# Evaluation of Hepatoprotective Activity of Lauha Bhasma in D-Galactosamine induced HepG2 cellModel- in Vitro study

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#### Abstract

## Introduction:

The liver is a crucial organ responsible for various metabolic functions, detoxification, and nutrient storage. Liver diseases, such as fatty liver disease, hepatitis, and cirrhosis, are increasingly prevalent worldwide, often linked to lifestyle factors like obesity, excessive alcohol consumption, and viral infections. Ayurveda, the ancient Indian system of medicine, emphasizes liver health through holistic approaches, focusing on detoxification and dietary modifications. Ayurvedic practices often include herbal and Herbo-mineral remedies. Bhasma holds significant importance in managing liver disorders within Ayurvedic medicine. By improving digestion, reducing inflammation, and facilitating the elimination of toxins, Bhasma-based formulations aim to restore liver vitality and address conditions like fatty liver disease and hepatitis. Lauha Bhasma known for its hematinic and detoxifying properties, Lauha Bhasma helps improve haemoglobin levels and supports overall liver function. It is particularly beneficial in conditions like anaemia and fatty liver disease, where it aids in enhancing digestion and promoting the elimination of toxins. By balancing Pitta dosha, Lauha Bhasma can help reduce liver inflammation and improve metabolic processes. In this study, Lauha Bhasma was prepared, analysed and investigated the hepatoprotective activity in D-Galactosamine induced HepG2 cell Model and assessed the results via Viability and proliferation assay, and calculated the LC50, EC50 value of Lauha Bhasma. Aim: To evaluate Hepatoprotective activity of 'Lauha Bhasma in D-Galactosamine induced HepG2 cell Model -In Vitro study. Objectives: Primary Objectives: 1. To prepare Lauha Bhasma mentioned in Rasa Ratna samucchay... 2. To Evaluate Hepatoprotective effect of Lauha Bhasma in D-Galactosamine induced HepG2 cells culture model via Viability and proliferation assay and at morphological level. Secondary Objectives: 1. To calculate and report the EC 50 and LC 50 value of Lauha Bhasma. 2. To analyse Lauha Bhasma according to Ayurvedic and modern parameters. 3. Development of in-vitro study using HepG2 cell line. Material And Methods: Lauha Bhasma was prepared according to ref mentioned in Rasa Ratna Samucchay. Analytical tests of Lauha Bhasma were performed according to methods described in Avurvedic pharmacopoeia of India and Hepatoprotective activity of Lauha Bhasma was carried out in vitro study using HepG2 cell line. Result: Test item Lauha Bhasma showed 47.09, 50.46, 64.53 and 89.91% hepatoprotective activity in D-Galactosamine induced HepG2 cell line at the concentrations of 125, 250, 500 and 1000 µg/mL and EC50 observed at the concentration of 214.7 µg/ml..Conclusion:- The study presents Lauha Bhasma as a potent Hepatoprotective drug. Lauha Bhasma possesses restorative qualities when administered as a hepatoprotective medication.

Keywords: Hepatoprotective activity, LC50 value, EC50 value, D-Galactosamine, In-Vitro Study, HepG2 cell, *Lauha Bhasma, Ayurvedic* Pharmacopoeia, *Bhasma, Lauha Bhasma*.

#### Introduction

*Ayurveda* refers to Ayur = life and Veda = science. *Ayurveda* is concerned with the prevention rather than cure of diseases<sup>[1.2]</sup> According to the principles of '*Ayurveda*', there is not a single substance in the Universe which does not have a potential to be used as a drug, provided it is used judiciously by the physician where it is required.<sup>(3)</sup>. As per the *Ayurvedic* pharmacopeia more than 80,000 formulations are found for different diseases and clinical conditions and for the wellbeing of the humans<sup>[4]</sup> In *Ayurveda*, heavy metals are converted into non-metallic form<sup>[5]</sup>.

*Rasa Shastra* is such a branch of *Ayurveda* which deals with Preaparation of *Ayurvedic* medicine. It is existing since *vedic* period <sup>(6)</sup> *Rasa Shastra*, an advanced branch of *Ayurveda*, deals with the science of mineral and

metal-based pharmacology, detailing the processing, purification, and therapeutic uses of metallic and mineral substances for medicinal purposes. <sup>(7.8)</sup> *Rasa Shastra* is dominated by descriptions of mercury processing techniques also mercury" and "*Rasa*" are thought to be synonymous <sup>(9)</sup> It also describes the uses of mercury, salts, corals, seashells, feathers, and metals including gold, silver, copper, tin, lead, and iron <sup>(10.11)</sup>. There are various *Ayurvedic kalpa* mentioned in classic *Ayurvedic* texts

Out of all the *Kalpana* mentioned in *Rasa Shastra*, *Bhasma Kalpana* has attained an important position among the *Rasoushadhis* due to its assimilatory organo-metallic constitution and in the *Ayurvedic* world they are highly efficacious. Current time says metals and minerals cause toxicity to biological system but *Ayurveda* proclaims that the *Bhasma* prepared from the same metals and minerals they are not only non-toxic, but also very much beneficial to human body <sup>[12-15]</sup>

One of the widely used *Bhasma* preparation by *Ayurvedic* Practitioners is *Lauha Bhasma*. *Lauha Bhasma* (LB) is a nano iron particles based medicine used in *Ayurveda* <sup>[16]</sup>. *Lauha Bhasma* is used for the treatment of many diseases such as anaemia, liver disorders, worm infestation, dry skin, irregular fat metabolism, heart disease, pica, rhinitis, etc<sup>(17.18)</sup>. In modern medicine, Iron plays a vital role. For many years, nutritional interest in iron focused on its role in haemoglobin formation and oxygen transport<sup>[19]</sup> ] Iron had early medicinal uses by Egyptians, Hindus, Greeks, and Romans<sup>[20.21]</sup> However, it was not until 1932 that the importance of iron was finally settled by the convincing proof that inorganic iron was needed for haemoglobin synthesis.<sup>[22]</sup> But in India, Iron is used as medicine from the *Vedic* period itself.

*Ayurveda* describes liver disorders and their treatment in fragmented form. Any abnormalities in structure and function of Liver is Known as Liver disorders. Liver disease accounts for approximately two million deaths per year worldwide, 1 million due to complications of cirrhosis and 1million due to viral hepatitis and hepatocellular carcinoma. Cirrhosis is currently the 11<sup>th</sup> most common cause of death globally and liver cancer is the 16<sup>th</sup> leading cause of death; combined, they account for 3.5% of all deaths worldwide.<sup>(23)</sup>

The drug taken for the present study is *Lauha Bhasma* described in *RasaRatnaSamuchhay*.<sup>(24)</sup>. It is indicated in *Yakrut* and *Pleeha Vikar*. *Chandanadi Lauha* is indicated in Liver and spleen disorders<sup>(25)</sup> Navayas Lauha indicated in Jaundice and liver disorders<sup>(26)</sup> *Tapyadi Lauha* indicated in Viral hepatitis (250-500mg)<sup>(27)</sup>. There are 21 *Lauha* kalp mentioned to treat Pandu and Kamala and 11 for Pleeha and yakrut vikar. <sup>(28)</sup> There are various processes to prepare *Lauha Bhasma* given in *Ayurvedic* texts. In present study we have selected *Triphala* as a maran Dravya. There are various studies showing *Triphala* has great effect on liver health.<sup>(29-34).</sup> As per *Ayurvedic* texts, *Lauha kalpas* are used to treat Liver disorders.There is need to study individual hepatoprotective activity of *Lauha Bhasma*. Hence this study is aimed to investigating Hepatoprotective activity of *Lauha Bhasma* in In-vitro model.

#### Material & Method:

#### **Collection and Authentication of Raw Drugs**

All raw drugs were procured from authenticated vendor and further authenticated from experts of *Rasa Shastra* dept. of our institute and botany dept. RTMNU Nagpur.

#### Samanya Shodhana of Lauha<sup>(35)</sup>

- a) <u>Preparation of accessory drugs:</u> *Takra*<sup>(36),</sup> *Kanji*<sup>(37),</sup> and *Kulattha Kwatha* <sup>(38)</sup> were prepared as per classics for the process of *Samanya Shodhan*a.
- b) <u>Process of Shodhana</u>: Ingredients
  1. Main drug – Lauha, 500 g.
  2. Accessory drugs – Til Taila, 7 L; Takra, 7 L; Gomutra, 7 L; Kanji, 7 L; Kulattha Kwatha, 7 L. Procedure –
- Initially, each media was divided into 7 parts
- Iron fillings were taken on ladle and heated on gas stove until red hot.
- Red hot fillings were quenched into respected media.
- After selfcooling the fillings were removed and dried.
- The above procedure of heating and quenching was repeated 7 In same media.
- This process is done for each respective media mentioned above.
- Every time Fresh media was taken

- The iron fillings were weighed each time before heating and after quenching.
- The change of appearance of the iron fillings and the media was observed after each process.

## Vishesha shodhana of Lauha (39)

a) <u>Preparation of accessory drugs:</u> Triphala Kwath Ingredients - Triphala, - 2 kg; water - 16 L. Equipments: Stainless steel vessel, gas stove, measuring jar, weighing machine, strainer

#### **Procedure:**

- 1. Triphala and water were boiled in stainless steel vessel until water is reduced to 1/4.
- 2. The Kwatha thus obtained is strained.
- b) Process of Vishesh Shodhana: Ingredients 1. Main drug – Lauha, 531 g. 2. Accessory drugs :- Triphala Kwath- 7 lit Procedure -
- Initially, Triphal Kwath was divided into 7 parts
- Iron fillings were taken on ladle and heated on gas stove until red hot.
- Red hot fillings were quenched into Triphala Kwath. •
- After cooling the fillings were removed and dried.
- The above procedure of heating and quenching was repeated 7 times with each media.
- Every time Fresh media was taken •
- The iron fillings were weighed each time before heating and after quenching.
- The change of appearance of the iron fillings and the media was observed after each process.

#### Marana of Lauha<sup>(40)</sup>

a) Preparation of Triphala Kwatha in Gomutra

Ingredients:

- Triphala coarse powder ½ kg
   Gomutra-4 L

Equipments: Stainless steel vessel, gas stove, measuring jar, weighing machine, strainer

Procedure:

1. Triphala and Gomutra were boiled in medium flame until Gomutra was reduced to 1/4 of its volume

2. The Kwatha was strained.

b) Process of Vishesh Shodhana:

Ingredients

1. Main drug – Lauha, 500 g.

2. Accessory drugs :- Triphala Kwath- 7 lit

Procedure

Bhavana of Lauha

1. Triphala Kwatha was prepared in Gomutra

2.Shuddha Lauha was taken in Khalva Yantra and triturated with Triphala Kwatha.for 5 hrs

3. Mardana was done until the mixture attained paste like semisolid consistency.

4. Chakrika (small, round, flat pellets) were made and dried in shadow.

Puta

1. The Chakrika were placed in between two earthen saucers facing each other

2. Sharev SamPuta (sealing with mud smeared cloth) was done and allowed to dry.

3. The Sharava were placed in GajaPuta(EMF) and incinerated. at 750°C with acceleration of 40 which take 4 and 1/2 hr to reach the temperature of 750 °C. Maintain the temperature for about 1 and 1/2 hr. then gradually taper the temperature

4. The Puta was allowed to cool down on its own

5.Same process was repeated for 25 times until Lauha Bhasma was obtained.

- 6. The weight of Lauha Bhasma after triturating, dried pellets and after incinerating was recorded each time
- 7. The Amount of Triphala Kwatha required was also measured each time

8. The temperature of *Puta* were recorded till the *Puta* cools down.

Dravya for Samanya Shodhan













Ashuddha Lauha



Takra

Gomutra

Kanji

Kulattha kwath

Dravya For Vishesh Shodhan



Triphal Kwath

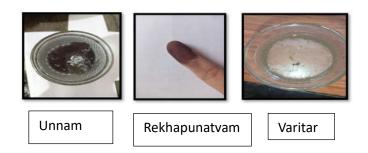
## Samanya and Vishesh Shodhan of Lauha



Sharav samput Vishesh Triphala Chakrika Bhavana kwath shodhit

After Puta

Bhasma Parikshan: -



### Analytical Study of Raw Materials -

In this study, analytical evaluation of Lauha Bhasma was carried out: -

- a) Organoleptic characters<sup>(41)</sup>: color, taste, touch and odor and weight
- b) Physiochemical analysis: -
  - Acid insoluble ash <sup>(42)</sup>
  - Total- ash value <sup>(43)</sup>
  - Water soluble ash <sup>(44)</sup>
  - Loss on drying <sup>(45)</sup>
  - pH <sup>(46)</sup>
  - XRD <sup>(47)</sup>
  - SEM (48)
- c) Bhasma Parikshan:-
  - Varitar <sup>(49)</sup>
    - *Unnam* <sup>(50)</sup>
    - Rekhapurnatvam<sup>(51)</sup>
    - Shlakshan (52)
  - Sukhshma<sup>(53)</sup>

#### **Experimental study**

#### **STUDY DESIGN: -**

Assay for hepatoprotective activity was performed on different concentrations of test item dissolved in DMEM media on HepG2 (human liver cancer) cell line. Assay was conducted on 24h timeline.

#### **3 EXPERIMENTAL PROCEDURES**

#### 3.1 HepG2 cell line:

HepG2 human liver cancer cell line generated from human liver tissue, it has adherent type growth mode. The cells are epithelial in morphology, have a modal chromosome number of 55.

#### 3.2 MTT assay principle:

Measurement of cell viability and proliferation forms the basis for numerous in vitro assays of a cell population's response to external factors. The reduction of tetrazolium salts is now widely accepted as a reliable way to examine cell proliferation. The yellow tetrazolium MTT (3 (4, 5-dimethylthiazolyl-2)-2, 5-diphenyltetrazolium bromide) is reduced by metabolically active cells, in part by the action of dehydrogenase enzymes, to generate reducing equivalents such quantified by spectrophotometric means.

#### **3.3Cell count using trypan blue:**

Cell cultures were removed from culture flasks by enzymatic digestion (trypsin/EDTA) and the cell suspension was centrifuged (1000 RPM, 3 min). The cells were then resuspended in culture medium. 0.1 mL of cell suspension was added to 0.1mL of 0.4% trypan blue solution and loaded to a hemacytometer and cells were

counted immediately. Number of viable cells were counted in four WBC counting chamber of hemocytometer. To calculate the number of viable cells per mL of culture, the formula below was used. Average number of viable cells  $\times$  104  $\times$  Dilution factor (2) = cells/mL

#### 3.3 Preparation of media:

streptomycin solution. Sr. No. as NADH and NADPH. The resulting intracellular purple formazan can be solubilized and DMEM medium was used as media with 10% filtered fetal bovine serum and 1% penicillin-

#### Table No.1 Details of media components are

Table No. 2 Test item formulation:

#### given in following table:

Sr.	Name of	Make	Batch No.	Expiry
No.	component			date
1.	DMEM	Himedia	0000647911	05-
				2025
2.	Fetal bovine serum	Himedia	0000608853	08-
				2028
3.	Antimycotic	Gibco	0000216918	21-01-
	solution			2025
5.	Trypsin EDTA	Himedia	0000607778	30-09-
				2025
6	Thiazolylbluetetraz	Merck	MKCS4540	-
	olium bromide			
7	Dimethyl	Oxford	4868	Jul.
	Sulphoxide			2025

Weight (mg)/Vol. (mL)	Total Vol. (mL)	Vehicl e Vol. (mL)	Conc. In mg/mL	Conc. In μg/mL	Formu lation ID
20 mg	2.0	2.0	10	1000	F1
0.5 mL of F1	1.0	0.5	5	500	F2
0.5 mL of F2	1.0	0.5	2.5	250	F3
0.5 mL of F3	1.0	0.5	1.25	125	F4
0.5 mL of F4	1.0	0.5	0.625	62.5	F5
0.5 mL of F5	1.0	0.5	0.3125	31.25	F6

#### **Cytotoxicity Procedure**

1. After receiving of cell line from NCCS cells were passaged for two times before using in the test.

2. Cell cultures were removed from culture flasks by enzymatic digestion (trypsin/EDTA) and the cell suspension was centrifuged (1000 RPM, 3 min). The cells were then resuspended in culture medium and the cell suspension was adjusted at a density of  $1 \times 105$  cells/mL. 100 µL culture medium only (blank) was added into the peripheral wells of a 96-well tissue culture microtitre plate using a multichannel pipette. In the remaining wells, 100 µL of a cell suspension of  $1 \times 105$  cells/mL ( $1 \times 104$  cells/well) was dispensed.

3. Culture plates were incubated for 24 h (5 % CO2,  $37^{\circ}$ C, > 90 % humidity) so that cells could form a halfconfluent monolayer. This incubation period ensured cell recovery, and adherence and progression to exponential growth phase.

4. Plates were examined under a phase contrast microscope to ensure that cell growth is relatively even across the microtitre plate.

5. After 24 h incubation, culture medium was removed and 100  $\mu$ L of treatment medium containing either the appropriate concentration of sample extract, or the negative control, or the positive controlwas added per well in triplicate.

6. Six different concentrations of the test item formulations and four concentrations of positive control (SLS) were used in the assay.

7. Again plates were incubated for 24 h (5 % CO2, 37 °C, > 90 % humidity).

8. After 24 h of incubation treated culture was carefully removed from each well.

 $9.100 \ \mu L \ of \ MTT \ reagent \ was added \ and \ plates \ were \ incubated \ for \ 3 \ h.$ 

10. After incubation period MTT reagent and media was removed completely and 100  $\mu$ L of dimethyl sulphoxide was added to dissolve the crystals of formazon.

11. Absorbance was measured at 570 nm on ELISA plate reader.

### 3.6 D-Galactosamine induced HepG2 cell toxicity

1. HepG2 cells was adjusted to  $1 \times 105$  cells/well in DMEM supplemented with 10% FBS, and 100  $\mu$ L of the cell suspension will be plated into 96 well culture plate and incubated at 37°C in a humidified atmosphere containing 5% CO2 for 24 h.

2. Post incubation, the cells were treated with different concentrations (125, 250, 500 and 1000  $\mu$ g/mL) of test substance and incubated for 2 h.

3. Silymarin (12.5  $\mu g/mL)$  was used as a reference standard.

4. After incubation of 2 h, the cells were treated with 20 mM of D-galactosamine for 24 h.

5. Thereafter, the supernatant was discarded and the cells were washed with phosphate buffer solution, and MTT was added and incubated for 4 h.

6. After incubation the absorbance was measured at 570 nm.

7. Toxicity was calculated considering the viability of the untreated control cells as 100%.

8. Percentage hepatotoxicity was calculated by the following formula.

% Hepatoprotective activity = (Ap- At/Ac-At) \*100

- Ac- Absorbance of untreated cells
- At- Absorbance of toxicant i.e. diseased control
- Ap- Absorbance of treated cells

9. The EC50 was calculated based in a nonlinear regression (curve fit) using GraphPad Prism 10.3.1.

#### **Observation and result**

#### Table No. 3 Observation of Lauha and Media during Samanya and Vishesh Shodhan of Lauha: -

Sr · N o	Media		Observatio	on of <i>Lauha</i>		Observation of Media				
		Colour	Iron Flakes	Time required to attained red hot stage	other	Colour	Viscosi ty	Fumes/odour	Other	
1	Til Taila	Black	Some flakes converted into coarse powder	After 35 min	Brittlene ss increased after shodhana	Changed from yellow to blackish brown	Taila become viscous	Pungent smell, Black fumes	Oil caught fire	
2	Takra	Bluish Black	Same as above	20 min	Brittlene ss increased	Brownish black sediments		Burnt smell and white fumes	<i>Takra</i> began to boil	
3	Gomutra	Blackis h brown	Coarse powder	20 min		Turned to Brownish Colour		Strong Pungent smell		
4	Kanji	Browni sh	Coarse powder began to dissociate	25 min	Flakes become more Brittle	Brownish colour	Becom e viscid	Pungent, Burnt smell		
5	Kullatha <i>Kwath</i>	Browni sh	Fine and few coarse powder	20 min		Blackish colour and black sediments		More Fumes were produced		
6	Triphala	Bluish	Lauha	After 35	Heavy	Brownish black		Burnt smell		

Kwath	black	turned into	min	weight	Lauha	of Triphala	
		fine		fine	sediments	Kwath	
		powder		powder			

## Table No. 5 Results after Samanya and Vishesh Shodhan of Lauha

Sr. No.	Media 	Wt of <i>Lauha</i> before Nirvapana(7 times)(g)	Wt of <i>Lauha</i> after Nirvapana(7 times)(g)	Amount of Liquid before Nirvapana(total used for 7 times((ml)	Amount of Liquid after Nirvapana(total used for 7 times((ml)
01	Til Taila	500	505	7000	5600
02	Takra	505	512	7000	5075
03	Gomutra	512	518	7000	5180
04	Kanji	518	525	7000	5075
05	Kullath Kwath	525	531	7000	4480
06	Triphala Kwath	531	537	7000	4900

Initial weight of *Lauha*:- 500 g Final weight of *Lauha*:- 537 g Total amount of *Lauha*:- 37 g % of gain: - 8%

#### Observations during Marana of Lauha:-

The mean temperature attain during each Puta was about 700c.

The highest temperature was maintained for 2-3 hrs and the temperature was reduced to normal nearly after 10 hrs

It took 25 Gaja Puta to obtain LauhaBhasma. Bluish Lauha Bhasma with red hue is obtained

 Table No. 6 Observations during Marana of Lauha:

				Observati	ons
	Temp. of EMF	Weight of <i>Lauha</i> before <i>Puta</i> (g)	Weight of <i>Lauha</i> after <i>Puta</i>	Colour of <i>Bhasma</i>	Other observations
01	750	500	492	Black	Surface of <i>Lauha</i> fillings become shiny, lustrous. Pellets were fragile
02	750	491	484	Black	Same as above
03	750	483	477	Black	Same as above
04	750	476	466	Black	Same as above
05	750	465	462	Brownish grey	Same as above
06	750	461	460	Brownish grey	Pellets become hard and not easily breakable
07	750	459	457	Brownish grey	Pellets become hard and not easily breakable
08	750	456	454	Reddish brown	Pellets become soft. <i>Bhasma</i> become fine and Lousturless but not fully varitar
09	750	453	451	Reddish brown	Same as above

10	750	450	449	Reddish brown	Same as above
10	750	430	449	Reduisii biowii	Same as above
11	750	448	447	Reddish brown	Pellets become hard
12	750	446	444	Reddish brown	Pellets exhibited bluish colour on surface, but has reddish brown colour on breaking
13	750	443	442	Blackish grey	Same as above
14	750	441	438	Blackish grey	Bhasma gradually became more varitar
15	750	437	436	Blackish Grey	Same as above
16	700	435	432	Blackish grey	Same as above
17	700	431	429	Dark purple	Same as above
18	700	428	426	Dark purple	Same as above
19	700	425	423	Dark purple	It became more fine and light in weight
20	700	422	421	Dark purple	Same as Above
21	700	420	418	Dark purple	Same as Above
22	650	417	414	Dark purple	Bhasma became Varitar
23	650	413	409	Dark purple	Same as Above
24	650	408	404	Dark purple	Same as Above
25	650	403	401	Dark purple	<i>Bhasma</i> becomes fine lustureless, Varitar and passed all the tests.

**Result after Marana of Lauha**:-Initial weight of Lauha: 500g Final weight of Lauha: 401g Total loss: 99 g % of loss: 20%

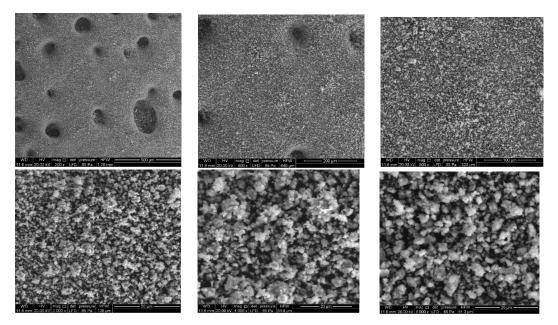
## Table NO.7 Observations and Result of Analytical study:-

1.Loss on drying@105oC0.0752.Acid insoluble ash1.25%3pH5.54Particle Size20-50 micron5Water Soluble Ash2.21%6Total ash7.8%	Sr. No.	Test Name	Results
3pH5.54Particle Size20-50 micron5Water Soluble Ash2.21%	1.	Loss on drying@105oC	0.075
4Particle Size20-50 micron5Water Soluble Ash2.21%	2.	Acid insoluble ash	1.25%
5Water Soluble Ash2.21%	3	pН	5.5
	4	Particle Size	20-50 micron
6 Total ash 7.8%	5	Water Soluble Ash	2.21%
	6	Total ash	7.8%

## XRD:-

The XRD study of LB showed peaks of  $\mathrm{Fe_2O_3}$ 

SEM



Result:- The images were captured at different magnification ranging from 200X to 5000X.*Lauha Bhasma* showed the presence of nano particles of around 20-50 micron. Some of the particles got fused with each other and particles were not of definite shape.

Experimental study:-
Table No.         Showing Absorbance, % Viability for vehicle, positive control and test item- Lauha Bhasma

			Abs	orbance at	570 nm- 24	hour			
Formulations		Conc. (µg/mL)	Ab. 1	Ab. 2	Ab. 3	Mean	Mean Ab. –	SD	% Viability
			0.000	0.005	0.001	0.002	Blank		
Blank		-	0.002	0.005	0.001	0.003	0.002	-	-
Untreated Control		-	0.312	0.309	0.31	0.310	0.002	0.308	100
Vehicle control		-	0.297	0.317	0.277	0.297	0.020	0.294	95.67
	F6	31.25	0.269	0.279	0.285	0.278	0.008	0.275	89.38
Tart Harr	F5	62.5	0.279	0.251	0.291	0.274	0.021	0.271	88.08
Test Item <i>Lauha</i>	F4	125	0.273	0.295	0.254	0.274	0.021	0.271	88.19
Bhasma	F3	250	0.281	0.287	0.251	0.273	0.019	0.270	87.87
	F2	500	0.239	0.276	0.293	0.269	0.028	0.267	86.67
	F1	1000	0.185	0.225	0.271	0.227	0.043	0.224	72.91
	F4	0.125 mg/mL	0.223	0.248	0.244	0.238	0.013	0.236	76.60

Positive	F3	0.25	0.151	0.182	0.237	0.190	0.044	0.187	60.89
control	15	mg/mL							
SLS	F2	0.5	0.21	0.18	0.124	0.171	0.044	0.169	54.82
	12	mg/mL							
	F1	1	0.105	0.108	0.103	0.105	0.003	0.103	33.37
	11	mg/mL							

The cell line used in the experiment was HepG2 cell line. Exponentially growing HepG2 cells were seeded in 96-well plate at a concentration of 1 x 105 cells/mL. After 24 hrs of incubation the cells were treated with test item, *Lauha Bhasma* at the concentrations of 1000, 500, 250, 125, 62.5 and 31.25  $\mu$ g/mL, positive control, SLS at the concentrations of 0.125, 0.250, 0.5 and 1.00 mg /mL. Culture plates were incubated for 24 hrs at 37 ± 1 °C and 5% CO2 in the incubator. Thereafter culture plates were subjected to quantitative evaluation. MTT assay was conducted for quantitative analysis of the test item. Cytotoxicity was observed in the group treated with positive control at the concentrations of 0.25, 0.50 and 1.00 mg /mL SLS. Cytotoxicity in terms of cells detachment, changes in cell morphology and cell lysis was observed.

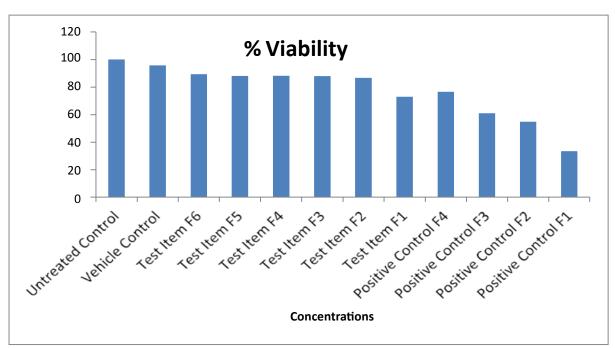
## Table No. Showing Absorbance, % Viability for vehicle, positive control and test item- Lauha Bhasma are

	Absorbance at 570 nm- 24 hour										
Formulations		Conc. (µg/mL)	Ab. 1	Ab. 2	Ab. 3	Mean	SD	Mean Ab. – Blank	% Viability	% Hepatoprote c -tive actiity	
Blank (Media without cells)		-	0.035	0.031	0.035	0.034	0.002	-	-	-	
Untreated Control (Untreated cells)		-	0.227	0.252	0.291	0.257	0.032	0.223	100.00	-	
<b>Disease Control</b> (Galactosamine treated cells)			0.169	0.178	0.096	0.148	0.045	0.114	51.12	0	
Vehicle co	ntrol	-	0.119	0.204	0.23	0.184	0.058	0.151	67.56	33.64	
	F4	125	0.207	0.204	0.186	0.199	0.011	0.165	74.14	47.09	
Lauha Bhasm	F3	250	0.201	0.205	0.202	0.203	0.002	0.169	75.78	50.46	
а	F2	500	0.214	0.223	0.217	0.218	0.005	0.184	82.66	64.53	
	F1	1000	0.249	0.242	0.246	0.246	0.004	0.212	95.07	89.91	
Reference standard (Silymarin)	F1	12.5 μg/mL	0.245	0.238	0.246	0.243	0.004	0.209	93.87	87.46	

tabulated below for D-Galactosamine induced HepG2 cell toxicity

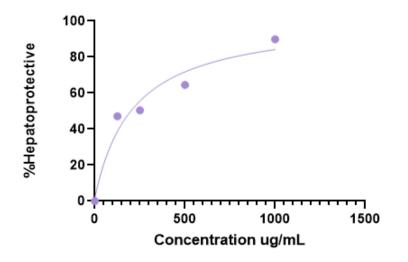
Test item *Lauha Bhasma* tested for 24 hours hepatoprotective activity on D-Galactosamine induced HepG2 cell. Vehicle control treated with DMEM media showed 95.67 % viability. Since the % cell viability showed no cytotoxic effect the hepatoprotective assay was conducted on four concentrations of test item *Lauha Bhasma*. The % hepatoprotective activity was assed at the four concentrations of 1000, 500, 250 and hepatoprotective activity and that of vehicle control was 33.64 %. 125  $\mu$ g/mL which showed 89.91, 64.53, 50.46 and 47.09 % hepatoprotective activity and that of reference standard silymarin at the concentration of 12.5  $\mu$ g/mL showed 87.46 %

### Graphical presentation of data



Graphical presentation for % cell viability

Graphical presentation for % Viability for vehicle, positive control and test item- Lauha *Bhasma* are tabulated below for D-Galactosamine induced HepG2 cell toxicity 24h timeline.

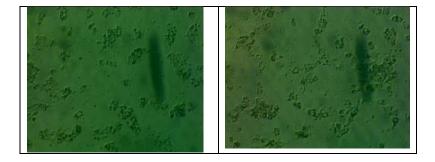


## % Hepatoprotective activity

## Photographs:

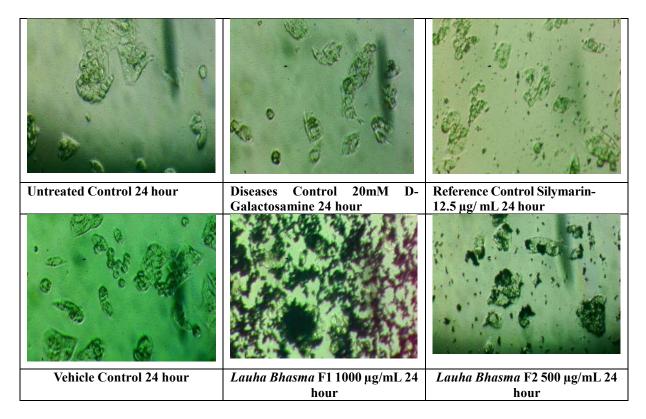
## Cytotoxicity Photographs:

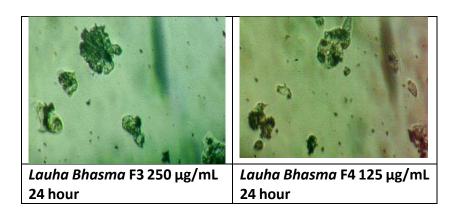
Vehicle Control 24 hour	<i>Lauha Bhasma</i> F6 31.25 µg/mL 24 hour	<i>Lauha Bhasma</i> F5 62.5 µg/mL 24 hour
Lauha Bhasma F4 125 µg/mL	Lauha Bhasma F3 250	<i>Lauha Bhasma</i> F2 500 μg/mL
24 hour	μg/mL 24 hour	24 hour
Lauha Bhasma F1 1000	Sodium Lauryl Sulphate-	Sodium Lauryl Sulphate-
μg/mL 24 hour	0.125 mg/ mL 24 Hour	0.25 mg/ mL 24 Hour



Sodium Lauryl Sulphate-	Sodium Lauryl Sulphate-
0.5mg/ mL 24 Hour	1.0 mg/ mL 24 Hour

D-Galactosamine induced HepG2 cell toxicity Photographs:





#### **Discussion:**

Samanya Shodhana was done according to reference of Rasaratnasamucchaya, where Shodhana common to all Dhatu Varga is mentioned. Initially 500 gm of Lauha fillings were taken and after Shodhana 537 g of Lauha fillings(powder) were obtained. In the process of Samanya Shodhana, Til Taila imparted softness, the Amla Rasa of Takra imparted brittleness, because of Gomutra toxicity was removed and Kanji and Kullatha helped to convert the Lauha fillings into coarse powder. In Vishesh Shodhan, Initially 500g of Lauha fillings were taken and finally bluish black coloured Shuddha Lauha was obtained. The final weight after both Shodhana was 401g. Heating and cooling immediately in to liquid media leads to decrease in tension and increase in compression

force. Repetitions of this procedure cause destruction in tension and force balance leading to brittleness, reduction in hardness and reduction in particle size. During red hot state of metals and minerals volatile impurities like arsenic are removed completely. *Marana* of *Lauha* involves *Bhavana*, Pellet formation, Sharavsamputikaran, and *Puta*. Process of *Bhavana* known as attrition, which involves the material breaking down due to rubbing action between two surfaces. Flat pellets have a larger surface area and less thickness, they can be heated more evenly and uniformly.

Gaja *Puta* is recommended by RasaRatna Samucchay for the making of *Lauha Bhasma*. EMF is utilized in the current study as *GajaPuta* for *Lauha Bhasma*. Approximately 55 minutes were needed to attain the maximum temperature of 750°C. After one hour of maintenance, the peak temperature self-cooled after ten hours. In this study, 25 *GajaPuta* are given to prepare tha *Lauha Bhasma*.

In Analytical Study, The L.O.D. value of *Lauha Bhasma* was 0.075% of because it contains metallic substances as its main ingredients, traces of organic matter and moisture. The pH value was 5.5 which show acidic nature. *Lauha Bhasma* was evaluated for ash value and it was found 7.8% due to high metal content in the *Lauha Bhasma*. Acid insoluble Ash value was 1.25 % which facilitates the easy absorption of drug.Water soluble ash value is 2.21 %. XRD study of *Lauha Bhasma* suggest that it constitute compounds of Fe<sub>2</sub>O<sub>3</sub>. In SEM study of *Lauha Bhasma* images were captured at different magnification ranging from 200X to 5000X.*Lauha Bhasma* showed the presence of nano particles of around 20-50 micron Hence it can be concluded that, they do not differ chemically. But may differ in their pharmacological actions.

Test item *Lauha Bhasma* tested for 24 hours for cytotoxicity and hepatoprotective activity on D-Galactosamine induced HepG2 cell. The % Viability was assed at the six concentrations of test item *Lauha Bhasma* at **1000**, **500**, **250**, **125** and **62.5** µg/mL which showed **86.67**, **87.87**, **88.19**, **88.08** and **89.38** % viability. The positive control SLS was treated at the concentrations of 1.0, 0.5, 0.25 and 0.125 mg/mL, which showed 33.37, 54.82, 60.89 and 76.60 % viability.

Hepatoprotective activity was accessed at the concentrations of 125, 250, 500 and 1000  $\mu$ g/mL on D-galactoasmine induce HepG2 cells. The EC50 value was calculated using GraphPad Prism 10.3.1. The test item *Lauha Bhasma*, % cell viability observed were 72.91, 86.67, 87.87, 88.19, 88.08 and 89.38 % at the concentrations of 1000, 500, 250, 125, 62.5 and 31.25  $\mu$ g/mL respectively. Since the % cell viability showed no cytotoxic effect the LC 50 value cannot be calculated. The % hepatoprotective activity observed were 89.91, 64.53, 50.46, 47.09 and 33.64 % at the concentrations of 1000, 500, 250 and 125  $\mu$ g/mL. EC50 value observed at the concentration of 214.7  $\mu$ g/mL.

#### **Conclusion:**

After appropriate Shodhana process, all physical, chemical impurities of raw materials were washed out, after *Bhavana & Marana*, it was concluded that, all *Bhasma* were properly incinerated as they were passed all classical parameters. Standard Operating Procedure was followed in the preparation and analysis of *Lauha Bhasma*. *Lauha Bhasma*'s hepatoprotective properties were investigated, and an in vitro model of HepG2 cells was created under authentic laboratory settings. *Lauha Bhasma* possesses restorative qualities when administered as a hepatoprotective medication, according to the experimental data above.

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#### **References:-**

- 1. Thakur KS, Vahalia MK, Jonnalagadda VG, Rashmi K, Nadkarni SD, Gudi RV,et al. Evaluation of Structural, Chemical Characterisation and Safety Studies of Samagandhak Kajjali, an Indian Traditional *Ayurvedic* Drug. Journal of Pharmacognosy and Phytochemistry. 2014; 2(6):57-67.
- 2. Saper RB, Kales SN, Paquin J, Burns MJ, Eisenburg DM, Davis RB, et al. Heavymetalcontentof*Ayurvedic*herbal medicine products. J Am Med Assoc. 2004; 292:2868-2873.
- 3. Samhita Caraka, Dipika Aayurved. In: Sutra Sthaana 26/12. Acharya Vaidya Jadavaji Trikamji., editor. Varanasi (India): Choukhmba Sanskrita Sansthan; 1984a. commentary by Cakrapaani. [Google Scholar]
- 4. The *Ayurvedic* Pharmacopoeia of India, Government of India, Ministry of Health and Family Welfare. Department of *Ayurveda*, Yoga & Naturopathy, Unani, Siddha and Homoeopathy. Part 1. Vol. 2. New Delhi: Ministry of Health and Family Welfare; 2007.

- Balaji K, Narendran R, Brindha P, Sridharan K, Uma, Maheswari K, et al. Scientific validation of the different purification steps involved in the preparation of an Indian *Ayurvedic* medicine, *Lauha Bhasma*. J Ethnopharmacol. 2012b; 142:98-104.
- 6. Tripathi R, Kiran. Concept of Rasayana in Rasa Shastra. IJRAP. 2012; 3(6):777-779
- 7. Sharma S, Shastri K. Rasa tarangini. Taranga 2000;14:59e61.
- 8. Dhiman AK, Kumar A. Ayurvedic drug plants. Daya Books; 2006.
- 9. Sharma S, Shastri K. Rasa tarangini. Taranga 2000;14:59e61.
- 10. Bhanu P. Use of metals in Ayurvedic medicine. Indian J Hist Sci 1997;32:1e28.
- 11. Bhat KG, Sara Samgraha Rasendra. Hindi trans and commentary by Indradev tripathi. 2004.
- 12. Chopra A, Doiphode VV. *Ayurvedic* medicine: Core concept, therapeutic principles, and relevance. Med Clin North Am. 2002;86:75–89
- 13. 2. Sahu G. K., Kavita, Parhate S. M., Karbhal K.S. Chronological Development of *Rasa Shastra*. International Journal of Trend in Scientific Research and Development. Volume 2, Issue 5, Jul-Aug 2018
- 14. Bodeker G., Ong C. K., Grundy C., Burford G. and Shein K., WHO Global Atlas of Traditional, Complementary and Alternative Medicines, World Health Organization, Kobe, 2005
- Bhowmick TK, Suresh AK, Kane SG, Joshi AC, Bellare JR. Physicochemical characterization of an Indian traditional medicine, Jasada *Bhasma*: Detection of nanoparticles containing non-stoichiometric zinc oxide. J Nanopart Res. 2009;11:655–64
- 16. Mishra S. Somadeva's Rasendra Chudamanivol. 4; 2004. p. 30e42. Varanasi: Chaukhamba orientalia.
- 17. Bhat KG, Sara Samgraha Rasendra. Hindi trans and commentary by Indradev tripathi. 2004
- 18. Kulkarni D. Vagbhattachariyas' rasa ratna samucchaya. New Delhi: Meharchand lachhmandas publication; 1998. p. 198.
- 19. Underwood EJ, Suttle NF. The mineral nutrition of livestock. 3rd ed. Wallingford: CABI International Publishing; 1999. p. 614.
- 20. Wood RJ, Ronnenberg A. Iron. In: Shils ME, Shike M, Ross AC, Caballero B, Cousins RJ, editors. Modern Nutrition in Health And Disease. 10th ed. Baltimore: Lippincott Williams & Wilkins; 2005. p. 248-70.
- 21. McDowell LR. Minerals in Animal And Human Nutrition. 2nd ed. Amsterdam: Elsevier Science; 2003. p. 660.
- 22. Yip R, Dallman PR. Iron. In: Ziegler EE, Filer LJ, editors. Present knowledge in nutrition. 7th ed. Washington DC: ILSI Press; 1996. p. 278-92.
- 23. Asrani SK, Devarbhavi H, Eaton J, Kamath PS, Burden of liver diseases in the world. J Hepatol. 2019 Jan;70 (1):151-171. doi: 10.1016/j.jhep.2018.09.014. Epub 2018 Sep 26.
- 24. Dattatreya anant kulkrni, vagbhatacharyavirachit, Rasaratnasamuchhaya, Meharchand Lachmandas Publication, Reprint, Vol.1, ch.5/117-120. P-115
- 25. Jankar S, Bhise D, Panchaware P. REVIEW ON CHANDANADI LAUHA
- 26. Sharma T, Chakradhar MV, Madalageri MM. Navayasa *Lauha* as an herbomineral preperation and their utility in different disease. Journal of *Ayurveda* and Integrated Medical Sciences. 2018 Aug 31;3(04):158-61.
- 27. Shripathi, R., Management of medical jaundice, Ayurmedline hepatitis, 21, 2002
- 28. Panda AK, Mishra S, Mohapatra SK. Iron in Ayurvedic medicine. J. Adv. Dev. Res. 2011;2(2):287-93..
- 29. Thilakchand KR, Mathai RT, Simon P, Ravi RT, Baliga-Rao MP, Baliga MS. Hepatoprotective properties of the Indian gooseberry (Emblica officinalis Gaertn): a review. Food Funct. 2013 Oct;4(10):1431-41. doi: 10.1039/c3fo60237k. PMID: 23978895.
- Yadav N, Singh A, Amalaki (Emblica officinalis Gaertn.): A review on its therapeutic properties. J Ayu Int Med Sci. 2023;8(8):155-162.Available From <u>https://jaims.in/jaims/article/view/2592</u>
- Choi MK, Kim HG, Han JM, Lee JS, Lee JS, Chung SH, Son CG. Hepatoprotective Effect of Terminalia chebula against t-BHP-Induced Acute Liver Injury in C57/BL6 Mice. Evid Based Complement Alternat Med. 2015; 2015:517350. doi: 10.1155/2015/517350. Epub 2015 Jan 26. PMID: 25691908; PMCID: PMC4321673.
- 32. Tasduq SA, Singh K, Satti NK, Gupta DK, Suri KA, Johri RK. Terminalia chebula (fruit) prevents liver toxicity caused by sub-chronic administration of rifampicin, isoniazid and pyrazinamide in combination. Hum Exp Toxicol. 2006 Mar;25(3):111-8. doi: 10.1191/0960327106ht6010a. PMID: 16634329.
- 33. Gupta A, Kumar R, Ganguly R, Singh AK, Rana HK, Pandey AK. Antioxidant, anti-inflammatory and hepatoprotective activities of *Terminalia bellirica* and its bioactive component ellagic acid against diclofenac induced oxidative stress and hepatotoxicity. Toxicol Rep. 2020 Dec 24;8:44-52. doi: 10.1016/j.toxrep.2020.12.010. PMID: 33391996; PMCID: PMC7772792.
- [Aswathy V.M, M. A Shajahan and Indulekha V.C. (2019); HEPATOPROTECTIVE EFFECT OF *TRIPHALA* AND ITS COMBINATIONS - IN HEPG2 CELL LINES. *Int. J. of Adv. Res.* 7 (Sep). 346-352] (ISSN 2320-5407).
- 35. Shastri A. Rasaratnasamucchaya. Varanasi:Chaukhamba Orientalia; 1978; Ch.5/13; pp.96

- 36. Kaviraj Ambikadutta Shastri, Shushruta Samhita, Chaukhambha Sanskrut Sansthan, Sutrasthana 45/85
- 37. Dr. Brahmanand Tripathi, Sharangadhara Samhita, Chaukhamba Prakashan, Madhyama Khanda 10/14
- 38. Dr. Brahmanand Tripathi, Sharangadhara Samhita, Chaukhamba Prakashan, Madhyam Khanda 2/1
- 39. Dattatreya anant kulkrni, vagbhatacharyavirachit, Rasaratnasamuchhaya, Meharchand Lachmandas Publication, Reprint, Vol.1 ch 5/103
- 40. Dattatreya anant kulkrni, vagbhatacharyavirachit, Rasaratnasamuchhaya, Meharchand Lachmandas Publication, Reprint, Ch 5/125-126
- 41. LAUHAR. Dr. (2008). Protocol for Testing Ayurvedic Siddha and Unani.
- 42. The *Ayurvedic* Pharmacopoeia of India; Government of India Ministry of Health & Family welfare Department of AYUSH; 1st edition, Delhi: The Controller of Publications; 2016; Vol-9;Ch 2.1.9; p.114
- 43. The *Ayurvedic* Pharmacopoeia of India; Government of India Ministry of Health & Family welfare Department of AYUSH; 1st edition, Delhi: The Controller of Publications; 2008; Vol-6;Ch2.2.3
- 44. *Ayurvedic* Pharmacopoeia of India; Government of India Ministry of Health & Family welfare Department of AYUSH; 1st edition, Delhi: The Controller of Publications; 2016; part I;Vol-9;Ch 2.1 .8; p.114.
- 45. The *Ayurvedic* Pharmacopoeia of India, Part 2, vol I, 1st ed. Appendix 2, test and determination, pg. 140-41.
- 46. *Ayurvedic* Pharmacopoeia of India, Part 2(formulations), vol I, 1st ed, The controller of publications, Delhi, Appendix 3, pg 191.
- 47. The *Ayurvedic* Pharmacopoeia of India; Government of India Ministry of Health & Family welfare Department of AYUSH; 1st edition, Delhi: The Controller of Publications; 2007; Part 2; Vol 1;Ch 3.3; p.191.
- 48. Goldstein, Joseph I., et al. Scanning Electron Microscopy and X-Ray Microanalysis. United States, Springer New York, 2017.
- 49. Kaimal S, Vineeth PK, Ramesh N, Significance of Put and Bhasmikarana with special reference to Sankha *Bhasma*; Journal of *Ayurvedic* and Herbal Medicine 2017;3(4):222-224.p.223.
- 50. Shri Vagbhatacharya, Rasaratnasamucchay, edited by Kulkarni D.A., New Delhi: Meharchand Lachhmandas Publications;2010;Vol-1,Ch-8/28;p.148.
- 51. Shri Vagbhatacharya, Rasaratnasamucchay,edited by Kulkarni D.A., New Delhi: Meharchand Lachhmandas Publications;2010;Vol-1, Ch-8/29;p.148.
- 52. Mishra S. Ayurvedia Rasashasstra. Varanasi: Chaukhamba Orientallia;2013; Ch 2.p.93.
- 53. Shri Vagbhatacharya, Rasaratnasamucchay, edited by Kulkarni D.A, New Delhi: Meharchand Lachhmandas Publications;2010; Vol-1, Ch-8/29; p.148 Ch8/27;p.148.