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Antioxidative properties of spices and their impact on postprandial blood glucose in humans

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Abstract

Background: Diabetes mellitus represents disrupted orderly processes of carbohydrate metabolism, in which body cells become unable to utilize glucose. Consequently, glucose molecules pile up in blood and exceed upper normal limit. Spices are vital source of bioactive molecules, which could be useful to treat different diseases including diabetes. Present study was conducted to determine the effect of turmeric, cloves, green cardamom and cinnamon intake on postprandial blood glucose (PBG) levels in normal healthy human subjects.

Method: A total of 10 participants including both genders were considered to assess blood glycemic response of said four culinary spices. Participants' ages were 20-25 years. Incremental area under the curve (IAUC) method was employed for glycemic index (GI) determination. In addition to this, antioxidative properties were estimated by 2, 2-azino-bis-(3-ethylbenzothiazoline-6-sulfonic acid (ABTS')) radical, Folin-Ciocalteu reagent and aluminum chloride.

Results: GI values of turmeric, cloves, green cardamom, cinnamon and their combined blend were 83.06, 87.48, 82.27, 73.59 and 69.48, respectively. Antioxidative activity (AA) of spices was 2.63, 1.55, 2.55 2.8 and 3.33, respectively. Regarding antioxidant levels cinnamon contained the highest amount (32.78 mg/g) of total phenolic compounds (TPC) than turmeric (28.7 mg/g), cloves (29.6 mg/g) and green cardamom (15.04 mg/g). Similarly, total flavonoid contents (TFC) were found maximum (6.17 mg/g) in cinnamon relative to the other three spices i.e. 2.66, 4.6 and 1.6 mg/g, respectively. Furthermore, GI was inversely related to antioxidative properties i.e. AA ($r=-0.88$), TPC ($r=-0.5625$) TFC ($r=-0.7716$).

Conclusion: The results obtained from this present study indicate that spices' antioxidants interfere with gastrointestinal digestion, lowering starch conversion into blood glucose, effectively. An appropriate intake of spices may be wanted to keep blood glucose level within an optimum limit.



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Introduction

Several previously published studies reported that elevated blood glucose level in postprandial state is a major risk factor/clinical sign for the development of various metabolic disorders, not only in diabetic victims but also in normal healthy obese human subjects [1]. It is also speculated that decrease in postprandial blood glucose levels might be a key target for the management and treatment of diabetes mellitus [2]. Spontaneously, elevated blood glucose causes proteins' glycation in form of advanced glycated end products (AGEs) [3]. Receptors of AGEs (RAGEs) situated on various cells interact with glycated proteins in order to alter gene expression, intercellular signaling pathways and antioxidants-free radicals/reactive oxygen species (ROS) balance. These derangements during the course of disease pathobiology predispose to diabetic macro- and micro-vascular complications [4-6].

Generally, various kinds of drugs are suggested in order to keep blood glucose level in optimum limit [7]. But disease phenotype is not reversed by these available drugs [8]. Therefore, attention is paying to explore alternative medicines developed from plant sources [9-11]. Among natural products, culinary spices are supposed to be effective against several ailments [12, 13]. Additionally, past researches indicated that bioactive compounds/antioxidants in spices are promising to reduce dietary carbohydrates conversion into blood glucose and successive prevention of oxidative stress and glycation processes in diabetic patients [14].

Spices are commonly used in human diets and most of them have been proved effective to reduce blood glucose elevation [15-17]. Glycemic index (GI) is a parameter which is used to rank foods for their conversion into blood glucose [18]. Among numerous spices turmeric, cloves, green cardamom and cinnamon are commonly used to prepare different kinds of foods/dishes [19, 20]. Past studies demonstrated the significant effects of spices on postprandial blood glucose (PBG) levels [17, 21]. A measurable impact of a culinary intake on diabetes markers was also manifested [22]. In another previous study it is reported that cinnamon reduces PBG remarkably [23]. It is reported that bioactive compounds/antioxidants in spices are playing role to decrease blood glucose, oxidative stress and glycation processes in diabetic patients [24, 25]. Therefore, investigating commonly consumed spices i.e. turmeric, cloves, green cardamom and cinnamon in terms of antioxidative properties and GI values may become useful to understand the medicinal value of culinary spices in perspective of blood glucose regulation for diabetes patients.

Methods

Sampling and processing

Initially, four culinary spices i.e. turmeric, cloves, green cardamom and cinnamon were purchased from local market Muzaffarabad, Azad Kashmir. Subsequently, spices were air dried, crushed and ground to form fine powders. A powdered blend was also prepared by mixing equal quantity (20g) of each said spice, using mincer and mortar. Each powdered sample was divided into two parts to determine antidiabetic activity and antioxidative properties i.e. antioxidant activity, total phenolic and flavonoid contents.

Antidiabetic activity

In all, ten (10) normal healthy human subjects including males (n=5) and females (n=5) were considered for blood glycemic response of four commonly used culinary spices such as turmeric, cloves, green cardamom, cinnamon and their blend. For glycemic response, 30g of each said sample was ingested with water. Successively, with uniform interval of time i.e. 15 minutes, postprandial blood glucose (PPB) concentrations were measured by glucometer (Infopia Easy Glucometer). Before conducting PPB, blood glucose level of each participant was also measured in fasting state at zero time point. Average of value of PPB for each time point was used to calculate incremental area under the curve (iAUC). Then, iAUC values were used to compute glycemic index (GI) of turmeric, cloves, green cardamom and cinnamon. Participants involved for PPB evaluation were informed one day earlier to come at specified place with an overnight fast. Their age and other demographic and health related information were also written in predesigned proforma. Consent was also received from each volunteer. This study was approved by Board of Advanced Studies and Research (BASR) of the University.

Antioxidant properties

Antioxidants investigation of turmeric, cloves, green cardamom and cinnamon was carried out by following [26], with few changes. The antioxidants extraction of said fine powder was carried out in methanol. For this, 2g of each sample was extracted with 50ml of 80% methanol at room temperature by placing at stirring for 24 hours using water bath. Successively, the sample was filtered using Whatman filter paper and filtrate was evaporated on heating at room temperature. Resulted residue was divided into three portions and used for antioxidative activity, total phenolic and flavonoid contents.

Determination of antioxidant activity

Re et al. method was applied to assess oxidants scavenging capacity of spices' extracts with 2,2-azino-bis-(3-ethylbenzothiazoline-6-sulfonic acid (ABTS'))

free radical, as adopted earlier with some modifications [26]. Initially, 5mg of residue was dissolved in 1 ml of methanol with successive aqueous (4ml) dilution. Vitamin C was used as standard instead of Trolox. Standard curve was made with serial dilutions of vitamin C. Finally, antioxidant activity was measured in milligram (mg) ascorbic acid/g extract against optical density (OD) at 734 nm.

Estimation of total phenolic contents

Total phenolic contents were estimated with Folin–Ciocalteu colorimetric method as described previously [26], with few alterations. First of all, 10mg residue part was dissolved in 1ml of water and out of them 0.5ml residual solution was mixed with 0.5ml of 10% Folin–Ciocalteu reagent and 2ml of 7.5% sodium carbonate. This mixture was kept 60 minutes at room temperature and to get maximum absorbance at 765nm wavelength, spectrophotometrically. Gallic acid was used as standard and results were declared as mg of gallic acid equivalent/g extract. The obtained results were expressed in mg rutin /g spice extract.

Estimation of total flavonoid contents

According to an analytical method which was adopted by [27], total flavonoid contents (TFC) were measured with changes. A total of 10 mg of sample residue was dissolved in 1ml of water and 0.5ml of this was further diluted with 2ml of water, then mixed with 0.15ml of 5% NaNO₂ and kept the solution for 6 minutes. After this 1.5ml of 10% AlCl₃ added and allowed to incubate at room temperature for 10 minutes, then added 2ml of 4% NaOH in it. Absorbance was measured spectrophotometrically (UV-1700 of Shimadzu) at 510nm. Flavonoids were quantified in said samples by plotting their obtained absorbance against the standard calibration graph of rutin hydrate. The obtained results were expressed in mg rutin /g spice extract.

Statistical analyses

Pearson correlation coefficients (r) and univariate regression were applied for GI, AA, TPC and TFC mutual correlation analyses, using Graph Pad prism 5 and Excel Software 2010. P value of <0.05 was considered statistically significant.

Results

The incremental area under the curve (IAUC), antioxidative properties and glycemic index (GI) values are given in Figure 1 and Table 1. GI values of turmeric, cloves, green cardamom and cinnamon were 83.06, 87.48, 82.27 and 73.59 respectively. Spices combined blend showed 69.48 GI value which was the lowest as compared with the other individual culinary spice GI value. Furthermore, 16.9, 12.51, 17.73, 26.41 and 30.52%

postprandial blood glucose levels were decreased by the consumption of each culinary relative to the reference GI value i.e. 100).

Antioxidant activity of turmeric, cloves, green cardamom, cinnamon and mixed blend was 2.63, 1.55, 2.55, 2.8 and 3.33mg of ascorbic acid equivalent/g, respectively. Total phenolic contents obtained from spices samples were 28.7, 29.6, 15.04, 32.7 and 36.89mg of gallic acid equivalence/g, respectively. Total flavonoid contents obtained were 2.66, 4.6, 1.3, 6.17 and 8.8mg of Rutin hydrate equivalence/g, respectively, also given in the Table 1. This work has also reported, for the first time, an inverse relationship between GI and three antioxidative parameters i.e. AA ($r=-0.8539$), TPC ($r=-0.9841$) and TFC ($r=-0.7949$) in four culinary spices.

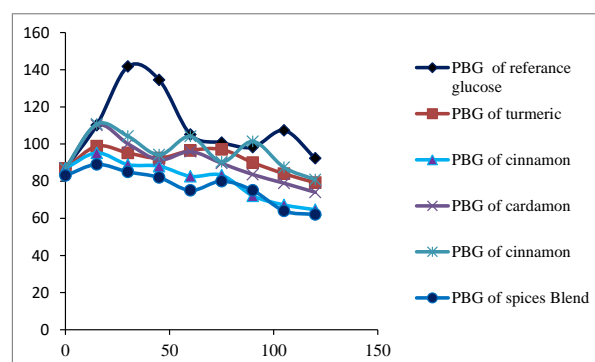


Figure 1: Graphs show IAUC of spices. Abbreviations: PBG=Postprandial blood glucose, IAUC=incremental area under the curve.

Standard and spice samples	GI (%)	AA	TPC	TFC
Glucose	100			
Turmeric	83.06	2.63	28.7	2.66
Cloves	87.48	1.55	29.6	4.6
Cardamom	82.27	2.55	15.04	1.3
Cinnamon	73.59	2.8	32.78	6.17
Mixed blend	69.48	3.33	36.89	8.8

Table 1: GI, AA, TPC and TFC of the standard and spice samples Abbreviations: AA=antioxidative activity, GI=glycemic index, TFC=total flavonoid contents, TPC=total phenolic contents.

Discussion

Comparatively, cinnamon intake showed the lowest GI value which was comparable with the previously published results [28]. It is also studied that chronic blood glucose elevation causes enhanced reactive oxygen species (ROS) production, which ultimately leads to oxidative stress development and vital organs damage [29, 30]. Several studies reported that plants including different spices are rich source of phytochemicals such as phenolic and flavonoid compounds [22, 26, 31, 32]. Synergistically, these antioxidants counter two digestive enzymes' activity

including α -glucosidase and α -amylase, induce insulin production and increase glucose channels (GLUTs) opening in body tissues [17]. It is also reported that antioxidants-amylose adduct constitution may trigger starch digestion [33, 34]. These lead to a new avenue to regulate hyperglycemia in diabetic victims by reducing the associated morbidities and mortalities [35].

Inverse relationship of GI with oxidative properties obtained from this study is supported by other studies. As a past study reported the oxidative attenuating capability of eight Thai culinary plants [36]. Recently, a study conducted in US manifested that a spice blend enhances some plasma values of antioxidative properties in humans [22]. Similarly, a study screened out 26 spices originated from different countries as effective free-radical scavengers and vital natural antioxidants source [26]. For exploring vital antioxidants, several efforts have been made on various plants, culinary herbs and spices. Still, researchers are paying profound attentions to explore alternative medicines for metabolic disorders, including diabetes mellitus [37, 38]. Diets enriched with plethora of antioxidants have been supposed as potential candidates to manage diabetes mellitus [39, 40]. A few recent studies indicated that the inclusion of culinary spices in diets of diabetic patients might be helpful to reduce the adverse effects of diabetes and its associated complications [39]. For examples; a past study manifested euglycaemic and enhanced antioxidative activities of spices, concomitantly [22]. It has been manifested that consumption of about 6 g of cinnamon/day decrease blood plasma of glucose, and lipids in diabetic patients [23]. In another study, it has been studied that a polyphenol from cinnamon behave like insulin regarding blood glucose regulation [41]. Past studies reported the antioxidants and enzymes mutual binding to explain their antidiabetic capacity [17, 42]. Restriction of glycation processes might lead to improve insulin sensitivity in diabetic patients [43, 44].

On the basis of findings obtained from this study, it could be concluded that blood glucose lowering effects of culinary spices intakes was antioxidants dependent. Since GI was inversely related to antioxidative properties which provide new insight of bioactive components interaction with blood glucose. An expected synergism of the bioactive compounds from spices blend on postprandial blood glycemic response in humans was also obtained. Thus, this study suggests that incorporation of appropriate amount of spices in diet might be beneficial to normalize postprandial glucose and enhance antioxidative defenses, reducing risk factors associated with increased blood glucose level/hyperglycemia. Furthermore, correlation between GI and antioxidative properties obtained from this study is needed to validate in large prospective cohort studies

in order to define adapted recommendations for healthy persons and diabetic patients.

Conflict of Interest Statement

The authors declare that there is no conflict of interest regarding the publication of this paper.

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Authors' Contribution

ARK & NM designed and conducted the study. HF supported in additional lab work while ZI supervised the research.

References

1. Khan AR, Awan FR. Mining of protein based biomarkers for type 2 diabetes mellitus. *Pakistan Journal of Pharmaceutical Sciences*, (2012); 25(4): 889-901.
2. Ceriello A. Point: postprandial glucose levels are a clinically important treatment target. *Diabetes care*, (2010); 33(8):1905-1907.
3. Vlassara H, Uribarri J. Advanced glycation end products and diabetes: cause, effect, or both? *Current Diabetes Reports*, 2014, 14(1): 1-17.
4. Giacco F, Brownlee M. Oxidative stress and diabetic complications. *Circulation Research*, (2010); 107(9): 1058-1070.
5. Pitocco D, Tesaro M, Alessandro R, Ghirlanda G, Cardillo C. Oxidative stress in diabetes: implications for vascular and other complications. *International Journal of Molecular Sciences*, (2013); 14(11): 21525-21550.
6. Nita M, Grzybowski A. The role of the reactive oxygen species and oxidative stress in the pathomechanism of the age-related ocular diseases and other pathologies of the anterior and posterior eye segments in adults. *Oxidative Medicine and Cellular Longevity*, (2016); 2016: 1-23.
7. Adams OP. The impact of brief high-intensity exercise on blood glucose levels. *Diabetes, metabolic syndrome and obesity*, 2013; 6: 113-122.
8. DeFronzo RA, Eldor R, Abdul-Ghani M. Pathophysiologic approach to therapy in patients with newly diagnosed type 2 diabetes. *Diabetes Care*, 2013; 36(2): S127-S138.
9. Chang CL, Lin Y, Bartolome AP, Chen YC, Chiu SC, Yang WC. Herbal therapies for type 2 diabetes mellitus: chemistry, biology, and potential application of selected plants and compounds. *Evidence-Based Complementary and Alternative Medicine*, 2013; 2013: 1-33.
10. Cragg GM, Newman DJ. Natural products: a continuing source of novel drug leads. *Biochimica et Biophysica Acta (BBA)-General Subjects*, 2013; 1830(6): 3670-3695.
11. Pan SY, Pan S, Yu ZL, Ma DL, Chen SB, Fong WF, Han YF, Ko KM. New perspectives on innovative drug discovery: an overview. *Journal of Pharmacy & Pharmaceutical Sciences*, 2010; 13(3): 450-471.
12. Yanishlieva NV, Marinova E, Pokorný J. Natural antioxidants from herbs and spices. *European Journal of lipid science and Technology*, 2006; 108(9): 776-793.

13. Hinneburg I, Dorman HD, Hiltunen R. Antioxidant activities of extracts from selected culinary herbs and spices. *Food chemistry*, 2006; 97(1): 122-129.
14. Ranilla LG, Kwon YI, Apostolidis E, Shetty K. Phenolic compounds, antioxidant activity and in vitro inhibitory potential against key enzymes relevant for hyperglycemia and hypertension of commonly used medicinal plants, herbs and spices in Latin America. *Bioresource Technology*, (2010); 101(12): 4676-4689.
15. Rao PV, Gan SH. Cinnamon: a multifaceted medicinal plant. *Evidence-Based Complementary and Alternative Medicine*, (2014); 2014: 1-12.
16. Shukri R, Mohamed S, Mustapha NM. Cloves protect the heart, liver and lens of diabetic rats. *Food chemistry*, (2010); 122(4): 1116-1121.
17. Hanhineva K, Törrönen R, Bondia-Pons I, Pekkinen J, Kolehmainen M, *et al.* Impact of dietary polyphenols on carbohydrate metabolism. *International Journal of Molecular Sciences*, (2010); 11(4):1365-1402.
18. Cândido FG, Pereira EV, Alfenas RCG. Use of the glycemic index in nutrition education. *Revista de Nutrição*, (2013); 26(1):89-96.
19. Parthasarathy VA, Chempakam B, Zachariah TJ: Chemistry of spices, (2008); 2: 422.
20. Leela N. Cinnamon and cassia. *Chemistry of spices*, (2008); 3: 124-126.
21. Oyenihni AB, Brooks NL, Oguntibeju OO, Aboua G. Antioxidant-rich natural products and diabetes mellitus. *Antioxidant-Antidiabetic Agents and Human Health*, (2014); 2014: 1-31.
22. Skulas-Ray AC, Kris-Etherton PM, Teeter DL, Chen CO, Vanden Heuvel JP, *et al.* A High Antioxidant Spice Blend Attenuates Postprandial Insulin and Triglyceride Responses and Increases Some Plasma Measures of Antioxidant Activity in Healthy, Overweight Men. *The Journal of Nutrition*, (2011); 141(8): 1451-1457.
23. Khan A, Saffdar M, Khan MMA, Khattak KN, Anderson RA. Cinnamon improves glucose and lipids of people with type 2 diabetes. *Diabetes Care*, (2003); 26(12): 3215-3218.
24. Rajeshwari C, Shobha R, Andallu B. Oxidative stress and antioxidant effects of herbs and spices in diabetes. *Annal Phytomedicine*, (2013); 2: 13-27.
25. Johnston K, Sharp P, Clifford M, Morgan L. Dietary polyphenols decrease glucose uptake by human intestinal Caco-2 cells. *FEBS Letters*, (2005); 579(7): 1653-1657.
26. Shan B, Cai YZ, Sun M, Corke H. Antioxidant capacity of 26 spice extracts and characterization of their phenolic constituents. *Journal of Agricultural and Food Chemistry*, (2005); 53(20):7749-7759.
27. Chan KW, Khong NM, Iqbal S, Umar IM, Ismail M. Antioxidant property enhancement of sweet potato flour under simulated gastrointestinal pH. *International Journal of Molecular Sciences*, (2012); 13(7): 8987-8997.
28. Azzeh FS. Postprandial Blood Glucose. *Pakistan Journal of Biological Sciences*(2013); 16(2): 74-79.
29. Fakhruddin S, Alanazi W, Jackson KE. Diabetes-induced reactive oxygen species: mechanism of their generation and role in renal injury. *Journal of Diabetes Research*, (2017); 2017: 1-30.
30. Mahjoub S, Masrou-Roudsari J. Role of oxidative stress in pathogenesis of metabolic syndrome. *Caspian journal of internal medicine*, (2012); 3(1): 386-396.
31. Azimi P, Ghiasvand R, Feizi A, Hariri M, Abbasi B. Effects of cinnamon, cardamom, saffron, and ginger consumption on markers of glycemic control, lipid profile, oxidative stress, and inflammation in type 2 diabetes patients. *The Review of Diabetic Studies*, (2014); 11(3): 258-266.
32. Azimi P, Ghiasvand R, Feizi A, Hosseinzadeh J, Bahreynian M, *et al.* Effect of cinnamon, cardamom, saffron and ginger consumption on blood pressure and a marker of endothelial function in patients with type 2 diabetes mellitus: A randomized controlled clinical trial. *Blood Pressure*, (2016); 25(3): 133-140.
33. Liu J, Wang M, Peng S, Zhang G. Effect of green tea catechins on the postprandial glycemic response to starches differing in amylose content. *Journal of Agricultural and Food Chemistry*, (2011); 59(9): 4582-4588.
34. Lo Piparo E, Scheib H, Frei N, Williamson G, Grigorov M, Chou CJ. Flavonoids for controlling starch digestion: structural requirements for inhibiting human α -amylase. *Journal of Medicinal Chemistry*, (2008); 51(12): 3555-3561.
35. Asif M. The role of fruits, vegetables, and spices in diabetes. *International Journal of Nutrition, Pharmacology, Neurological Diseases*, (2011); 1(1): 27-35.
36. Wangcharoen W, Morasuk W. Antioxidant capacity and phenolic content of some Thai culinary plants. *Maejo International Journal of Science and Technology*, (2007); 1(2): 100-106.
37. Chang HA, Wallis M, Tiralongo E. Use of complementary and alternative medicine among people with type 2 diabetes in Taiwan: a cross-sectional survey. *Evidence-Based Complementary and Alternative Medicine*, (2011); 2011: 1-8.
38. Ching SM, Zakaria ZA, Paimin F, Jalalian M. Complementary alternative medicine use among patients with type 2 diabetes mellitus in the primary care setting: a cross-sectional study in Malaysia. *BMC complementary and alternative medicine*, (2013); 13(1): 148-153.
39. Pandey KB, Rizvi SI. Plant polyphenols as dietary antioxidants in human health and disease. *Oxidative Medicine and Cellular Longevity*, (2009); 2(5): 270-278.
40. da Silva SB, Costa J, Pintado M, Ferreira D, Sarmento B. Antioxidants in the prevention and treatment of diabetic retinopathy—a review. *Journal of Diabetes and Metabolism*, (2010); 1(3): 1-10.
41. Anderson RA, Broadhurst CL, Polansky MM, Schmidt WF, Khan A, Flanagan VP, Schoene NW, Graves DJ. Isolation and characterization of polyphenol type-A polymers from cinnamon with insulin-like biological activity. *Journal of Agricultural and Food Chemistry*, (2004); 52(1): 65-70.
42. Perera H, Handuwalage C. Detection of protein glycation inhibitory potential of nine antidiabetic plants using a novel method. *Asian Journal of Medical Sciences*, (2014); 6(2): 1-6.
43. Mark AB, Poulsen MW, Andersen S, Andersen JM, Bak MJ, *et al.* Consumption of a diet low in advanced glycation end products for 4 weeks improves insulin sensitivity in overweight women. *Diabetes Care*, (2014); 37(1): 88-95.
44. Baye E, Kiriakova V, Uribarri J, Moran LJ, Courten B. Consumption of diets with low advanced glycation end products improves cardiometabolic parameters: meta-analysis of randomised controlled trials. *Scientific Reports*, (2017); 7(1):1-9.



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