Bioprospecting for antimalarials from medicinal plants

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Why bioprospect for antimalarials

- Malaria is one of the most devastating diseases of the developing world
- Kills 1–3 million people annually, mostly affecting the children and pregnant women ¹
- In every 30 seconds, a child dies of malaria
- In Uganda, malaria accounts 30–50% of outpatient visits
- 35% of hospital admissions
- 9–14% of hospital deaths ²

Malaria distribution- affect many tropical and subtropical regions of the world³



3. Gething et al., 2010

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Malaria Endemicity in Uganda, 2010



Plants as sources of anti-malarials

- Ant malarial compounds have been isolated from plants & developed into drugs e.g.
- Quinine isolated from Cinchona bark in 1820⁷

•Artemisinine isolated from Artemisia annua

Artemisinin Derivatives

9. Meshnick et al., 1996

Standardised herbal medicines for treatment of malaria

- The use of many validated anti-malarial phytomedicines formulated from traditional medicines have been reported in recent years¹⁰
- Their use lifts the burden of drug pressure for development of resistance
- Act as alternatives where there is unavailability of the recommended anti-malarial

Government approved

- Argemone mexicana (Mali),
- Artemisia annua (China)
- Cinchona bark

Malaria treatment

- WHO recommends artemisinin-based combination therapy (ACT), as the firstline treatment for malaria.
- Artemisinin-lumenfatrine (Coartem)
- Non artemisinin combinations like- atovaquone–proguanil (Malarone[™])
- Sulphadoxine–pyrimethamine (Fansidar[™]).
- It is believed that combining two medicines with different mechanisms of action lowers the probability that a resistant parasite will emerge .

Prevention: Malaria vaccine

- There are control measures such as vector control, insecticide-treated bednets and anti malarial therapy.
- A vaccine esp to infants and pregnant mothers would greatly contribute on the malaria prevention. Unfortunately, there is no vaccine available yet.
- The most advanced malaria vaccine candidate coded as "RTS, S," has reached phase III clinical trials^{10,11}
- GSK has applied for approval of RTS, S vaccine from the European medicine Agency .(<u>www.reuters.com:July</u> 24,2014)

Challenges of malaria treatment

- In Uganda, a proper treatment of malaria can be estimated at 10-15 USD & not affordable to most people
- Parasite resistance to the cheap and available antimalarials (Chloroquine, mefloquine)
- Recently resistance to artemisinins has been reported¹³
- The need to search for more antimalarials is of utmost importance

The problem?

- Though plants are being used in medicine, Most of them are not documented.
- Efficacy, safety and active compounds in some of the plants are not known

• This limits their wider use, standardization and development into drugs/medicines

OBJECTIVES

- Document the indigenous knowledge on the use of the medicinal plants- Creating a basis for phytochemical investigation
- Extract and screen for antiplasmodial activity
- Isolate & characterize the active compounds which can be lead compounds to discovery of new drugs.
- Markers for herbal preparations

Materials and methods:

Ethnobotanical survey¹⁵

- Efficacy Antiplasmodial activity
- determination the chemical structures; chromatopgraphic and spectroscopic means.

Materials and methods: Ethnobotanical survey: study site (Kibale National Park)

Isolation and Purification

14. Smilkstein et al., 2004; 15. Desjardins et al., 1979

Materials and Methods

- 1D and 2D-NMR spectra recorded on Bruker 300-600 MHz spectrometer
- ¹HNMR & ¹³CNMR
- DEPT- CH , CH ,CH ,CH
- HSQC- **C-H** ↓
- COSY- H-H
- HMBC-H-C-C-C-

Results and discussions: Ethnobotanical survey

- Data Organized in table form: Plant name, local name, diseases treated, plant part ; mode of preparation and administration;
- 131 plant species belonging to 121 genera and 55 families were documented to treat several illnesses.

Medicinal plants	Disease
<i>Vernonia amygdalina</i> (Kibirizi, omululuza, Olubirizi)	Malaria
Albizia coriaria (Omusisa, Mugavu, Omusita)	Cough
Neoboutonia macrocalyx (Ekihora, Omweganza)	malaria

1. Neomacrolactone

2. 22α -acetoxyneomacrolactone

 $IC_{50} = 1.1 \ \mu g/mI$

 $IC_{50} < 10 µg/mL$, good activity; IC_{50} of 10-50 µg/mL, moderate activity; IC_{50} of 50-100 µg/mL, low activity; $IC_{50} > 100 µg/mL$, inactive¹⁷

7. Neonthrene

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Conclusion and recommendations

- Traditional medicinal plants contribute significantly in the treatment of several diseases esp malaria in this area need for conservation sensitisation- (medicinal plant gardens)
- These new compounds could serve as leads to the development of new drugs for malaria; need to look at their synergy with available antimalarial.
- Compounds –marker in formulation of a herbal preparation from this plant
- The identification of antimalarial chemicals from *N. Neoboutonia* suggests that these compounds may play a role in the medicinal properties of this plant and therefore its use as a medicinal plant is supported.

Acknowledgement

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Thank you