

BioMedical and Clinical Research

An Official Publication of "Ibn Sina Academy of Medieval Medicine & Sciences")

WWW.IABCR.ORG

Original Article

Antibacterial Activity of *Nigella Sativa* Linn. Seeds Against Multiple Antibiotics Resistant Clinical Strains of *Staphylococcus aureus*

Mohammad Tariq Salman^{1*}, Rahat Ali Khan², Indu Shukla³

¹Department of Pharmacology, College of Medicine, University of Dammam, King Faisal Coastal Road, Dammam, Eastern Province, Saudi Arabia. 31441. P.O. Box 1982. ²Department of Pharmacology, Jawaharlal Nehru Medical College, Aligarh Muslim University, Aligarh, India. 202002. ³Department of Microbiology, Jawaharlal Nehru Medical College, Aligarh Muslim University, Aligarh, India. 202002.

ABSTRACT

Objective: Staphylococcus aureus is one of the major resistant pathogens extremely adaptable to antibiotic pressure. Nigella sativa (black cumin) seed extracts and essential oil have been shown to possess antimicrobial activity against several bacteria but little work has been done on their effect against multidrug resistant S. aureus strains isolated from patients. So, we studied antibacterial activity of Nigella sativa against multidrug resistant clinical strains of Staphylococcus aureus. It was an experimental, in vitro study.

Materials and methods: Nigella sativa (black cumin) seed essential oil and extracts were tested in varying dilutions against 40 clinical strains of Staphylococcus aureus which were isolated from patients attending a tertiary care teaching hospital in North India using disc agar diffusion technique on inoculated Muellar Hinton agar plates under standard laboratory conditions. The tested strains were resistant to 4 or more clinically used antibiotics belonging to at least 3 different classes.

Results: The Methanolic extract and oil of Nigella sativa were found active against 38 and 35 multi-drug resistant strains respectively. Both the oil and Methanolic extract showed remarkable dose dependant antibacterial activity against the tested strains up to a dilution of 1:50 as evident from the zones of inhibition. Conclusion: Nigella sativa possesses antibacterial activity against multidrug resistant clinical strains of Staphylococcus aureus

Key words: Nigella sativa, Black seed, Black cumin, Staphylococcus aureus, Antimicrobial activity, Antibiotic resistance.

INTRODUCTION

Staphylococcus aureus is one of the major resistant pathogens and a common organism isolated from clinical specimens in tertiary care hospitals.^[1] Found on the mucous membranes and the skin of around a third of the population, it is extremely adaptable to antibiotic pressure. This resistance problem demands that a renewed effort be made

Access this article online	
Website:	Quick Response code
www.iabcr.org	回機聚回
DOI: 10.21276/iabcr.2016.2.3.24	

Received:04.09.16| Revised:10.09.16| Accepted:14.09.16

Corresponding Author

Dr. Mohammad Tariq Salman, Department of Pharmacology, College of Medicine, University of Dammam, King Faisal Coastal Road, Dammam, Eastern Province, Saudi Arabia. 31441. P.O. Box 1982.

Email: mtsalman@uod.edu.sa

Copyright: © the author(s) and publisher. IABCR is an official publication of Ibn Sina Academy of Medieval Medicine & Sciences, registered in 2001 under Indian Trusts Act, 1882. This is an open access article distributed under the terms of the Creative Commons Attribution Non-commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

to seek antibacterial agents effective against pathogenic bacteria resistant to current antibiotics. One of the possible strategies towards this objective is the rational localization of bioactive phytochemicals.

Nigella sativa L. (Ranunculaceae) is an herbaceous plant whose seeds and essential oil derived from them have been used for centuries for treatment of various ailments, including infectious diseases. It has been recommended for use on a regular basis in Tibbe Nabwi (Prophetic Medicine) as is evident from the following tradition: Narrated Abu Hurairah, "I heard Allah's Apostle saying, 'There is healing in black cumin for all diseases except death^[2]." In the Unani system of medicine, black cumin has been regarded as a valuable remedy in a number of diseases. Ibn Sina (Avicenna, 980-1037 A.D.), most famous for his volumes called 'The Canon of medicine' regarded as one of the most famous book in the history of medicine, refers to black cumin as the seed that stimulates the body's energy and helps recovery from fatigue and dispiritedness and several therapeutic effects on digestive disorders, gynaecological diseases and respiratory system have been ascribed to it.[3]

The seeds have been thoroughly studied scientifically in the last 3-4 decades and reported to possess a number of medicinal properties like immunomodulatory^[4] and antioxidant^[5] activities. Their crude extracts^[6] and essential oil^[7] have been shown to possess activity against several bacteria. However, little work has been done on their effect against multidrug resistant S. aureus strains isolated from patients. Hence this study was undertaken.

MATERIALS AND METHODS

Acquisition of seeds and oil of *Nigella sativa*: Seeds of *N. sativa* (locally known as Kalonji) were procured from a local dealer at Aligarh and authenticated by a botanist at Department of Botany, Aligarh Muslim University, Aligarh. *N. sativa* essential oil (Kalonji oil) was procured from Mohammedia products, Red Hills, Nampally, Hyderabad, Andhra Pradesh, India. As per manufacturer's information, it was prepared by steam distillation at Hyderabad, India.

Preparation of extracts

- (a) **By Soxhlet extraction:** Methanolic extract was prepared using HPLC grade methanol. Seeds were crushed and extracted with methanol in Soxhlet apparatus by heating at its boiling point (50 0C) till it cleared.
- (b) By maceration: Methanolic extract was prepared using HPLC grade methanol as described previously. ^[8] Briefly, 150 grams of ground seeds were soaked in 150 ml of methanol for 7 days at room temperature, followed by filtration and removal of solvent under aseptic conditions. The extract thus prepared was transferred as aliquots of 1 ml each into sterile vials and stored at − 20 °C till further use.

Preparation of drug impregnated filter paper discs:

This was done by the method of Morley, 1945^[9] with slight modification.

Methanolic extracts and oil were tested as previously described. Briefly, the extracts and oil were diluted using methanol and Ethylene glycol respectively upto a dilution of 1:100. During sensitivity testing, 4µl of extract or oil in pure or diluted form was impregnated on filter paper disc of 6 mm diameter, placed on Muellar Hinton Agar plate previously inoculated with bacteria.

Inoculation of plates: This was done using flood-inoculation technique. Bacterial suspension in Nutrient Broth having turbidity equivalent to 0.5 McFarland was freshly prepared and 2 ml of this was transferred onto the Muellar Hinton Agar plate and distributed gently over the surface of medium with gentle rocking. The excess fluid was removed from the plate and the plate was kept in incubator at 37 0C for 30 minutes for drying before application of discs.

Disc susceptibility testing: This was carried out by placing discs impregnated with test material on surface of inoculated agar plates. [12] For sensitivity testing with standard antibiotics, commercial antimicrobial susceptibility testing discs obtained from HiMedia Laboratories Limited, Bombay were used. The plates were

then kept in incubator at 37 0C for 18 hours and diameters of zones of inhibition were measured.

 $N.\ sativa$ oil and methanolic extracts were tested in different dilutions against Oxford S. aureus (NCTC 6571) and S. aureus (ATCC 25923). All the experiments were repeated in triplicate. Ampicillin (10 µg/disc) and Amoxicillin (10 µg/disc) obtained from HiMedia Laboratories Limited, Bhaveshwar Plaza, LBS Marg, Mumbai, India were kept as standard. Discs soaked in respective diluents were also kept as negative control.

Since Methanolic extract prepared by maceration showed more pronounced activity as compared to that derived by Soxhlet, it was used for further studies on clinical isolates. *N. sativa* oil also showed pronounced antibacterial activity against standard strains and was studied further on clinical isolates.

Strains of S. aureus were isolated from pus, blood, cervical and conjunctival swabs, ear discharge, semen and CSF of various patients attending Jawaharlal Nehru Medical College Hospital, Aligarh and tested for their sensitivity to a number of clinically used antibiotics. The concentrations of antimicrobial sensitivity testing discs used and interpretation of sizes of zones of inhibition were in accordance to Performance Standards for Antimicrobial Susceptibility Tests, CLSI.[13] The antibiotics tested and their concentrations used were: Ampicillin (10µg/disc), Amikacin (30 µg/disc), Cotrimoxazole (trimethoprim-1.25, sulphamethoxazole-23.75 µg/disc), Cefaclor (30 µg/disc), Ciprofloxacin (5 µg/disc), Ceftriaxone (30 µg/disc), Cefotaxime (30 µg/disc), Ceftazidime (30 µg/disc), Erythromycin (15 µg/disc), Gentamicin (10 µg/disc), Gatifloxacin (5µg/disc), Ofloxacin (5µg/disc), Roxithromicin (15 µg/disc), Sparfloxacin (5µg/disc), Tetracycline (30µg/disc) and Tobramycin (10 µg/disc). Out of these, 40 strains which were resistant to 4 or more antibiotics belonging to at least 3 different classes were tested for their sensitivity to Methanolic extract and oil of N. sativa in various dilutions.

Statistical Analysis:

Clinical strains which were sensitive to oil or extract and those which were resistant were compared statistically for their sensitivity to various antibiotics using Fisher's Exact Test. Clinical strains sensitive or resistant to oil/extract were also compared for number of antibiotics to which each of the strains was resistant and for number of groups of antibiotics to which each of the strains showed resistance using Mann Whitney U test. P value <0.05 was considered as significant. All analyses were done using SPSS 16.0 software.

RESULTS

The Effect of Nigella sativa against standard strains.

N. sativa oil as well as Methanolic extracts showed remarkable dose dependant antimicrobial activity against the standard strains (Fig. 1). The methanolic extract obtained by maceration showed highest antibacterial activity. The antibacterial activity was observed up to a dilution of 1:100, the least concentration tested.

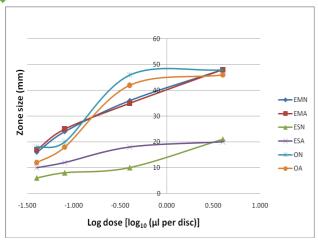


Figure 1: Dose response curves showing effect of Methanolic extracts and oil of *Nigella sativa* against standard strains of *Staphylococcus aureus*.

EMN- Extract (maceration) against Oxford S. aureus (NCTC 6571), EMA- Extract (maceration) against S. aureus (ATCC 25923), ESN- Extract (soxhlation) against Oxford S. aureus (NCTC 6571), ESA- Extract (soxhlation) against S. aureus (ATCC 25923), ON- Oil against Oxford S. aureus (NCTC 6571), OA- Oil against S. aureus (ATCC 25923).

Effect of Nigella sativa against Clinical isolates

Out of 40 strains tested, 16 were resistant to 4-6 antibiotics, 16 to 7-9 antibiotics, 3 to 10-12 antibiotics and 5 to 13-16 antibiotics. Resistance was highest to Aminoglycosides, Tetracycline, Cotrimoxazole, Ciprofloxacin, Ampicillin, 3rd generation Cephalosporins and Erythromycin (Fig 2).

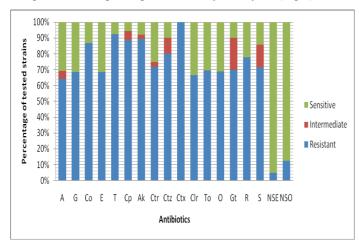


Figure 2: Sensitivity pattern of Clinical isolates of Staphylococcus aureus.

A- Ampicillin, Ak- Amikacin, Co- Cotrimoxazole, Clr- Cefaclor, Cp- Ciprofloxacin, Ctr- Ceftriaxone, Ctx- Cefotaxime, Ctz- Ceftazidime, E- Erythromycin, G-Gentamicin, Gt- Gatifloxacin, NSE- N. sativa extract, NSO- N. sativa oil, O-Ofloxacin, R- Roxithromicin, S- Sparfloxacin, T- Tetracycline, To- Tobramycin

The oil was active against 35 strains, up to a dilution of 1:50 against 14, up to 1:10 against 11 and only in undiluted state against 10 strains. The Methanolic extract was active against 38 strains, up to a dilution of 1:50 against 22 strains, up to 1:10 against 10 and only in undiluted state against 6 strains (Fig 3).

It showed zones of inhibition larger than oil at all concentrations. No significant correlation was found between the resistance to *N. sativa* oil/extract and resistance to any other tested antibiotics, number of antibiotics to which the isolate was resistant or the number of classes of antibiotics to which the isolate showed resistance.

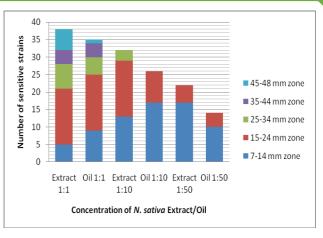


Figure 3. Effect of *Nigella sativa* Methanolic Extract and Oil on Clinical isolates of *Staphylococcus aureus*.

DISCUSSION

In Nigella sativa oil and Methanolic extracts derived by Soxhlet as well as by maceration, when tested in varying concentrations (1:1 to 1:100) showed dose dependent antibacterial activity against 2 standard strains of S. aureus. Out of 40 clinical strains of S. aureus resistant to four or more antibiotics belonging to at least 3 different classes, the extract was active against 38 strains and the oil against 35. This confirms earlier studies which reported antibacterial activity of alcoholic extract of seeds [6,14], volatile oil (obtained by steam distillation of fixed oil), [14] essential oil.[15] methanolic extract of N. sativa cell culture,[16] methanolic extract of germinating seeds^[17] and essential oil (obtained from crude extract).^[18] In a study by Sokmen et al. (1999)^[19] methanolic extract derived by soxhlet extraction was not active against one strain of S. aureus derived from a clinical sample. This may be due to difference of strains tested.

An alarming increase in bacterial strains resistant to a number of antimicrobial agents demands that a renewed effort be made to seek antibacterial agents effective against pathogenic bacteria resistant to current antibiotics. Many of these plants have been investigated scientifically for antimicrobial activity and a large number of plant products have been shown to inhibit growth of pathogenic bacteria. A number of these agents appear to have structures and modes of action that are distinct from those of the antibiotics in current use, suggesting that cross-resistance with agents already in use may be minimal. [20] This hypothesis is further supported by our study in which no significant correlation was found between the resistance to N. sativa oil/extract and resistance to any other tested antibiotics showing absence of cross-resistance with the tested antibiotics.

Thymol is a phenolic alcohol present in the essential oil[3] that has been reported to possess

antibacterial activity.^[21] Since Thymol is present in the methanol soluble portion of oil^[22], it will also be extracted in the Methanolic extract. Thymoquinone present in volatile oil obtained from the crude extract was shown to exhibit remarkable inhibition of the growth of various strains of bacteria.^[18] Thymoquinone is present in the

methanol soluble portion of *N. sativa* oil^[23] and thus will be extracted in Methanolic extract of seeds also. High antimicrobial activity in Thymoquinone and longifoline and weak antimicrobial activity in p-cymene present in N. sativa oil has also been reported.^[24] P-cymene has been demonstrated to work synergistically with carvacrol, also present in *N. sativa*, and a mixture exhibited greater antibacterial activity than the terpenoids on their own.^[25] The seeds also contain tannins, which can be extracted by methanol,^[26] and number of studies have reported antimicrobial properties of tannins.^[27] Antibacterial properties of *N. sativa* essential oil could be due to the ability of the oil to permeabilize membranes and to destroy cellular integrity of bacteria leading to cell death by necrosis and apoptosis.^[28]

It may be concluded that *Nigella sativa* oil as well as Methanolic extract are active against multidrug resistant strains of *Staphylococcus aureus*, with absence of crossresistance with commonly prescribed antibiotics, and may be used at least topically in susceptible cases. Further research is needed to advocate its use in systemic infections.

REFERENCES

- Mishra M, Mishra P, Banjare S, Thaware PP, Farooq U. To study the Prevalence and Antibiotic Sensitivity Pattern of Isolated Bacteria from the Blood, Urine, CSF and Pus Samples in a Tertiary Care Teaching Hospital. Int Arch BioMed Clin Res. 2016 Jan;2(1):18-22
- Al-Bukhari, 1976. MI. Division (71) on Medicine. In Sahih al Bukhari, the collection of authentic sayings of prophet Mohammad (peace be upon him). Hilal Yayinlari, Ankara, Turkey. 7 (71): 592
- Ave Sina: Law of Medicine, Interpreter, Sharafkhandy A. Ministry of Guidance Publication, Tehran, 1990, pg. 314.
- Alshatwi AA. Bioactivity-guided identification to delineate the immunomodulatory effects of methanolic extract of Nigella sativa seed on human peripheral blood mononuclear cells. Chin J Integr Med. 2014 Mar 2. [Epub ahead of print].
- D.S. Kushwah, M.T. Salman, P. Singh, V.K. Verma and A. Ahmad, 2014. Protective Effects of Ethanolic Extract of Nigella sativa Seed in Paracetamol Induced Acute Hepatotoxicity In vivo. Pakistan Journal of Biological Sciences, 17(4): 517-522.
- Ali NA, Julich WD, Kusnick C and Lindequist U. Screening of Yemeni medicinal plants for antibacterial and cytotoxic activities. J Ethnopharmacol, 2001; 74(2): 173-9.
- Salman MT, Khan RA, Shukla I. Antimicrobial activity of Nigella sativa Linn. seed oil against multi-drug resistant bacteria from clinical isolates. Natural Product Radiance. 2008; 7(1): 10-4.
- 8. Salman MT, Khan RA, Shukla I. A Study of Nigella sativa Linn. seeds for antimicrobial activity against multidrug resistant clinical strains of Pseudomonas aeruginosa. Hippocratic Journal of Unani Medicine. 2009; (4): 95-104.
- Morley DC. A simple method of testing the sensitivity of wound bacteria to penicillin and sulphathiazole by use of impregnated blotting paper discs. J Pathol and Bacteriol. 1945; 57: 379-82.
- Salman MT, Khan RA, Shukla I. Antimicrobial activity of Black Cumin seeds (Nigella sativa) against multidrug resistant strains of Coagulase negative Staphylococci. Hippocratic Journal of Unani Medicine. 2008; 3(1): 107-112.
- Acar JF, Goldstein FW, 1996. Disk susceptibility test, in Antibiotics in Laboratory Medicine. 4th edition, ed. Victor L, Williams and Wilkins Publishers, 1-51.

- Bauer AW, Kirby WMM, Sherris JC, Turck M. Antibiotic susceptibility testing by a standardized single disk method. Am J Clin Pathol. 1966; 45: 493-6.
- Clinical and Laboratory Standards Institute. Performance Standards for Antimicrobial Susceptibility Testing; Twentyfifth Informational Supplement. CLSI document M-100 S25. Clinical and Laboratory Standards Institute, Wayne, Pennsylvania, USA, 2015.
- Iqbal Ahmad, Arina Z. Beg. Antimicrobial and phytochemical studies on 45 Indian medicinal plants against multi-drug resistant human pathogens. Journal of Ethnopharmacology. 74 (2); 2001, Pages 113–123
- Sharmishtha Purkayastha, Rittee Narain, Praveen Dahiya. Evaluation of antimicrobial and phytochemical screening of Fennel, Juniper and Kalonji essential oils against multi drug resistant clinical isolates. Asian Pacific Journal of Tropical Biomedicine (2012)S1625-S1629
- Sokmen A, Jones BM, Erturk M. Antimicrobial Activity of Extracts from the Cell Cultures of some Turkish Medicinal Plants. Phytother. Res 1999; 13: 355
- Islam MH, Ahmad IZ, Salman MT. Antibacterial efficacy of Nigella sativa seed in germination phases on clinical strains isolated from human patients. E3 Journal of Biotechnology and Pharmaceutical Research 2013; 4(1): 8
- 18. Kahsai, Alem Welderufael, "Isolation and Characterization of Active Ingredients from Nigella Sativa for Antibacterial Screening." (2002). Master's Thesis, Department of Chemistry, East Tennessee State University. Electronic Theses and Dissertations. Paper 692. http://dc.etsu.edu/etd/692: last assessed 04/09/2016
- Sokmen A, Jones BM, Erturk M. The in vitro antibacterial activity of Turkish medicinal plants; Journal of Ethnopharmacology. 1999; 67: 79.
- 20. Zahner H, Fiedler HP. The need for new antibiotics: possible ways forward. In P. A. Hunter, G. K. Darby and N. J. Russell (editors); Fifty years of antimicrobials: past perspectives and future trends. Proceedings of Fifty-Third Symposium of the Society for General Microbiology. Cambridge University Press, Cambridge, United Kingdom; 1995
- 21. Karapinar M and Aktug SE. Inhibition of food borne pathogens by thymol, eugenol, menthol and anethole. Int J Food Microbiol 1987; 4(2): 161-6.
- Enomoto S, Asano R, Iwahori Y, Narui T, Okada Y, Singab AN, Okuyama T. Hematological studies on black cumin oil from the seeds of Nigella sativa L. Biol Pharm Bull 2001; 24 (3): 307.
- Abou Basha LI, MS Rashed, Aboul EHY. TLC assay of thymoquinone in Black Seed oil (Nigella sativa Linn) and identification of dithymoquinone and thymol. Journal of Liquid Chromatography 1995; 18(1): 105-115.
- Bourgou S, Pichette A, Marzouk A, Legault J. Bioactivities of black cumin essential oil and its main terpenes from Tunisia. South African Journal of Botany 2010; 76: 210–6.
- Ultee A, Slump RA, Steging G, Smid EJ. Antimicrobial activity of carvacrol toward Bacillus cereus on rice. Journal of Food Protection 2000; 63: 620–4.
- Eloff JN. Which extractant should be used for the screening and isolation of antimicrobial components from plants? J Ethnopharmacol 1998; 60:1-8.
- Scalbert A. Antimicrobial properties of tannins. Phytochemistry 1991; 30: 3875-3883.
- Bakkali F, Averbeck S, Averbeck D, Idaomar M. Biological effects of essential oils. Food and Chemical Toxicology 2007; 46: 446–475.

How to cite this article: Salman MT, Khan RA, Shukla I. Antibacterial Activity of *Nigella Sativa* Linn. Seeds Against Multiple Antibiotics Resistant Clinical Strains of *Staphylococcus aureus*. Int Arch BioMed Clin Res. 2016;2(3):96-99. DOI: 10.21276/iabcr.2016.2.3.24

Source of Support: Nil, Conflict of Interest: None