Analgesic Activity of young stem of *Melocanna baccifera* and extract of a traditional Tribal food ingredient. *chakhwi*

Uma Namasudra¹, B. Iplab D.E.² and Debabrata Bhawmik³

Department of Human Physiology, R. K. Mahavidyalaya. Kailashahar, Unakoti Tripura, 799277 (India) Regional Institute of Pharmaceutical Science and Technology, Abhoynagar, Agartala, 799005 (India) Bhavan's Tripura College of Science & Technology, Anandanagar, Agartala (India)

Abstract

The analgesic activity of the methanolic extract of young bamboo stem i.e *Melocanna baccifera* and extract of *chakhwci* has been studied in acetic acid induced model. The result indicated that these possess significant analgesic activity at the dose of 100mg/kg bw. Both the activities were compared with standard drug aspirin.

Key words: *Melocanna baccifera, Chakhwi*, Analgesic activity, Acetic acid, aspirin.

Tripura is a small but beautiful hilly state with lovely green hills, and valleys, luxuriant forests, streams and small rivers. Nutritional biodiversity among the tribal people of Tripura is well known. Generally they use less amount of spices and least amount of oil. Maximum of them take dry fish in each recipe.

*Chakhw*i is a popular food ingredients of Tribal peopleof Tripura. It is liquid in nature & alkaline in reaction. In Bengali, it is also known as *Kharpani*. To prepare *chakhwi*, Tribals burn dry leaves of bamboo, banana, sesame, plants, dry stem and shoots of bamboo etc. The burn ash is taken in a specially prepared basket called *cheyakhok* in *Kokborok* (The popular Tribal Language/dialect). The basket is hanged from a suitable support & a container is kept below it to collect the extract of ashes. The water is poured slowly on ash to bath the whole ash. This extract is collected in the container is known as *chakhwi*. They prepare many more dishes mixing with *chakhwi*, along with other vegetables like *Muia* (Bamboo shoot) & *Laifung* (young banana stem) etc. Tribasl consider this type of food as an easily digested food, which does not produce any disturbances in stomach. They also believe that this *chakhwi* with *muia* (known as *Muia-chakhwi*) acts as an antihelmintic and as a washing agent of bowel¹.

Some phytochemicals of plant ingredients used by Tribal people of Tripura are also reported. Few food items/ingredients are muia (Bambusa arundinacea), Khamka sikam (Solanum torvum), Khamka bilati(Solanum indicum), Hukni Phantok(Solanum melongena), khokleng (Cajanus cajan) etc¹.

In this part of research, I wanted to concentrate on one prepared food ingredient *chakhwi* and one plant originated raw food ingredient *muia*.

Tribal people of Tripura like to mix *chakhwi* with almost all curry/preparations. *Muia* is also used daily & vigorously by the tribal people by allowing it as one of the major ingredient of almost all curries.

Based on a preliminary survey conducted among the house wives of tribal families residing in North Tripura district, it has been observed that one adult consumes approximately 100-200 ml. of *chakhwi* per day on an average and almost 250 gm of *muia* per day.

A review of literature is presented below for *muia* & *chakhwi* and for leaves & shoots of bamboo, leaves of banana and leaves of sesame plant.

Nutraceutical" a term combining the words 'Nutrition' a 'Pharmaceutical', is a food or food product that provides health & medical benefits, including prevention & treatment of diseases. It has become a popular science during recent years. Studies on ancient and Tribal food materials will provide newer imports in the field of nutrition. A neutraceutical is demonstrated to have physiological benefits and provide protection against chronic diseases². This term was coined in the late 1980s by Dr.

Stephen L. De. Felice, M.D. founder and chairman of the Foundation for Innovation in Medicine $(FIM)^{2,3}$.

It is reported that tribal people of Tripura also believe that *Muia* has certain medicinal importances and they are utilizing *Muia* for following medicinal purposes¹.

- 1. A thick transparent watery liquid is obtained from the hollow internodes of the female bamboo called *Tabashir* in Hindi, *Bansa Roch ana* in Sanskrit and *Wakthwi* in *Kokborok*. This *Tabashir* is composed of silicic acid with traces of iron, calcium, alum, alkalies and organic matters. The Tabashir obtained from *Bambusa arundinacea* is largly used as cooling tonic and as an aphrodisiac. It is also useful in asthma, cough, poisoning cases and paralytic complaints.
- 2. In Ayurveda, the stems and leaves are used in *Kapha*, diseases of blood, leucoderma, wounds and piles and inflammatory conditions.
- 3. According to the indigenous system of medicines, the burnt roots are applied to ring worm, bleeding gum and to painful joints.
- 4. The leaves are good as eye wash and in fever. The leaves are given to animals during parturition, from a supposition that they cause a more rapid expulsion of the placenta.

Nutrition has great deal for survival of society & for its people and exploration of the nutritional status is still unfolded in case of Tribal people of Tripura. That is why concentration is given on searching and followed by screening of different ingredients of their dishes.

The aim of this work is to study the analgesic activity of the two food ingredients *i.e chakhwi and muia*.

Preparation of extract of muia :

Very young stem of bamboo (*Melocanna baccifera*) *i.e. muia* was collected. Removing the outer shell and internodes, 1 kg of *muia* was cut into pieces (1.5mm in length), since certain compounds get denatured in sunlight it was dried under shade to avoid decomposition followed by grinding into fine powder by electric grinder. After shade drying, it was 56.7 gm and soaked into 200 ml methanol. The extract was filtered through cotton followed by vaccuum suction.

Preparation of sample-2 :

The prepared ingredient named *Chakhwi* is also allowed to evaporate under very low flame. When the water portion was evaporated entirely, the whitish substance like powder is obtained and allowed to dry which is treated as sample 2.

Screening of Analgesic activity: Acetic acid Induced Method⁴

The abdominal torsion test described by Wittkin *et al.*,⁴ was used to measure the analgesic activity of two unknown samples. Overnight fasted healthy adult albino swiss mice weighing between 18-25gm were divided into four groups of six animals. The animals were housed under standard environmental condition $(25\pm2^{\circ}C)$ and relative humidity $(50\pm5\%)$ and fed with standard diet and water *ad libitum*. The animals were acclimatized to laboratory environment for a period of 14 days before performing the experiments.

The first group of four comprised the control, and the remaining 3 groups were administered with Standard and test drugs. The test doses were prepared in distilled water to get the desired concentration of the extract.

The animals were orally pretreated with vehicle (0.5% CMC), aspirin (100mg/ Kgbw) or samples (100mg/kgbw). 30 min later all mice were treated with intraperitoneal injection of 3% aqueous acetic acid solution (2ml/kg) to cause a typical stretching response. The mice were then kept in individual cages and writhing or stretching of each mouse was counted for a period of 10 min by myself and blinded individual. The analgesic effect was measured by calculating the mean number of writhing produced into treated groups compared with those of control group.

Result of the application of two samples are shown in the Table-1.

Mean number of writhing produced in control after injection of acetic acid was $76.33\pm$ 5.194. But when we applied the sample the number of writhing reduced. In case of sample 1, the mean number is about 40.66 ± 1.647 and that of sample 2 is 38.33 ± 2.591 . The no. of writhing produced after injection of drug aspirin was 19.33 ± 2.171 . It has been observed that the affect of samples is not similar to those of standard drug aspirin, but both these samples have the analgesic activity.

(306)

Sl.	Treatment	Dose	Number of writhing	Total	Mean+-	Responders
No			(in 10 min duration)		SEM	n/n
1	Control	10ml/kg	TT 25, Ex L 30, AC-23	78	76.33±5.194	6/6
2	CMC/Water		TT 32, Ex L 37, AC-26	95		
3	+	+	TT 28, Ex L 33, AC-21	82		
4	Acetic acid	2ml/kg	TT 30, Ex L 15, AC-31	78		
5			TT 22, Ex L 17, AC-19	58		
6			TT 26, Ex L 25, AC-16	67		
1	Aspirin(std)	100gm/kg	TT 12, Ex L09, AC-05	26	19.33±2.171	6/6
2	100mg/kg		TT-10, ExL-07, AC-07	24		
3	+	+	TT-09, ExL-06, AC-04	19		
4	Acetic acid	2ml/kg	TT-08, ExL-05, AC-06	19		
5			TT-11, ExL-03, AC-03	17		
6			TT-06, ExL-04, AC-01	11		
1	Muia	100gm/kg	TT-09, ExL-25, AC-14	48	40.66±1.647	6/6
2	+	+	TT-15, ExL-18, AC-08	41		
3	Acetic acid	2ml/kg	TT-13, ExL-16, AC-10	39		
4			TT-10, ExL-20, AC-06	36		
5			TT-11, ExL-15, AC-15	41		
6			TT-18, ExL-14, AC-07	39		
1	Chawkhwi	100gm/kg	TT-18, ExL-09, AC-15	42	38.33±2.591	6/6
2	+	+	TT-18, ExL-07, AC-16	41		
3	Acetic acid	2ml/kg	TT-16, ExL-10, AC-08	34		
4			TT-19, ExL-06, AC-07	32		
5			TT-16, ExL-15, AC-17	48		
6			TT-11, ExL-08, AC-14	33		

Table-1. Results of analgesic activity (acetic acid- induced writhing)

TT-tongue twisting, Ex L-Extension of limb, AT-Abdominal torsion.

Highest mean writhing response of 40.66 ± 1.647 was shown by the animals after the injection of sample 1 (*muia*) at a dose of 100mg/kg bw and also the writhing response of 38.33 ± 2.591 was shown by the animals after the injection of sample 2 (*chakhwi*) given at a dose of 100mg/kg bw. On calculating the percentage of protection of sample 1 is shown 48.105% while of sample 2 is 49.805%. Hence it has been observed that chakhwi is more active in analgesic property. The values are considered significant when p<0.001 as compared with control acetic acid treated groups vs test groups.

The Tribals' most common traditional two food ingredients are sample1 and sample

2. Both of These two food ingredients have analgesic property.

References :

- 1. Bhakta T. (2004), Food Preservaton Techniques in Common Vegetables of the Tribals of Tripura, TRI, Govt. of Tripura, Agartala. P-59, 61, 81.
- 2. http://enwikipedia.org/wiki/nutraceuticals
- 3. www.aboutbioscience.org(prepared by : North Carolina Association for biomedical Research).
- Wittkin L.B., Heubuer C.F., Galdi F., Okeefe E., Spitaletta P. and Plummer A.J. (1961)J. Pharmacol. Expt. Therap., *133*, 400-408.