

Universidade Federal de Pernambuco
Centro de Ciências Biológicas
Mestrado em Bioquímica

Investigação da ação expectorante do extrato
acetônico e do ácido fumarprotocetrárico da
Cladonia verticillaris (líquen) em camundongos

Mestranda: Cynthia K. Wessen Pereira Lima
Orientador: Prof. Dr. Nicácio Henrique da Silva
Co-orientadores: Prof. Dra. Eugênia C. Pereira
Prof. Dra. Maria Teresa Jansem Catanho

Recife
2007

Cynthia Karinne Wessen Pereira Lima

Investigação da ação expectorante do extrato
acetônico e do ácido fumarprotocetrárico da
Cladonia verticillaris (líquen) em camundongos

Dissertação apresentada para o
cumprimento parcial das exigências
para obtenção do título de mestre
em bioquímica pela Universidade
Federal de Pernambuco.

Wessen, Cynthia K.

Investigação da ação expectorante do extrato acetônico e do ácido fumarprotocetrárico de *Cladonia Verticillaris* (Líquen) em camundongos/ Cynthia K. Wessen – Recife: O Autor, 2007.

55 folhas : il., fig., tab.

Dissertação (mestrado) – Universidade Federal de Pernambuco. CCB. Bioquímica, 2007.

Inclui bibliografia e anexo.

1. Líquens 2. *Cladonia Verticillaris* 3. Ácido Fumarprotocetrarico
I. Título.

**577.1
572**

**CDU (2.ed.)
CDD (22.ed.)**

**UFPE
CCB – 2007- 038**

Ata da defesa de dissertação da Mestranda **Cynthia Karine Wessen Pereira Lima**, realizada em 15 de fevereiro de 2007, como requisito final para obtenção do título de Mestre em Bioquímica.

Às 09:10 minutos do dia 15 de fevereiro de 2007, foi aberto, no Auditório Prof. Marcionilo Lins/Depto. de Bioquímica, o ato de defesa de dissertação da mestranda **Cynthia Karine Wessen Pereira**, aluna do Curso de Mestrado em Bioquímica. Iniciando os trabalhos a Profa. Dra. Patrícia Maria Guedes Paiva, Vice-Coordenadora do Curso supra citado, fez a apresentação da aluna, de seu orientador, Prof. Dr. Nicácio Henrique da Silva, de suas co-orientadoras, Profa. Dra. Eugênia Cristina Gonçalves Pereira, do Depto. de Geografia/UFPE e Profa. Dra. Maria Teresa Jansem Catanho, do Depto. de Biofísica/UFPE, e da Banca Examinadora composta pelos professores doutores: Nicácio Henrique da Silva, na qualidade de Presidente, Maria da Paz Carvalho da Silva, ambos do Depto. de Bioquímica/UFPE, Armele de Fátima Dornelas de Andrade, do Depto. de Fisioterapia/UFPE e Maria Bernadete de Souza Maia, do Depto. de Fisiologia e Farmacologia/UFPE. Após as apresentações, o Sr. Presidente convidou a aluna para a apresentação de sua dissertação intitulada: "**Investigação da ação expectorante do extrato acetônico e do ácido fumarprotocetrárico de *Cladonia verticillaris* (LÍQUEN) em camundongos**", e informou que de acordo com o Regimento Interno do Curso, o candidato disporia de até 50 (cinquenta) minutos para apresentação do trabalho e o tempo de arguição para cada examinador, juntamente com o tempo gasto pelo aluno para responder às perguntas seria de 30 (trinta) minutos. A aluna procedeu a explanação e comentários acerca do tema em 30 (trinta) minutos. Em seguida, o Sr. Presidente convidou a Banca Examinadora para ocupar seus lugares e passou a palavra ao primeiro examinador, a Profa. Dra. Armele de Andrade, em seguida para a Profa. Dra. Bernadete Maia, e finalmente para a Dra. Maria da Paz Carvalho Silva, os quais agradeceram o convite, fizeram alguns comentários, deram sugestões e iniciaram suas respectivas arguições. Ao final das mesmas, os referidos professores deram-se por satisfeitos. Em seguida, o Sr. Presidente usou da palavra para tecer alguns comentários, agradecer à Banca Examinadora e parabenizar a candidata. Finalmente, a sessão foi suspensa para proceder ao julgamento pela Banca Examinadora, a qual se reuniu na Secretaria do Mestrado, na presença da Vice-Coordenadora do Curso. Após alguns comentários, a Banca decidiu, por unanimidade, conceder a menção "**Aprovada**". Nada mais havendo a tratar, lavrei a presente ata que vai assinada por mim, Secretário, e demais membros da Banca Examinadora. Recife, 15 de fevereiro de 2007.

[Assinatura]
[Assinatura]
[Assinatura]
Nicácio Henrique da Silva

José Manoel de Almeida

Em Tempo:

Nº LINHA 03, ONDE SE LÊ: CYNTHIA KARINE WESSEN PEREIRA,
 VELA-SE: CYNTHIA KARINE WESSEN PEREIRA LIMA.

José Manoel de Almeida
 2m. 15/02/2007

COMISSÃO EXAMINADORA

Prof. Dr. Nicácio Henrique da Silva
Orientador (Presidente)

Profa. Dra. Maria da Paz Carvalho da Silva
1º examinador

Profa. Dra. Armele de Fátima Dornelas de Andrade
2º examinador

Profa. Dra. Maria Bernadete de Souza Maia
3º examinador

Recife, 2007

À minha família pelo amor
incondicional em todas as horas.

"A alegria está na luta, na tentativa,
no sofrimento envolvido.
Não na vitória propriamente dita".
(Mahatma Gandhi)

SUMÁRIO

AGRADECIMENTOS

LISTA DE ABREVIATURAS

RESUMO

ABSTRACT

1. INTRODUÇÃO	21
2. REVISÃO DA LITERATURA	22
3. OBJETIVOS	29
3.1. Gerais.....	29
3.2. Específicos.....	29
4. ARTIGO A SER PUBLICADO	30
5. CONCLUSÃO.....	49
6. REFERÊNCIAS	50
7. ANEXOS	55
7.1. Resumo referente ao assunto da dissertação, publicado e apresentado em congresso no decorrer do curso	56
7.2. Normas do periódico especializado, ao qual o trabalho da dissertação foi submetido	58

AGRADECIMENTOS

Ao Deus do meu coração, cuja infinita bondade, me faz todos os dias fechar os olhos e abrir o coração para enxergar as belezas da vida.

Aos meus orientadores Prof. Dr. Nicácio Henrique que sempre esteve presente dedicando-se carinhosamente com paciência e humildade fazendo-me sorrir nas horas mais difíceis, à Profa. Dra. Eugênia Pereira que praticou o verdadeiro sentido da palavra orientar indo muito além dos ensinamentos científicos, à Profa. Dra. Maria Teresa Jansem Catanho pela atenção e competência.

Ao Departamento de Bioquímica da Universidade Federal de Pernambuco, por tornar possível a realização deste projeto.

Ao Laboratório de Produtos Naturais do Departamento de bioquímica da Universidade Federal de Pernambuco, por ter concedido-me suas instalações e todo o apoio para realização deste trabalho.

À Coordenação de Aperfeiçoamento de Pessoal de Ensino Superior (CAPES) pela concessão de bolsa, utilizada em parte do curso.

Aos técnicos de laboratório do Departamento de Bioquímica/UFPE, especialmente ao Sr João Virgínio.

Aos colegas do Curso de Pós Graduação em Bioquímica/UFRPE, especialmente Alba Serafim, Jenayce Vasconcelos, Flávia Pereira e Paula Hirakawa, pela amizade e companheirismo.

A Ivomar Guimarães, por ser a estrela onde brilha a minha alma.

LISTA DE ABREVIATURAS

ATR – Atranorina

BL – Bronchial lavage

COPD – Chronic obstructive pulmonary disease

DPOC – Doença pulmonar obstrutiva crônica

FUM – Ácido fumarprotocetrário

HPLC – High-performance liquid chromatography

LD₅₀ – Lethal dose 50%

PRO – Ácido Protocetrário

TLC – Thin-layer chromatography

Os líquens tem sido utilizados na medicina popular desde a antiguidade para tratar vários tipos de doenças do trato respiratório como irritação da garganta, tosse, tuberculose, e asma. Este estudo tem como objetivo avaliar a atividade expectorante do extrato acetônico e do ácido fumarprotocetrárico (FUM) de *Cladonia verticillaris* em camundongos. Para este propósito, foram usados 60 camundongos albinos suíços, fêmeas, separados em cinco grupos, aos quais foi administrado vermelho de fenol, diluído em salina 0,9%, intraperitonealmente (200 mg/kg em 10 mL/kg) e após isto, foi administrada a droga oralmente. Os animais foram sacrificados 30 minutos e 1 hora após a administração das drogas e tiveram a traquéia dissecada e canulada com uma agulha, através da qual foram realizadas lavagens pulmonares com solução salina. Os fluidos coletados foram centrifugados e ao sobrenadante adicionado NaOH (0,01 N). Em seguida, a leitura do material foi feita em espectrofotômetro a 546 nm. Os resultados foram analisados através do teste não paramétrico de Mann-Whitney ($p \leq 0,05$). Os grupos tratados com ambroxol (75 mg/kg) e com o extrato acetônico (80 mg/kg) apresentaram aumento estatisticamente significativo da excreção do vermelho de fenol na secreção traqueobrônquica dos animais. Estes resultados sugerem que, na forma oral, o extrato acetônico, na dose de 80 mg/kg, mostrou-se tão eficaz quanto o ambroxol como expectorante.

Palavras-chaves: *Cladonia verticillaris*; Ácido fumarprotocetrárico; Atividade mucolítica

ABSTRACT

Lichen metabolites exert a wide variety of biological actions including antibiotic, antimycobacterial, antiinflammatory, analgesic and antipyretic effects. Throughout the ages, lichens have been used for various purposes in folk medicine for treatment of affections such as throat irritation and cough, tuberculosis and asthma. This study was aimed at evaluating the expectorant activity of acetonc extract from *Cladonia verticillaris* and fumarprotocetraric acid (FUM) in mice. Female Swiss mice (n = 60) were separated into five groups. Phenol red, suspended in saline, was injected intraperitoneally (200 mg/kg in 100 mL/kg) and after this the drugs were administered orally. The mice were sacrificed and their tracheas were dissected and cannulated with a blunt. Through this blunt lung lavages were carried out with saline and the fluids collected were then centrifuged. A portion was taken and mixed with NaOH (0,01 N) and measured at 546 nm. The Mann-Whitney test and a probability level of $p \leq 0.05$ were chosen as the criterion for statistical significance. The groups treated with ambroxol (75 mg/kg) and acetonc extract (80 mg/kg) showed statistical significance with increasing of phenol red in tracheobronchial sputum. These results suggest that acetonc extract (80 mg/kg) administered orally is as an efficient mucolytic agent as ambroxol.

Keywords: Lichen; *Cladonia verticillaris*; Fumarprotocetraric acid; Mucolytic activity

1. INTRODUÇÃO

As doenças respiratórias constituem importante causa de morbidade e mortalidade em adultos e crianças no mundo. Segundo dados da Organização Mundial de Saúde (OMS), em 2002, estima-se que as infecções respiratórias representaram 6,9% do total de mortos e que a doença pulmonar obstrutiva crônicas (DPOC) e a asma somaram juntas 6,5% (OMS, 2004). A OMS estima ainda que entre os anos de 2000 e 2003, as infecções respiratórias agudas representaram 19% do total de mortes entre crianças menores de 5 anos (OMS, 2005).

No Brasil, as doenças respiratórias agudas e crônicas também ocupam lugar de destaque nas estatísticas. Segundo o Ministério da Saúde, estas foram responsáveis por 14,91% dos internamentos no Sistema Único de Saúde (SUS) em 2005 e, por 11,24% do total de óbitos em 2003 (BRASIL, 2005).

Nas doenças respiratórias, a inflamação persistente leva a uma excessiva produção de muco com alta viscoelasticidade e adesividade, dificultando, desta forma, a mobilização desta secreção na via aérea e sua expectoração pela tosse. O muco acumulado na via aérea pode levar a obstrução, colonização por bactérias e infecções recorrentes (DAVISKAS & ANDERSON, 2006).

Mucolíticos e outras drogas similares são usados desde a antiguidade. Embora sejam largamente empregados e prescritos, sua eficácia permanece em dúvida (YUTA & BARANIUK, 2005). Em virtude de supostamente apresentarem menos ou nenhum efeito adverso, os medicamentos fitoterápicos são amplamente utilizados como expectorantes. Na Europa, o líquen *Cetraria islandica* é empregado como base em diversos produtos, dentre eles xaropes expectorantes e pastilhas para afecções respiratórias.

O líquen *Cladonia verticillaris*, comum no nordeste brasileiro, possui composição química semelhante a *C. islandica*, ambos contém o ácido fumarprotocetrárico como principal metabólito, que demonstrou ação antitumoral (SANTOS *et al.*, 1997), antiinflamatória aguda e crônica, antinociceptiva e antipirética (SANTOS, 2003).

Visto a efetividade deste composto e sua ocorrência em quantidades suficientes para estudo em *C. verticillaris*, além de ser esta espécie abundante na costa do nordeste brasileiro, justifica-se um estudo que vislumbre mais uma de suas propriedades farmacológicas.

2. REVISÃO DA LITERATURA

Os líquens são originados da associação simbiótica entre uma ou mais algas e um fungo, resultando na formação de um talo de estrutura específica, com características morfológicas peculiares que os distinguem das formas que lhes deram origem (HALE, 1983; HARKSWORTH & HILL, 1984; NASH III, 1996). Produzem uma variedade de metabólitos secundários característicos, alguns dos quais exibem uma alta taxa de usos potenciais em atividades biológicas (YAMAMOTO, 1991).

As substâncias químicas produzidas pelos líquens são agrupadas, de acordo com a localização do talo, em produtos intra e extracelulares. O talo liquênico é uma estrutura composta sendo alguns produtos sintetizados pelo fungo e outros pela alga (HALE, 1983). Os produtos intracelulares (carboidratos, carotenóides e vitaminas, aminoácidos e proteínas) estão ligados à parede celular e ao protoplasto. São freqüentemente solúveis em água e, podem ser extraídos a quente. Esses compostos ocorrem não somente em líquens, mas em fungos e algas de vida livre e em plantas superiores (HALE, 1983). Os produtos extracelulares, freqüentemente chamados metabólitos secundários, são encontrados na medula ou no córtex, raramente em ambas as camadas (NASH III, 1996). São ácidos alifáticos, meta e para-depsídeos, depsidonas, ésteres benzílicos, dibenzofuranos, xantonas, antraquinonas, ácidos úsnicos, terpenos e derivados do ácido pulvínico. Embora alguns desses compostos também sejam produzidos por fungos de vida livre e por plantas superiores, a maior parte é considerada exclusiva de líquens (ELIX, 1996).

O uso tópico de extratos liquênicos tem origem nos tempos do Egito antigo (VARTIA, 1973). A espécie *Lecanora esculenta*, comum no deserto, é relatada como sendo o maná bíblico (TREASE & EVANS, 1978). Os líquens eram usados na medicina popular de acordo com a sua semelhança às enfermidades; como exemplo a *Lobaria pulmonaria*, por sua superfície reticulada, era utilizada em problemas pulmonares (ABRAHAN & FLOREY, 1949).

Através dos anos, os líquens têm sido utilizados com vários propósitos, como corantes, perfumes e remédios na medicina popular (MÜLLER, 2001).

Como certos compostos fenólicos produzidos pelos líquens absorvem fortemente raios UVB, estes agentes têm sido usados como fotoprotetores (FERNÁNDEZ *et al.*

1996), e sua capacidade antioxidante (HIDALGO *et al.*, 1994; GÜLÇİN *et al.*, 2002) justifica o uso destes em cremes cosméticos. Testes com o extrato aquoso da *Lobaria pulmonaria* mostraram forte atividade anti-ulcerogênica em camundongos (SÜLEYMAN *et al.*, 2003). O extrato metanólico do líquen *Umbilicaria esculenta* mostrou significativa ação antitrombótica *in vivo* e *in vitro* (KIM & LEE, 2006). Testes com líquens comprovaram a ocorrência freqüente de metabólitos com propriedades antibióticas, antimicobacteriana, antiviral, antitumoral, analgésica e antipirética (MÜLLER, 2001).

A *Cetraria islandica* (Isla moss), é muito conhecida na medicina popular européia, sendo usada no tratamento de doenças como hemorróidas, disenteria, bronquite, tuberculose (DÜLGER *et al.*, 1998), resfriados comuns, asma (HUOVINEN *et al.*, 1986), tosse, irritação na garganta e gastrite (KARTNIG, 1987). Esta espécie também tem sido utilizada como droga hemostática (BAYTOP, 1999) e comprovou-se a presença de compostos neste líquen capazes de inibir, *in vitro*, o crescimento do *Helicobacter pylori*, justificando seu uso no alívio dos sintomas da gastrite e da úlcera duodenal (INGÓLFSDÓTTIR *et al.*, 1997). Pastilhas preparadas a partir de extratos da *C. islandica*, de nomes comerciais de “Isla-Moos ®” e “Isla-Mint ®” (Figura 1), usadas para doenças do trato respiratório superior, tiveram suas tolerabilidades testadas em 3.143 crianças e resultados satisfatórios favoreceram o seu uso (HECKER & VOLP, 2004). Kempe *et al.* (1997) estudaram 61 pacientes que haviam se submetido à cirurgia recente de desvio de septo nasal e, apresentavam secura e inflamação da garganta devido à respiração predominantemente bucal na fase pós-cirúrgica. Verificaram que a pastilha “Isla moos®” foi capaz de causar mudanças diretas nos quadros clínicos observados sem, contudo, causar efeitos adversos no tratamento da inflamação da mucosa oral. Desta forma, o uso desta pastilha na fase pós-operatória de cirurgia nasal, após intubação ou em infecções simples na garganta tem se mostrado eficiente.

Além das pastilhas Isla-Moos ® e Isla-Mint ®, são encontrados na Europa, sobretudo na Alemanha, outros medicamentos e produtos obtidos a partir da *C. islandica* como o xarope expectorante de nome comercial Pulmobronquiol Plus ® (Figura 2), o xampu de nome comercial Natural Shower ® (Figura 3) e o bom-bom de nome Em-Herbal ® (Figura 4).



Figura 1. Pastilhas à base de *C. islandica* de nomes comerciais Isla-Moos® e Isla-Mint®.



Figura 2. Xarope à base de *C. islandica* de nome comercial Pulmobronquiol Plus®.



Figura 3. Xampu à base de *C. islandica* de nome comercial Natural Shower®.



Figura 4. bala à base de *C. islandica* de nome comercial Em-herbal®.

O ácido fumarprotocetrárico (FUM), ácido protoliqueterínico, α -metileno- γ -lactona, e o β -orcinol são considerados os metabólitos secundários com maior atividade biológica da *C. islandica* (ÖGMUNDSÓTTIR *et al.*, 1998). O FUM (Figura 5A), produzido apenas por líquens, é classificado como depsidona. Este composto liquênico possui dois anéis aromáticos e um heterociclo resultante de uma ligação éter e éster. O FUM possui no anel B uma molécula de ácido fumárico adicionada por esterificação direta do grupo $-\text{CH}_2\text{OH}$ deste anel, quando ainda na forma de ácido protocetrárico (PRO) (Figura 5B) (HONDA & VILEGAS, 1998).

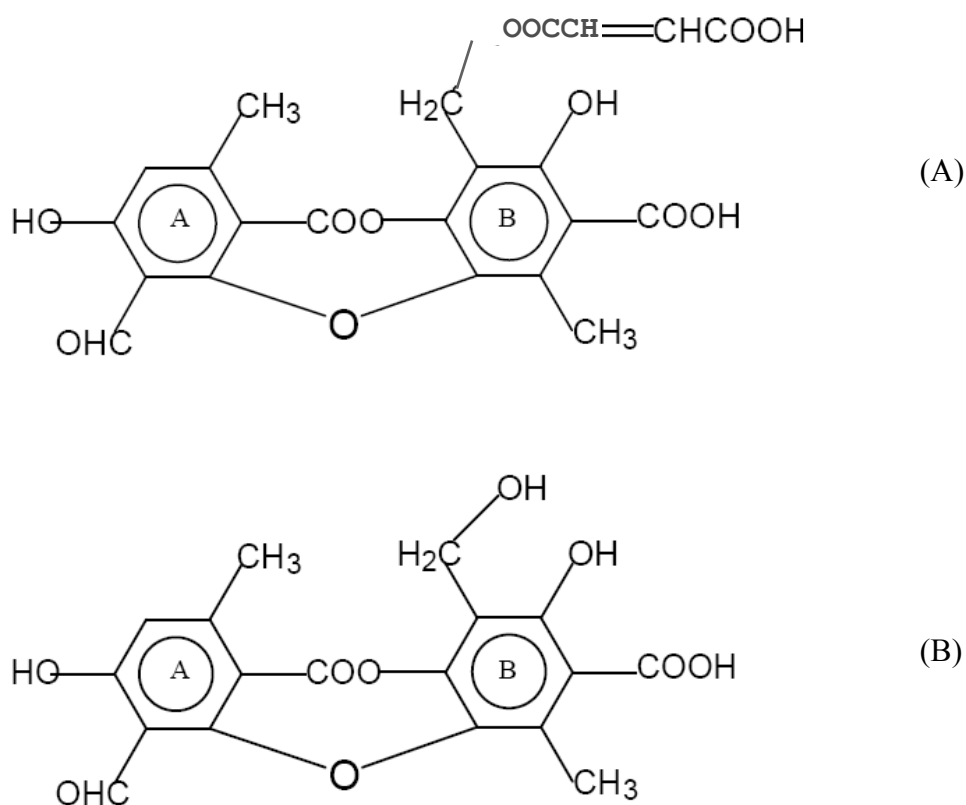


Figura 5. Modelo estrutural do FUM (A) e do PRO (B). Fonte: Pereira, 1998.

O líquen *Cladonia verticillaris* (Raddi) Fr. (Figura 6) é considerado por Ahti *et al.* (1993) como espécie endêmica da costa leste do Brasil, encontrada do Rio Grande do Sul à Paraíba.

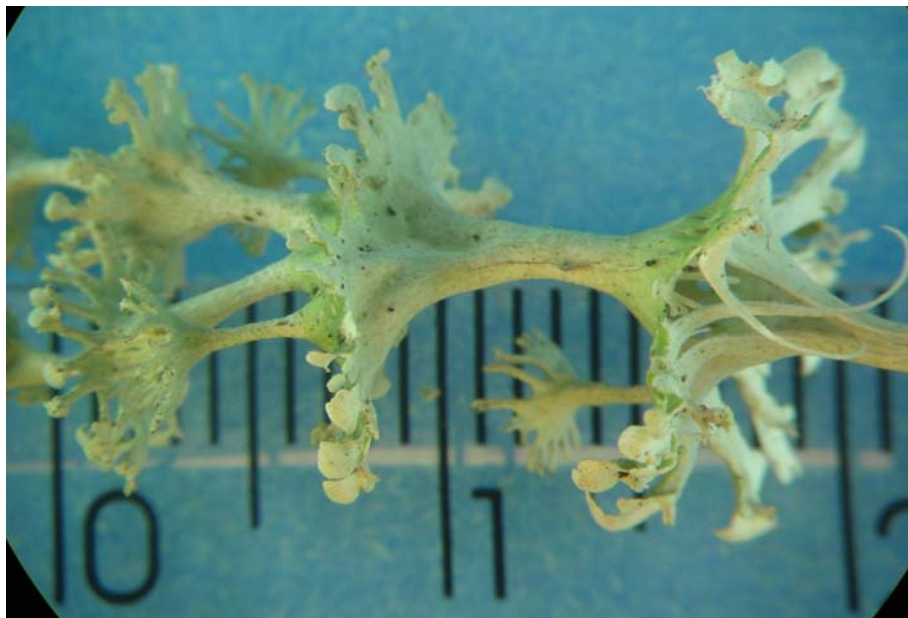


Figura 6. *Cladonia verticillaris* (Raddi) Fr. Ocorrente sobre solos arenosos de tabuleiros. Escala em centímetros. Fonte: Freitas, 2006.

A *C. verticillaris* tem como principal componente químico o FUM e, em menores concentrações, o PRO e a atranorina (ATR) (AHTI *et al.*, 1993). Outros compostos podem ocorrer em mínimas concentrações, sobretudo sob influência micro climática, como as substâncias Cph₁ e Cph₂ (LEGAZ *et al.*, 1986), ou produtos intermediários da biossíntese do FUM como o ácido hipoprotocetrárico e seu aldeído (PEREIRA *et al.*, 1999).

A atranorina, que é um para-depsídeo, é formada de duas unidades aromáticas substituídas. A substância possui, no anel A, duas hidroxilas fenólicas, um grupo metila, e uma função aldeídica; no anel B possui dois grupos metila, uma hidroxila fenólica e uma função éster (Figura 7) (ASAHINA & SHIBATA, 1954).

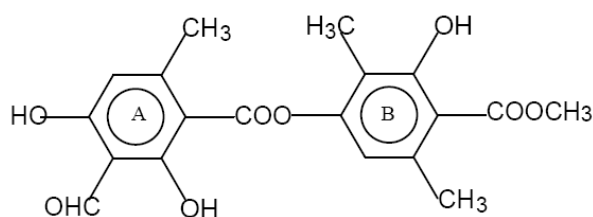


Figura 7. Modelo estrutural da atranorina. Fonte: Pereira, 1998

As depsidonas mostraram-se efetivas como fotoprotetores (FERNÁNDEZ *et al.*, 1996); como inibidores da integrase do HIV-1, que é uma enzima responsável por inserir o DNA viral no cromossomo do hospedeiro (NEAMATI *et al.*, 1997) e, como inibidores da lipoxigenase-5 de leucócitos de porco, que é uma enzima responsável por catalisar o primeiro passo da transformação do ácido araquidônico em leucotrienos, desempenhando importante função em uma variedade de processos patofisiológicos em humanos, particularmente nos inflamatórios (INGÓLFSDÓTTIR *et al.*, 1996). O FUM extraído da *Cladonia verticillaris* mostrou ação antitumoral (SANTOS *et al.*, 1997), ação antiinflamatória aguda e crônica, antinociceptiva e antipirética (SANTOS, 2003).

Uma das consequências da inalação de cerca de 10.000 litros de ar todos os dias é a de que, junto com esse ar, penetram também no aparelho respiratório partículas em suspensão, gases e microrganismos que, dependendo de sua natureza, concentração e forma de apresentação, têm maior ou menor potencial de provocar danos ao organismo. Para defender-se dessas agressões em potencial, o aparelho respiratório possui um sistema de defesa altamente eficiente e integrado, dos quais o mais bem conhecido e estudado é o da depuração mucociliar, que depende basicamente da integração entre o movimento dos cílios das células do epitélio de revestimento da mucosa respiratória e, o muco produzido pelas glândulas mucosas e pelas células caliciformes (HOSOE *et al.*, 1998; SILVA, 2006).

Em várias doenças do sistema respiratório, a exemplo a bronquite crônica, fibrose cística e asma, o sistema de depuração mucociliar está prejudicado pela diminuição dos batimentos ciliares das células epiteliais, ou por uma mudança na produção de muco, ou ambos (HOSOE *et al.*, 1998).

Há séculos o homem busca substâncias capazes de facilitar a retirada do excesso de secreção brônquica; entretanto, é importante que isso ocorra como consequência e, antes de decidir sobre qual droga mucoativa utilizar, o paciente deve ser avaliado quanto à patologia primária e ao tratamento específico iniciado. Droga mucoativa é definida como um agente que possui, como ação primária, a capacidade de modificar a produção e secreção de muco, sua natureza e composição e/ou sua interação com o epitélio. Frequentemente são listadas sob uma série de termos como expectorantes, fluidificantes, demulcentes, dentre outros sinônimos (SILVA, 2006).

O ambroxol (trans - 4 - [(2 - amino - 3,5 - dibromofenil - metil) amino] ciclohexanol) (Figura 8), um agente muco regulador, estimula a síntese e secreção do

surfactante, normalizando a produção de muco e, facilitando a expectoração (NOWAK *et al.*, 1994). Exibe atividade antioxidante (GILLISSEN *et al.*, 1997; SUZUKI *et al.*, 1998) e antiinflamatória com redução de citocinas dos macrófagos, monócitos e granulócitos broncoalveolares (PFEIFER *et al.*, 1997; GIBBS *et al.*, 1999).

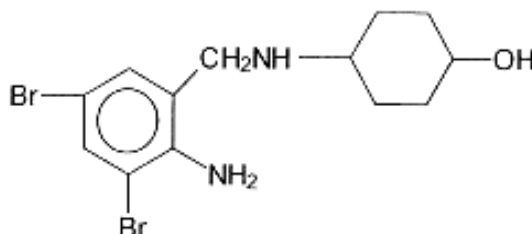


Figura 8. Modelo estrutural do ambroxol. Fonte: Nowak *et al.*, 1994.

Por isso, estudos direcionados à descoberta de novos produtos que minimizem o problema e apresente baixa ou nenhuma toxicidade, são promissores neste ramo da ciência.

Os líquens nordestinos, sobretudo os da família Cladoniaceae, são encontrados em quantidades suficientes para testes, além de produzirem metabólitos secundários bioativos, a exemplo do ácido fumarprotocetrárico.

Diante do fato da *C. islandica* ser um líquen muito usado na medicina popular e da efetividade do FUM, seu principal metabólito secundário, como adjuvante quimioterápico e antiinflamatório, o estudo do FUM como agente mucolítico possibilitará contribuir para o conhecimento das propriedades das substâncias liquênicas ao nível regional.

3. OBJETIVOS

3.1 Geral

Avaliar o potencial do extrato acetônico e do FUM isolado e purificado de *Cladonia verticillaris* como mucolítico no trato respiratório de camundongos.

3.2 Específicos

- Obter extrato acetônico de *C. verticillaris*, isolar, purificar e quantificar o FUM nele contido.
- Determinar a dose de FUM ativa como agente mucolítico em camundongos.
- Realizar testes *in vivo* da atividade mucolítica do extrato acetônico e do FUM de *C. verticillaris* em modelo experimental.

4. ARTIGO A SER PUBLICADO

Investigation of expectorant action of acetonie
extract and fumarprotocetraric acid from *Cladonia*
verticillaris (lichen) in mice.

A ser submetido à revista:

JOURNAL OF ETHNOPHARMACOLOGY:

Impacto: : 1.554

<http://www.ethnopharmacology.org>

Investigation of expectorant action of acetonic extract and fumarprotocetraric acid from
Cladonia verticillaris (lichen) in mice.

Cynthia Wessen ^a, Alba Tatiana Serafim ^a, Eugênia Cristina Pereira ^{b, *}, Maria Teresa J.
Catanho ^c, Nicácio Henrique da Silva ^a

^a Departamento de Bioquímica, Centro de Ciências Biológicas (CCB), Universidade Federal de Pernambuco, Avenida Professor Moraes Rego s/n, Cidade Universitária 50670-420 Recife, PE – Brasil Telephone: 55 (81) 2126-8540 Fax: 55 (81) 3126-8570

^b Departamento de Ciências Geográficas, Centro de Filosofia e Ciências Humanas (CFCH), Universidade Federal de Pernambuco, Avenida Professor Moraes Rego s/n, Cidade Universitária 50740-530, Recife, PE – Brasil Fax: 55 (81) 2126-8275

^c Departamento de Biofísica e Radiobiologia, Centro de Ciências Biológicas (CCB), Universidade Federal de Pernambuco, Avenida Professor Moraes Rego s/n, Cidade Universitária 50670-920 - Recife, PE – Brasil Telephone: 55 (81) 2126-8535 Fax: 55 (81) 2126-8560

* Corresponding author at: Universidade Federal de Pernambuco, Departamento de Ciências Geográficas, Av. Prof. Moraes Rego, s/n, Cidade Universitária, CEP 50.740-530, Recife-PE, Brasil, Fax: 55 (81) 2126-8275, eugenia.pereira@pesquisador.cnpq.br

Abstract

Lichen metabolites exert a wide variety of biological actions including antibiotic, antimycobacterial, antiinflammatory, analgesic and antipyretic effects. Throughout the ages, lichens have been used for various purposes in folk medicine for treatment of affections such as throat irritation and cough, tuberculosis and asthma. This study was aimed at evaluating the expectorant activity of acetonc extract from *Cladonia verticillaris* and fumarprotocetraric acid (FUM) in mice. Female Swiss mice (n = 60) were separated into five groups. Phenol red, suspended in saline, was injected intraperitoneally (200 mg/kg in 100 mL/kg) and after this the drugs were administered orally. The mice were sacrificed and their tracheas were dissected and cannulated with a blunt. Through this blunt lung lavages were carried out with saline and the fluids collected were then centrifuged. A portion was taken and mixed with NaOH (0,01 N) and measured at 546 nm. The Mann-Whitney test and a probability level of $p \leq 0.05$ were chosen as the criterion for statistical significance. The groups treated with ambroxol (75 mg/kg) and acetonc extract (80 mg/kg) showed statistical significance with increasing of phenol red in tracheobronchial sputum. These results suggest that acetonc extract (80 mg/kg) administered orally is as an efficient mucolytic agent as ambroxol.

Keywords: Lichen; *Cladonia verticillaris*; Fumarprotocetraric acid; Mucolytic activity

1. Introduction

The respiratory diseases are essential cause of morbidity and mortality in adults and children around the world. According to World Health Organization (WHO), in 2002 respiratory infections represented 6.9% of the total of deaths. The chronic obstructive pulmonary disease (COPD) as well asthma were responsible for 6.5% of deaths (WHO, 2004).

Respiratory diseases have taken a position of great importance in Brazil. Patients entered public health centers all over the country, only in 2005, victims of such diseases, according to the Health Minister, corresponds to 14.91% of people suffering from the problem. In 2003, 11.24% of the people died as a result of the problem (Brasil, 2005).

In respiratory diseases, persistent inflammation leads to excessive production of mucus, with high viscoelasticity and adhesivity, which is not easily transported by cilia or cough interactions. Accumulated mucus in the airways can lead to airway obstruction, bacterial colonisation, and recurrent infections, resulting in poor quality of life and increased morbidity and mortality (Daviskas & Anderson, 2006).

Mucolytic and related agents have been in use since prehistoric times. Although widely prescribed and used extensively in over-the-counter preparations, their efficacy and mechanisms of action remain unexplained (Yuta & Baraniuk, 2005).

Lichens are symbiotic association between one or more algae and one fungi, resulting in a form of thallus with morphological differences of the original form (Hale, 1983; Harksworth & Hill, 1984; Nash III, 1996). They produce a large variety of secondary metabolites, some of them having potential biological activities (Yamamoto, 1991). Throughout the ages, lichens have been used for various purposes, particularly as dye, perfumes and medicines in folk medicine (Müller, 2001). An example is the lichen

Cetraria islandica (L.) Ach., a very common lichen in Turkey, that is extensively used in folk medicine for treatment of diseases such as hemorrhoids, bronchitis, dysentery and tuberculosis (Dülger et al., 1998). Protolichesterinic acid, α -methylene- γ -lactone, fumarprotocetraric (FUM) acid and β -orcinol depsidone are considered to be the major biologically active secondary metabolites in the lichen *C. islandica* (Ogmundsdóttir et al., 1998). There are a lot of manufactured products made from *C. islandica* in Europe such lozenges for treatment of diseases of upper respiratory tract, syrup with expectorant action, shampoo and many others products.

Cladonia verticillaris (Raddi) Fr., a very common lichen in the northeast of Brazil, has a similar chemical composition to *C. islandica*, and has as essential biologically active secondary metabolites the FUM and protocetraric acid (PRO) (Figure 1).

The lung is a tissue that is in direct contact with the environment which contains several pollutants that need to be expelled from the airway. These pollutants are removed by a system called mucociliary clearance (Hosoe et al., 1998). Throughout the centuries men research substances which may be to facilitate the excess bronchial sputum removal (Silva, 2006).

Due to the positive activity of FUM as antitumoral, antiinflammatory and antimicrobial agent, studies of mucolytic action from this compound will enlarge the knowledge of lichen substances properties.

2. Materials and methods

2.1. Lichen collection

C. verticillaris was collected from sandy soils of tableland in Alhandra-Paraíba, in the northeast of Brazil. A sufficient quantity was collected in order to identify it and to take chemical and biological tests. Samples were identified according to their morphological characteristics. Thalli were dried in air and stored at room temperature ($28 \pm 3^\circ \text{C}$). The lichen was identified and deposited in UFP herbarium at the Botanic Department of the Universidade Federal de Pernambuco, Brazil, register nº 361638.

2.2. Preparation of extracts

Samples of *C. verticillaris* were Soxhlet extracted with ether (250 mL) and after with acetone (250 mL) and then concentrated by vacuum.

2.3. Isolation and purification of fumarprotodetraric acid

Fumarprotodetraric acid was isolated and purified after repeated recrystallisation as described by Asahina & Shibata (1954) and modified by Pereira *et al.* (1999). Samples were analysed by thin-layer chromatography (TLC), according to Culberson (1972), and by high-performance liquid chromatography (HPLC), according to Legaz & Vicente (1983).

2.4. Animals

Female Swiss mice (24 -51 g) were obtained from the Aggeu Magalhães Research Center (Pernambuco, Brazil). All recommendations by the Brazilian National Law (no. 6.638, 05 November 1979) for management of animals were respected. The animals had free access to a commercial pellet diet and drinking water before experiments.

2.5. *Estudy of mucolytic activity from C. verticillaris*

The bronchial lavage (BL) was done according to Coppi & Gatti (1989). The animals (n= 60) were fed overnight and divided into five groups. Phenol red, suspended in saline 0.9% (200 mg/kg in 100 mL/kg) was administered intraperitoneally (0.4 mL). FUM or acetonc extract, diluted in saline, and Ambroxol were administered orally with a gavage needle five minutes before the phenol red administration. The FUM and the extract were tested in two different doses (65 mg/Kg and 80 mg/Kg, both of them) following the LD₅₀ tested by Santos et al. (1997). The mice were sacrificed thirty minutes and one hour after the dye injection; their tracheas were dissected and cannulated with a blunt hipodermic needle of 1.5 cm. The needle was connected to a 1mL syringe through which six lung washings were done with 0.5 mL of saline. The liquid was collected after each washing. Samples were then centrifuged at 1600 xg for 10 minutes in order to separate the red cells. Two mL of supernadant was mixed with 1 mL of NaOH 0.01 N and measured the absorbance at 546 nm. Then, the total of phenol red eliminated in the tracheobronchial secretion was calculated.

2.6. *Statistical analysis*

Experimental results were expressed as the mean $\pm$ S.D., and the Mann-Whitney test was used to determine the significance of the differences between the control and experimental groups ($P \leq 0.05$) considered statistically significant.

3. Results and discussion

The extraction with ether was used so that impurities and pigments were removed from the lichen. Afterwards, the same procedure was done with acetone. The ether extract wasn't used in *in vivo* experiments, because in this extract there wasn't FUM, like observed in TLC. However, TLC showed the presence of the FUM and PRO in acetonetic extract confirmed by HPLC (Figure 2).

According to HPLC, acetonetic extract reached peaks such retention time (RT) were 4.11 min and 4.30 min, that corresponding to FUM and PRO, respectively. The shortest peaks indicated on the chromatogram corresponds to methanol (Figure 3).

Protolichesterinic acid, α -methylene- γ -lactone, fumarprotocetraric (FUM) acid and β -orcinol depsidone are considered to be the major biologically active secondary metabolites in *C. islandica* (Ogmundsdóttir et al., 1998). *C. verticillaris* has FUM, PRO and ATR as its main chemical components (Ahti et al., 1993). FUM represents the metabolite with higher concentration in both species (Ahti et al., 1993; Ingólfssdóttir & Gudjónsdóttir, 1997). Due to FUM be present at both species and being an antiinflammatory agent, its expectorant action was investigated.

Phenol red excretion in BL from all groups of animals being treated with the drugs tested, in different doses was higher compared to that of the control group. This increase showed a direct relation with the drug doses (Table 1).

The animals treated with ambroxol showed an average concentration of 7.64 $\mu\text{g/mL} \cdot 10^2$ of phenol red in BL. This represented a statistically significant increase ($p=0.0207$) of 46.92% in comparison with the control group (Figures 4 and 5). Silva (2006), mentioned that ambroxol is tolerated by the organism showing rare occurrence of pyrosis and diarrhoea. Although it has been widely used as expectorant, its clinical importance remains unclear. Hosoe et al. (1998) reported that ambroxol was enable to

improve the mucociliary clearance in rats. Weiss et al. (1981) observed significant increase in such clearance only in the third part of the lung, after the oral administration of the ambroxol for 4 days.

Acetonic extract (80 mg/kg) raised in 45% the excretion of phenol red in the tracheobronchial secretion in animals. It was possible to obtain $7.54 \mu\text{g/mL} \cdot 10^2$ of phenol red in BL from these animals. This increase was statistically significant with $p=0.0291$ (Figures 4 and 5).

In table 1, acetonic extract induced a higher excretion of phenol red in BL than FUM in both doses, 65 mg/kg and 80 mg/kg, but it wasn't statistically significant. One of the possibilities that might explain that is the presence of protocetraric acid in the extract. Huovinen et al. (1986), mentioned that the FUM had been hydrolised during the preparation of teas and lichen infusions in folk medicine, and the loss of the fumarate portion converts FUM in PRO. Another possibility is that the synergism between the compounds of the extract may intensify its action.

Acetonic extract (80 mg/kg) showed a similar increase to ambroxol on phenol red excretion in BL, without statistical significance (table 1). Santos et al. (1997) established in 668.5 mg/kg the acetonic extract LD_{50} . This high lethal dose supported the use of the acetonic extract as a possible mucolytic agent, therefore none of the animals used in this experiment showed any sign of toxicity.

4. Conclusion

FUM and acetonc extract proved to be efficient as mucolytic agent in mice. However, the increase of phenol red excretion in BL in animals treated with FUM hasn't got statistical significance. The acetonc extract (80 mg/kg) developed an expectorant action as efficient as ambroxol. The extract showed an action about three times more active than the FUM, using the same dosage.

Further studies should be done to improve the influence of FUM and PRO, acetonc and aqueous extract on bronchial secretion and their use in aerosol form.

Reference

1. Ahti, T., Stenroos, S., Xavier-Filho, L., 1993. The lichen family Cladoniaceae in Paraíba, Pernambuco and Sergipe, northeast Brazil. *Tropical Biology*, v. 7, 55-70.
2. Asahina, Y., Shibata, S., 1954. Chemistry of lichen substances. Japanese Society for the Promotion of Science, Tokio, p. 240.
3. Brasil. Ministério da Saúde. Anuário Estatístico de Saúde do Brasil, 2005. Disponível em: <<http://tabnet.datasus.gov.br>>. Acesso em 15 jan 2007.
4. Coppi, G., Gatti, M. T., 1989. A method for studying expectorant action in the mouse by measurement of tracheobronchial phenol red secretion. *IL Farmaco* 44 (5), 541-545.
5. Culberson, C. F., 1972. Improved conditions and new data for the identification of lichen products by standardized thin layer-chromatographic method. *Journal of Chromatography* 72, 113-125.
6. Daviskas, E.; Anderson, S. D. Hiperosmolar agents and clearance of mucus in the diseased airway. *J. Aerosol Med.*, 19(1):100-9, 2006.
7. Disse, B. G., 1987. The pharmacology of ambroxol. *European Journal Respiratory Disease*. 153, 255-262.
8. Dülger, B., Gücin, F., Aslan, A., 1998. *Cetraria islandica* (L) Ach. Likenin antimikrobiyal aktivitesi. *Turkish Journal of Biology* 22, 11-118.
9. Harknsworth, D. L. & Hill, D. J., 1984. *The Lichen Forming Fungi*. Chapman & Hall, New York, p. 158.
10. Hale-Jr, M. E. 1983. *The Biology of Lichens*. 3 ed. Edward Arnold Pub., London, p. 90.

11. Hosoe, H., Kaise, T., Ohmori, K., 1998. Erdosteine enhances mucociliary clearance in rats with and without airway inflammation. *Journal of Pharmacological and Toxicological Methods* 40, 165-171.
12. Huovinen, K.; Harmala, P.; Hietunen, R.; Schantz, M. V. Variation of fumarprotocetraric and protocetraric acids in *Cetraria islandica* and *C. ericetorum*. *Panta Medica*, 6:508, 1986.
13. Ingólfssdóttir, K., Gudjónsdóttir, G. A., 1997. Quantitative determination of protolichesterinic and fumarprotocetraric acids in *Cetraria islandica* by high-performance liquid chromatography. *Journal of Chromatography A*. 757, 303-306.
14. Legaz, M. E., Vicente, C., 1983. Endogenous inactivators of arginase, arginine decarboxylase and agmatine amidinohydrolase in *Evernia prusnastri* thallus. *Plant Physiology* 71, 300-302.
15. Müller, K., 2001. Pharmaceutically relevant metabolites from lichens. *Applied Microbiology and Biotechnology*. 56, 9-16.
16. Nash III, T. H., 1996. *Lichen Biology*. Cambridge University Press, Cambridge, USA, p. 303.
17. Ögmundsdóttir, H. M., Zoëga, G. M., Gissurarson, S. R., Ingólfssdóttir, K., 1998. Anti-proliferative effects of lichen-derived inhibitors of 5-lipoxygenase on malignant cell lines and mitogen-simulated lymphocytes. *Journal of Pharmacy and Pharmacology*. 50, 107-115.
18. Pereira, E. C. G., Vicente, C., Legaz, M. E., Silva, N. H., Silva, E. F., Andrade, L. H. C., 1999. Production of lichen metabolites through cell immobilization by *Cladonia clathrata* Ahti & Xavier-Filho. *Phyton*. 39 (1), 79-89.
19. Santos, N. P., Pereira, E. C., Lima, R. M. C., Honda, N. K., Silva, N. H., 1997. Efeito da sazonalidade na produção de metabólitos com ação antitumoral em

- Cladonia verticillaris* (Líquen). Revista da Universidade do Amazonas, Série Ciências Biológicas 1(2), 23-43.
20. Silva, P., 2006. Farmacologia. Guanabara Koogan, Rio de Janeiro, 7 ed., p. 1369.
21. Weiss, T., Dorow, P., Felix, R., 1981. Effects of a beta adrenergic drug and a secretolytic agent on regional mucociliary clearance in patients with cold. Chest 80, 881-885.
22. World Health Organization. Relatório mundial da saúde 2004 – Changing history. Geneva. WHO, 2004.
23. Yamamoto, Y., (1991) Production of Lichen Substances. In: Plant cell culture in Japan. Komamine, A. (Ed), Tokyo: CMC Co. Ltd. p.58-71.
24. Yuta, A.; Baraniuk, J. N. Therapeutic approaches to mucus hypersecretion. Curr. Allergy Asthma Rep. 5(3):243-51, 2005.

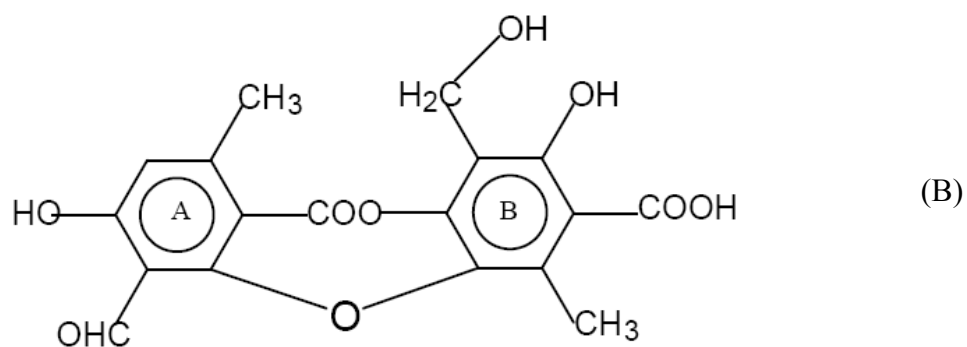
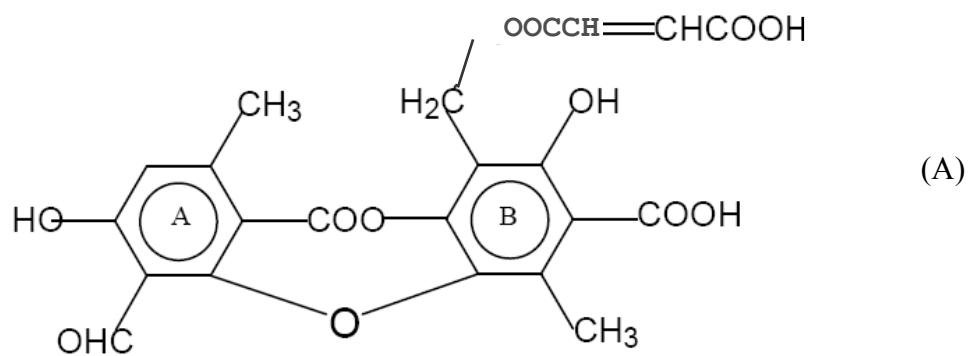


Figure 1. Chemical structure of FUM (A) and PRO (B).

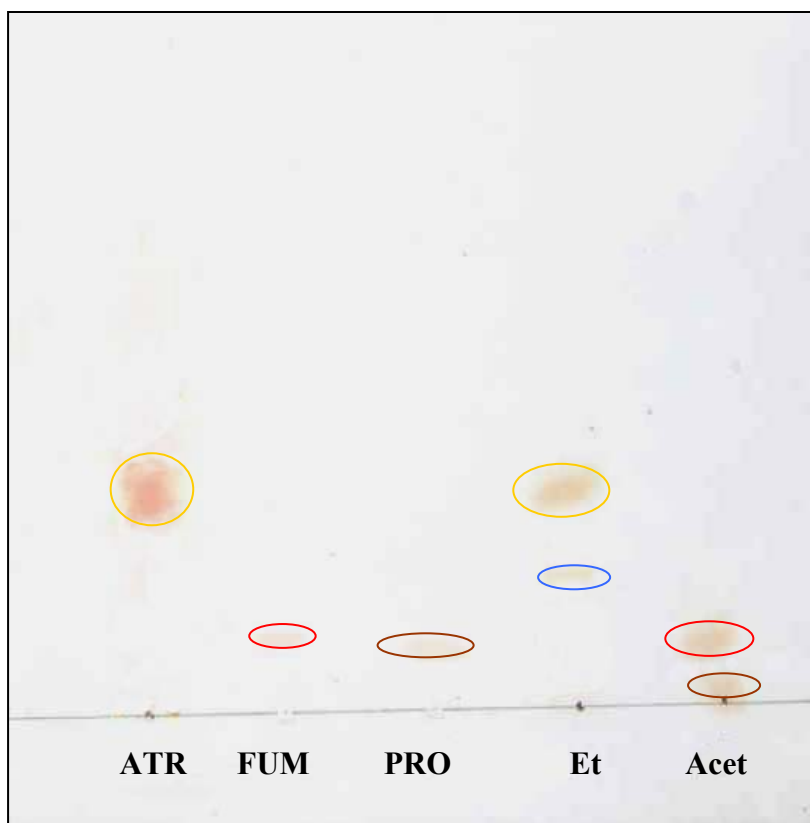


Figure 2. Thin Layer chromatography of organic extracts of *C. verticillaris*. Standards: (ATR) - Atranorin, (FUM) - Fumarprotocetraric acid, (PRO) - Protocetraric acid. Extracts: (Et) - Ether extract, (Acet) - Acetonic extract.

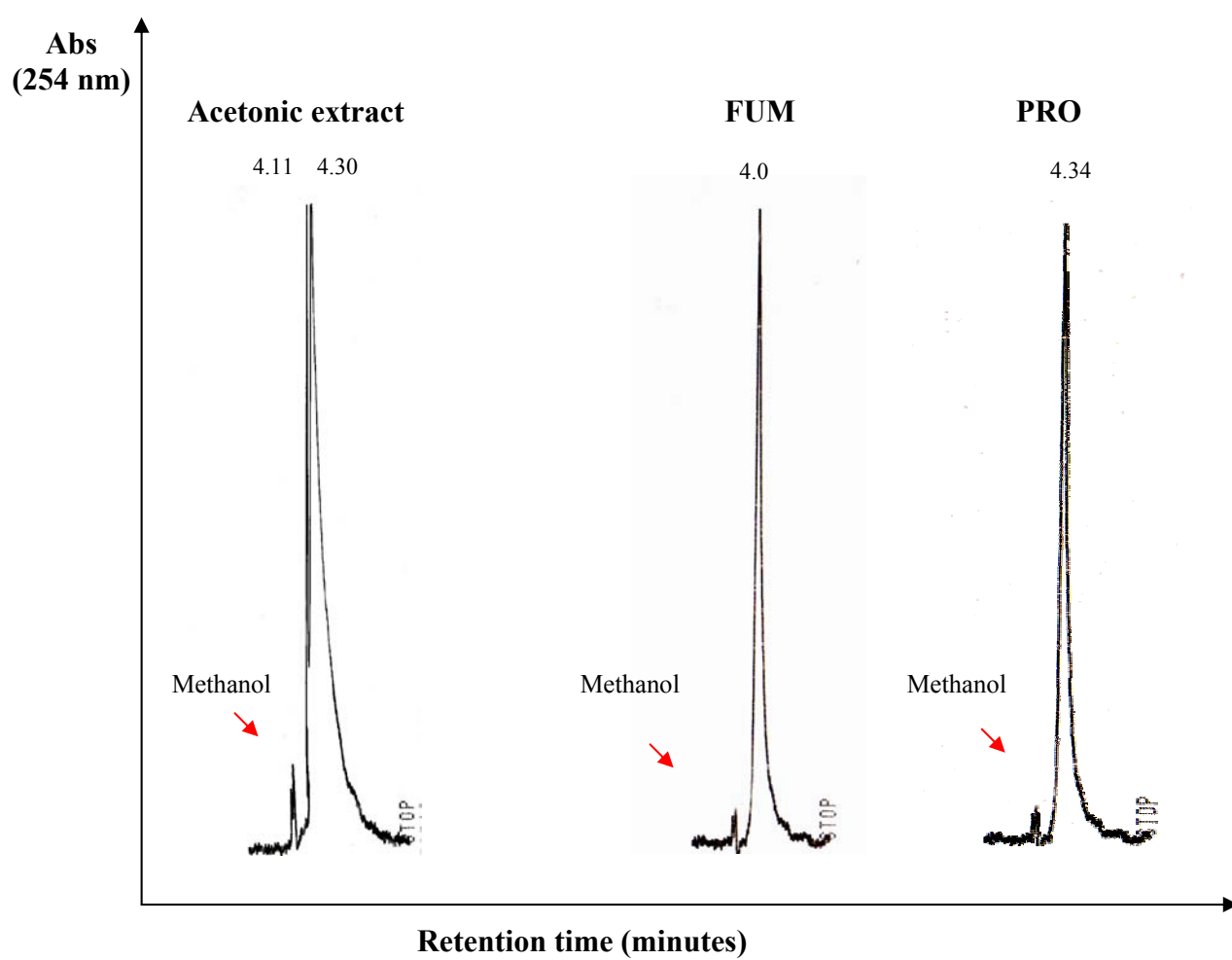


Figure 3. High-performance liquid chromatography of acetonetic extract from *C. verticillaris* and standards: PRO e FUM.

Table 1. Effect of ambroxol, FUM and acetonc extract on the phenol red excretion in bronchial secretion of mice.

<i>Samples</i>	<i>Dose (mg/kg)</i>	<i>Phenol red concentration in BL ($\mu\text{g/mL} \cdot 10^2$)</i>	<i>Increase in phenol red excretion in BL (%)</i>
Control	-	5.2 ± 1.85	-
Ambroxol	75	7.64 ± 1.14	46.92
FUM	65	5.56 ± 1.60	6.92
FUM	80	5.58 ± 1.98	12.69
Acetonc extract	65	6.94 ± 3.69	33.46
Acetonc extract	80	7.54 ± 1.91	45.00

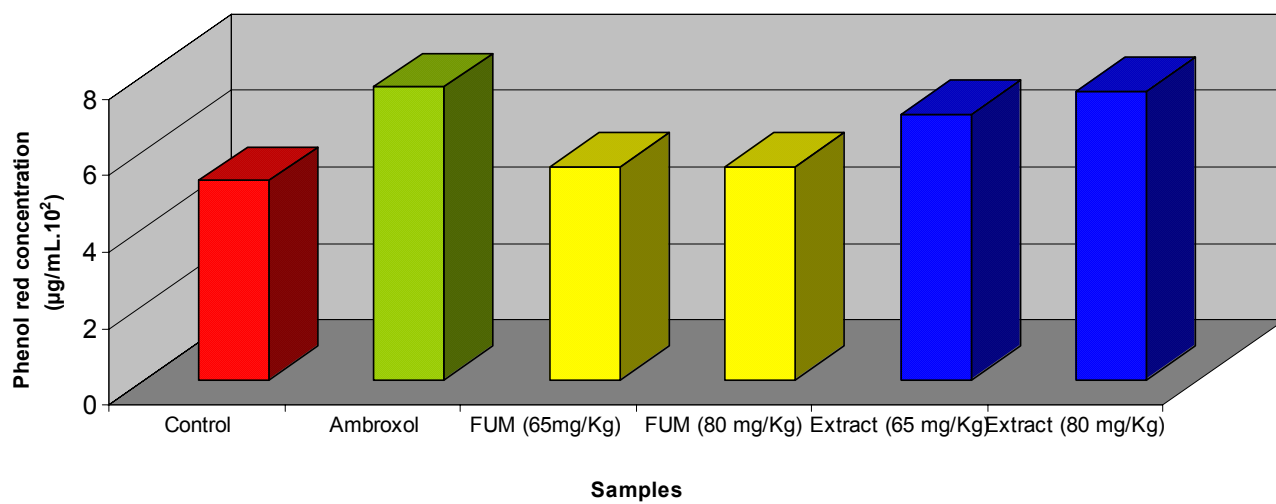


Figure 4. Phenol red concentration in bronchial lavage from animals treated with ambroxol, FUM and acetonc extract.

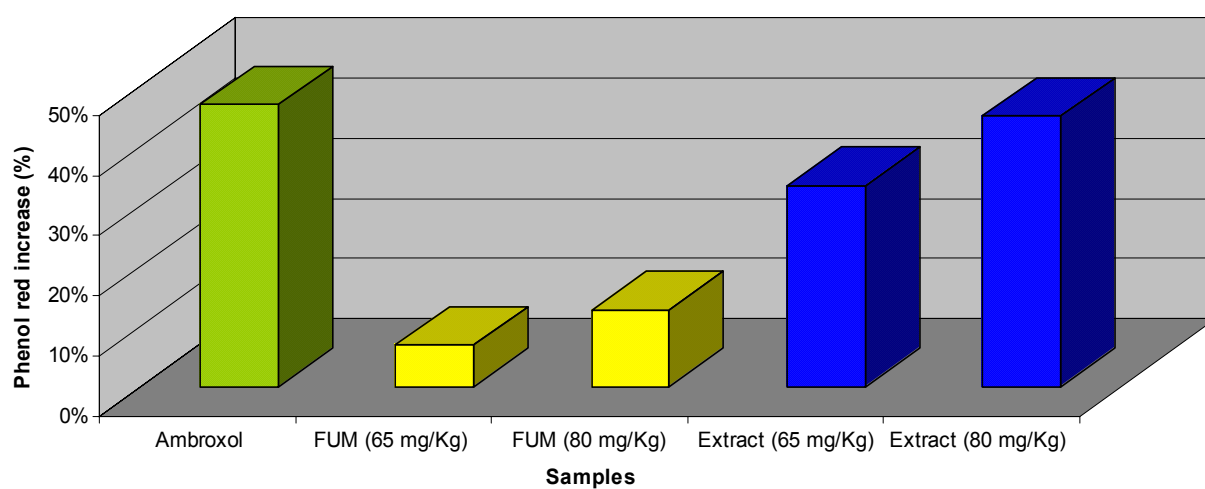


Figure 5. Percentual of increasing phenol red excretion in bronchial lavage from animals treated with ambroxol, FUM and acetonc extract.

5. CONCLUSÃO

O FUM e o extrato acetônico mostraram-se eficazes como mucolítico em camundongos, embora o aumento da excreção de vermelho fenol no lavado brônquico dos animais tratados com o FUM não tenha sido estatisticamente significante. O extrato acetônico, na dose de 80 mg/kg mostrou-se um agente expectorante tão eficaz quanto o ambroxol e cerca de três vezes mais ativo que o FUM na mesma dose.

Vislumbramos, no futuro, realizar testes *in vivo* e *in vitro* com o extrato acetônico, o FUM e o PRO e também com o extrato aquoso deste líquen a fim de determinar a influência que estes podem ter sobre a secreção brônquica e utilizá-los em novos ensaios administrando estes compostos na forma de aerosol.

6. REFERÊNCIAS

1. AHTI, T.; STENROOS, S.; XAVIER-FILHO, L. The lichen family Cladoniaceae in Paraíba, Pernambuco and Sergipe, northeast Brazil. **Tropical Biology**, v. 7, p. 55-70, 1993.
2. ABRAHAN, E. P.; FLOREY, H. W. Antimicrobial substances from lichens and algae. In: **Antibiotic**. V.1, cap. 13, 1949. p. 566-575.
3. ASAHINA, Y.; SHIBATA, S. **Chemistry of lichen substances**. Tokio, Japanese Society for the Promotion of Science, 1954. 240p.
4. BAYTOP, T. Therapy with medicinal plants in Turkey (past and present). **Istanbul University**, Istanbul, 1999, p.233.
5. BRASIL. Ministério da Saúde. Anuário Estatístico de Saúde do Brasil, 2005. Disponível em: <<http://tabnet.datasus.gov.br>>. Acesso em 15 jan 2007.
6. COPPI, G.; GATTI, M. T. A method for studying expectorant action in the mouse by measurement of tracheobronchial phenol red secretion. **I. L. Farmaco**, 44(5):541-545, 1989.
7. CULBERSON, C. F. Improved conditions and new data for the identification of lichen products by standardized thin layer-chromatographic method. **J. Chromatog.**, 72:113-125, 1972.
8. DAVISKAS, E.; ANDERSON, S. D. Hiperosmolar agents and clearance of mucus in the diseased airway. **J. Aerosol Med.**, 19(1):100-9, 2006.
9. DÜLGER, B.; GÜCİN, F.; ASLAN, A. *Cetraria islandica* (L.) Ach. Likeninin antimikrobiyal aktivitesi. **Turkish Journal of Biology**, 22:11-118, 1998.
10. ELIX, J. A. Biochemistry and secondary metabolites. In: **Lichen Biology**. Nash III, T. H. (Ed), Cambridge University Press, Cambridge, 1996, p.154.
11. FERNANÁNDEZ, E.; QUILHOT, W.; GONSÁLEZ, I.; HIDALGO, M.E.; MOLINA, X.; MENESES, I. Lichen metabolites as UV-B filters. **Cosmetic and Toiletries**, 111:69-74, 1996.
12. FREITAS, F. M. R. **Uso de *Cladonia verticillaris* (Raddi) Fr. como biomonitor da qualidade do ar no Complexo Industrial Portuário de Suape - PE**. 72f.

Dissertação (Curso de Mestrado em Biologia Vegetal), Universidade Federal de Pernambuco, Recife, 2006.

13. GIBBS, B. F.; SCHMUTZLER, W.; VOLLRATH, I. B.; BROSTHARDT, P.; BRAAM, U.; WOLFF, H. H.; ZWADLO-KLARWASSER, G. Ambroxol inhibits the release of histamine, leukotrienes and cytokines from human leukocytes and mast cells. **Inflamm. Res.**, 48:86-93, 1999.
14. GILLISSEN, A.; BARTLING, A.; SCHOEN, S.; SCHULTZE-WERNINGHAUS, G. Antioxidant function of ambroxol in mononuclear and polymorphonuclear cells *in vitro*. **Lung**, 175:235-242, 1997.
15. GÜLCIN, I.; OKTAY, M.; KÜFREVIÖĞLU, I. Ö.; ASLAN, A. Determination of antioxidant activity of lichen *Cetraria islandica*. **Journal of Ethnopharmacology**, 79:325-329, 2002.
16. HAKSWORTH, D. L. & HILL, D. J. **The Lichen Forming Fungi**. New York, Chapman & Hall, 158p, 1984.
17. HALE-JR, M. E. **The Biology of Lichens**. 3 ed. London. Edward Arnold Pub., 1983, 90p.
18. HECKER, M.; VOLP, A. Tolerability of Icelandic moss lozenges in upper respiratory tract diseases—Multicentric drug monitoring study with 3,143 children. **Forschende Komplementärmedizin und Klassische Naturheilkunde**, 11(2):76-82, 2004.
19. HIDALGO, M. E.; FERNÁNDEZ, E.; QUILHOT, W.; LISSI, E. A. Antioxidante capacity of depsides and depsidones. **Phytochemistry**, 3:1585-1587, 1994.
20. HONDA, N. K.; VILEGAS, W. A química dos líquens. **Química Nova**. 21(6):110-121, 1998.
21. HOSOE, H.; KAISE, T.; OHMORI, K. Erdosteine enhances mucociliary clearance in rats with and without airway inflammation. **Journal of Pharmacological and Toxicological Methods**, 40:165-171, 1998.
22. HUOVINEN, K.; HÄRMÄLÄ, P.; HIETUNEN, R.; SCHANTZ, M. V. Variation of fumarprotocetraric and protocetraric acids in *Cetraria islandica* and *C. ericetorum*. **Panta Medica**, 6:508, 1986.
23. INGENITO, E. P.; MORA, R.; CULLIVAN, M.; MARZAN, Y.; HALEY, K.; MARK, L.; SONNA, L. A. Decreased surfactant protein-B expression and surfactant dysfunction in a murine model of acute lung injury. **Am. J. Respir. Cell Mol. Biol.**, 25:35-44, 2001.

24. INGÓLFSDÓTTIR, K.; GISSURARSON, S. R.; MÜLLER-JAKIC, B.; BREU, W.; WAGNER, H. Inhibitory effects of the lichen metabolite lobaric acid on arachidonate metabolism *in vitro*. **Phytomedicine**. 2:243-246, 1996.
25. INGÓLFSDÓTTIR, K.; HJALMARSDOTTIR, A. M.; SIGURDSSON, A.; GUDJONSDOTTIR, G. A.; BRYNJOLFSDOTTIR, A.; STEINGRIMSSON, O. *In vitro* susceptibility of *Helicobacter pilory* to protolichesterinic acid from the lichen *Cetraria islandica*. **Antimicrobial Agents and Chemotherapy**. 4:215-217, 1997.
26. INGÓLFSDÓTTIR, K.; GUDJÓNSDÓTTIR, G. A. Quantitative determination of protolichesterinic and fumarprotocetraric acids in *Cetraria islandica* by high-performance liquid chromatography. **Journal of Chromatography A**. 757: 303-306, 1997.
27. KARMPALIOTIS, D.; KOSMIDOU, I.; INGENITO, E. P.; HONG, K.; MALHOTRA, A.; SUNDAY, M. E.; HALEY, K. J. Angiogenic growth factors in the pathophysiology of a murine model of acute lung injury. **Am. J. Physiol. Lung Cell Mol. Physiol.** 283:585-595, 2002.
28. KARTINIG, T. *Cetraria islandica*- Isländisches moos. **Z. Phytother.** 8:127-130, 1987.
29. KEMPE, C.; GRUNING, H.; STASCHE, N.; HORMANN, K. Icelandic moss lozenges in the prevention or treatment of oral mucosa irritation and dried out throat mucosa. **Laryngorhinootologie**. 76(3):186-188, 1997.
30. KIM, M. S.; LEE, K. A. Antithrombotic activity of methanolic extract of *Umbilicaria esculenta*. **Journal of Ethnopharmacology**. 105:342-345, 2006.
31. LEGAZ, M. E.; VICENTE, C. Endogenous inactivators of arginase, arginine decarboxylase and agmatine amidinohydrolase in *Evernia prusnastri* thallus. **Plant Physiology**. 71:300-302, 1983.
32. LEGAZ, M. E.; VICENTE, C.; PEREIRA, E.C.; XAVIER-FILHO, L. Pigment analysis of sun and shade populations of *Cladonia verticillaris*. *Bioch. Syst. Ecol.*, v.14 (6), p. 575-582, 1986.
33. MÜLLER, K. Pharmaceutically relevant metabolites from lichens. **Appl. Microbiol. Biotechnol.** 56:9-16, 2001.
34. NASH III, T. H. **Lichen Biology**. Cambridge, USA, Cambridge University Press, 1ed., 1996, 303p.

35. NEAMATI, H.; HONG, H.; MAZUMBER, A.; WANG, S.; SUNDER, S.; NICKAUS, M. C.; MILNE, G. W.; PROKSA, B.; POMMIER, Y. Depsides and depsidones as inhibitors of HIV-1 integrase: discovery of novel inhibitors through 3D databases searching. **J. Med. Chem.** 40:942-951, 1997.
36. NOWAK, D.; ANTCZAK, A.; KROL, M.; BIALASIEWICZ, P.; PIETRAS, T. Antioxidant properties of ambroxol. **Free Radical Biol. Med.** 4:517-522, 1994.
37. ÖGMUNDSÓTTIR, H. M.; ZOËGA, G. M.; GISSURARSON, S. R.; INGÓLFSDÓTTIR, K. Anti-proliferative effects of lichen-derived inhibitors of 5-lipoxygenase on malignant cell lines and mitogen-simulated lymphocytes. **J. Pharm. Pharmacol.** 50:107-115, 1998.
38. PEREIRA, E. C. **Produção de metabólitos por espécie de Cladoniaceae (líquen), a partir de imobilização celular.** 238p. Tese (Doutorado), Universidade Federal Rural de Pernambuco. 1998.
39. PEREIRA, E. C.; VICENTE, C.; LEGAZ, M. E.; SILVA, N. H.; SILVA, E. F.; ANDRADE, L. H. C. Production of lichen metabolites through cell immobilization by *Cladonia clathrata* Ahti & Xavier-Filho. **Phyton**, v. 39(1), p. 79-89, 1999.
40. PFEIFER, S.; ZISSEL, G.; KIENAST, K.; MULLER-QUERNHEIM, J. Reduction of cytokine release of blood and bronchoalveolar mononuclear cells by ambroxol. **Eur. J. Med. Res.** 2:129-132, 1997.
41. SANTOS, M. O. **Atividade antinociceptiva, antipirética e antiinflamatória do extrato bruto e do ácido fumarprotocetrárico isolado de *Cladonia verticillaris* (líquen).** 82f. Dissertação (Curso de Mestrado em Fisiologia), Universidade Federal de Pernambuco, 2003.
42. SANTOS, N. P.; PEREIRA, E. C. G.; LLMA, R. M. C.; HONDA, N. K.; SILVA, N. H. S. M. P. Efeito da sazonalidade na produção de metabólitos com ação antitumoral em *Cladonia verticillaris* (Líquen). **Revista da Universidade do Amazonas**, Série Ciências Biológicas, v. 1(2), p. 23-43, 1997.
43. SILVA, P. **Farmacologia.** Rio de Janeiro, Guanabara Koogan, 7 ed., 2006, 1369p.
44. SU, X.; WANG, L.; SONG, Y.; BAI, C. Inhibition of inflammatory responses by ambroxol, a mucolytic agent, in a murine model of acute lung injury induced by lipopolysaccharide. **Intensive Care Med.** 30:133-140, 2004.
45. SÜLEYMAN, H.; ODABASOGLU, F.; ASLAN, A.; CAKIR, A.; KARAGOZ, Y.; GOCERİ, F.; HALICI, M.; BAYIR, Y. Anti-inflammatory and antiulcerogenic effects of the aqueous extract of *Lobaria pulmonaria* (L.) Hoffm. **Phytomedicine.** 10:552-557, 2003.

46. SUZUKI, M.; TERAMOTO, S.; MATSUSE, T.; OHGA, E.; KATAYAMA, H.; FUKUCHI, Y. Inhibitory effect of ambroxol on superoxide anion production and generation by murine lung alveolar macrophages. **J. Asthma**. 35:267-272, 1998.
47. TREASE, G.E.; EVANS, W.C. **Pharmacognosys**, Baillière Tindall, Londres, 11 ed., 1978, p. 75-76.
48. VARTIA, K. O. Antibiotics in lichens. In: **The lichens**. Ahmadjiian, V.; Hale, M.E. (Ed), 3 ed. Academic Press, New York, 1973, p.547-561.
49. WEISS, T.; DOROW, P.; FELIX, R. Effects of a beta adrenergic drug and a secretolytic agent on regional mucociliary clearance in patients with cold. **Chest**. 80:881-885, 1981.
50. YAMAMOTO, Y. (1991) Production of Lichen Substances. In: **Plant cell culture in Japan**. Komamine, A. (Ed), Tokyo: CMC Co. Ltd., 1991, p.58-71.
51. YUTA, A.; BARANIUK, J. N. Therapeutic approaches to mucus hypersecretion. **Curr. Allergy Asthma Rep.** 5(3):243-51, 2005.
52. WORLD HEALTH ORGANIZATION. Relatório mundial da saúde 2004 – Changing history. Geneva. WHO, 2004.
53. WORLD HEALTH ORGANIZATION. Relatório mundial da saúde 2005 – Make every mother and child count. Geneva. WHO, 2005.

7. ANEXOS

7.1 Resumo referente ao assunto da dissertação, publicado e apresentado em Congresso no decorrer do curso.

VIII Reunião Regional Nordeste da SBBq / 3rd International Symposium in Biochemistry of Macromolecules and Biotechnology

MUCOLYTIC ACTION FROM *CLADONIA VERTICILLARIS* EXTRACT AND OF FUMARPROTOCETRARIC ACID IN THE MICE.

Wessen, C.K.¹; Serafim, A.T.N.¹; Silva, N.H.¹; Pereira, E.C.²; Catanho, M.T.J.A.³

¹Departamento de Bioquímica; ²Departamento de Ciências Geográficas;

³Departamento de Biofísica; Universidade Federal de Pernambuco (UFPE)

Lichens are organisms in symbiotic relationship with fungi and algae. Throughout the ages, lichens have been used for various purposes in folk medicine for treatment of affections such as throat irritation and cough, tuberculosis and asthma. This study was aimed at evaluating the expectorant activity of an extract from *Cladonia verticillaris* and of fumarprotocetraric acid (FUM) in the mice. Sixty (60) female Swiss mice, weighting 25-50g were separated into five groups. Into each group were used four controls animals. Phenol red was injected intraperitoneally, five minutes after, a drug was administered orally: Ambroxol (3mg) and the extract and FUM were used in two different concentration (2.6mg and 3.2mg). The mice were sacrificed thirty minutes after the dye injection; their tracheas were dissected and cannulated with a blunt. Through this blunt six lung lavages were repeated with 0.5 mL saline. The washing fluids collected were then centrifuged at 1600xg for 10 minutes. A portion was taken and brought to 3 mL with NaOH and the read at 546nm. The results showed an increase of 46.15% ($P < 0.05$) in phenol red secretion with the use of Ambroxol and an increase in phenol red secretion with acetonic extract (19.23%) and FUM (3.84%) in the group treated with 3.2mg of drug, but it wasn't statistically significant. These results suggest that just Ambroxol enhanced the mucolytic action.

Key words: *Cladonia verticillaris*, fumarprotocetraric acid, mucolytic.



Mucolytic Action from *Cladonia verticillaris* Extract and of Fumarprotocetraric Acid in the Mice

Wessen, C.K.¹; Silva, N.H.¹; Serafim, A.T.N.¹; Pereira, E.C.²; Catanho, M.T.J.A.³;

¹Departamento de Bioquímica; ²Departamento de Ciências Geográficas; ³Departamento de Biofísica; Universidade Federal de Pernambuco (UFPE), Recife-PE, Brasil

Objective

This study has aimed to evaluate the expectorant activity of acetonc extract from *Cladonia verticillaris* and of fumarprotocetraric acid (FUM) in the mice.

Methodology

Sixty (60) female Swiss mice, weighing 25-50g were separated into five groups, each one containing twelve animals. Phenol red was injected intraperitoneally, five minutes after, a drug was administered orally. The drugs were administered as follows: Ambroxol (3mg), the extract acetonc and FUM were used in two concentrations (2.6mg and 3.2mg). The mice were sacrificed thirty minutes and one hour after the dye injection; their tracheas were dissected and cannulated with a blunt. Through this blunt six lung lavages were repeated with 0.5 mL saline. The washing fluids collected were then centrifuged at 1600xg for 10 minutes. A portion was taken and brought to 3 mL with NaOH 0.01N and the read at 546nm.

Results

The results showed an increase of 46.15% ($P<0.05$) in phenol red secretion with the use of Ambroxol. On the other hand, this study showed an increase in phenol red secretion with acetonc extract (19.23%) and FUM (3.84%) in the group treated with 3.2mg of drug, but it wasn't statistically significant.



Fig. 1. Lung lavage.

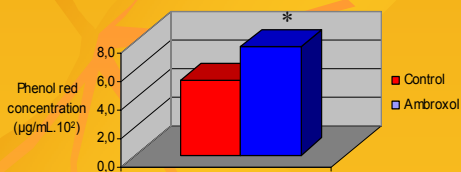


Fig. 2. Effect of Ambroxol in phenol red excretion. * $p<0,05$

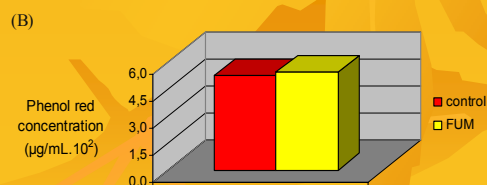
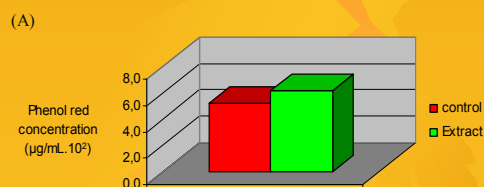


Fig. 3. Effect of acetonc extract (A) and FUM (B) in phenol red excretion. * $p<0,05$

Conclusion

The results suggest that just Ambroxol enhanced the mucolytic action. An Improved access to these lichen substances in drug discovery high-throughput screening programs will provide impetus for identifying novel lead-compounds with therapeutic potential and poses new challenges for medicinal chemistry.

7.3 Normas do periódico especializado, ao qual o trabalho da dissertação foi submetido.

JOURNAL OF ETHNOPHARMACOLOGY

An Interdisciplinary Journal Devoted to Indigenous Drugs

The Official Journal of the [International Society of Ethnopharmacology](#)

Impact factor of this journal

2005: 1.554increased from 1.420 in 2004

Journal Citation Reports® 2005, published by Thomson Scientific

Guide for Authors

I. Scope of the journal

The *Journal of Ethnopharmacology* is dedicated to the exchange of information and understandings about people's use of plants, fungi, animals, microorganisms and minerals and their biological and pharmacological effects based on the principles established through international conventions. Early people, confronted with illness and disease, discovered a wealth of useful therapeutic agents in the plant and animal kingdoms. The empirical knowledge of these medicinal substances and their toxic potential was passed on by oral tradition and sometimes recorded in herbals and other texts on *materia medica*. Many valuable drugs of today (e.g., atropine, ephedrine, tubocurarine, digoxin, reserpine) came into use through the study of indigenous remedies. Chemists continue to use plant-derived drugs (e.g., morphine, taxol, physostigmine, quinidine, emetine) as prototypes in their attempts to develop more effective and less toxic medicinals.

In recent years the preservation of local knowledge, the promotion of indigenous medical systems in primary health care, and the conservation of biodiversity have become even more of a concern to all scientists working at the interface of social and natural sciences but especially to ethnopharmacologists. Recognizing the sovereign rights of States over their natural resources, ethnopharmacologists are particularly concerned with local people's rights to further use and develop their autochthonous resources.

Accordingly, today's Ethnopharmacological research embraces the multidisciplinary effort in the documentation of indigenous medical knowledge, scientific study of indigenous medicines in order to contribute in the long-run to improved health care in the regions of study, as well as search for pharmacologically unique principles from existing indigenous remedies.

The *Journal of Ethnopharmacology* publishes original articles concerned with the observation and experimental investigation of the biological activities of plant and animal substances used in the traditional medicine of past and present cultures. The



journal will particularly welcome interdisciplinary papers with an **ethnopharmacological**, an **ethnobotanical** or an **ethnochemical** approach to the study of indigenous drugs. Reports of **anthropological** and **ethnobotanical** field studies fall within the journal's scope. Studies involving **pharmacological** and **toxicological** mechanisms of action are especially welcome. **Clinical studies** on efficacy will be considered if contributing to the understanding of specific ethnopharmacological problems.

The journal welcomes review articles in the above mentioned fields especially those highlighting the multi-disciplinary nature of ethnopharmacology. Commentaries are by invitation only. All reviews and commentaries are fully peer-reviewed. Potential authors are strongly encouraged to contact the Reviews Editor jethnopharmacol@pharmacy.ac.uk prior to writing a review. A one-page outline and a short C.V. of the (senior) author should also be included.

THE "RULES OF 5"

The Editors and Editorial Board have developed the "Rules of 5" for publishing in JEP. We have produced five clear criteria that each author needs to think about before submitting a manuscript and setting the whole process of editing and reviewing at work. Click here

II. Preparation of manuscripts

Authors who want to submit a manuscript should consult and peruse carefully recent issues of the journal for format and style. Authors must include the following contact details on the title page of their submitted manuscript: full postal address; fax; e-mail. All manuscripts submitted are subject to peer review. The minimum requirements for a manuscript to qualify for peer review are that it has been prepared by strictly following the format and style of the journal as mentioned, that it is written in good English, and that it is complete. Manuscripts that have not fulfilled these requirements will be returned to the author(s).

Contributions are accepted on the understanding that the authors have obtained the necessary authority for publication. Submission of multi-authored manuscripts implies the consent of each of the authors. The publisher will assume that the senior or corresponding author has specifically obtained the approval of all other co-authors to submit the article to this journal. Submission of an article is understood to imply that it is not being considered for publication elsewhere and that the author(s) permission to publish his/her article in this journal implies the exclusive authorization to the publisher to deal with all issues concerning copyright therein. Further information on copyright can be found on the Elsevier website.

In the covering letter, the author must also declare that the study was performed according to the international, national and institutional rules considering animal experiments, clinical studies and biodiversity rights. See below for further information. The ethnopharmacological importance of the study must also be explained in the cover letter.

Animal and clinical studies - Investigations using experimental animals must state in the Methods section that the research was conducted in accordance with the

internationally accepted principles for laboratory animal use and care as found in for example the European Community guidelines (EEC Directive of 1986; 86/609/EEC) or the US guidelines (NIH publication #85-23, revised in 1985). Investigations with human subjects must state in the Methods section that the research followed guidelines of the Declaration of Helsinki and Tokyo for humans, and was approved by the institutional human experimentation committee or equivalent, and that informed consent was obtained. The Editors will reject papers if there is any doubt about the suitability of the animal or human procedures used.

Biodiversity rights - Each country has its own rights on its biodiversity. Consequently for studying plants one needs to follow the international, national and institutional rules concerning the biodiversity rights.

1. Manuscript types

The *Journal of Ethnopharmacology* will accept the following contributions:

1. Original research articles - whose length is not limited and should include Title, Abstract, Methods and Materials, Results, Discussion, Conclusions, Acknowledgements and References. As a guideline, a full length paper normally occupies no more than 10 printed pages of the journal, including tables and illustrations
2. Ethnopharmacological communications (formerly Short Communications) - whose average length is not more than 4 pages in print (approx. 2000-2300 words, including abstract and references). A maximum of 2 illustrations (figures or tables) is allowed. See paragraph below for description and format.
3. Letters to the Editors;
4. Reviews - Authors intending to write review articles should consult and send an outline to the Reviews Editor (see inside front cover for contact information) before preparing their manuscripts. The organization and subdivision of review articles can be arranged at the author's discretion. Authors should keep in mind that a good review sets the trend and direction of future research on the subject matter being reviewed. Tables, figures and references are to be arranged in the same way as research articles in the journal. Reviews on topics that address cutting-edge problems are particularly welcome.
5. Book reviews - Books for review should be sent to the Reviews Editor.
6. Commentaries - *invited*, peer-reviewed, critical discussion about crucial aspects of the field but most importantly methodological and conceptual-theoretical developments in the field and should also provide a standard, for example, for pharmacological methods to be used in papers in the *Journal of Ethnopharmacology*. The scientific dialogue differs greatly in the social / cultural and natural sciences, the discussions about the common foundations of the field are ongoing and the papers published should contribute to a transdisciplinary and multidisciplinary discussion. The length should be a maximum of 2-3 printed pages or 2500 words. Please contact the Reviews Editor j.ethnopharmacol@pharmacy.ac.uk with an outline.
7. Conference announcements and news.

2. General procedures

The language of the Journal is English. Manuscripts should be neatly typed, double-spaced throughout, including tables, on pages of uniform size with at least 2.5 cm margins on all sides. Use one font type and size throughout the manuscript. Author(s) should not break or hyphenate words. When using an electronic printer, the right-hand margin should not be justified. Footnotes in text are not permitted. The text of the manuscript must be paginated, the first page being the title page. The manuscript, typed with double spacing and ample margins, should be submitted with a cover letter (containing the declaration that the study was performed according to the international, national and institutional rules considering animal experiments, clinical studies and biodiversity rights and a clear explanation of the ethnopharmacological importance of the study) and a completed Author Checklist ([click here](#)).

The following format and order of presentation is suggested.

2.1. Title, author(s), address(es)

The title should be no longer than 100 letters, including spaces. Initials or first and middle names followed by last name of the author or authors must be given (**not** last name followed by initials). If there are two or more authors with different addresses, use a superscripted letter (a, b, c etc.), not a number, at the end of the last name of each author to indicate his/her corresponding address. The full address of the corresponding author (the way the author wishes to be contacted) should be provided. The corresponding (usually, the senior) author, to whom correspondence and proofs will be sent, must be indicated by an asterisk and footnoted, and in the footnote, his/her telephone and fax numbers, and e-mail address must be indicated. Address(es) should be underlined or italicised.

2.2. Abstract

The abstract should present a summary of the problem, scientific method, major findings and conclusions, in no more than 200 words and in one paragraph and presented at the beginning of the paper. Unsubstantiated speculation should not be included. Footnotes may not be used. References, if cited, must provide complete publication data.

2.3. Text layout

The text of a research paper should be divided into the following headings: Introduction, Methodology (or Materials and Methods), Results, and Discussion and conclusions. Each heading (and subheading) must be numbered using the convention established in the journal. Acknowledgements should come after Discussion and conclusions and before References; Acknowledgements and References are not to be numbered. Headings must be bold-faced and written in an upper-and-lower case style [not in caps], while subheadings should be underlined or italicised. Tables and figures are to be placed at the end of the text, after References. Authors are required to include: (i) the chemical structure, formula and proprietary name of novel or ill-defined compounds; (ii) the w/w yield of prepared

extracts in terms of starting crude material; (iii) complete formulation details of all crude drug mixtures; (iv) the voucher herbarium specimen number of the plant(s) studied in case of less well known plants, cited using the collector and collection number (e.g., *Doe 123*), and indicating the name of the herbarium institution where it has been deposited. All plant materials must be fully identified as in the following illustration: *Catharanthus roseus* (L.) G. Don f. *albus* Pich. (Apocynaceae) as authenticated by Dr. John Doe, Department of Botany, University of Connecticut.

2.4. Guidelines for Plant and Animal Names

All scientific names (Latin binomials) must be underlined or italicised throughout the text and in the tables and figures. For plant and animal species, full or complete scientific names, genus-species and the correct authority citation, must be used, *when that name appears for the first time in text*. The authority citation may be dropped in subsequent mention of that name throughout the text. The family name must follow the scientific name in parentheses when the name appears for the first time in the text. Full scientific names and the family name of the subject plants/animals must be used in the Abstract. Synonyms must be indicated in parentheses and preceded by the word "syn." followed by a colon. Authors are advised to consult the International Plant Name Index (IPNI) (<http://www.ipni.org>) and W3Tropicos (<http://www.mobot.org>) web-based databases to determine the correct spelling of full plant scientific names. Generic names may be abbreviated (e.g., *C. roseus* for *Catharanthus roseus*), provided such practice does not lead to confusion; generic names, however, must not be abbreviated when the name appears for the first time in the text. Specific epithets must never be abbreviated; thus, the use of *Catharanthus r.* is not allowed.

2.5. Keywords

Authors are requested to assign 3-6 keywords to the manuscript, preferably taken from Index Medicus or Excerpta Medica Index, for abstracting and indexing purposes. These keywords should be typed at the end of the Abstract. Each keyword should start with a capital letter and be separated from each other by a semi-colon.

2.6. Tables, illustrations and graphs

Tables should be on separate sheets, one table per sheet, and should bear a short descriptive title. Footnotes in tables should be indicated by consecutive superscript letters, not numbers.

Figures should be original ink drawings, photographs or computer drawn figures in the original, and of high quality, ready for direct reproduction. Xerox copies are unacceptable as they give unsatisfactory results after final printing. Figures should be drawn in such a way that they can be reduced to **8 cm** in width (i.e., the column width); in exceptional cases a reduction to a width of **17.5 cm** will be allowed. All lettering should be such that height of **1.2-1.5mm (minimum)** of numbers and capital letters results after reduction. Numerical scales, scale and curve legends, and all other lettering within the figure itself should be drawn with a lettering guide (stencil) or should be done using stripleters (Letraset, etc). All figures should have captions. Each figure should be identified in the margin or at the back in a corner

with the name of the author and the figure number. The figure captions should be on a separate sheet. One set of original drawings is required.

Colour illustrations should be submitted as original photographs, high-quality computer prints or transparencies, close to the size expected in publication, or as 35 mm slides. Polaroid colour prints are not suitable. If, together with your accepted article, you submit usable colour figures then Elsevier will ensure, at no additional charge, that these figures will appear in colour on the web (e.g., ScienceDirect and other sites) regardless of whether or not these illustrations are reproduced in colour in the printed version. For colour reproduction in print, you will receive information regarding the total cost from Elsevier after receipt of your accepted article. The 2006 price for color figures is EUR 285 for the first page and EUR 191 for subsequent pages.

For further information on the preparation of electronic artwork, please see  <http://authors.elsevier.com/artwork>

Please note: Because of technical complications which can arise by converting colour figures to 'grey scale' (for the printed version should you not opt for colour in print) please submit in addition usable black and white prints corresponding to all the colour illustrations.

2.7. References

References should be referred to by name and year (Harvard system) chronologically in the text (e.g.: Brown and Penry, 1973; Stuart, 1979; Ageel et al., 1987) and listed alphabetically at the end of the paper. No ampersand should be used and the words "et al." should not be underlined or italicized. Only papers and books that have been published or in press may be cited. For papers in press, please cite the DOI article identifier. The Digital Object Identifier (DOI) is a persistent identifier which may be used to cite and link to electronic documents. The DOI consists of a unique alpha-numeric character string which is assigned to a document by the publisher upon the initial electronic publication. The DOI will never change. Therefore, it is an ideal medium for citing Articles in Press, which have not yet received their full bibliographic information. *Unpublished manuscripts or manuscripts submitted to a journal but which have not been accepted may not be cited.* Journal and book titles should not be underlined or italicised and should be given in full in the reference list, with no underline or italics.

Examples:

Journals:

Britton, E.B., 1984. A pointer to a new hallucinogen of insect origin. *Journal of Ethnopharmacology* 12, 331-333.

Books: Emboden, W., 1972. *Narcotic Plants*. Studio Vista, London, p. 24.

Multiauthor Books: Farnsworth, N.R., 1988. Screening plants for new medicines. In: E.O. Wilson and F.M. Peter (Eds.), *Biodiversity*, National Academy Press,

Washington, D.C., pp. 83-97.

Ethnopharmacological Communications (formerly short communications) are brief contributions on:

- isolation of biological active compound(s) from a traditional medicine,
- screening of a series traditional medicines for biological activity,
- study on a pharmacological activity of a traditional medicine,
- study on the toxicology of a traditional medicine. ([click here](#)) for examples of various formats.

III. Submission

All manuscripts (except reviews, commentaries and book reviews) must be submitted to  <http://authors.elsevier.com/journal/iethpharm>

Each Submission must include a cover letter (containing the declaration that the study was performed according to the international, national and institutional rules considering animal experiments, clinical studies and biodiversity rights and a clear explanation of the ethnopharmacological importance of the study) and a completed Author Checklist ([click here](#)).

If an author cannot submit their manuscript electronically, then please send to:

Professor Dr R. Verpoorte Editor-in-Chief, *Journal of Ethnopharmacology*
Division of Pharmacognosy Institute of Biology Leiden University P.O. Box 9502
2300 RA Leiden The Netherlands

IV. Copyright regulations for authors

All authors must sign the "Transfer of Copyright" agreement before the article can be published. This transfer agreement enables Elsevier to protect the copyrighted material for the authors, but does not relinquish the author's proprietary rights. The copyright transfer covers the exclusive rights to reproduce and distribute the article, including reprints, photographic reproductions, microform, or any other reproductions of similar nature and translations, and includes the right to adapt the article for use in conjunction with computer systems and programs, including reproduction or publication in machine-readable form and incorporation into retrieval systems. Authors are responsible for obtaining from the copyright holder permission to reproduce any figures for which copyright exists. Transfer of copyright agreement forms will be sent to the corresponding author following acceptance of the manuscript.

V. Retained authors' rights

As an author you (or your employer or institution) may do the following:

- make copies (print or electronic) of the article for your own personal use,

including for your own classroom teaching use

- make copies and distribute such copies (including through e-mail) of the article to research colleagues, for the personal use by such colleagues (but not commercially or systematically, e.g., via an e-mail list or list server)
- post a pre-print version of the article on Internet websites including electronic pre-print servers, and to retain indefinitely such version on such servers or sites
- post a revised personal version of the final text of the article (to reflect changes made in the peer review and editing process) on your personal or institutional website or server, with a link to the journal homepage (on <http://www.elsevier.com>)
- present the article at a meeting or conference and to distribute copies of the article to the delegates attending such a meeting
- for your employer, if the article is a 'work for hire', made within the scope of your employment, your employer may use all or part of the information in the article for other intra-company use (e.g., training)
- retain patent and trademark rights and rights to any processes or procedure described in the article
- include the article in full or in part in a thesis or dissertation (provided that this is not to be published commercially)
- use the article or any part thereof in a printed compilation of your works, such as collected writings or lecture notes (subsequent to publication of your article in the journal)
- prepare other derivative works, to extend the article into book-length form, or to otherwise re-use portions or excerpts in other works, with full acknowledgement of its original publication in the journal

VI. Correcting proofs and reprints

Proofs will be sent to the corresponding author. Elsevier is now sending PDF proofs by e-mail for correction. If an author is unable to handle this process, regular print proofs will be sent. Elsevier will do everything possible to get the article corrected and published as quickly and accurately as possible. Therefore, it is important to ensure that all corrections are sent back in ONE communication. Subsequent corrections will not be possible. Only typesetting errors may be corrected; no changes in, or additions to, the accepted manuscript will be allowed. Proofs should be returned to Elsevier within 48 hours. Twenty-five offprints of each paper will be supplied free of charge to the corresponding author. Additional offprints can be ordered at prices shown on the offprint order form that accompanies the copyright form.

VII. Language Polishing

For authors, who require information about language editing and copyediting services pre- and post-submission, please visit <http://www.elsevier.com/wps/find/authorhome.authors/languagepolishing> or contact

authorsupport@elsevier.com for more information. Please note Elsevier neither endorses nor takes responsibility for any products, goods or services offered by outside vendors through our services or in any advertising. For more information please refer to our [Terms & Conditions](#).

VIII. US National Institutes of Health (NIH) voluntary posting ("Public Access") policy

Elsevier facilitates author posting in connection with the voluntary posting request of the NIH (referred to as the NIH "Public Access Policy"; see <http://www.nih.gov/about/publicaccess/index.htm>) by posting the peer-reviewed author's manuscript directly to PubMed Central on request from the author, after formal publication. Upon notification from Elsevier of acceptance, we will ask you to confirm via e-mail (by e-mailing us at NIHauthorrequest@elsevier.com) that your work has received NIH funding (with the NIH award number, as well as the name and e-mail address of the Prime Investigator) and that you intend to respond to the NIH request. Upon such confirmation, Elsevier will submit to PubMed Central on your behalf a version of your manuscript that will include peer-review comments, for posting 12 months after the formal publication date. This will ensure that you will have responded fully to the NIH request policy. There will be no need for you to post your manuscript directly with PubMed Central, and any such posting is prohibited. Individual modifications to this general policy may apply to some Elsevier journals and its society publishing partners.

IX. Author enquiries

For enquiries relating to the submission of articles (including electronic submission where available) please visit Elsevier's Author Gateway at <http://authors.elsevier.com>. The Author Gateway also provides the facility to track accepted articles and set up e-mail alerts to inform you of when the article status has changed, as well as detailed artwork guidelines, copyright information, frequently asked questions and more.

Contact details for questions arising after acceptance of an article, especially those relating to proofs, are provided after registration of an article for publication.

No responsibility is assumed by the Publisher for any injury and/or damage to persons or property as a matter of products liability, negligence or otherwise, or from any use or operation of any methods, products, instructions or ideas contained in the material herein. Because of the rapid advances made in the medical sciences, independent verification of diagnoses and drug dosages should be made.