

**A161 Effects of *Crinum bulbispermum* on the isolated perfused rat heart**P. Mugabo <sup>a</sup>, Y. Gurie <sup>a</sup>, A. Mitha <sup>a</sup>, A.P. Burger <sup>b</sup>, L. Cyster <sup>c</sup> and J. Syce <sup>a</sup>Departments of Pharmacology <sup>a</sup>, Physiology <sup>b</sup> and Botany <sup>c</sup>; University of the Western Cape, Private Bag X17, Bellville, 7535, South Africa.

*Crinum bulbispermum* (CBS) is used by traditional healers to treat cardiovascular disorders such as heart failure, arterial hypertension and cardiac arrhythmias (1,2,3), but there is no scientific proof for the claimed pharmacological effects of this plant on the heart. The aim of the present study was to determine whether CBS has any effect on the force and rate of contraction of the heart. Hearts from Wistar rats were mounted in a modified Langendorff heart system, retrogradely perfused with Krebs Henseleit buffer. The heart rate and diastolic and systolic pressures were measured via a latex balloon inserted in the left ventricle. Solutions of adrenaline and aqueous extracts of CBS were injected into the aortic cannula. Infusion of adrenaline (0.1 mg/min) decreased the diastolic pressure (from  $71.17 \pm 1.72$  mm Hg to  $60.17 \pm 2.14$  mm Hg), and increased the systolic pressure (to  $127.67 \pm 4.18$  mm Hg vs  $93.13 \pm 3.06$  mm Hg at baseline), and the heart rate (to  $385.00 \pm 4.60$  bpm vs  $281.00 \pm 7.92$  bpm at baseline). Infusion of CBS (0.1 mg/min) increased the systolic pressure (to  $133.17 \pm 3.19$  mm Hg vs  $100.50 \pm 1.87$  mm Hg at baseline), and decreased diastolic pressure (from  $73.33 \pm 3.08$  mm Hg to  $63.17 \pm 2.48$  mm Hg), but did not change the heart rate ( $281.33 \pm 1.75$  bpm at baseline vs  $281.50 \pm 1.38$  bpm at peak). Aqueous extracts of CBS thus appear to contain constituents capable of producing positive inotropic effects without affecting the heart rate. Further experiments are needed to isolate these active principles and confirm their activity.

**References:** 1. Hutchings, A. (1996) Zulu Medicinal plants. Natal University Press, Pietermaritzburg, South Africa. 2. Van Wyk, B.E. et al, (2000) Medicinal Plants of South Africa. Briza Publications (SA). 3. Watt, J.M. & Breyer - Brandwijk, M.G. (1962). The medicinal and poisonous plants of Southern and Eastern Africa, 2nd edition, South Africa.

**A162 Cardiovascular effects of *Leonotis leonorus* in the normotensive rat**P. Mugabo <sup>a</sup>, A. Njagi <sup>a</sup>, D.L. Dietrich <sup>b</sup> and J. Syce <sup>a</sup>Department of Pharmacology <sup>a</sup> and Physiology <sup>b</sup>; University of the Western Cape, Private Bag X17, Bellville, 7535, South Africa.

*Leonotis leonorus* (LL) is used in traditional medicine for treatment of various diseases including epilepsy (1,2), cardiac asthma and hypertension (1,3). Using the modified "Langendorff Perfusion Model", it was found that aqueous extracts of LL leaves and stems had a positive inotropic and negative chronotropic effect on isolated perfused rat hearts (4). The aim of this study was to determine the effect of aqueous extracts of LL on the blood pressure (BP) and the heart rate (HR) *in vivo* in rats. Extracts of the plant and various control agents were administered via the external jugular vein to anaesthetized Wistar rats being ventilated via the trachea while the heart rate and blood pressure were measured via a pressure transducer connected to the femoral artery. IV infusion of adrenaline (0.1 mg/min) significantly ( $p = 0.05$ ) increased the systolic pressure (to  $355.17 \pm 4.36$  mm Hg vs  $210 \pm 2.83$  mm Hg at baseline); the diastolic pressure (to  $255.0 \pm 3.35$  mm Hg vs  $151.67 \pm 2.16$  mm Hg at baseline); and the heart rate (to  $321.17 \pm 2.14$  bpm vs  $303.5 \pm 2.88$  bpm at baseline). Verapamil (0.01 mg/min) decreased the systolic pressure (from  $253.83 \pm 3.06$  mm Hg to  $111.17 \pm 1.17$  mm Hg), the diastolic pressure (from  $100.67 \pm 0.82$  mm Hg to  $82.33 \pm 2.58$  mm Hg) and the heart rate (from  $359.50 \pm 1.87$  bpm to  $291.83 \pm 1.94$  bpm). *L. leonorus*, however had no significant effect on either BP (systolic:  $220.67 \pm 1.64$  mm Hg vs  $231.50 \pm 1.64$  mm Hg at baseline; diastolic:  $155.83 \pm 1.47$  mm Hg vs  $172.67 \pm 1.86$  mm Hg at baseline), or the heart rate ( $396.17 \pm 1.17$  bpm vs  $394.17 \pm 2.32$  bpm at baseline). There are thus differences in the cardiovascular effects of LL when measured *in vitro* in isolated heart and *in vivo* in normotensive rats.

**References:** 1. Hutchings, A. (1996) Zulu Medicinal plants. Natal University Press, Pietermaritzburg, South Africa. 2. Van Wyk, B.E. et al (2000) Medicinal Plants of South Africa. Briza Publications (South Africa). 3. Watt, JM & Breyer - Brandwijk, M.G. (1962) The medicinal and poisonous plants of Southern and Eastern Africa, 2nd edition. 4. Khan, F. et al (2001) Effects of *Leonotis leonorus* on the isolated perfused rat heart. Presented at the International Immunopharmacology Congress September 2001, Sun City (South Africa).