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A Systematic Review on Natural Antioxidant Properties of Resveratrol

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Polyphenols, including anthocyanins, flavonoids and stilbenes, which constitute one of the most abundant and ubiquitous groups of plant metabolites, are an integral part of the human diet. Resveratrol (3,5,4'-trihydroxystilbene), a naturally occurring polyphenol produced by some plants as a self-defence agent, has an antifungal activity. Resveratrol has been found in some plants (such as grapevine, pine and peanuts) and is considered to have beneficial effects also on human health. The number of studies on resveratrol greatly increased in PubMed database since 1997, after the anticancer effect of this molecule was first reported. The interest in resveratrol in grape was originally sparked by epidemiological studies indicating an inverse relationship between long-standing moderate consumption of red wine and the risk of coronary heart disease; this effect has been ascribed to resveratrol, which possesses diverse biochemical and physiological properties, including antiplatelet and anti-inflammatory proprieties, and provides a wide range of health benefits ranging from chemoprevention to cardioprotection. Recently, resveratrol has been described as an anti-aging compound. The consumption of resveratrol (red wine) together with a Mediterranean diet or a fast-food meal ("McDonald'sMeal") had a positive impact on oxidized (ox-) LDL and on the expression of oxidative and inflammatory genes. Therefore, this review summarized the most important scientific data about healing and preventive potential of resveratrol, acting as cardioprotective, neuroprotective, chemopreventive and antioxidant agent.

Keywords: Red wine, Health, Liver disease, Cardiovascular disease, Cancer chemoprevention, Anti-aging, Neuro-protective, Mediterranean diet.

Phytoalexin molecules are of enormous chemical diversity, but those from the Vitaceae, Fabaceae and Pinaceae seem to constitute a somewhat restricted group belonging to the stilbene family of compounds, consisting of two aromatic rings joined by a methylene bridge. The skeleton of stilbenes is based on the resveratrol molecule (3,5,4'-trihydroxystilbene) in Vitaceae and Fabaceae or pinosylvin (trans-3,5-dihydroxystilbene) in Pinaceae. Resveratrol (Figure 1), produced by several plant species, is found in two isoforms: trans-resveratrol and cis-resveratrol. The trans isomer, which possesses a greater biological activity due to the presence of the 4'-hydroxystyryl group, was first detected in 1940 in the roots of white hellebore (Veratrum grandiflorum) [1]. The content and distribution of resveratrol in plants has attracted growing attention in recent years, particularly with the respect to fruit and vegetables commonly eaten by humans, due to its dual implications in plant protection and human health.

Resveratrol has been found in at least 72 plant species distributed among 31 genera and 12 families. All of the families, found to contain resveratrol, belong to the spermatophytes division: *Vitaceae*, *Myrtaceae*, *Dipterocarpaceae*, *Cyperaceae*, *Gnetaceae*, *Fabaceae*, *Pinaceae*, *Moraceae*, *Fagaceae*, *Liliaceae* [2, 3]. On the other hand, the compound has been reported in few fruit and vegetable products included in the human diet (grapes, wine, grape juice, cranberries, peanuts). In 2003, resveratrol was found in hops, and suggested that this molecule could also be found in beer [4]; instead in 2006, Counet *et al.* [5] found *trans*-resveratrol and *trans*-piceid in dark chocolate and cocoa liquor, although the antioxidant

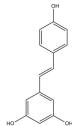


Figure 1: Structure of resveratrol.

activity of chocolate is probably related to its high procyanidin content rather than the presence of stilbenes (0.4 mg/kg *trans*-resveratrol and 1 mg/kg *trans*-piceid, the glucoside of resveratrol, in dark chocolate and 0.5 mg/kg *trans*-resveratrol and 1.2 mg/kg *trans*-piceid in cocoa liquor) [5].

Resveratrol and related stilbenes in plants are strongly implicated as an important mechanism in host defence against infection and injury, being synthesized as response to biotic and abiotic stress, such as fungal infection [6], ultra violet light exposure [7, 8], ozone stress [9], anoxic treatment [10], and wounding [6]. This molecule is derived from the acetate-malonate and phenylpropanoid pathways of primary and secondary metabolism of the plant, respectively. The condensation of p-coumaroyl CoA with three molecules of malonyl CoA is accomplished through stilbene synthase activity. Four moles of CO_2 are released for each mole of resveratrol synthesised. Resveratrol synthesis in grape is then catalysed by the stilbene

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synthase (STS) enzyme, which utilizes p-coumaryl-CoA and malonyl CoA as the substrate. The same substrates are also utilized by chalcone synthase (CHS) for the production of chalcone, the precursor of flavonoids. Chalcone synthase indeed catalyses a reaction involving one p-coumaroyl CoA and three malonyl CoA molecules, but in this instance only three CO₂ molecules are generated. The product is naringenin chalcone which, in a further series of reactions, gives rise to the flavonoid family. Two gene families for CHS and STS have been identified in Vitis vinifera, one of the plant species in which the markedly high amounts of resveratrol are naturally found. Grapevine genome sequencing reported in 2007 revealed a marked expansion of STS genes (43 genes identified in addition to the 20 previously identified), suggesting the great importance of stilbene metabolism for this species [11]. Several plants have been genetically modified by transferring the STS gene to produce trans-resveratrol in order to investigate its potential roles in health promotion in humans and disease control in plants, such as tobacco, tomato and poplar [12-14]. Products from grapes, the world's second largest fruit crop, are considered as the most important available human dietary source of resveratrol. Grape germplasm resources are being able to provide abundant quantities of natural resveratrol products. Therefore, it is of utmost importance to accurately measure the resveratrol content in grape germplasm in order to utilize germplasm resources to produce resveratrol and/or in breeding programs, to obtain new cultivar berries containing high quantities of resveratrol.

Stilbene synthesis takes place in the skin and seeds of berries [15-17], but has also been detected in the stem, axillary bud, shoot tip, petiole, root and leaf of grapevine, at constitutive levels ranging from 0.2 mg/kg FW to 16.5 mg/kg FW. Stem phloem tissue contains the greatest amounts of resveratrol, whereas leaves have the lowest.

In grapevine and interspecific varieties, the resveratrol content of UV irradiated grape berries decreased proportionately from the green stage to complete maturity, being close to zero in ripe fruit. The geographical area in which grapes are cultivated appears to influence the level of resveratrol in wine; overall, the red varieties had a higher content than the white/pink ones. The highest total resveratrol content was found in varieties such as Pinot Noir and Pinot Tete de Negre (>20 mg/kg of FW of total grape berry), and the lowest in Teroldego and Rebo (<1 mg/kg of FW of total grape berry).

Romero-Pèrez *et al.* [18] measured the level of resveratrol in 36 grape juices and found that the average concentration in red samples is ten-fold higher than that in the white juices. The great variability was also observed: the total resveratrol content ranged from 0.69 to 14.47 mg/l in red samples and 0 to 1.44 mg/l in white samples. As found by Li *et al.* 2006 [17] in grape berries, the fresh juices from the wine-making grape varieties had more total resveratrol content than the commercial juices. Thus, grape juice, in particular red grape juice, may be an alternative dietary source to wine to achieve the beneficial effects of resveratrol [18, 19].

Moreover, the efficacy of dietary resveratrol may be greater when included in the diet rather than taken in the form of a compound in pills. It has been suggested that the presence of quercetin, which interfere with resveratrol removal, might diminish the catabolism of the phytoalexin, and therefore increase its levels in serum [20, 21]. Also, there are indications that the combination of resveratrol and quercetin could enhance the effects of these compounds on triacylglycerol metabolism. However, further studies are required to verify this. Resveratrol is poor soluble in water and the preparation

of proper formulation with satisfactory bioavailability of this molecule present a real challenge [22]. For many years, the benefits of fruits and vegetables have long been considered due to their fibers, minerals and vitamin contents, but studies made in the last few decades have highlighted the importance of phytochemicals in preventing disease and increasing life expectancy.

An ever-increasing number of persons are becoming aware of the importance of the healthy diet, and the challenges that it incurs. The life expectancy of humans can be prolonged by an appropriate diet, rich in vegetables and fruit, which contain antioxidants; of course, a correct diet cannot be considered as panacea, since genetic factors also play a significant role in life expectancy. Yet, foodstuffs with a relevant antioxidant effects contain molecules that can prevent damage to the cellular system incurred by oxygen radicals O2 (ROS). The diet that has been inversely related to the mortality from cardiovascular diseases [23] contains a wide range of predominantly phenolic bioactive compounds, including flavonols (e.g. myricetin kaempferol, quercitin, catechin and epicatechin, proanthocyanidins, anthocyanins, phenolic acids and stilbene resveratrol). Thousands of articles that describe the metabolism and bioactive proprieties of resveratrol and its close derivatives, were published in the last 20 years. In particular, the increasing interest shown in resveratrol is due to the discovery of its numerous biological activities and its beneficial effect on human health, providing protection from heart disease, cancer neuron damage, skin conditions and the effects of aging [20, 24-38].

The interest in this molecule in grape was originally sparked by epidemiological studies indicating an inverse relationship between moderate consumption of red wine over a long period of time and risk of coronary heart disease. This discovery, made in the early nineties, gave rise to the term "French Paradox": even if a positive correlation between a high saturated fat intake and high mortality from coronary heart disease (CHD) has been found worldwide, in France, where red wine is consumed generally in moderate quantities, it was not confirmed [28]. This biological attribute ascribed to resveratrol has been borne out by a large body of evidence demonstrating resveratrol's pharmacological activities.

Resveratrol provides protection against cardiovascular diseases [39] (CVD), currently the leading cause of death, and a relevant health problem worldwide. Some of the major risk factors for CVD, such as age, sex, genetic predisposition, diet, and lifestyle are constant. Moreover, it is widely accepted that excessive dietary intake of saturated fats and cholesterol play a role in the onset and development of CVD through changes in plasma low-density lipoprotein-cholesterol (LDL-c) [40, 41]. However, non-lipid risk factors can also contribute to the development of CVD. About one half of the deaths due to this condition occur in individuals with normal cholesterol levels [40, 42]. It is believed that risk factors other than raised plasma cholesterol may play an important role in the development of CVD [43]. Novel pharmaceutical and dietary strategies, so-called "functional foods", provide a new window of opportunity in the efforts being made to reduce CVD.

At the concentration obtainable physiologically by the consumption of red wine, resveratrol increases the expression of endothelial nitric oxide (NO) synthase in human vascular endothelial cells, which is responsible for synthesizing the potent vasodilator, nitric oxide [44]; it also decreases the expression of the potent vasoconstrictor, endothelin [44]. Other mechanisms underlying the cardio-protective effects of resveratrol include the inhibition of platelet aggregation, similar to aspirin, and its antioxidant effects on cholesterol metabolism [39].

Resveratrol has an important effect on endothelial cells injury. It maintains a balance between vasodilators, such as NO, and vasoconstrictors, such as endothelin-1 (ET-1) [45] which, together, provide thrombus-resistance, and prevent atherogenesis [46]. Recent studies have shown that resveratrol has the ability to regulate the production of these important compounds [47]. Normally, when endothelial injury occurs, platelets adhere to the subendothelial matrix of a damaged vessel, spread over its surface and recruit additional platelets to form a thrombus. Improper regulation or over reactivity of this repair system can lead to the thrombosis. Findings reported in several in vitro and in vivo studies showed that platelet aggregation by a number of agonists is suppressed by resveratrol [31, 48, 49]. As reported by Wang et al. in 2002 [31], the administration of resveratrol (4 mg/kg/day) to rabbits with a high cholesterol diet caused a 35% reduction in the average ADP-induced platelet aggregation rate (PAR) in compare with the animals given a standard diet.

Resveratrol has been found to significantly inhibit LDL oxidation [26, 33, 49], which is the key event in the initiation of endothelial injury and the induction of pro-inflammatory molecules expression in endothelial cells. High plasma LDL levels are associated with an increased risk of atherosclerosis [50], and in numerous studies it has been found that resveratrol protects lipids from peroxidative degradation and inhibits the uptake of oxidized LDLs in the vascular wall [51, 52].

Vascular dysfunction is the initial step in the onset of many cardiovascular system diseases states concurrent with diabetes [53]. Oxidative stress is the key mechanism in the pathogenesis of diabetes-related vascular dysfunction, and the inactivation of nitric oxide by ROS is known be a crucial factor in reducing NO bioavailability and the development of endothelial dysfunction [54]. NAD(P)H oxidase is a key source of superoxide (O2) in the vasculature [55]. Previous studies demonstrated that Tumor Necrosis Factor-alpha (TNF-α) treatment inhibits NAD(P)H oxidase activation in coronary arterioles from mice with type 2 diabetes [56]. TNF-α is reported to down-regulate NOS expression in the fat and muscle of obese rodents [57]. Several studies have also reported that resveratrol attenuates TNF-α expression activated by lipopolysaccharides (LPS) [58, 59], suggesting that resveratrol protects the organism against vascular dysfunction in diabetics by attenuating TNF-α induced vascular oxidative stress [60]. Furthermore, it has been shown that resveratrol induces major cellular anti-oxidant enzymes (e.g. glutathione peroxidase, heme oxygenase, superoxide dismutase) in cardio-vascular cells [61], thus leading to a marked attenuation in oxidative stress. Resveratrol downregulates both the vascular and cardiac expression of TNF-α and inhibits NADPH oxidases in the vasculature [60, 62, 63]. Importantly, resveratrol inhibits the mitochondrial production of ROS in the vasculature [40]. For the first time Di Renzo et al. [64, 65] observed the effect of resveratrol (in red wine), in association with McDonald's and a Mediterranean meal, on ox-LDL and gene expression. When red wine is associated with the two types of meals, values of ox-LDL are lowered and expression of antioxidant genes is increased, while chemokine C-C motif ligand 5 (CCL5) expression is decreased. CCL5, a chemotactic cytokine plays diverse roles in the pathology of inflammatory disease [64, 65].

Recently, Kantartzis *et al.* [66] studied the effects of 12-week resveratrol supplementation on liver fat content and cardiometabolic risk parameters in overweight, obese and insulin-resistant volunteers. No effects of resveratrol supplementation on cardiometabolic risk parameters were observed. However, it is worth of noting that the variability in liver fat content was very

large and tissue biopsy was not performed. Therefore, some resveratrol effects on molecular level might have not been recorded.

It was also observed that resveratrol could slow down the effects of aging. The socio-economic and health implications of increased human life expectancy are related to an increase in the healthcare burden incurred by age-related diseases. Anti-aging pharmacological treatment should thus increase the quality of life by decreasing the risk of age-associated diseases [67-69].

One of the most widely proposed strategies designed to reduce the effects of age is dietary restriction [70] defined as a reduction in nutrient intake in the absence of malnutrition [71]. Thus, experimental studies have demonstrated that dietary reduction increases lifespan in a variety of different experimental organisms, including yeast, nematodes, flies and rodents [71, 72]. Dietary restriction increases the lifespan as well as the period of life spent in relatively good health and free of age-associated disease [73]. A particular class of enzymes, called sirtuins, seems to mediate some of the effects of dietary restriction [74]. There are seven members of the sirtuin class of enzymes in mammals - SIRT-1 to SIRT-7 [20]. Sirtuins regulates a number of intracellular pathways via the activation of transcription factors and enzymes responsive to nutrient availability. SIRT-1, the major sirtuin activated through both calorie restriction and resveratrol, mediates the beneficial impact of each on longevity and health [75]. SIRT-1 acts by deacetylating transcription factors, such as the tumor suppressor p53, the FOXO family of transcription factors FOXO1, FOXO3 and FOXO4 and the transcription factors NF-kB [76-78]. The importance of the FOXO transcription factor in the mammalian aging process, recently revealed in reports from three independent studies, suggests that there is an association between an increase in longevity and FOXO 3A gene [79, 80]. Moreover, as is well known, NF-kB is the master regulator of the immune/inflammatory response; by regulating NF-kB, SIRT-1 may inhibit the expression of genes involved in inflammation that is directly related with the NF-kB signaling pathway [81, 82]. SIRT-1 is involved in other vital processes, such as DNA repair, cell survival, gluconeogenesis, muscle cell differentiation, cell cycle regulation lipid metabolism fat mobilization and sensitivity to insulin [83]. The physiological actions of SIRT-1 are mediated in part of their ability to deacetylase nucleosomal histone proteins at specific residues for histone H4 lysine 16 [84, 85]. It has been suggested that a potential cause of aging is failure to control the structure of chromatin which, once SIRT-1 is activated, mediates intracellular responses by regulating non-histone cellular substrates [20, 86]. Therefore, it has been suggested that resveratrol mimics the protective effects of dietary restriction, since it can activate the mammalian sirtuin in SIRT-1 in vitro assays [87]. However, it is widely debated whether resveratrol is a direct activator of SIRT-1 [88]. Resveratrol may not lead to the direct activation of SIRT-1 with p53 native peptide substrate [89] although a convincing body of evidence both in vivo and ex vivo showed that resveratrol and its metabolites can promote a SIRT 1dependent cellular response, as demonstrated by resveratrol-induced decreases in acetylation of various known SIRT-1 targets [90]. In addition, the over expression of SIRT-1 in endothelial cells can mimic many of the effects of resveratrol, whereas SIRT-1 depletion tends to attenuate the resveratrol-induced cellular effect [30, 91-93]. The ability of resveratrol to mimic lower energy intake was originally tested in two parallel experiments in mice [94, 95]. When mice were on high fat diet, resveratrol restored their normal lifespan by preventing conditions leading to early death, but it also improved insulin sensitivity and motor function [90, 94]. In mice on a normal diet, resveratrol did not increase lifespan significantly [94], although its possible effects at higher doses have not been

investigated. Moreover, dietary restriction may reduce mitochondria-derived ROS production, in accordance with the mitochondrial theory of species. Therefore, mitochondria-derived ROS might accelerate the aging process in pathological conditions, such as diabetes and the metabolic syndrome [74]; in addition, an increasing number of studies now suggest that resveratrol plays an important role in protecting mitochondria and attenuating mitochondrial ROS production. Many experiments confirmed that resveratrol reverses hyperglycaemic status in high fat-induced obese rodents and animal models with type 1 diabetes. It was observed that the oral administration of resveratrol at dose of 22.4 mg/kg/day improves insulin sensitivity and slightly reduces body weight in one-year-old mice on a high fat diet. At a dose of 400 mg/kg/day, resveratrol prevents diet-induced obesity and alleviates obesityrelated insulin resistance; in the diabetic rat, it has been shown that resveratrol decreases plasma glucose and lipid levels in a dependent fashion [90, 94, 96]. However, Zhang et al. [60] demonstrated that resveratrol neither alters body weight nor reduces hyperinsulinemic hyperglycaemia in Lepr^{db} mice (an animal model in which a genetic modification incurs a defect in receptor for the obese gene product, leptin). Zhang et al. [60] suggest that resveratrol has therapeutic effects, especially on vascular complications, which can also occur independently of weight loss and hyperglycaemic status. It is wellestablished that age-associated low-grade inflammation accelerates the incidence of coronary artery disease and stroke in the elderly. The consequences of increased oxidative stress in aging include functional inactivation of NO by high concentrations of O2, resulting in significant vasomotor dysfunction [30], increased apoptosis of endothelial cells [97, 98], and impaired mitochondrial biogenesis [91, 92, 99]. Recent studies provide clear evidence that resveratrol treatment can also confer vasoprotection in aged mice and rats, thus attenuating ROS production, improving endothelial function, inhibiting inflammatory processes and decreasing the rate of endothelial apoptosis [29, 95]. Further studies of this type are required in order to clarify whether resveratrol might be used as a drug in humans to prevent vascular injury and its fatal complications.

There has been a focus on the involvement of resveratrol in neuron protection against neurodegenerative diseases. The study by Virgil and Contestabile [100], which appeared in 2000 was the first to suggest a neuroprotective property of resveratrol against excitotoxic brain injury: the authors compared the effect of systemic administration of an excitotoxin kainic acid (KA) in young adult rats, and found that chronic resveratrol treatment prior to KA administration considerably reduced the damages caused by KA in the olfactory cortex and the hippocampus. Multiple cell culture investigations and in vivo studies in animal models of neurodegenerative diseases/brain injury show that resveratrol is a potent neuroprotective compound. Interesting neuroprotective effects are probably mediated through multiple mechanisms that may include the inhibition of the: voltage-gated potassium current [101], electrical activity of CA1 neurons [102] and/or excitatory synaptic glutamate receptors [101]. In cell culture studies, resveratrol treatments reduced the effects of many types of brain injury, such as ethanol induced neuronal cell death [103, 104] in the presence of amyloid beta-peptide, a neurotoxic peptide believed to play a role in the pathogenesis of Alzheimer's disease [105, 106], and the loss of dopaminergic neurons in rat primary midbrain neuron-glial cultures treated with lipopolysaccharides (LPS) via anti-inflammatory activity [107]. In 2011, Liu et al. demonstrated in rat model of spinal cord injury that resveratrol treatment provides neuroprotection and functional recovery via its anti-oxidant, antiapoptotic and anti-inflammatory actions [108]. Resveratrol treatment was also found to provide neuroprotection in animal

models of Huntington's disease via the activation of *Ras* extracellular signal regulated kinase [109], and in a rat model of multiple sclerosis probably via anti-inflammatory activity [103, 110].

Also, some preclinical studies provoke resveratrol supplementation in promoting cognition. Based on the new meta-analysis of randomized controlled trials, although resveratrol enhances some cognitive performance measures outcomes were inconsistent probably due to the different dose (75 - 500 mg), the length of the trial period, heterogeneity of the participants [111]. Numerous studies are in progress with the aim to gain a better understanding of the association/correlation between the human nervous system and resveratrol.

Moreover, the valuable data are obtained concerning the safety and tolerability of resveratrol in humans [112], while its clinical pharmacokinetic and metabolism profiles have now been defined yet. So far, 16 studies on resveratrol are available in literature, and another six, which have been completed, are forthcoming; they include trials that investigate the potential role of resveratrol in the management of type 2 diabetes, Alzheimer's disease, and cancer [113]. However, in only a small number of clinical trials resveratrol was used as a single-agent and its safety and tolerability was investigated [62, 114-117].

Resveratrol also plays a key chemopreventive role against cancer; epidemiological studies suggests that a higher flavonoid intake is associated with lower cancer risk [118], the molecule affecting all three stages of carcinogenesis (initiation, promotion, and progression) by modulating the signal transduction pathways controlling cell division and growth, apoptosis, inflammation, angiogenesis, and metastasis, and is therefore considered as a promising anticancer agent by some authors [119]. The anticancer property of resveratrol has been supported by findings indicating that it inhibits the proliferation of a wide variety of human tumour cells in vitro. These data have prompted numerous preclinical studies designed to evaluate the potential of resveratrol in cancer chemoprevention and chemotherapy [118-123]. In the first study on the anticancer property of resveratrol in literature, an experiment was conducted on skin cancer development in mice treated with a carcinogen. Indeed chemoprevention, the prevention of cancer by the ingestion of chemical agents that reduce the risk of carcinogenesis, is one of the most direct ways of reducing its morbidity and mortality. Cancer chemopreventive agents include nonsteroidal anti-inflammatory drugs (NSAIDs) such as indomethacin, aspirin, piroxicam, and sulindac (inhibitors of cyclooxygenase, COX) [124]. Resveratrol was identified as a potent inhibitor of COX [125], and therefore a potent chemopreventive agent against cancer. So, there are many metabolic pathways by which resveratrol can take a determinant role. One of the most important ways of the prevention of the development of cancer is by the induction of apoptosis, which may be mediated by either death receptors or signals arising from within the cell (i.e. via a mitochondrial mechanism) or by the generation of reactive oxygen species [123]. The induction of apoptosis selectivity in cancer cells is regarded as an important strategy for cancer prevention as well as therapy. Resveratrol has been reported to induce apoptosis in various cancerous or transformed cells in culture, chemically induced mouse skin tumours and in transplanted tumours in nude mice by activating both the extrinsic and intrinsic pathways of cell death mechanisms [126-128]. Resveratrol induces apoptosis by activating pro-apoptotic signalling molecules as well as inhibiting the anti-apoptotic molecules of the intracellular signalling molecules of the intracellular signal transduction pathways [128]. Resveratrol also seems to have the power to inhibit angiogenesis by

disrupting angiogenesis signalling cascades, a process that is believed to be the frontline of attack by various anti-cancer agents. Findings of paramount importance in the literature, confirm the anti-angiogenetic effects of resveratrol. Increased metabolic activity and oxygen consumption by rapidly proliferating cells make solid tumours more likely to maintain an intratumoral hypoxic environment [129, 130], which promotes tumour cell adaptation by inducing hypoxia responsive genes [131, 132]. The data collected by several laboratories show that resveratrol exerts its anti-proliferative effect by targeting members of the apoptotic family in cancer of various tissues, such as the prostate, breast, brain, endometrium, blood rectum, pancreas, skin, lung, ovary and bladder [133,134].

Chemotherapy is often used as the front-line regimen in the treatment of most cancer types. However, the development of tumour resistance to chemotherapy, so called chemoresistance, is a major hurdle in cancer therapy [135, 136]. Chemosensitization is an effective tool in overcoming chemoresistance, whose mechanisms in tumours can be intrinsic (cells resistant before treatment) or acquired (resistance develops during treatment) [132]. These mechanisms may depend on, for example, drug influx and efflux, inactivation of chemotherapeutic agents, alterations in target molecules, enhanced DNA repair, growth factor signalling, and/or alterations in cell-death regulation. Resveratrol exerts its sensitization effect by modulating one or more mechanisms of resistance. Findings in most of the recent reports in the literature indicate that resveratrol sensitizes tumour cells to chemotherapeutic agents by modulating cell survival proteins; for example, to sensitize human cancer cell lines to chemotherapeutic agents such as doxorubicin cytarabine (AraC), actinomycin D, taxol, and methotrexate by down-regulating any surviving expression and increasing apoptosis [135, 137, 138]. Likewise, in another study, resveratrol-potentiated apoptosis was found to be induced by

chemotherapeutic agents such as a cisplatin, gefitinb, and paclitaxed in multidrug-resistance non-small-cell lung cancer cells, the process being associated with a decrease in surviving expression [135]. Furthermore, studies on the pharmacokinetics of resveratrol in humans have concluded that even high doses of resveratrol might be insufficient to achieve the resveratrol concentration required *in vivo* for the systemic prevention of cancer [115, 118]. This observation is consistent with the findings made in animal cancer models, which indicate that the *in vivo* effectiveness of resveratrol is limited by its poor systemic bioavailability [33, 139, 140]. The most convincing evidence of the anticancer effect of resveratrol has been obtained in tumours where direct contact with the molecule was enabled (such as cancer of the skin and gastrointestinal tract). For other cancers, the evidence is uncertain, even if massive doses of resveratrol are used [118, 139].

Additional proof of the wide potential of resveratrol presents the recent investigation of resveratrol as possible agent in the treatment of infertility. It was observed that resveratrol supports the growth of follicles in the culture model derived based on donated human ovarian tissue [141].

According to all, many pre-clinical studies provided promising evidences about different resveratrol benefits. As natural and biologically active compound the consumption of resveratrol is generally recognized as well-tolerated and safe. However, the outcomes of clinical studies are inconsistent and limited. Regarding the poor bioavailability of the most of the commercially available resveratrol supplements, the application of improved oral dosage forms is necessary. Therefore, more clinical studies on resveratrol as single agent, which will measure wide range of parameters, are needed in order to determine conclusively the effect of resveratrol on the human health.

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