

Anti-inflammatory, analgesic and antipyretic properties of ethanolic extracts of three plants of Benin pharmacopoeia: *Euphorbia hirta*, *Citrus aurantifolia* and *Heterotis rotundifolia*

Oladélé Gautier ROKO

Universite d'Abomey-Calavi

Victorien Tamègnon DOUGNON (✉ victorien88@hotmail.com)

Universite d'Abomey-Calavi <https://orcid.org/0000-0001-9047-7299>

Jean Robert KLOTUE

Universite d'Abomey-Calavi

Lamine BABA-MOUSSA

Universite d'Abomey-Calavi

Research note

Keywords: *Euphorbia hirta*, *Citrus aurantifolia*, *Heterotis rotundifolia*, anti-inflammatory, analgesic, antipyretic.

Posted Date: October 14th, 2019

DOI: <https://doi.org/10.21203/rs.2.16006/v1>

License: © ⓘ This work is licensed under a Creative Commons Attribution 4.0 International License.

[Read Full License](#)

Abstract

Objective *Euphorbia hirta*, *Citrus aurantifolia* and *Heterotis rotundifolia* are commonly used in Benin in the treatment of infectious diseases. The aim of this study is to evaluate the anti-inflammatory, analgesic and antipyretic properties of ethanolic extracts of these plants. The study was performed on wistar rats with 200 mg/kg b.w. Results Administration of these extracts prevents edema inflammatory induced by 2% formalin in rat paw. Inhibition percentages of edema vary between 23.67% and 86.76% for the three extracts. These extracts have similar anti-inflammatory activity ($p > 0.05$) to that of diclofenac at 50 mg/kg. Analgesic activity show that these extracts inhibit very significantly ($p < 0.001$) the pain induced by 3% acetic acid and the highest inhibition percentage is 60.34% (*Citrus aurantifolia*). This percentage is like to that of acetylsalicylic acid (67.35%) administered at the same dose. Likewise, these extracts attenuate significantly ($p < 0.05$) the thermal pain induced by tail immersion of each rat in hot water at 50°C. Indeed, these extracts, reduces very significantly ($p < 0.001$) pyrexia induced by 20% beer yeast suspension in rats and they have similar effect ($p > 0.05$) to that of acetylsalicylic acid at the fourth hour. These results prove, some traditional therapeutic indications of these plants.

Background

Inflammation is a reaction implemented by organism whenever its morphological and biological constants are threatened [1]. It may have an infectious origin or caused by physical or chemical agent [2]. Usually, inflammatory response is a beneficial process. Its purpose is to eliminate the pathogen and repair tissue damage. However, inflammation can be harmful, because of the aggressiveness of the pathogen, its persistence, by abnormal regulation of the inflammatory process, or by quantitative or qualitative abnormalities of cells involved in inflammation [3]. It can be manifested by various symptoms such as edema, pain and heat usually accompanied by fever.

Nowadays, anti-inflammatory and/or analgesic potential molecules are used in the treatment of inflammatory diseases. They are steroidal and non-steroidal anti-inflammatory drugs [4,5]. These molecules, despite their efficiencies, most often have side effects, which can cause other annoyances as a result of prolonged use [6,7]. Indeed, the use of phytochemicals compound is useful and without side effects [8]. Besides, herbal medicine has been used for centuries to treat several diseases. Thus, herbal teas, decoctions, macerations, infusions and plasters are used successfully [9].

In the rich and diverse Benin flora, *Euphorbia hirta*, *Citrus aurantifolia*, and *Heterotis rotundifolia* are known and used as having effects on conditions that cause inflammatory reactions [10,11]. Especially that inflammation and pain are a common feature of many diseases [12]. Due to the wide use of these plants in traditional medicine, their extracts have been the subject of several phytochemical studies. The richness of these plants in polyphenols and flavonoids gives them several pharmacological activities [13]. Nevertheless, very few studies have focused on their anti-inflammatory activity. That's why this study has the aim to evaluate anti-inflammatory, analgesic and antipyretic properties of the ethanolic extracts

of these plants (*Euphorbia hirta*, *Citrus aurantifolia*, *Heterotis rotundifolia*). The results of this study can be used to enhance and improve their use.

Methods

Animals used

Male and female Wistar rats having 8 to 12 weeks old and weighing between 100 and 150 g were used. These animals came from the Applied Biomedical Sciences Institute of University of Abomey-Calavi. These animals were acclimatized to the conditions of the animal house for a week before experiments.

Plants used

The whole plants of *Euphorbia hirta* (*E. hirta*) and *Heterotis rotundifolia* (*H. rotundifolia*) and the leaves of *Citrus aurantifolia* (*C. aurantifolia*) were used. They were harvested and confirmed at the national herbarium of University of Abomey-Calavi. These plants were dried and powdered in laboratory. The powders were used to make ethanolic extracts.

Ethanolic extracts preparation

The ethanolic extracts are obtained by maceration of 50 g of powder of each plant in 500 ml of 96% ethanol for 48 h with continuous stirring. The mixture was then filtered twice on hydrophilic cotton and once on N°1 Whatman paper before being concentrated in rotavapor at 50°C. The concentrates were deposited in an oven at 50°C until obtained a dry mass which constitutes the ethanolic extract [14].

In vivo anti-inflammatory activity of extracts

The method used here has been inspired by that of Sy et al. [15] with some modifications. Thus, 5 groups of 6 rats each were formed and fasted 15 hours before experimentation. The treatment was done orally as follows :

- The first animals group were used as controls and they received only physiological water at 1 ml/100 g body weight (b.w.) ;
- The second animals group were used as a reference and they received diclofenac at 50 mg/kg b.w ;
- The other three animal's groups received ethanolic extracts of *hirta* (EE-Eh), *C. aurantifolia* (EE-Ca) and *H. rotundifolia* (EE-Hr) at 200 mg/kg b.w. respectively.

One hour after treatments, 0.1 ml of 2% formalin solution was injected into each rat under foot pad of the right hind paw. The paw diameter at the arch was measured every hour until fifth hour. Edema increase (EAP) and inhibition (EIP) percentages were calculated from the following formulas:

$$EAP = \frac{Dt - Do}{Dt} \times 100$$

Where Dt: Mean diameter of the right hind paw at time t; Do: Mean diameter of the right hind paw at time 0 (before treatment).

$$EIP = \frac{(EAP)_{control\ group} - (EAP)_{treated\ group}}{(EAP)_{control\ group}} \times 100$$

Analgesic activity of extracts

Writhing test

The method proposed by Koster et al. [16] and taken over by Sy et al. [15] was used. Thus, 5 groups of 6 rats each were formed and treated in the same way as before. But the reference animals group used here received acetylsalicylic acid (ASA) at 200 mg/kg b.w. Thirty minutes after treatments, 0.1 ml of 3% acetic acid solution was injected intraperitoneally to all rats and the twisting for each rat was counted over 30 minutes. Cramping inhibition percentage (CIP) was calculated according formula :

$$CIP = \frac{TCc - TCt}{TCc} \times 100$$

Where TCc : Mean of twisting count of control group ; TCt : Mean of twisting count of treated groups

Tail immersion method

To evaluate analgesic effect of extracts by this approach, the method described by Gbenou et al. [17] was used with some modifications. The rats were arranged and treated as in the writhing test. Thirty minutes after treatments, the tail of each animal was immersed in hot water at 50°C and the reaction time was recorded.

Antipyretic effect of extracts

Pyrexia was induced in 5 groups of 6 rats each with a 20% beer yeast suspension. 24 hours after this induction, rats that showed an increase in temperature were treated with extracts and ASA as described above. The anal temperature of each rat was recorded every hour for 4 hours [18]. Pyrexia inhibition percentage (PIP) was calculated according formula :

$$PIP = \frac{(T^{\circ}t - T^{\circ}o)_{control\ group} - (T^{\circ}t - T^{\circ}o)_{treated\ group}}{(T^{\circ}t - T^{\circ}o)_{control\ group}} \times 100$$

Where $T^{\circ}o$: Temperature before pyrexia induction ; $T^{\circ}t$: Temperature after pyrexia induction and treatment at time t

Euthanasia

At the end of the experiments, all rats were euthanized in a specially designed enclosure. Euthanasia by inhalation of CO_2 with progressive filling (80%) of the enclosure was used under ethics committee control.

Statistical data processing

GraphPad Prism 7 software was used to perform graphs and statistical analyzes. A comparison of mean was made with analysis of variances (ANOVA) followed by tukey's multiple comparison test. The differences are considered significant if p -value < 0.05 and very significant if p -value < 0.001.

Results

Figure 1 show, percentages of edema increase (a) and inhibition (b) of right hind paw of rats. The extracts prevent very significantly ($p < 0.001$) from third to fifth hour edema in rats compared to Control. This prevention is similar to that of rats treated with Diclofenac at the same time intervals. The increase percentages of edema are steady (between 45.72 and 49.95%) in control rats, whereas in treated rats (Diclofenac and Extracts), these percentages decrease from the first to the fifth hour (Figure 1a). We also note that the inhibition percentages of edema increase with time and there is no significant difference ($p > 0.05$) between the anti-inflammatory effect of extracts at 200 mg/kg and that of Diclofenac at 50 mg/kg from first to fifth hour. However, the highest inhibition percentage of inflammatory edema were observed at the fifth hour in all treated rats. So we have: 79.80%, 86.75%, 83.07% and 87.94% respectively for *E. hirta*, *C. aurantifolia*, *H. rotundifolia* and Diclofenac (Figure 1b).

Table 1 and Figure S1 show analgesic activity of extracts. The administration of ASA and extracts has very significantly ($p < 0.001$) prevented pain to the rats. Which's noted by a clear decrease twisting count in treated rats (Extracts and ASA). Inhibition percentages ranges from 35.39% to 60.34% in extracts-treated rats (Table 1). The reaction time is 4.66 seconds in control rats after immersion of their tail in hot water at 50°C. This time has significantly ($p < 0,05$) increased and ranges from 10.66 to 14 seconds in rats treated with extracts (Figure S1).

Figure 2 show, the evolution of temperature of control and treated rats (a) and Pyrexia inhibition percentages (b). In control rats, the temperature remained high (between 38.43°C and 39.06°C) while in treated rats (ASA and extracts) there was a decrease until the fourth hour when it was very significant ($p < 0.001$) compared to the control (Figure 2a). Indeed, pyrexia inhibition percentages vary between 70.89% and 80.61% for extracts-treated rats at fourth hour. These percentages are similar ($p > 0.05$) to that of the ASA at the same hour.

Discussion

After injection of formalin to animals, inflammatory reaction was almost immediate with appearance of classic signs of acute local inflammation (redness, pain, heat and edema) at the five experimental groups. This inflammatory reaction occurs in two phases. The first phase occurs between 0 and 2 hours after injection of phlogogenic agent and the second phase, initiated after two hours extending to the fifth hour and even beyond [19, 20].

The extracts, at 200 mg/kg, have edema inhibition percentages similar ($p > 0.05$) to that of the standard (diclofenac) in the second phase of the inflammatory process (Figure 1). Many studies have reported that diclofenac acts at the 2nd phase of inflammation, by inhibiting prostaglandins releasing through Cyclooxygenase (COX2) inhibition [21, 22]. It can therefore be deduced that the extracts at 200 mg/kg would have acted in the same way as the diclofenac. Indeed, the anti-inflammatory activity of plants is often attributed to secondary metabolites. Dougnon et al. [13] had revealed polyphenols and flavonoids presence in the ethanolic extracts of plants studied. In addition, several studies have already shown the anti-inflammatory properties of bioactive molecules belonging to the flavonoid family [23, 24, 25].

The highest edema inhibition percentages of extracts of these plants are 79.80% (EE-Eh), 86.75% (EE-Ca) and 83.07% (EE-Hr) obtained at fifth hour. These percentages are greater than 67.17% obtained with aqueous extract of *Elaeis guineensis* at 500 mg/ml in Sene et al. [26] studies. On the other hand, they are less than 98% and 90% obtained respectively with aqueous extracts of *Sterculia setigera* and the mixture *Aframomum melegueta-Citrus aurantifolia* at 1500 mg/kg in Gbénou et al. [17] studies. The difference observed between results of this study and those of aforementioned authors, can be explained by the difference at the plants and extracts used as well as the difference in assessed doses.

3% acetic acid injection causes chemical pain in rats, which is manifested by abdominal cramps and twists, through chemical mediators releasing such as bradykinin, serotonin, acetylcholine and prostaglandins. The fact that the extracts inhibits very significantly ($p < 0.001$) this chemical pain such as ASA at 200 mg/kg suggests that these extracts may interfere with these mediators like salicylics. Same observations were made in Uche et al. [27] studies.

Furthermore, animals tail immersion in hot water at 50°C causes tail sudden movement and sometimes an overall animals body retreat in control rats. There was a significant ($p < 0.05$) and very significant ($p < 0.001$) increase in reaction time, respectively in extracts-treated and standard-treated rats (Figure S1). The reaction time varies between 10.66 (EE-Hr) and 14 seconds (EE-Ca) in extracts-treated rats. These times are greater than 4.47 ± 0.19 seconds and 5.48 ± 0.27 seconds obtained by Bose et al. [28] with *Cleome Rutidosperma* ethanolic extract at 200 mg/kg and 400 mg/kg respectively. The inhibition of this type of pain by plants studied extracts, had already been demonstrated with *Paederia sandens* extracts [29].

Indeed, same mediators that cause inflammation and pain often cause fever. This is why antipyretic effect of these extracts has been assessed. The results show that the extracts oppose fever installation

by gradually lowering the temperature in extracts-treated rats. Similar result was obtained with ASA with faster effect. It's therefore possible that extracts inhibits prostaglandins synthesis like ASA [30]. Antipyretic effect observed in this study is similar to that observed by Morabandza et al. [30] in their study with aqueous extracts of stem bark of *Strychnos camptoneura* at different doses.

As a conclusion, *E. hirta*, *C. aurantifolia* and *H. rotundifolia*, have anti-inflammatory, analgesic and antipyretic effects similar to nonsteroidal anti-inflammatory drugs (NSAIDs) such as diclofenac and Acetylsalicylic Acid. Our results confirm and justify the traditional use of these plants in the treatment of various diseases.

Limitations

The current study only investigated *in vivo* anti-inflammatory, analgesic and antipyretic effects of ethanolic extracts of *E. hirta*, *C. aurantifolia* and *H. rotundifolia*. It would be better to complete this study by measuring the mediators (histamine, prostaglandin, interleukins...) involved in these pathologies (before treatments and after observations) and to explore the mechanism of action of these extracts.

Abbreviations

EE-Eh : Ethanolic Extracts of *Euphorbia hirta*

EE-Ca : Ethanolic Extracts of *Citrus aurantifolia*

EE-Hr : Ethanolic Extracts of *Heterotis rotundifolia*

b.w : body weight

EAP : Edema Increase Percent

EIP : Edema Inhibition Percent

Dt : Mean diameter of the right hind paw at time t

Do : Mean diameter of the right hind paw at time 0 (before treatment)

ASA : Acetylsalicylic Acid

CIP : Cramping Inhibition Percent

TCc : Mean of twisting count of control group

TCt : Mean of twisting count of treated groups

PIP : Pyrexia Inhibition Percent

T°o : Temperature before pyrexia induction

T°n : Temperature after pyrexia induction and treatment at time t

NSAIDs : Nonsteroidal Anti-inflammatory Drugs

CO₂: Carbon dioxide

ORG : Oladélé Gautier ROKO

VD : Victorien DOUGNON

JRK : Jean Robert KLOTUE

LB : Lamine BABA-MOUSSA

Declarations

Ethics approval and consent to participate

All the experiments were conducted according to the protocol approved by the ethics committee of the Research Unit in Applied Microbiology and Pharmacology of natural substances-University of Abomey-Calavi (URMAPha-UAC). In addition, all experimentation was carried out in accordance with Act No. 2010-40 of December 08, 2010 on the code of ethics and deontology for health research in the Republic of Benin

Consent for publication

Not Applicable

Availability of data and materials

The datasets used and/or analysed during the current study are available from the corresponding author on reasonable request

Competing interests

The authors declare that they have no competing interests

Funding

This research was carried out through research funding no 487RG/BIO/AF/AC_G-FR3240293303 allocated to the research team by the World Academy of Sciences (TWAS) and the United Nations Educational Organization, science and culture (UNESCO). This research fund allowed us to acquire, the necessary materials/equipments as well as the animals used in this study.

Authors' contributions

VD and LB designed the project and supervised the work. OGR and JRK carry out the experiments, analyzed and interpreted the data. OGR wrote the manuscript. VD and LB edited the manuscript. All authors read and approved this manuscript

Authors' Informations

Oladélé Gautier ROKO, E-mail. Oladele09@yahoo.fr

Victorien DOUGNON, E-mail. victorien88@hotmail.com Jean Robert KLOTTOE E-mail. jrklotoe@yahoo.fr Lamine BABA-MOUSSA, E-mail. laminesaid@yahoo.fr

Acknowledgements

The Authors would like to acknowledge the Research Unit in Applied Microbiology and Pharmacology of natural substances (URMAPha) and the Laboratory of Biology and Molecular Typing in Microbiology (LBTMM). These research units provided adequate framework and materials for experimentation.

References

1. Singla AK, Pathak K. Tropical antiinflammatory effects of *Euphorbia prostrata* on carrageenan-induced foot pat oedema in mice. *Ethnopharmacol.* 1990 ; 29 : 294-291
2. Abena AA, Gbenou JD, Yayi E, Moudachirou M, Ongoka RP, Ouamba JM, Silou T. Comparative chemical and analgesic properties of essential oils of *Cymbopogon nardus* (L) Rendle of Benin and Congo. *J. Trad. Compl. Alt. Med.* 2007 ; 4(3) : 267-272
3. Medzhitov R. Inflammation 2010 : new adventures of an old flame. 2010 ; 140 (6) : 776-771
4. Vane J, Botting R. Inflammation and the mechanism of action of anti-inflammatory drugs. *Faseb J.* 1987 ; 1 : 96-89
5. Rouveix B Rouveix B, Bauwens MC, Giroud JP. Traitement des différents types de douleurs. *B. Acad. Nat. Med.* 1999 ; 183 (5) : 903-889
6. Bauwens M.C., Giroud, J. P. (1999). Traitement des différents types de douleurs. *Bulletin de L'Académie Nationale de Médecine.* 183 (5) : 889-903
7. Risser A, Donovan D, Heintzman J, Page T. NSAID prescribing precautions. *Am Fam Physician.* 2009 ; 80 (12) : 1371-8
8. Henzen C. Traitement aux glucocorticoïdes : risques et effets secondaires. *In Schweiz Med Forum* 2003 ; 19 : 6-442
9. Barnes PJ. Anti-inflammatory actions of glucocorticoids : molecular mechanisms. *Sci.* 1998 ; 94 : 572-557
10. Millogo-Koné H, Asimi S, Guissou IP, Nacoulma OG. Etude de l'activité antimicrobienne d'extraits de *Parkia biglobosa* (JACQ.) BENTH. sur des souches de *Staphylococcus aureus*. *Pharm. Méd. Trad. Afr.*

2008 ; 15 : 5-1

11. Dougnon V, Legba B, Yadouketon A, Agbankpe J, Koudokpon H, Hounmanou G, et al. Utilisation des plantes du Sud-Bénin dans le traitement de la fièvre typhoïde : rôle des herboristes. 2018; 60: 29-20
12. Gairola S, Shama J, Gaur RD, Siddiqui TO, Painuli RM. Plants used for treatment of dysentery and diarrhoea by the Bhoxa community of district Dehradun, Uttarakhand, India. 2013 ; <http://dx.doi.org/10.1016/j.jep.2013.10.007>
13. Prescott SL. Early-life environmental determinants of allergic diseases and the wider pandemic of inflammatory noncommunicable diseases. J Allergy Clin. Immunol. 2013 ; 131 (1) : 30-23
14. Dougnon VT, Klotoé JR, Sènou M, Roko GO, Dougnon G, Fabiyi K, Amadou A, Aniambossou A, Assogba P, Bankolé H, Dougnon J, Baba-Moussa L. Chemical Composition, Cytotoxicity and Antibacterial Activity of Selected Extracts of *Euphorbia hirta*, *Citrus aurantifolia* and *Heterotis rotundifolia* on Enteropathogenic Bacteria. EC Microbiology. 2017; 12 (4): 195-180
15. N'Guessan JD, Bidie AP, Lenta BN, Weniger B, Andre P, Guede-Guina F. *In vitro* assays for bioactivity-guided isolation of anti-*Salmonella* and antioxidant compounds in *Thonningia sanguinea* Afr. J. Biotechnol. 2007; 6: 1689-1685
16. Sy GY, Fall AD, Diatta W, Gueye M, Bassène E, Faye B. Analgesic and anti-inflammatory activity of aqueous root extract of *Cassia sieberiana* C. (*Caesalpinaceae*). Afr J Pharm Pharmacol. 2009 ; 3(12) : 653-651
17. Koster R, Anderson M, De Beer J. Acetic acid for analgesic screening. Fed Proc. 1959 ; 8 : 420-412
18. Gbenou JD, Ahounou JF, Ladouni P, Agbodjogbe WK, Tossou R, Dansou P, Moudachirou M. Propriétés anti-inflammatoires des extraits aqueux de *Sterculia setigera* Delile et du mélange *Aframomum melegueta* Schum – *Citrus aurantifolia* Christm et Panzer. Int. J. Biol. Chem. Sci. 2011 ; 5(2) : 641-634
19. Morabandza CJ, Elion Itou RDG, Etou Ossibi AW, Gombé Assoungou H, Ongoka PR, Ouamba JM, Abena AA. Activités analgésique et antipyrétique de l'extrait aqueux des écorces de tige de *Strychnos camptoneura* Gilg & Busse (*Loganiaceae*). Pharm. Méd. Trad. Afr. 2016 ; 18(1) : 7-1
20. Habib M, Waheed I. Evaluation of anti-nociceptive, anti-inflammatory and antipyretic activities of *Artemisia scoparia* hydromethanolic extract. Ethnopharmacol. 2013 ; 145 : 24-18
21. Ndiaye M, Sy G, Diéye AM, Touré MT, Faye B. Evaluation de l'activité des feuilles de *Annona Réticulata* (Annonaceae) sur l'œdème aigue de la patte de rat induit par la carragenine. Pharm.Med.Trad.afr. 2006 ; 14 : 186-179
22. Talwar S, Nandakumar K, Nayak PG, Bansal P, Mudgal J, Mor V, Rao CM, Lobo R. Anti-inflammatory activity of *Terminalia paniculata* bark extract against acute and chronic inflammation in rats. Ethnopharmacol. 2011 ; 134 : 328-323
23. Alam K, Pathak D, Ansari SH. Evaluation of Anti-inflammatory Activity of *Ammomum subulatum* Fruit Extract. J. Pharm. Sci. Drug Res. 2011 ; 3 : 37-35
24. Hwang JT, Lee YK, Shin JI, Park OJ. Anti-inflammatory and Anticarcinogenic Effect of Genistein Alone or in Combination with Capsaicin in TPA-Treated Rat Mammary Glands or Mammary Cancer

Cell Line. Ann. N. Y. Acad. Sci. 2009 ; 1171 (1) : 420-415

25. Hämäläinen M, Nieminen R, Vuorela P, Heinonen M, Moilanen E. Anti-inflammatory effects of flavonoids : genistein, kaempferol, quercetin, and daidzein inhibit STAT-1 and NF-kappaB activations, whereas flavone, isorhamnetin, naringenin, and pelargonidin inhibit only NF-kappaB activation along with their inhibitory effect on iNOS expression and NO production in activated macrophages. *Mediators Inflamm.* 2007 ; doi :10.1155/2007/45673
26. Xagorari A, Papapetropoulos A, Mauromatis A, Economou M, Fotsis T, Roussos C. Luteolin inhibits an endotoxin-stimulated phosphorylation cascade and proinflammatory cytokine production in macrophages. *J. Pharmacol. Exp. Ther.* 2001 ; 296 (1) : 187-181
27. Sene M, Ndiaye M, Barboza FS, Sene M, Diatta W, Sarr A, Ndiaye-Sy A, Dieye AM., Sy GY. Activité anti-inflammatoire de l'extrait aqueux des feuilles de *Elaeis guineensis* (ARECACEAE) sur l'œdème aigu de la patte de rat induit par la carraghénine. *Int. J. Biol. Chem. Sci.* 2016 ; 10(6) : 2574-2568
28. Uche I, Shorinwa A, Okorie O, Mgbahurike A, Chijioke I. Antinociceptive and anti-inflammatory activities of crude extracts of *Ipomoea involucreta* leave in mice and rats. *Asian Pac. J. Trop. Med.* 2011 ; 8 : 124-121
29. Bose A, Mondal S, Kumar J, Ghosh T, Dash GK, Sudam S. Analgesic, anti-inflammatory and antipyretic activities of the ethanolic extract and its fractions of *Cleome Rutidosperma*. 2007 ; 78 : 520-515
30. Chen YF, Li N, Jiao YL., Wei P, Zhang QY, Rahman K, Zheng HC, Qin LP. Antinociceptive activity of petroleum ether fraction from the MeOH extracts of *Paederia scandens* in mice. 2012 ; 15 : 436-427
31. Vergne P, Bertin P, Trèves R. Aspirine, douleurs et inflammation. *Rev. Med. Interne.* 2000 ; 1 : 96-89

Tables

Table 1: Effect of extracts and ASA on pain induced by 3% acetic acid in rats

	Control	ASA	EE-Eh	EE-Ca	EE-Hr
Twisting Count	41.5 ±3.44	13.5 ±4.4**	23 ±3.79**	16.33 ±3.32**	26,67 ±4,88**
CIP (%)	--	67,35±11,23 ^a	43,97±11,76	60,34±9,01 ^a	35,39±13,06

Legends: EE-Eh: Ethanolic Extracts of *Euphorbia hirta* ; EE-Ca : Ethanolic Extracts of *Citrus aurantifolia* ; EE-Hr : Ethanolic Extracts of *Heterotis rotundifolia* ; ASA : Acetylsalicylic Acid ; CIP : Cramping Inhibition Percentages ; With** : very significant difference with Control ; With **a** : no significant difference between them

Figures

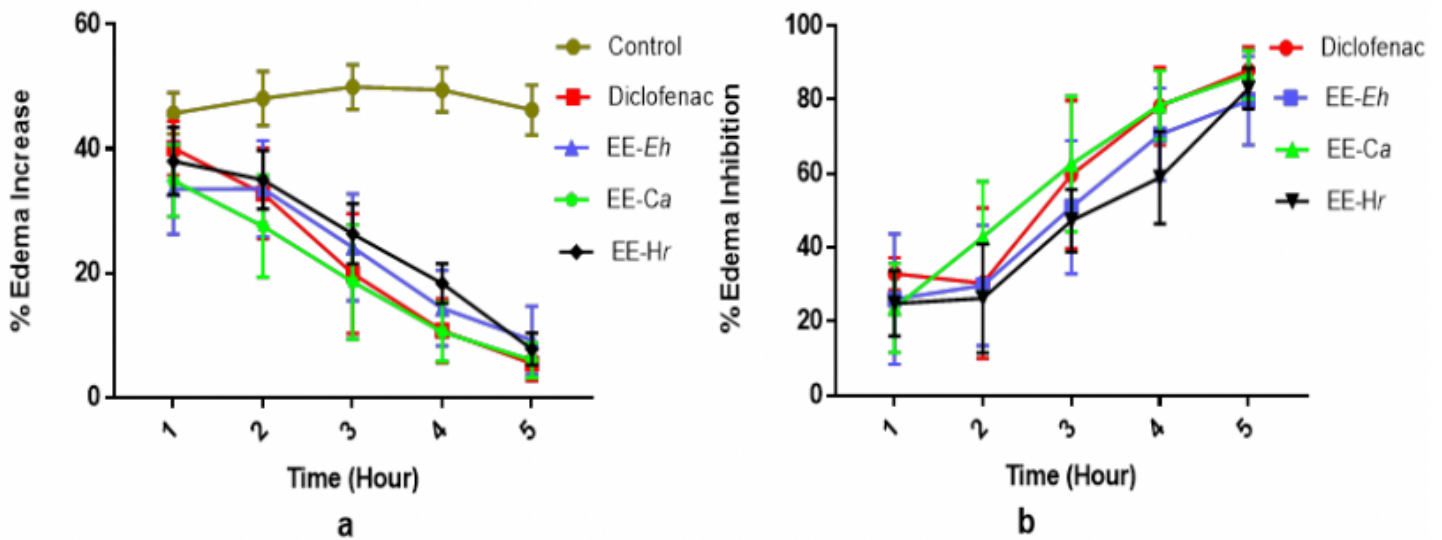


Figure 1

Percentages of Edema increase (a) and inhibition (b) of right hind paw of rats Figure 1 legends: EE-Eh: Ethanolic Extracts of *Euphorbia hirta* ; EE-Ca : Ethanolic Extracts of *Citrus aurantifolia* ; EE-Hr : Ethanolic Extracts of *Heterotis rotundifolia* ; a : Percents of Edema Increase ; b : Percents of Edema Inhibition

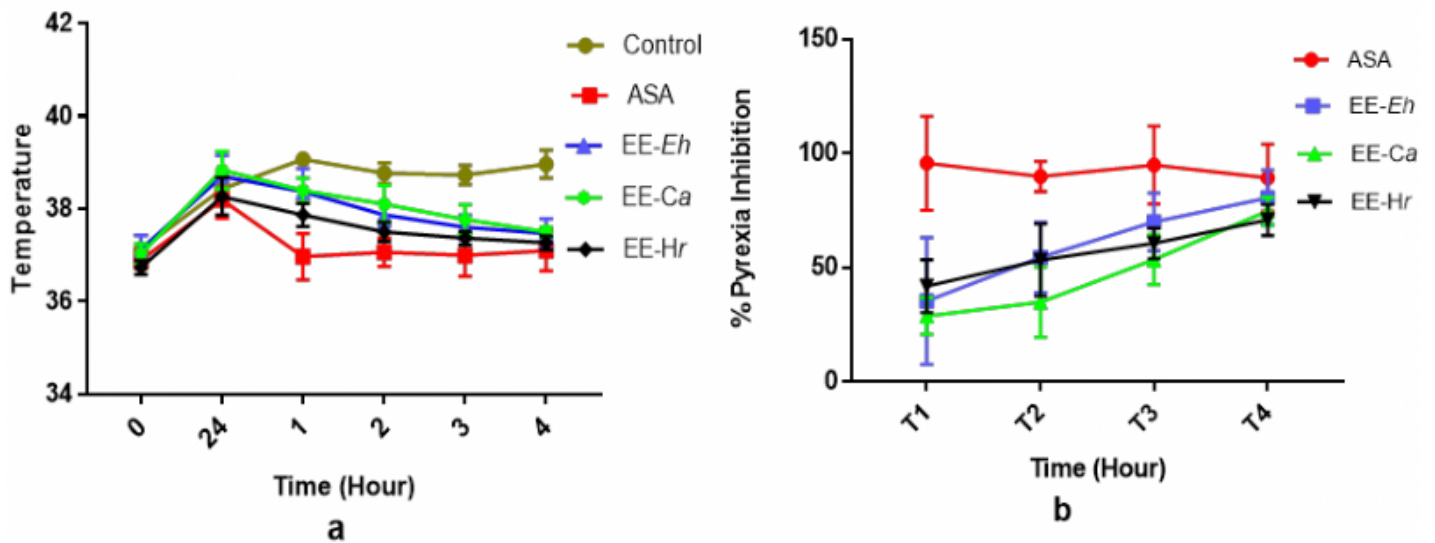


Figure 2

Evolution of temperature of control and treated rats (a) and Pyrexia inhibition percentages (b) Figure 2 legends: EE-Eh: Ethanolic Extracts of *Euphorbia hirta* ; EE-Ca : Ethanolic Extracts of *Citrus aurantifolia* ; EE-Hr : Ethanolic Extracts of *Heterotis rotundifolia* ; ASA : Acetylsalicylic Acid ; a : Evolution of temperature of control and treated rats ; b : Percents of pyrexia inhibition

Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- [Additionalfile1ROKO.docx](#)
- [ARRIVEGuidelinesChecklistfillableCompletedROKO.pdf](#)