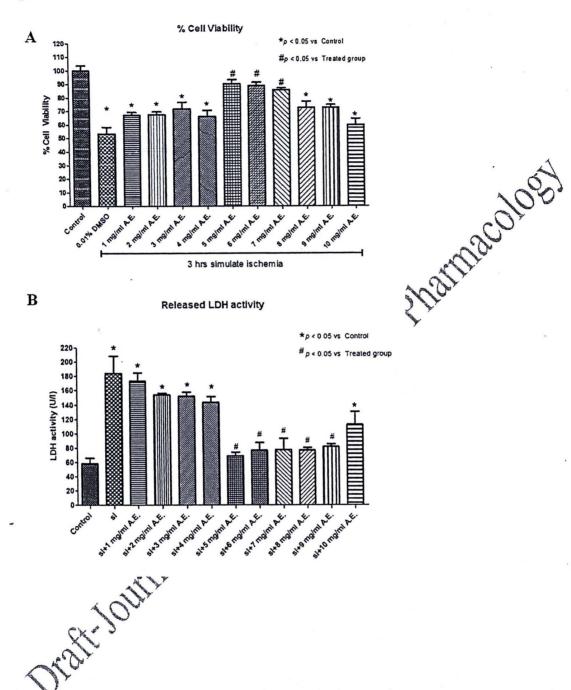


Figure 3.

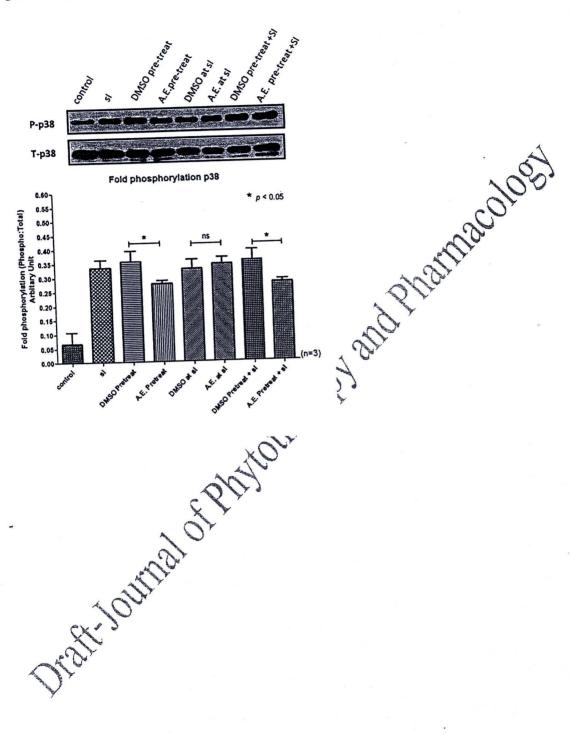
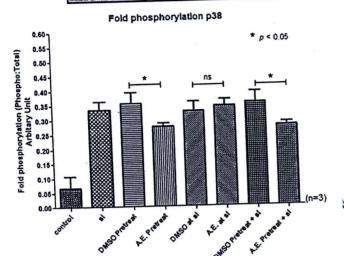


Figure 4.





and phannacology.

Or all of Diliting of Diliting of District of District

