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**Title:** *Bacopa monnieri* (L.) exerts anti-inflammatory effects on cells of the innate immune system *in vitro*

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**Running Title:** Anti-inflammatory activity of *Bacopa monnieri*

**Keywords:** Innate immune system; inflammation; *Bacopa monnieri*; Brahmi; memory; cognition; neuroprotection

**Abbreviations:** AD, Alzheimer's Disease; BM, *Bacopa monnieri*; CNS, central nervous system; COX, cyclo-oxygenase; CSF, cerebral spinal fluid; IL-*n*, interleukin *n*; IFN- $\gamma$ , interferon gamma; LPS, lipopolysaccharide; MCI, mild cognitive impairment; PHA, phytohemagglutinin; TNF- $\alpha$ , tumour necrosis factor alpha;

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#### **Abstract**

*Bacopa monnieri* (L., BM) is a traditional Ayurvedic medicinal herb recognised for its efficacy in relieving acute pain and inflammation, as related to selective inhibition of cyclooxygenase-2 (COX-2) enzyme and consequent reduction in COX-2-mediated prostanoid mediators. BM is also associated with cognitive enhancing (nootropic) activity including improving memory free recall, observed after prolonged intake (>3 months). It is likely that the timeframe required to exert an effect in the brain reflects regulation by BM of chronic inflammation and oxidative stress associated with aging and chronic diseases, and other polypharmacological effects. We report down-regulation by BM of NO and TNF- $\alpha$  in stimulated RAW 246.7 macrophages and of IFN- $\gamma$  in stimulated human blood cells. Furthermore, in human blood cells, IL-10 was slightly elevated indicating polarisation towards a regulatory T cell phenotype. These results provide further supportive evidence to justify the clinical evaluation of BM for managing diseases involving chronic systemic and brain inflammation driven by the innate immune system.

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## 1 **Introduction**

2 *Bacopa monnieri* (L.) Wettst. (*Syn. Bacopa monnieri* (L.) Pennell (Scrophulariaceae) (BM)  
3 known as Brahmi in traditional Ayurvedic medicine, is a small, creeping herb with numerous  
4 branches, small oblong leaves and light purple flowers. It is found throughout the Indian  
5 subcontinent in wet, damp and marshy areas. In Ayurvedic medicine, Brahmi is classified as  
6 a 'medhya-rasayana', the name given to drugs that promote cognitive functions and memory  
7 <sup>1</sup>. An extract of BM is now available in supplement form as 'Membac', and marketed for  
8 aiding memory recall and learning retention, in addition to assisting mental clarity,  
9 concentration and attention span. Effects of BM on memory and cognitive performance have  
10 been substantiated in a small number of randomized, controlled human clinical trials. A  
11 systematic review of randomized controlled trials showed that BM improved performance in  
12 9 out of 17 tests in the domain of memory free recall but was not effective in other cognitive  
13 domains <sup>2</sup>.

14

15 Compounds responsible for the pharmacological effects of BM include alkaloids, triterpenoid  
16 saponins and sterols. Many active constituents including the alkaloids: Brahmine and  
17 herpestine, the saponins: d-mannitol and hersaponin; and other compounds identified as acid  
18 A and monnierin have been characterised in India over 40 years ago. Other active  
19 constituents have since been identified, including betulic acid, stigmastanol, beta-sitosterol,  
20 and a number of triterpenoid saponins identified as bacosides and bacopasaponins <sup>3</sup>. To date,  
21 the effects of BM on cognitive function have been attributed to enhancing nerve impulse  
22 transmission by the triterpenoid saponins and bacosides <sup>4</sup>. In addition, the bacosides aid in  
23 repair of damaged neurons by enhancing kinase activity, neuronal synthesis, and restoration  
24 of synaptic activity, and ultimately nerve impulse transmission.

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1 However, the anti-inflammatory properties of BM could also be relevant to observed  
2 neuroprotective effects. Chronic low grade inflammation is linked with cognitive decline in  
3 Alzheimer's disease (AD) and other neurodegenerative disorders <sup>5,6</sup>. Both histochemical and  
4 blood biomarker evidence <sup>7</sup> as well as imaging studies <sup>8,9</sup> suggest that release of pro-  
5 inflammatory cytokines by activated macrophages in the blood and microglia in the brain  
6 contribute significantly to neuronal cell death <sup>7</sup>. These pro-inflammatory cytokines stimulate  
7 a cascade of pro-inflammatory cytokines and mediators including TNF- $\alpha$ , prostaglandin E2,  
8 nitric oxide and hyper-secretion of cortisol, the plasma levels of which predict rate of  
9 cognitive decline <sup>10</sup>. The latter steroid inhibits protein synthesis thereby reducing the  
10 synthesis of neurotrophic factors. Thus, chronic inflammation is strongly involved with the  
11 pathology of dementia, leading to increased neurodegeneration, reduced neuroprotection and  
12 neuronal repair <sup>11</sup>.

13

14 In addition to neurotrophic activities, BM appears to stabilize mast cells *in vitro*, and inhibit  
15 prostaglandin synthesis <sup>12</sup>. The bacopasides exert anti-inflammatory and neuropathic pain-  
16 relieving effects by inhibition of cyclooxygenase-2 (COX-2), with potential for the typical  
17 bacopaside: bacoside A<sub>3</sub> (BA<sub>3</sub>) to activate opioid receptors due to their structural similarity to  
18 morphine <sup>13</sup>. However, effects of BM on global parameters of inflammation, e.g cytokine  
19 release and free radical production have not yet been studied. The aim of this study was  
20 therefore to investigate effects of BM on modulating key inflammatory mediators produced  
21 by stimulated immune cells.

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## 1 **Materials and methods**

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3 The *Bacopa monnieri* was sourced as a bacoside-rich ethanolic extract representing bacosides  
4 from 4 g of dried plant solids, contained in each Membac capsule (Keen Mind CDRI 08,  
5 Keen Health Pty Ltd, Rozelle, NSW, Australia). . The standardised dried extract contained  
6 bacosides A and B accounting for at least 55% of total bacosides <sup>14</sup> and approximately 30%  
7 of total capsule solids. Excipients used to formulate the hard capsules are not  
8 known Lipopolysaccharide (LPS), phytohemagglutinin (PHA) and hydrocortisone were  
9 obtained from Sigma Chemical Co. (St Louis, MO, USA) and Dulbecco's modified Eagle's  
10 medium (DMEM) was obtained from Invitrogen (Carlsbad, CA, USA).

11

### 12 *Determination of anti-inflammatory activity in RAW 264.7 macrophages*

13 The procedure for determining anti-inflammatory activity in murine RAW 264.7 macrophage  
14 cells was previously described <sup>15</sup>. Briefly, the *Bacopa monnieri* sample was dissolved in 10%  
15 aqueous ethanol and diluted 10-fold to 10 mg/ml in serum-free DMEM before further serial  
16 dilution. Cells were pre-incubated for 1 h with sample (50  $\mu$ l) before activation with  
17 lipopolysaccharide (LPS, 25  $\mu$ g/ml in DMEM) and IFN- $\gamma$  (10 U/ml in DMEM), followed by  
18 further incubation at 37°C for 24 h. Cells with media alone constituted the negative control,  
19 and cells treated with pro-inflammatory stimuli, but no sample, were used as a positive  
20 control. After 24 h, cell viability was measured using the Alamar Blue assay involving the  
21 cellular reduction of resazurin to resorufin, and supernatants were deployed for analysis of  
22 nitrous oxide production by the Griess assay and TNF- $\alpha$  production by commercial ELISA  
23 kit (Cat. 900-K54, Peprotech, NJ, USA), according to manufacturer's instructions. At least 3  
24 independent dose response experiments with duplicate determinations from each well, were  
25 conducted for each assay.

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3 *Determination of anti-inflammatory activity in human whole blood cells*

4 Blood was obtained from healthy adult volunteers following their informed consent, as  
5 required for study approval by the CSIRO Food and Nutritional Sciences Human Ethics  
6 committee. An assay system utilising diluted whole blood was adapted from Matalka (2003)  
7 <sup>16</sup> and described previously <sup>17</sup>. Cells were stimulated into an inflammatory state by addition  
8 of LPS and PHA together with test compound, before further incubation at 37°C for 48 h.  
9 Hydrocortisone (HC, 200 ng/ml) was used as a positive control. The *Bacopa monnieri*  
10 sample was dissolved in 10% aqueous ethanol and diluted in serum-free media before further  
11 serial dilution. Samples or positive control were tested in duplicate for each of 4 donors.  
12 Supernatants were recovered for analysis of IFN- $\gamma$  and IL-10 by commercial ELISA kits  
13 according to manufacturer's instructions (DuoSet, R&D Systems, Minneapolis, MN, USA).  
14 For each cytokine, analysis of each supernatant was conducted in triplicate.

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16

## 17 **Results**

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19 *Inflammation prevention model - efficacy of Bacopa monnieri macrophages*

20 The experimental method of pre-conditioning of macrophages with BM for 1 h prior to pro-  
21 inflammatory stimulation allowed BM to diffuse into the cells to then regulate the subsequent  
22 pro-inflammatory challenge with LPS and IFN- $\gamma$ . The results indicated that BM was  
23 effective in lowering NO production ( $EC_{50} = 0.25 \pm 0.3$  mg/ml) but less effective in lowering  
24 TNF- $\alpha$  production ( $EC_{50} = 1.15 \pm 0.1$  mg/ml). Loss of cell viability was also observed with  
25 an  $EC_{50}$  value of  $1.32 \pm 0.23$  mg/ml (Figure 1).

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2 *Inflammation competitive regulation model - efficacy of Bacopa monnieri in whole blood*

3 In the whole blood assay, diluted whole blood from healthy volunteers was co-stimulated  
4 with LPS, PHA and BM simultaneously before incubation for 48 hr. The experimental  
5 method of co-stimulating blood cells with BM and pro-inflammatory mediators  
6 simultaneously therefore represented a model for testing capacity of BM to counter and  
7 suppress pro-inflammatory responses in an immediate timeframe. The results indicated that  
8 BM was effective in lowering IFN- $\gamma$  production ( $EC_{50} = 12.8 \pm 1.7 \mu\text{g/ml}$ ) and this co-  
9 incided with sustained (trend towards increase) production of IL-10 (1-30  $\mu\text{g/ml}$ ) before  
10 decline above  $\sim 500 \mu\text{g/ml}$ , associated with apparent toxicity in RAW264.7 cells (Figure 2).  
11 The steady state or trend towards increase in IL10 production at  $\sim 15 \mu\text{g/ml}$ ) suggested that  
12 control of inflammation was associated with elevation of the regulatory T cell population.  
13 The results for both IFN- $\gamma$  and IL-10 suggested that the BM appeared to become toxic to  
14 blood cells above  $\sim 30 \mu\text{g/ml}$  (Figure 2).

15

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## 17 **Discussion**

18

19 The results from 2 independent cellular model systems suggest that BM is likely to exert an  
20 anti-inflammatory effect by the regulation of Th1-polarised immune responses involving  
21 suppression of NO (and TNF- $\alpha$ ) by macrophages and IFN- $\gamma$  by innate lymphocytes.  
22 Furthermore, sustained production of IL-10 was indicative of neutralisation of Th1 activation  
23 in favour of activation of regulatory T cells. These results are supported by concentration-  
24 dependent inhibition of TNF- $\alpha$  release in human whole blood after pre-incubation (45 min)



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1 with various solvent extracts of BM and LPS-mediated stimulation<sup>18</sup>. These results indicated  
2 that the soluble ethyl acetate extract was more active than the bacoside-enriched extract.

3

4 The multiple bioactivities of BM have been attributed to the pentacyclic terpenoid saponins<sup>19</sup>  
5 and the related aglycone, betulinic acid<sup>20</sup>. The most studied pentacyclic terpenoid, ursolic  
6 acid is found in cranberry and displays significant anti-inflammatory and anti-cancer  
7 activities<sup>21</sup>. Anti-inflammatory regulation of TNF- $\alpha$ -induced activation of NF- $\kappa$ B was  
8 demonstrated in both Jurkat cells and human T lymphocytes<sup>21</sup>. Likewise, betulinic acid, was  
9 reported to suppress pro-inflammatory IL-6 production and NF- $\kappa$ B activation in LPS-  
10 stimulated human peripheral blood mononuclear cells<sup>20</sup>. In the rat paw edema model, using  
11 histamine, serotonin, bradykinin, arachidonic acid and prostaglandin E2-stimulated edemas,  
12 efficacy of BM was 100% for prostaglandin E2 and moderate to insignificant for all other  
13 phlogistic agents<sup>22</sup>. These results support that bacosides of BM are known to exert their  
14 anti-inflammatory and neuropathic pain relieving effects by inhibition of cyclooxygenase-2  
15 (COX-2), with additional possible pharmacological effects as related to the structural  
16 similarity of BA<sub>3</sub> bacosides to morphine<sup>13</sup>.

17

18 All activated effector and immune cells can produce pro-inflammatory eicosanoids,  
19 specifically, prostaglandins via COX-2 mediated pathway, which are stimulated by pro-  
20 inflammatory cytokines including IFN- $\gamma$  and TNF- $\alpha$ . In addition to selective inhibition of  
21 COX-2 by different solvent fractions of BM<sup>18</sup>, a minor aglycone, betulinic acid in BM, was  
22 also associated with modulating NF- $\kappa$ B translocation via regulating p38 and ERK MAP  
23 kinases. In the study by Viji *et al.*, the combination of betulinic acid with specific p38 and  
24 ERK MAP kinase inhibitors was more effective at down-regulating NF- $\kappa$ B than either of the  
25 p38 and MAP kinase inhibitors alone, suggesting that betulinic acid was acting on an

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1 additional pathway, presumably inhibiting COX-2, and could account for the synergistic anti-  
2 inflammatory effect <sup>20</sup>. It is therefore possible that pro-inflammatory activation of  
3 macrophages and human blood cells reported here also induced expression of COX-2 and  
4 prostaglandin mediators, and that apparent suppression of NO and TNF- $\alpha$  in RAW  
5 macrophages (Figure 1) and IFN- $\gamma$  in human blood cells (Figure 2) could be attributed to  
6 upstream inhibition of COX-2.

7

8 Apart from pain management reflecting COX-2 inhibitory activity <sup>13</sup>, a significant application  
9 focus for BM reflects its reputed nootropic efficacy and potential for improving cognitive  
10 function in the elderly <sup>23</sup>. A recent systematic review of cognition-enhancing effects  
11 concluded that there was some evidence for improvement in the memory domain of free  
12 recall associated with long term BM supplementation, but inadequate evidence demonstrating  
13 effects in any other cognitive domains <sup>24</sup>. Collectively, reported nootropic effects suggest  
14 that metabolites of BM are bioavailable to brain and the apparent range of  
15 polypharmacological actions <sup>23</sup> most probably reflect beneficial modulation of the  
16 chronically-activated peripheral and CNS immune systems, associated with several chronic  
17 diseases and aging <sup>25</sup>. An immune inflammation-centred hypothesis is supported by the need  
18 for extended therapy (>3 months) before benefits of BM are evident <sup>23</sup> and that intake of 300  
19 mg of BM does not provide any immediate benefit for cognition in healthy humans <sup>26</sup>.

20

21 The apparent requirement for long-term use to detect a cognitive benefit for BM is  
22 reminiscent of the protective effects associated with long-term use of barbiturate-free, non-  
23 steroidal anti-inflammatory drugs (NSAIDs), which was significantly correlated with  
24 lowering risk of AD and to a lesser extent, MCI <sup>27</sup>. Furthermore, long-term intervention  
25 studies (2 years) with the anti-inflammatory drug, naproxen, in cognitively normal elderly

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1 significantly prevented or delayed onset of AD<sup>6</sup>. In contrast, anti-inflammatory therapies  
2 have been consistently ineffective in slowing progression of dementia symptoms in MCI and  
3 AD patients<sup>28</sup>. These results suggest that future intervention studies with BM seeking to  
4 improve memory should involve long term interventions and also seek to evaluate effects on  
5 biomarkers of inflammation. This approach can contribute to the understanding of the role of  
6 inflammation in memory decline and progression of dementia.

7

8

### 9 **Acknowledgements**

10 This work was conducted with support from the CSIRO Preventative Health National  
11 Research Flagship. Technical assistance of Kiruba Shanmugam and Santina Forsyth are also  
12 gratefully acknowledged.

13

### 14 **Conflict of Interest Statement**

15 On behalf of all authors, the corresponding author states that there is no conflict of interest.

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1 **Figure Captions**

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4 **Figure 1.**5 **Concentration-dependent effects of *Bacopa monnieri* (BM) on the production of pro-**  
6 **inflammatory mediators by RAW264.7 macrophages activated with LPS and IFN- $\gamma$ .**7 Percentage change from control (no added BM) of mediator release in the presence of BM (1-  
8 1000  $\mu\text{g/ml}$ ). Results for cell viability (CV), nitrous oxide (NO) and tumor necrosis factor  $\alpha$   
9 (TNF- $\alpha$ ) are shown. Data are the mean of 3 independent experiments  $\pm$  SD.

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12 **Figure 2.**13 **Concentration-dependent effects of *Bacopa monnieri* (BM) on the production of pro-**  
14 **inflammatory and regulatory mediators by human blood cells activated with**15 lipopolysaccharide and phytohemagglutinin. Percentage change from control (no added  
16 BM) in the presence of BM (1- 1250  $\mu\text{g/ml}$ ), showing results for IFN- $\gamma$  and IL-10 are shown.  
17 Positive control was hydrocortisone (not shown). Results are the mean of four donors  $\pm$   
18 SEM.

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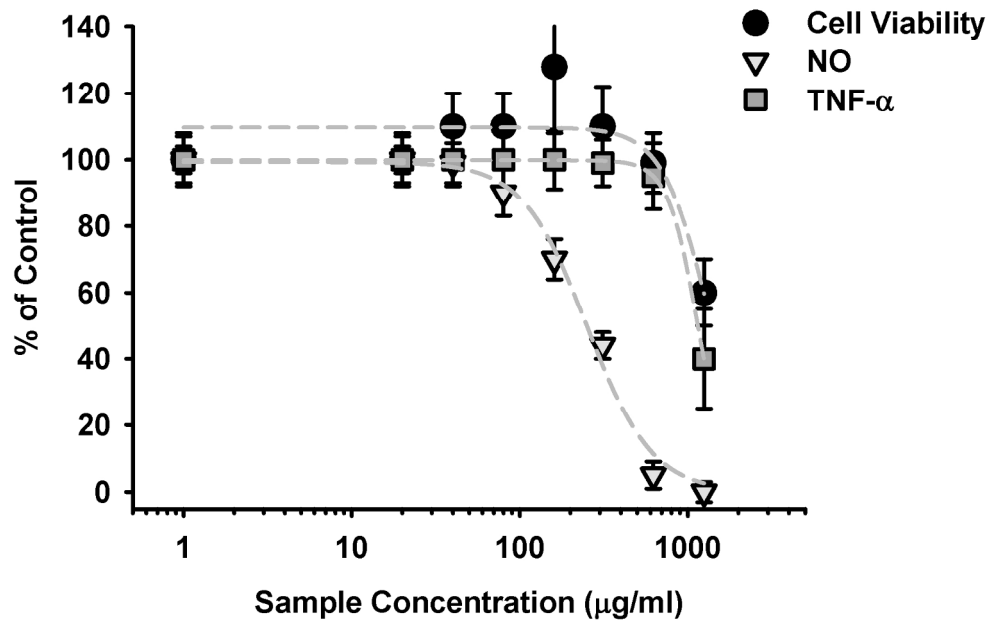
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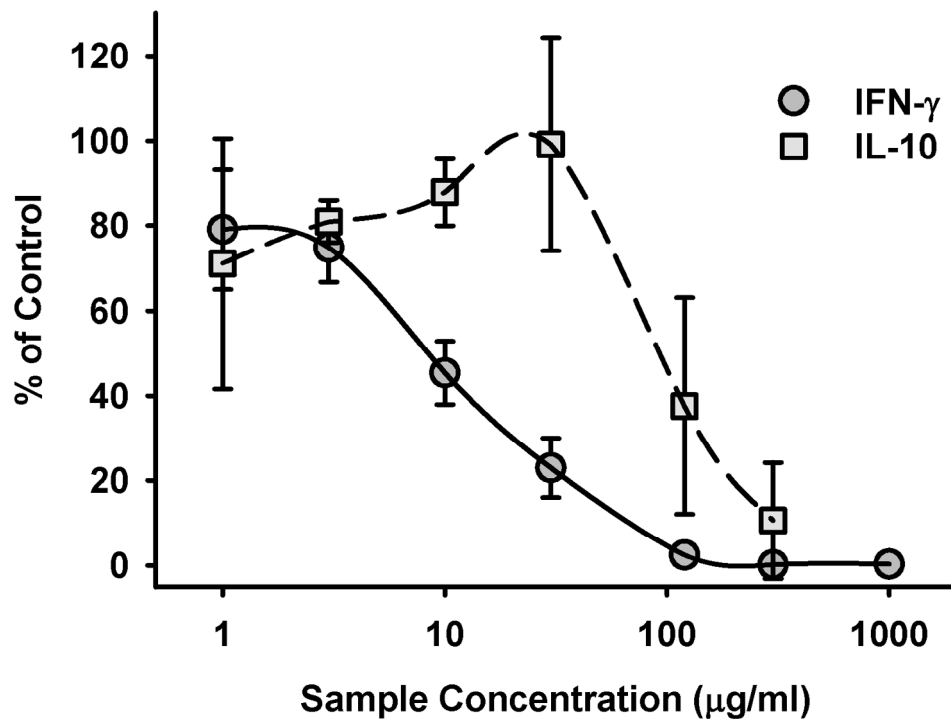
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Concentration-dependent effects of *Bacopa monnieri* (BM) on the production of pro-inflammatory mediators by RAW264.7 macrophages activated with LPS and IFN- $\gamma$ . Percentage change from control (no added BM) of mediator release in the presence of BM (1- 1000  $\mu\text{g/ml}$ ). Results for cell viability (CV), nitrous oxide (NO) and tumor necrosis factor  $\alpha$  (TNF- $\alpha$ ) are shown. Data are the mean of 3 independent experiments  $\pm$  SD.  
186x118mm (300 x 300 DPI)



Concentration-dependent effects of *Bacopa monnieri* (BM) on the production of pro-inflammatory and regulatory mediators by human blood cells activated with lipopolysaccharide and phytohemagglutinin. Percentage change from control (no added BM) in the presence of BM (1- 1250 μg/ml), showing results for IFN- $\gamma$  and IL-10 are shown. Positive control was hydrocortisone (not shown). Results are the mean of four donors  $\pm$  SEM.

156x118mm (300 x 300 DPI)