

FORMULATE AND EVALUATE OF HERBAL GEL CONTAINING POMEGRANATE FRUITE EXTRACT

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ABSTRACT

Inflammation or phlogosis is a pathophysiological response of living tissues to injuries that leads to the local accumulation of plasmatic fluid and blood cells. Although it is a defense mechanism, the complex events and mediators involved the inflammatory reaction can induce, maintain or aggravate many diseases. Therefore, the uses of anti-inflammatory agents are helpful in the therapeutic treatment of these pathologie.

The concept of anti-inflammatory is changing day to day. The medicinal plants Punica granatum are richest source for management of the anti-inflammatory. Family Lythraceaeis used as hemostatic and anti-inflammatory. The aim of present study is to formulate and evaluate the herbal gel containing pomegranate fruit extract. The pomegranate fruit extract is shows the anticancer activity, analgesic and anti-inflammatory activity, Antiepileptic activity, Antidiabetic, hypolipidaemic and antioxidant activity, Prevention of skin damage, Cardio protective, Musculoskeletal. The gel formulation was designed by using Carbopol 940, pomegranate fruit extract propylene glycol, methyl paraben, Propyl paraben and required amount of distilled water. The skin pH was maintained by drop wise addition of Tri-ethanolamine. The prepared gel was characterized for their physicochemical parameters, preliminary Phytochemical analysis, appearance, quantitative analysis, Spread ability, pH, viscosity and extrudability, stability study.

KEYWORDS: Pomegranate Fruit, Carbopol 940, Anti-Inflammatory, Gel Formulation etc

INTRODUCTION

The pomegranate belongs to the family Lythraceae (previously Punica) with only two different species namely *Punicagranatum* and *Punicaprotopunica*. These are planted either for its edible

Fruit or as an ornamental tree. Commonly found in India is used for its patent anti-inflammatory activity. Focusing on the treatment and prevention of various disease. The constituents of pomegranate have been reported to have antioxidant anti-carcinogenic and anti-inflammatory properties, focusing on the treatment and prevention of various diseases. The pericarp of Punicagranatum has been commonly employed as a crude drug in Indian traditional medicine for treatment of diarrhea as well as for use as an astringent, anti-helminthes, laxative, diuretic, stomachic, cardio tonic and refrigerant. The anti-inflammatory components of PoP, i.e., punicalagin, punicalin, strictinin A and granatin B significantly reduce production of nitric oxide and PGE2 by inhibiting the expression of pro- inflammatory proteins Currently there is a greater global interests in non synthetic natural drug derived from plant herbal sources due to better tolerance and

decreased adverse drug reaction. However, there is a lack of supporting studies regarding the formulation and evaluation aspect. A document on quality control for medicinal plant material by the WHO and the note for guidance on specifications, by the committee for proprietary medicinal product (CPMP) are positive measured in this direction thus the present study was carried out to formulate gel of punicagranatum fruit extract using different gelling agent in varying proportion and to evaluate its physical parameters and to set up specifications for the finished medicinal product. The oral bioavailability with an elimination of half-life of1.87 to 4.58 h. the topical delivery is difficult due to its high lipophilicity^[1].

Inflammation (from Latin: inflammation) is part of the complex biological response of body tissues to harmful stimuli, such as pathogens, damaged cells, or irritants, and is a protective response involving immune cells, blood vessels, and molecular mediators.

The function of inflammation is to eliminate the initial cause of cell injury, clear out necrotic cells and tissues damaged from the original insult and the inflammatory process, and initiate tissue repair.

The five classical signs of inflammation are heat, pain, redness, swelling, and loss of function (Latin calor, dolor, rubor, tumor, and functiolaesa).

Punica ganatum Linn. Has been investigated extensively for its anti-inflammatory activities.

The plant is used as haemostatic and anti-inflammatory agent from ethno pharmacological point of view's.p granatum peels showed intermediate anti- inflammatory effect than allopathic anti-inflammatory drug.

The anti-inflammatory components of Pop, i.e., punicalagin, punicalin, strictinin A and granatin B significantly reduce production of nitric oxide and PGE2 by in Topical anti-inflammatory and analgesic activities of a standardized pomegranate rind extract of which ellagic acid (EA) was assessed and finding reported that rind extract and the equivalent ellagic acid dose-dependently reduced the ear edemainhibiting the expression of pro-inflammatory proteins^[2].

Classical Signs of Inflammation

English	Latin
Redness	Rubor
Swelling	Tumor
Heat	Calor
Pain	Dolor
Loss of Function	Funtiolaesa

Table 1: Classical Signs of Inflammation

- Acute Inflammation
- Chronic Inflammation

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Inflammation can be Classified as Follows

	Acute	Chorinc					
Causative agent	Bacterial pathogens, injured tissues	Persistent acute inflammation due to non-degradable pathogens, viral infection, persistent foreign bodies, or autoimmune reactions					
Major cells Involved	neutrophils (primarily), basophiles (inflammatory response), and eosinophils (response to helmenthis worms and parasites), mononuclear cells (monocytes, macrophages)	Mononuclear cells (monocytes, macrophages, lymphocytes, plasma cells), fibroblasts					
Primary Mediators	Vasoactive amines, eicosanoids	IFN-γ and other cytokines, growth factors, reactive oxygen species, hydrolytic enzymes					
Onset	Immediate	Delayed					
Duration	Few days	Up to many months, or years					
Outcomes	Resolution, abscess formation, chronic inflammation	Tissue destruction, fibrosis, necrosis					





Figure 1: Chronic and Acute Inflammation.

Mechanism of Action of Anti-Inflammatory Agent

- NSAIDs inhibit cyclooxygenase (COX) enzymes responsible for the production of prostaglandins (PGs) which promote inflammation necessary for healing, pain and fever.
- As a consequence, ongoing inflammation, pain and fever are reduced by NSAIDs. When these phospholipids are acted upon by phospholipase A2, arachidonic acid is formed ^[3].



Mechanism of Action Pomegranate Fruit as Anti-Inflammatory Agent

Cold pressed pomegranate seed oil has been shown to inhibit both cyclooxygenase and lipoxygenase enzymes in vitro. Cyclooxygenase, a key enzyme in the conversion of arachidonic acid to prostaglandins (important inflammatory mediators), was inhibited by 37 percent by a CPSO extract. Lipoxygenase, which catalyzes the conversion of arachidonic acid to leukotrienes, also key mediators of inflammation, was inhibited by 75 percent by a CPSO extract. By comparison, an FPJ extract resulted in a 23.8-percent inhibition of lipoxygenase invitro^[4].

MATERIALS AND METHODS

Table 3: Materials						
S. No.	Ingredient	Category				
1.	Pomegranate fruit extract	API				
2.	Carbopol940	Gelling agent				
3.	Sodium CMC	Gelling agent				
4.	Propylene glycol	Penetration enhancer				
5	Methanol	Extracting solvent				
6.	Glycerine	Solvent				
8.	Methyl paraben	Preservative				
9.	Triethanolamine	Maintain the pH				



Figure 3: Pomegranate Fruit.

Biological Name: Punica granatum

Common Name: Hindi : Anar, Sanskrit : Dadimah, English : Pomegranate, Marathi : Dalimba, Gujarati : Dalimba, Bengali: Dadim, Tamil : Madalai, Telgu : Danimma, Malayalam : Talimatatalum, Pharsi : Anartursa, Arabi : Roman Hamiz, German: Granatapfels.

Family: Lythraceae / Pomeceae

Botanical Description

Leaves

Colour: Dark green.

Size: 3-7 cm long and 2 cm broad.

Shape: Glossy and have a leathery leaves that are narrow and lance-shaped.

Blossoms

Produced in summer where rainfall is minimal during late summer.

• Flower

Colour: Bright red with 5 to 8 crumpled a petal which persists on the fruit.

Size: 3 cm in diameter.

• Fruit:

Size: Typically ranges from 2 to 5 inch wide.

Colour: leathery skin or rind is typically yellow overlaid with light or deep pink or rich red.

FORMULATION OF TOPICAL GEL PREPARATION

The PFE gel was prepared using carbopol 940, sodium CMC as a gelling agent in a 1% w/w concentration with deionized water using mechanical stirrer. The methyl paraben heat on water bath and place to cool after that the glycerin and propylene glycol added into it. This solution added into the gel. The pH of the gel was adjusted to neutral by addition of sufficient quantities of Triethanolamine and DMSO with continuous stirring. The given quantity of methanolic extract of pomegranate fruit added into the gel and stirred for sufficient time for homogeneous mixing of extract in gel base. Prepared gel was filled in collapsible tubes and stored at a cool and dry place. Physical parameters such as colour, appearance, and feeling on application were recorded. pH of the gel was recorded using a pH meter^[6].

Ingredient(mg)/ Formulation	F1	F2	F3	F4	F5	F6	F7	F8	F9
Pumicagrantum fruit extract	0.5gm								
Carbopol 940(gm)	0.5	0.75	1.0	-	-	-	0.5	0.75	1.0
Sodium CMC(gm)	-	-	-	1	2	3	0.5	0.75	1.0
Propylene glycol	2.5ml								
Methanol	20ml								
Methyl paraben	0.2gm								
Glycerine	3ml								
Triethanolamine	q.s								
Distilled H ₂ O	Up to								
-	100	100	100	100	100	100	100	100	100

Table 4: Formulation Table

Formulation Table

EVALUATION OF GEL^[7-10]

Physical Evaluation

The colour& appearance of the prepared herbal gel formulations were observed physically.

pH Measurement

The pH of the gel was determined using digital pH meter. Gel formulation was dissolved in water and pH was determined by dipping the glass electrode completely into gel solution. Then instrument reading was recorded as a pH of solution.

Homogeneity

All developed gels were tested for homogeneity by visual inspection after the gels have been set in the container for their appearance and presence of any aggregates.

Spread Ability

It was determined by wooden block. Spread ability was measured on the basis of slip and drag characteristics of gels. An excess of gel was placed on this ground slide. The gel was then sandwiched between this slide and another glass slide having the dimension of fixed ground slide. The upper slide was then pulled apart horizontally with a string, then weight was applied. The time required separating the two slides was measured as spreadability using following formulae

 $S = M \times L / T$

Where,

S = Spread ability

- M = Weight in the pan (tied to the upper slide)
- L = Length moved by the glass slide
- T = Time (in sec.) taken to separate the slide completely each other.

In-Vitro Drug Release Study

The dissolution studies were performed USP rotating basket method in 6.8 phosphate buffer solution. The compartment containing 900 ml of 6.8 phosphate buffer solution. The sample of 5 ml each was withdrawn at predetermined time interval and were replenished immediately with the same volume of phosphate buffer maintaining sink condition throughout the experiment. The aliquots following suitable dilution with phosphate buffer were analyzed spectrophotometrically at λ max 285 nm. The concentrations of test samples were calculated using regression equation.

Viscosity

Viscosity of herbal gel was determined by using Brookfield rotational viscometer at 6rpm. Each reading was taken after equilibrium of the sample at the end of two minutes. The viscosity determination of samples was repeated three times

Stability Study

The stability study conducts by ICH guideline. It showed No significance change in properties of the optimized formulation & the drug release. Short term stability studies were performed in a Stability chamber over a period of 3 month on the promising *pomegranate fruit extract* gel. Sufficient quantity of gel formulation were packed in stability container and kept in a Stability chamber at Temperature 45^oc &RH 75%. Samples were taken for the P^H and viscosity, were performed to determine the stability profile.

RESULT AND DISCUSSION

Estimation by UV Spectroscopy

Calibration of Pomegranate fruit extract:

Tuble of Cultoration of Fonegranate France Extract							
Sr. No.	Concentration (µg/ml)	Absorbance (λ _{max} at 285nm)					
1.	2	0.205					
2.	4	0.425					
3.	6	0.665					
4.	8	0.890					
5.	10	1.254					
6.	12	1.521					

Table 5: Calibration of Pomegranate Fruit Extract

Calibration Curve





Interpretation of FTIR Spectra



Figure 5: Interpretation of FTIR Spectra of Pomegranate Fruit Extract.

•	8	
Functional Group	Standard Frequency	Observed Peak
C-H stretching(alkenes)	3040-3010	3068
C=C Stretching(alkene)	1680-1620	1692
C=N Stretching	1630-1690	1613
N=N stretching	1575-1630	1581
N=H bending	1500-1650	1510
C-C Stretching	1450-1600	1446

Table 6: Interpretation of FTIR of Pure Pomegranate Fruit Extract



Figure 6: FTIR Spectra of Formulations of Herbal Gel.

Evaluation Studies

Sr. No.	Batch	Appearance	Homogeneity	P ^H	Spreadability(gm.\sec)	Viscosity
1	F1	Light Brown and translucent	Homogeneous	6.5	20.83	14830
2	F2	Light Brown and translucent	Homogeneous	6.4	20.27	21600
3	F3	Brown and translucent	Homogeneous	6.8	19.16	22800
4	F4	Dark Brown And translucent	Homogeneous	6.6	17.22	58000
5	F5	Brown and translucent	Homogeneous	6.7	18.19	66800
6	F6	Light Brown And translucent	Homogeneous	6.5	19.15	33000
7	F7	Brown and translucent	Homogeneous	6.3	16.16	32666.6
8	F8	Dark Brown and translucent	Homogeneous	6.8	18.15	70500
9.	F9	Dark Brown and translucent	Homogeneous	6.7	20.86	23170

Table 7: Evaluation of Herbal Gel Containing Punica Ganatum

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In-Vitro Drug Release Study

The in-vitro diffusion studies were carried out using Franz diffusion cell apparatus and semi-permeable cellophane membrane. Cellophane membrane, previously soaked overnight in phosphate buffer 5.5 was mounted by tied and sandwiching between the donor and receiver compartment. Franz diffusion cell with a diameter 3.7 cm was used in in-vitro release studies. A glass tube with both end open, 10 cm height and 3.7 cm outer diameter was used as a permeation cell. A one gram sample was accurately weighed and placed on a semi permeable cellophane membrane to occupy a circle of 3.7 cm diameter. The loaded membrane was stretched over the lower open end of a glass tube of 3.7 cm diameter and made water tight by rubber band. The tube (donor compartment) was immersed in a beaker containing 100 ml of phosphate buffer pH 7.4(receptor compartment). The cell was immersed to a depth of 1 cm below the surface of buffer. The system temperature was maintained at $37^{\circ}\pm1^{\circ}$ and speed was maintained at 30 rpm throughout the experiment by magnetic stirrer Samples 5 ml were withdrawn at intervals of 1, 2, 3, 4, 5, 6, 7 and 8 hour, the volume of each sample was replaced by the same volume of fresh buffer to maintain constant volume. The samples were filtered through Whatman filter paper, diluted up to 10 ml and absorbance was taken by UV spectrophotometer at respective Λ_{max} 285nm. The experiment was carried out triplicate and average value is reported^[11].

Cumulative Drug Release

Table 8: Cumulative Drug Release

% Cumulative Drug Release								
F1	F2	F3	F4	F5	F6	F7	F8	F9
8.40	07.06	8.39	7.43	6.54	9.19	11.55	9.65	8.45
14.34	15.4	12.03	18.15	19.18	17.18	17.12	17.80	20.19
22.85	23.20	21.17	28.42	29.25	26.25	25.85	30.10	32.46
29.15	30.25	28.02	39.90	40.23	38.19	39.40	41.55	45.35
36.92	37.12	35.89	51.53	52.42	53.20	46.10	53.09	58.30
43.22	44.81	42.02	63.55	62.60	61.55	60.15	63.13	70.15
50.15	52.17	49.75	74.78	73.10	74.27	83.42	74.19	82.10
59.08	60.32	62.45	82.15	87.12	91.07	89.15	90.10	92.85
	F1 8.40 14.34 22.85 29.15 36.92 43.22 50.15 59.08	F1 F2 8.40 07.06 14.34 15.4 22.85 23.20 29.15 30.25 36.92 37.12 43.22 44.81 50.15 52.17 59.08 60.32	% F1 F2 F3 8.40 07.06 8.39 14.34 15.4 12.03 22.85 23.20 21.17 29.15 30.25 28.02 36.92 37.12 35.89 43.22 44.81 42.02 50.15 52.17 49.75 59.08 60.32 62.45	% Cumul: F1 F2 F3 F4 8.40 07.06 8.39 7.43 14.34 15.4 12.03 18.15 22.85 23.20 21.17 28.42 29.15 30.25 28.02 39.90 36.92 37.12 35.89 51.53 43.22 44.81 42.02 63.55 50.15 52.17 49.75 74.78 59.08 60.32 62.45 82.15	% Cumulative Dr F1 F2 F3 F4 F5 8.40 07.06 8.39 7.43 6.54 14.34 15.4 12.03 18.15 19.18 22.85 23.20 21.17 28.42 29.25 29.15 30.25 28.02 39.90 40.23 36.92 37.12 35.89 51.53 52.42 43.22 44.81 42.02 63.55 62.60 50.15 52.17 49.75 74.78 73.10 59.08 60.32 62.45 82.15 87.12	% Cumulative Drug Release F1 F2 F3 F4 F5 F6 8.40 07.06 8.39 7.43 6.54 9.19 14.34 15.4 12.03 18.15 19.18 17.18 22.85 23.20 21.17 28.42 29.25 26.25 29.15 30.25 28.02 39.90 40.23 38.19 36.92 37.12 35.89 51.53 52.42 53.20 43.22 44.81 42.02 63.55 62.60 61.55 50.15 52.17 49.75 74.78 73.10 74.27 59.08 60.32 62.45 82.15 87.12 91.07	% Cumulative Drug Release F1 F2 F3 F4 F5 F6 F7 8.40 07.06 8.39 7.43 6.54 9.19 11.55 14.34 15.4 12.03 18.15 19.18 17.18 17.12 22.85 23.20 21.17 28.42 29.25 26.25 25.85 29.15 30.25 28.02 39.90 40.23 38.19 39.40 36.92 37.12 35.89 51.53 52.42 53.20 46.10 43.22 44.81 42.02 63.55 62.60 61.55 60.15 50.15 52.17 49.75 74.78 73.10 74.27 83.42 59.08 60.32 62.45 82.15 87.12 91.07 89.15	% Cumulative Drug Release F1 F2 F3 F4 F5 F6 F7 F8 8.40 07.06 8.39 7.43 6.54 9.19 11.55 9.65 14.34 15.4 12.03 18.15 19.18 17.18 17.12 17.80 22.85 23.20 21.17 28.42 29.25 26.25 25.85 30.10 29.15 30.25 28.02 39.90 40.23 38.19 39.40 41.55 36.92 37.12 35.89 51.53 52.42 53.20 46.10 53.09 43.22 44.81 42.02 63.55 62.60 61.55 60.15 63.13 50.15 52.17 49.75 74.78 73.10 74.27 83.42 74.19 59.08 60.32 62.45 82.15 87.12 91.07 89.15 90.10



Figure 7: Cumulative Drug Release.

Stability Study

Sufficient quantity of Optimized gel formulation were packed in container and kept in a Stability chamber at Temperature 40° c & RH 75%. For 3 month stability will be checked its physical appearance, pH, viscosity, Homogeneity, Consistency, Drug Content (%) and % In Vitro Drug release Study were been checked and a result was tabulated in table 9.

Sr. No.	Parameters	Initial	Stability After 1 St Month	Stability After 2 nd Month	Stability After 3 rd Month
1	Physical Appearance	Brown and	Brown and	Brown and	Brown and
1.	Physical Appearance	Translucent	Translucent	Translucent	Translucent
2.	pН	6.7	6.6	6.5	6.4
3	Consistency	Smooth	Smooth	Smooth	Smooth
4	Viscosity	23170	22550	22010	21510
5	Drug Content (%)	98.75%	98.55%	97.55%	96.85%
6	In vitro drug release	92.85	91.12	90.85	88.85
7	Homogeneity	Homogeneous	No change	No change	No change

Table	9:	Stability	Study
Lanc		Stability	Stuu

REFERENCES

- Neelam Arun And D. P. Singh, Punica Granatum: A Review On Pharmacological And Therapeutic Properties, International Journal of Pharmaceutical Sciences And Research, (2012) 3(5) 1240-1245
- Goyal S., Sharma P., Ramchandani U., Shrivastava S.K., Dubey P.K., Novel Anti-Inflammatory Topical Herbal Gels Containing With aniasomnifera and Boswellia serrate, International Journal of Pharmaceutical and Biological Archives. (2011) 2(4) 1087-1094.
- 3. Srdan V., Stankov, definition of inflammation, causes of inflammation and possible anti-inflammatory strategies, the open inflammation journal, (2012) 5 1-9.
- 4. Tariq Ismail, Pierosestili, Saeedakhtar, Pomegranate Peel and Fruit Extracts: A Review of Potential Anti-Inflammatory and Anti-Infective Effects, Journal of Ethnopharmacology, (2012) 5.1-7
- 5. Garrach D., Patel Axxay, Chaktaborty Manodeep, Phytochemical and pharmacological profile of pumice grantum: an overview, international Research journal of pharmacy, (2012), 3(2) 65-68.
- 6. Loveleenpreet Kaur, Tarun Kumar Guleri, Topical Gel: A Recent Approach For Novel Drug Delivery, Asian Journal Of Biomedical And Pharmaceutical Sciences (2013), 3(17) 1-5.
- 7. Nino M, Calabro G, Santoianni P, Topical delivery of active principles: The field of dermatological research, Dermatology online Journal, (2010) 16(1), 4.
- 8. Robak J, Marcinkiewicz Scavenging of reactive oxygen species as the mechanism of drug action. Pol. J. Pharmacol.(1995), 47(2) 89-98.

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- Parag A. Kulkarni, a Shailesh Kewatkar Meghana D Lande, Mohini. A Phanse, and Pravin D. Chaudhari, Topical anti-inflammatory activity of herbal gel formulation, Scholars Research Library, Der Pharma Chemica, (2010),2(3) 338-342.
- 10. Hemendrasinh J Rathod and Dhruti P Mehta, A Review on Pharmaceutical Gel, Acta Scientifica International Journal of Pharmaceutical Science, (2015).1(1)
- 11. Mohammad R. S, Hydrogels as potential nano-scale drug delivery systems, Intech(2010), 575-596.