

Nigella Sativa (Ns) Could it be a New Remedy for Type 1 Diabetic Patients

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Submitted: 16 Nov 2018; **Accepted:** 22 Nov 2018; **Published:** 29 Nov 2018**Abstract**

Nigella sativa (NS) is a widely used medicinal plant throughout the world. Seeds and oil have a long history of folklore usage in various aspects of medicines and food. It has been used to treat a wide range of diseases including diabetes mellitus (DM). DM is a chronic incurable disease with high mortality and morbidity and increasing prevalence. The aim of this study was to investigate the hypoglycemic effect of (NS) in type 1 diabetic patients. 30 patients with type 1 diabetes aged 5 to 17 years were included in the study after consenting their parents. Their medical history was taken to confirm that they were fit in the last month and their FBG was measured. They were given NS (2gm per day) with yogurt, beside their regular treatment (insulin) without changing their dose or diet for 30 days. Fasting blood glucose (FBG) was rechecked after that and compared with the initial FBG paired t-test in Statistical Package for the Social Sciences (SPSS) 22 software. The mean levels of FBS before and one month after the intervention were 259 ± 102 and 134 ± 70 mg/dl respectively. There was significant reduction in FBS after treatment with NS ($P = 0.000$). In conclusion NS, a natural product, showed a significant improvement in FBG in type 1 diabetic patients. More studies are recommended in the future to determine the optimal dose, duration and frequency of NS as an antidiabetic drug, its mechanism of action in type 1 diabetes and to search for the active antidiabetic ingredient as well as to study the effect of NS in prevention of diabetic complications.

Keywords: Nigella Sativa, Type 1 Diabetic Patient, Hypoglycemic Effect**Introduction**

Nigella Sativa (NS) belongs to the family Ranunculaceae has many medicinal properties like; antidiabetic, anticancer, analgesic, anti-inflammatory, immunomodulation, anti-asthmatic, cardiovascular protective, gastro-protective, hepato-protective and renal protective effects [1-24]. It also has antibacterial, antifungal, anti-schistosomiasis, antioxidant, neuro-pharmacological and anticonvulsant activities [25-30]. The most important active compound of this plant is thymoquinone [12, 13]. Many studies proved the safety of this plant [31]. A previous study in Sudanese in Khartoum state showed that, both N sativa and bee honey seem to have some benefits to asthmatics with no hepato-renal toxicity [32]. Other studies indicated that NS oil is a potential drug in treating DM as well as improving of insulin signaling pathway [33].

Diabetes mellitus is a chronic disorder of glucose metabolism results from dysfunction of pancreatic beta cells, insulin resistance or both. It is a serious global health problem the prevalence of which has been rising more rapidly in middle and low income countries [34].

The disease prevails in both genders and all age groups, so there is concern among the general public about its control and treatment [35]. In 2015, diabetes was the direct cause of 1.6 million deaths,

WHO estimates that diabetes will be the seventh leading cause of death in 2030. Uncontrolled diabetes leads to serious damage to many of the body's systems, especially the nerves and blood vessels [34]. It can be divided primarily into two types: type I or insulin dependent diabetes mellitus and type II or non-insulin dependent diabetes mellitus [36]. Type I diabetes mellitus is an autoimmune disease characterized by local inflammatory reaction in and around islets that is followed by selective destruction of insulin secreting β -cells and it occurs mainly in childhood [35]. It is mainly treated by injected insulin as it cannot be given orally and the inhaled insulin is still under trials and no oral treatment is available [37].

Objectives

The objective of this study was to investigate the safety and hypoglycemic effect of NS on type 1 diabetics.

Methods

This study was conducted on 30 diabetic children (14 males and 16 female). Thirty patients with type I diabetes aged 5 to 17 years were included in the study after consenting their parents. Their medical history was taken to confirm that they were fit in the last month and their FBG was measured. They were given NS (2gm per day) with yogurt, beside their regular treatment (insulin) without changing their dose or diet for 30 days. Fasting blood glucose (FBG) was rechecked after that.

5ml of blood was collected by laboratory technician to measure fasting blood glucose (FBG) after overnight fasting (8 hours). FBG was estimated by glucose oxidase method using Bio systems A25 automated clinical chemistry analyzer.

Data was analyzed using paired t-test in Statistical Package for the Social Sciences (SPSS). 22 software and p value of 0.05 was taken as statistically significant.

Results

The mean of FBG before, and one month after the use of NS were 259 ± 102 , 134 ± 70 mg/dl respectively (Table 1, Figure 1). There was a significant reduction in FBG ($P=0.000$). The general health of the children was better.

Table 1: The effect of oral Nigella sativa on FBG in type1 diabetic children

Variable	Before treatment	After treatmentfor 1/12	P value
Fasting blood glucose(mg/dl)	259 ± 102	134 ± 70	0.000

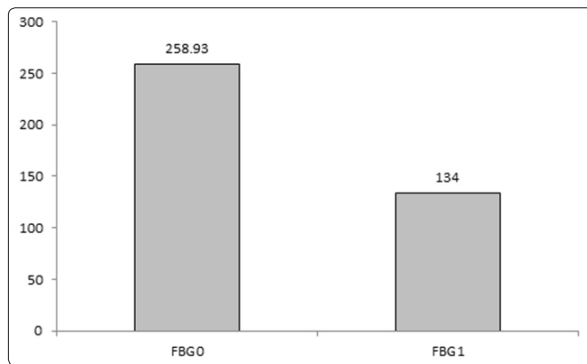


Figure 1: Fasting blood glucose in mg/dl before the use of NS (FBG0) and one month after oral 2g/day of Nigella sativa in type 1 diabetic children

Discussion

The only available remedy for type1 DM is injectable insulin therapy and inhaled insulin is not yet standardized. Compliance to Continuous insulin injections has been big challenge to the control of diabetes and its complications. In this study the traditional use of the natural herb Nigella sativa in treatment of so many diseases and its antidiabetic effect in type 2 DM has been tested in Type1DM [9].

Many experimental studies on the effect of NS on streptozotocin induced diabetes in rats have shown that it has a hypoglycemic effect [2-4]. Streptozotocin destroys the beta cells and in effect it is actually Type1DM.

Type I diabetes is an autoimmune disease and Nigella sativa was found to be immunomodulatory [17, 18]. Bamosa et al found that NS seeds (1, 2 and 3 g/day) significantly improved the glycemic control with no toxicity in Type 11 diabetic patients [9]. In this present study we investigated the hypoglycemic effect of N.S in Type I diabetic patients who were on regular insulin treatment. The use of oral whole NS seeds has decreased the FBG significantly without any side effects and the parents felt that their children were more fit.

In conclusion this study confirmed the oral hypoglycemic action of NS in Type I diabetic patients. More studies are needed to see its long term effect, its appropriate dose for proper control of DM, its active ingredient and its mechanism of action.

References

1. Aftab Ahmad, Asif Husain, Mohd Mujeeb, Shah Alam Khan, Abul Kalam Najmi, et al. (2013) A review on therapeutic potential of Nigella sativa: A miracle herb. Asian Pac J Trop Biomed 3: 337-352.
2. Salama RHM (2011) hypoglycemic effect of lipoic acid, carnitine and Nigella sativa in diabetic rat model. Int J Health Sci (Qassim) 5: 126-134.
3. Adelmeguid NE, Fakhoury R, Kamal SM, AI Wafai RJ (2010) Effects of Nigella sativa and thymoquinone on biochemical and subcellular changes in pancreatic β -cells of streptozotocin-induced diabetic rats. J Diabetes 2: 256-266.
4. Kanter M, Akpolat M, Aktas C (2009) Protective effects of the volatile oil of Nigella sativa seeds on beta-cell damage in streptozotocin-induced diabetic rats: A light and electron microscopic study. J Mol Histol 40: 379-385.
5. Pari L, Sankaranarayanan C (2009) Beneficial effects of thymoquinone on hepatic key enzymes in streptozotocin-nicotinamide induced diabetic rats. Life Sci 85: 830-834.
6. Altan MF, Kanter M, Donmez S, Kartal ME, Buyukbas S (2007) Combination therapy Nigella sativa and human parathyroid hormone on bone mass, biomechanical behavior and structure in streptozotocin-induced diabetic rats. Acta Histochem 109: 304-314.
7. Najmi A, Haque SF, Naseeruddin M, Khan RA (2008) Effect of Nigella sativa oil on various Clinical and biochemical parameters of metabolic syndrome. Int J Diabetes Dev Ctries 16: 85-87.
8. Kapoor S (2009) Emerging clinical and therapeutic applications of Nigella sativa in gastroenterology. World J Gastroenterol 7: 2170-2171.
9. Bamosa AO, Kaatabi H, Lebdaa FM, Elq AM, Al-Sultanb A (2010) Effect of Nigella sativa seeds on the glycemic control of patients with type 2 diabetes mellitus. Indian J Physiol Pharmacol 54: 344-354.
10. Benhaddou-Andaloussi A, Martineau L, Vuong T, Meddah B, Madiraju P, et al. (2011) The in vivo antidiabetic activity of Nigella sativa is mediated through activation of the AMPK pathway and increased muscle glut4 content. Evid Based Complement Alternat Med 2011: 538671.
11. Salem ML, Alenzi FQ, Attia WY (2011) Thymoquinone, the active ingredient of Nigella sativa seeds, enhances survival and activity of antigen-specific CD8-positive T cells in vitro. Br J Biomed Sci 68: 131-137.
12. Mahmoud SS, Torchilin VP (2012) Hormetic/cytotoxic effects of Nigella sativa seed alcoholic and aqueous extracts on MCF-7 breast cancer cells alone or in combination with doxorubicin. Cell Biochem Biophys 25: 1392-1398.
13. Peng L, Liu A, Shen Y, Xu HZ, Yang SZ, et al. (2013) Antitumor and anti-angiogenesis effects of thymoquinone on osteosarcoma through the NF- κ B pathway. Oncol Rep 29: 571-578.
14. Lei X, Lv X, Liu M, Yang Z, Ji M, et al. (2012) Thymoquinone inhibits growth and augments 5-fluorouracil-induced apoptosis in gastric cancer cells both in vitro and in vivo. Biochem Biophys Res Commun 417: 864-868.
15. Alemi M, Sabouni F, Sanjarian F, Haghbeen K, Ansari S (2013)

- Anti-inflammatory effect of seeds and callus of *Nigella sativa* L extracts on mix glial cells with regard to their thymoquinone content. *AAPS Pharm Sci Tech* 14: 160-167.
16. Shuid AN, Mohamed N, Mohamed IN, Othman F, Suhaimi F, et al. (2012) *Nigella sativa*: A potential antiosteoporotic agent. *Evid Based Compl Altern Med* 2012: 696230.
 17. Majdalawieh AF, Hmaidan R, Carr RI (2010) *Nigella sativa* modulates splenocyte proliferation, Th1/Th2 cytokine profile, macrophage function and NK anti-tumor activity. *J Ethnopharmacol* 131: 268-275.
 18. Ghonime M, Eldomany R, Abdelaziz A, Soliman H (2011) Evaluation of immunomodulatory effect of three herbal plants growing in Egypt. *Immunopharmacol Immunotoxicol* 33: 141-145.
 19. Khazdair MR (2015) The Protective Effects of *Nigella sativa* and Its Constituents on Induced Neurotoxicity. *Journal of Toxicology* 2015: 841823.
 20. Nemmar A, Al-Salam S, Zia S, Marzouqi F, Al-Dhaheri A, et al. (2011) Contrasting actions of diesel exhausts particles on the pulmonary and cardiovascular systems and the effects of thymoquinone. *Br J Pharmacol* 164: 1871-1882.
 21. Magdy MA, Hanan el-A, Nabila el-M (2012) Thymoquinone: Novel gastro protective mechanisms. *Eur J Pharmacol* 697: 126-131.
 22. Zafeer MF, Waseem M, Chaudhary S, Parvez S (2012) Cadmium-induced hepatotoxicity and its abrogation by thymoquinone. *J Biochem Mol Toxicol* 26: 199-205.
 23. Yaman I, Balikci E (2010) Protective effects of *Nigella sativa* against gentamicin-induced nephrotoxicity in rats. *Exp Toxicol Pathol* 62: 183-190.
 24. Saleem U, Ahmad B, Rehman K, Mahmood S, Alam M, et al. (2012) Nephro-protective effect of vitamin C and *Nigella sativa* oil on gentamicin associated nephrotoxicity in rabbits. *Pak J Pharm Sci* 25: 727-730.
 25. Bakathir HA, Abbas NA (2011) Detection of the antibacterial effect of *Nigella sativa* ground seeds with water. *Afr J Tradit Compl Altern Med* 8: 159-164.
 26. Aljabre SH, Randhawa MA, Akhtar N, Alakloby OM, Alqurashi AM, et al. (2005) Antidermatophyte activity of ether extract of *Nigella sativa* and its active principle, thymoquinone. *J Ethnopharm* 101: 116-119.
 27. Mohamed AM, Metwally NM, Mahmoud SS (2005) *Nigella sativa* seeds against *Schistosoma mansoni* different stages. *Mem Inst Oswaldo Cruz* 100: 205-211.
 28. Umar S, Zargan J, Umar K, Ahmad S, Katiyar CK, et al. (2012) Modulation of the oxidative stress and inflammatory cytokine response by thymoquinone in the collagen induced arthritis in Wistar rats. *Chem Biol Interact* 197: 40-46.
 29. Akhtar M, Maikiyo AM, Khanam R, Mujeeb M, Aqil M, et al. (2012) Ameliorating effects of two extracts of *Nigella sativa* in middle cerebral artery occluded rat. *J Pharm Bio allied Sci* 4: 70-75.
 30. Ezz HS, Khadrawy YA, Noor NA (2011) the neuroprotective effect of curcumin and *Nigella sativa* oil against oxidative stress in the pilocarpine model of epilepsy: A comparison with valproate. *Neurochem Res* 36: 2195-2204.
 31. Khader M, Bresgen N, Eckl PM (2009) In vitro toxicological properties of thymoquinone. *Food Chem Toxicol* 47: 129-133.
 32. Nahid Mahmoud AL Ameen, Faisal Altubaigy, Tamanna Jahangir, Idriss Abdalla Mahday, Esmaeel Abdurrahman Mohammedand, et al. (2011) Effect of *Nigella sativa* and bee honey on pulmonary, hepatic and renal function in Sudanese in Khartoum state. *Journal of Medicinal Plants Research* 5: 6857-6863.
 33. Badary OA, Abd-Ellah MF, El-Mahdy MA, Salama SA, Hamada FM (2007) Anticlastogenic activity of thymoquinone against benzo(a)pyrene in mice. *Food and Chemical Toxicology* 45: 88-92.
 34. World Health Organization (WHO) Diabetes prevalence has been.
 35. Farzaneh Hasanzade, Maryam Toliat, Seyyed Ahmad Emami, Zahra Emamimoghaadam (2013) the Effect of Cinnamon on Glucose of Type II Diabetes Patients. *J Tradit Complement Med* 3: 171-174.
 36. Tuomi T (2005) Type 1 and type 2 diabetes: What do they have in common? *Diabetes* 54: S40-S45.
 37. David C Klonoff (2014) Afezza inhaled insulin. *J Diabetes Sci Technol* 86: 1071-1073.

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