

Table 1: Chemical composition of *Salvia keerlii*

| Name of compound | Retention time (%) | Kovalts index |
|---|--------------------|---------------|
| Myristic acid | 15.483 (17.55) | 1788 |
| Oleic acid | 17.032 (9.20) | 2194 |
| (E)-9-Octadecenoic acid | 17.088 (3.89) | 2194 |
| Pentadecanoic acid | 17.250 (22.66) | 1888 |
| Eicosapentaenoic acid | 17.531 (0.42) | 2425 |
| 3-Hydroxyestrane-17-one, (3 α ,5 β)- | 18.333 (0.30) | 2113 |
| 9,12-Octadecadiynoic acid | 18.598 (0.54) | 2221 |
| Methyl dehydroabietate | 18.644 (12.35) | 2271 |
| 2-Hydroxyphenethyl alcohol | 18.791 (0.34) | 1475 |
| (Z)-5,8,11-Eicosatrienoic acid | 18.891 (8.56) | 2409 |
| Arachidonic acid | 19.569 (0.95) | 2417 |
| (3 β ,5 α)-Cholestan-3-ol, 2-methylene- | 19.681 (1.01) | 2652 |
| (Z)-13-Retinoic acid | 19.747 (5.37) | 2371 |
| Tetradecane, 2,6,10-trimethyl- | 25.025 (0.78) | 1519 |
| 10,12-Tricosadiynoic acid | 25.925 (0.51) | 2718 |
| 2-Oleoylglycerol | 28.519 (0.55) | 2788 |
| Ursolic acid | 28.840 (11.37) | 3306 |
| Oleanolic acid | 29.530 (2.90) | 3242 |

Table 2: Anti-inflammatory activity of the chloroform and methanol extracts of *Salvia keerlii* in ear edema induced with 12-O-tetradecanoylphorbol-13-acetate in mice

| Treatment | Dose (mg/ear) | Inhibition percentage |
|--------------|---------------|-----------------------|
| Vehicle | - | 0 |
| Indomethacin | 2 | 64.11 \pm 1.82* |
| Methanol | 2 | 38.58 \pm 7.3 |
| Chloroform | 2 | 84.96 \pm 3.92 |

The values are expressed as mean \pm SEM ($n=8$). * $P<0.05$ versus vehicle. SEM: Standard error of mean

Table 3: Anti-inflammatory activity of *Salvia keerlii* in ear edema induced by multiple applications of 12-O-tetradecanoylphorbol-13-acetate in mice

| Treatment | Dose (mg/kg) | Inhibition percentage |
|--------------|--------------|-----------------------|
| Vehicle | - | 0 |
| Indomethacin | 8 | 58.41 \pm 1.25* |
| SAKE | 12.5 | NA |
| | 25 | 16.35 \pm 2.63 |
| | 50 | 40.31 \pm 4.62 |
| | 100 | 56.57 \pm 3.16* |
| | 200 | 59.69 \pm 4.82* |

The values are expressed as mean \pm SEM ($n=8$). * $P<0.05$ versus vehicle. NA: No activity; SEM: Standard error of mean; SAKE: *Salvia keerlii*

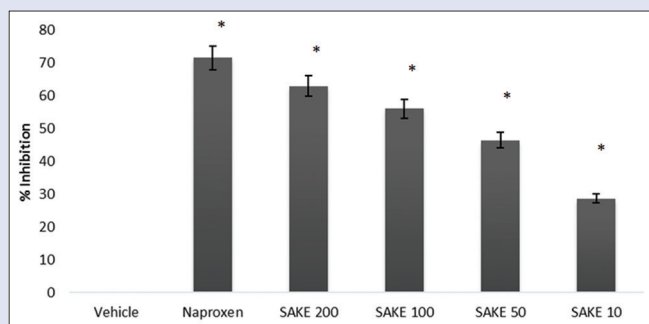


Figure 1: Effect of *Salvia keerlii* (10, 50, 100, and 200 mg/kg) and naproxen as control (100 mg/kg) on the intraperitoneal administration of acetic acid. Values are expressed as mean \pm standard error of mean ($n = 8$). * $P < 0.05$ versus vehicle

(56.57%) and 200 mg/kg (59.69%) showed an anti-inflammatory effect comparable to that obtained with 8 mg/kg IND (58.41%) [Table 3]. The effective dose 50 (ED₅₀) calculated for SAKE was 82.55 mg/kg.

Antinociceptive activity assay

SAKE showed antinociceptive effects (ED₅₀ = 74.11 mg/kg) in a dose-dependent manner by reducing acetic acid-induced writhing in mice. The percentage inhibition of writhing by SAKE at the doses of 10, 50, 100, and 200 mg/kg was 28.73%, 46.48%, 56.1%, and 63.05%, respectively, whereas 100 mg/kg naproxen, the positive control, showed the antinociceptive activity of 71.64% [Figure 1].

Acute oral toxicity of *Salvia keerlii*

Groups of 5 mice were administered 625, 1250, 2500, and 5000 mg/kg doses and observed for 72 h. The mice administered 2500 and 5000 mg/kg doses presented somnolence after 10 min of administration and remained in a catatonic state for 3 h. All mice administered with 5000 mg/kg SAKE died after 24 h of treatment. Mice administered with SAKE at doses of 625 and 1250 mg/kg showed somnolence after 45 min posttreatment, and this effect lasted 95 min. The other groups of mice were sacrificed 72 h posttreatment. Mice administered a dose of 2500 mg/kg presented irritation in the stomach and changes in the tone of the kidneys. These damages were also observed in a lower grade in the 1250 mg/kg SAKE groups. In contrast, mice treated with 625 mg/kg SAKE showed no damage to the liver, heart, stomach, lung, or kidney. The LD₅₀ calculated for SAKE was 3393 mg/kg.

Cell viability in macrophages

The effect of SAKE on the cell viability of J774A.1 macrophages was evaluated using the MTT assay. The results showed that SAKE at concentrations of 3.125–50 μ g/mL did not affect cell viability [Figure 2]. Therefore, the concentrations of 25 and 50 μ g/mL were used in subsequent experiments. The IC₅₀ calculated for SAKE was 147.85 μ g/mL.

Levels of pro- and anti-inflammatory cytokines

The action of SAKE and IND on the production of proinflammatory and anti-inflammatory cytokines was studied [Figure 3]. The results showed that compared to the control group, SAKE administration at 25 μ g/mL did not alter the levels of IL-6 but slightly diminished those of IL-1 β and TNF- α . However, SAKE at 50 μ g/mL reduced the levels of TNF- α (1.7-fold), IL-1 β (1.7-fold), and IL-6 (1.9-fold), and the findings were

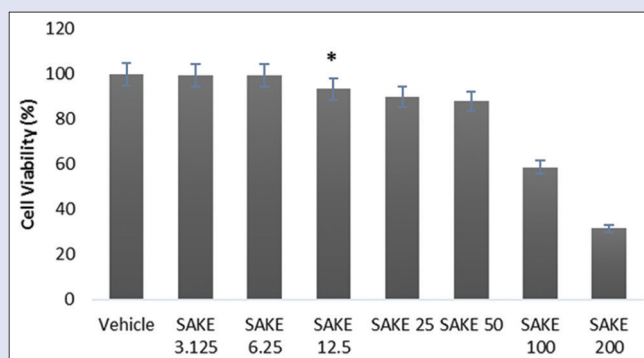


Figure 2: Effect on the cell viability of macrophages treated with *Salvia keerlii* at 3.125, 6.25, 12.5, 25, 50, 100, and 200 μ g/mL. Results are expressed as the percentage of surviving cell relative to control cell. The results are the mean of three determinations \pm standard error of mean. * $P < 0.05$ versus vehicle

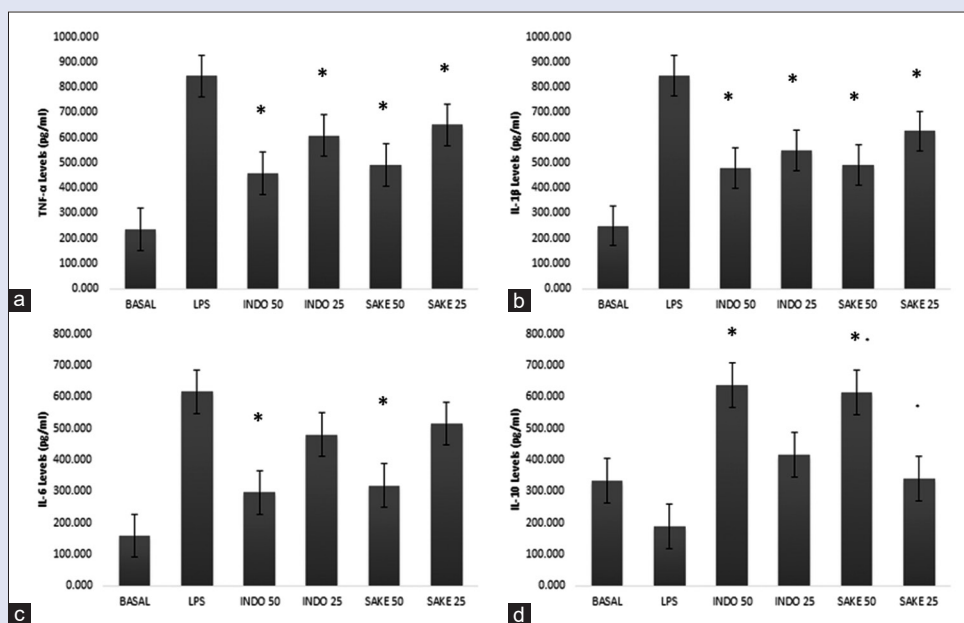


Figure 3: Effects of *Salvia keerlii* on the levels of (a) tumor necrosis factor- α , (b) interleukin-1 β , (c) interleukin-6, and (d) interleukin-10 in macrophages stimulated with lipopolysaccharide. The concentration was determined by enzyme-linked immunosorbent assay. The results are the mean of three determinations \pm standard error of mean. * $P < 0.05$ versus vehicle

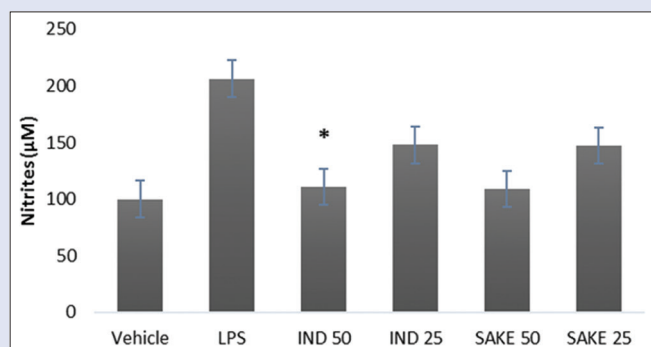


Figure 4: Effects of *Salvia keerlii* at concentrations of 25 and 50 $\mu\text{g/mL}$ on the production of nitric oxide in lipopolysaccharide-stimulated macrophages. The values are the mean \pm standard error of mean of three independent experiments. * $P < 0.05$ versus vehicle

similar to those found with IND. SAKE at 50 $\mu\text{g/mL}$ increased IL-10 production (1.9-fold) in comparison with the control group.

Inhibitory effects of *Salvia keerlii* on nitric oxide production

When cells were exposed to 5 $\mu\text{g/mL}$ LPS for 24 h, the NO concentration increased markedly [Figure 4]. SAKE at 25 and 50 $\mu\text{g/mL}$ inhibited the production of NO by 28.59% and 47.12%, respectively. This effect was similar to that obtained with IND at the same concentrations (28.29% and 46.29%, respectively).

Anti-arthritic activity *in vitro*

The results of the *in vitro* anti-arthritic activity of SAKE on the inhibition of protein denaturation are shown in Table 4. SAKE exhibited a significant anti-arthritic activity in a concentration-dependent manner. SAKE at 500, 750, and 1000 $\mu\text{g/mL}$ inhibited the protein denaturation by 68.23%,

72.86%, and 79.01%, respectively. Diclofenac, at the same concentrations, inhibited the protein denaturation by 84.05%, 89.50%, and 92.94%, respectively. The activity shown by SAKE ($\text{IC}_{50} = 40.73 \mu\text{g/mL}$) was lower than that obtained with diclofenac ($\text{IC}_{50} = 19.43 \mu\text{g/mL}$).

Membrane stabilization property

SAKE tested at 25, 50, and 100 $\mu\text{g/mL}$ showed 75.85%, 81.15%, and 86.50%, respectively, of protection in the membrane stabilization [Table 5]. The activity of SAKE ($\text{IC}_{50} = 8.68 \mu\text{g/mL}$) was comparable with that obtained with diclofenac ($\text{IC}_{50} = 5.19 \mu\text{g/mL}$). Diclofenac tested at 25, 50, 100, and 200 $\mu\text{g/mL}$ showed 89.7%, 91.63%, 92.20%, and 94.85%, respectively, of protection on membrane stabilization.

DISCUSSION

In this study, we determined the total phenolic and flavonoid content in SAKE using the Folin-Ciocalteu method and the AlCl_3 colorimetric method, respectively. The results showed that SAKE contains both types of secondary metabolites. In the GC-MS analysis of SAKE [Table 1], no phenolic or flavonoids were found, which could be because phenols and flavonoids with high molecular weight are very difficult to derivatize and cannot be determined by this method.

SAKE significantly inhibited (84.96%) acute TPA-induced ear edema in mice with higher activity than that obtained with IND; for this reason, the study was carried out with the chloroform extract. The topical application of TPA produces inflammation mediated by protein kinase C, the stimulation of phospholipase A_2 , and cyclooxygenase.^[16] Inhibition of the production of phospholipase A_2 and protein kinase C could be involved in the anti-inflammatory effect shown by SAKE.

SAKE was also tested at different doses on chronic TPA-induced edema. In this model, the infiltration of inflammatory cells, such as polymorphonuclear leukocytes, and epidermal hyperplasia occur,^[17] which increase the size of the ear edema. SAKE decreased ear edema induced by multiple applications of TPA, which suggests that this extract diminishes cellular infiltration.

Table 4: Effect of *Salvia keerlii* on the *in vitro* anti-arthritic activity on bovine serum protein denaturation method

| Group | Concentration (µg/mL) | Absorbance | Percentage denaturation | Percentage inhibition of denaturation |
|------------|-----------------------|------------|-------------------------|---------------------------------------|
| Control | - | 0.029 | 100 | 0 |
| Diclofenac | 1000 | 0.0312 | 7.05 | 92.94 |
| | 750 | 0.0324 | 10.49 | 89.50 |
| | 500 | 0.0345 | 15.94 | 84.05 |
| | 200 | 0.0384 | 24.47 | 75.52 |
| | 100 | 0.0401 | 27.68 | 72.31 |
| | 50 | 0.0496 | 41.53 | 58.46 |
| SAKE | 25 | 0.0501 | 42.11 | 57.88 |
| | 1000 | 0.0367 | 20.98 | 79.01 |
| | 750 | 0.0398 | 27.13 | 72.86 |
| | 500 | 0.0425 | 31.76 | 68.23 |
| | 200 | 0.043 | 32.55 | 67.44 |
| | 100 | 0.0501 | 42.11 | 57.88 |
| | 50 | 0.054 | 46.29 | 53.70 |
| | 25 | 0.064 | 54.68 | 45.31 |

SAKE: *Salvia keerlii***Table 5:** Percent human red blood cell membrane stabilization of *Salvia keerlii*

| Group | Concentration (µg/mL) | Percentage membrane stabilization |
|------------|-----------------------|-----------------------------------|
| Control | - | 0 |
| Diclofenac | 200 | 94.85 |
| | 100 | 92.20 |
| | 50 | 91.63 |
| | 25 | 89.70 |
| | 12.5 | 85.84 |
| | 1 | 29.47 |
| SAKE | 0.1 | 4.77 |
| | 200 | 61.50 |
| | 100 | 86.50 |
| | 50 | 81.15 |
| | 25 | 75.85 |
| | 12.5 | 70.01 |
| | 1 | 12.74 |
| 0.1 | 1.47 | |

SAKE: *Salvia keerlii*

The acetic acid-induced writhing test is selective for the initial screening of peripheral antinociceptive agents. Intraperitoneal administration with acetic acid induces nociception by the release of proinflammatory mediators such as prostaglandins, bradykinin, histamine, and substance *P* in the peritoneal cavity, which cause vascular permeability, resulting in abdominal contraction and elongation of limbs.^[18] SAKE (ED₅₀ = 74.11 mg/kg) showed a similar potency in the inhibition of nociception compared to that reported with naproxen (ED₅₀ = 33.7 mg/kg).^[19] The results suggest that the antinociceptive activity of SAKE could be due to the inhibition of prostaglandin synthesis.

LPS is a membrane component of Gram-negative bacteria that promotes the production of proinflammatory cytokines and NO in macrophages.^[20] NO is a signaling molecule with multiple physiological effects, such as vasodilation, host defense, inflammation, and blood clotting.^[21] Overproduction of NO during inflammation can activate nuclear factor-kappa B and induce the expression of proinflammatory mediators. The increased levels of NO by inducible NO synthase can result in tissue damage.^[22] Thus, inhibition of NO production in macrophages is a therapeutic strategy for inflammation. In this study, SAKE significantly inhibited NO production in LPS-stimulated macrophages.

Cytokines play an important role in the inflammatory process. TNF- α is one of the main proinflammatory cytokines involved in acute inflammation,^[23] and it regulates other proinflammatory cytokines such

as IL-6, which is involved in the induction and prolongation of early inflammation.^[24,25] IL-1 β is a proinflammatory IL that plays an important role in the progression of pain,^[26] whereas IL-10 is an anti-inflammatory cytokine that has a central role in the reduction of inflammation, promoting tissue protection.^[27] Thus, it is highly desirable to find agents that inhibit the production of proinflammatory cytokines but increase the levels of anti-inflammatory cytokines such as IL-10. These new drugs might be effective in the treatment of inflammatory diseases.

One of the causes of rheumatoid arthritis is the denaturation of protein, which results in the formation of auto-antigens.^[28] The mechanism of protein denaturation most likely involves alterations in the electrostatic hydrogen-bonding, hydrophobic, and disulfide interactions. We found that SAKE inhibited heat-induced protein denaturation, which suggests that this extract might have anti-arthritic activity.

The hemolytic effect of hypotonic solution is related to the accumulation of fluid within the cell, resulting in the breakage of the cell membrane. Lipid peroxidation by free radicals is another type of injury to human red blood cell membrane. Compounds with membrane-stabilizing properties should offer protection to the cell membrane.^[29] Moreover, compounds with membrane-stabilizing properties can interfere with the release of phospholipases by decreasing the levels of inflammatory mediators.^[15] SAKE exhibited a membrane stabilization effect by inhibiting the induced lysis of the erythrocyte membrane. This effect and the anti-inflammatory activity of SAKE on ear edema induced by TPA suggest that its anti-inflammatory activity may be associated with the inhibition of phospholipase release.

CONCLUSIONS

SAKE has anti-inflammatory activity in *in vivo* and *in vitro* models. SAKE diminishes the concentration of proinflammatory cytokines and increases the production of the anti-inflammatory cytokine IL-10 in macrophages stimulated with LPS. SAKE also inhibits protein denaturation and protects against membrane lysis. In addition, SAKE has an antinociceptive effect. These results suggest that SAKE could be used in the treatment of inflammatory conditions such as rheumatoid arthritis.

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Nil.

Conflicts of interest

There are no conflicts of interest.

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