Effects of Aqueous and Ethanolic Extracts of *Myrtus Communis* Leaves on Trophozoites and Cysts of *Acanthamoeba*: An In Vitro Study

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**ABSTRACT**

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**Key words**
*Acanthamoeba*
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**Background and Aims:** *Acanthamoeba* is a ubiquitous amphizoic organism which can cause lethal diseases such as granulomatous amoebic encephalitis and unfortunately, the infection has now increased in the world. The aim here was to evaluate *in vitro* anti-Acanthamoeba properties of crude aqueous and ethanolic extracts of *Myrtus communis*.

**Materials and Methods:** In this experimental research, a clinical isolate of *Acanthamoeba* was cultured and genotyped. The aqueous and ethanolic extracts of *Myrtus communis* were prepared. Then, various concentrations of *Myrtus communis* extracts (1.25, 2.5, 5, and 10 mg/ml) were tested at three different times (24, 48 and 72 hr) on trophozoites and cysts of *Acanthamoeba in vitro*. The viability of trophozoites or cysts was tested by trypan blue method. Unstained (viable) and stained (nonviable) parasites were evaluated by counting with a neobar lam.

**Results:** The percentage of viability of trophozoites and cysts after adding ethanolic extract of *Myrtus communis* was 0% and 8.62%, respectively. Moreover, at 10 mg/ml concentration of aqueous extract of *Myrtus communis*, 0% trophozoites and 31.10% cysts lived after 72 h.

**Conclusions:** This extract can be used as a safe anti-Acanthamoeba agent against trophozoites and cysts of *Acanthamoeba* and further investigations are recommended to show the effects of this plant as an antiparasitic drug in animal models and volunteer infected people.

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Introduction

Acanthamoeba are ubiquitous amphizoic organisms are found in variety of environments including water, sewage, air, soil, food items, swimming pool, dust, dialysis units, humidifiers, and healthy individuals [1-3]. Acanthamoeba keratitis (AK) is a painful sight-threatening ocular disease that occurs generally among immunocompetent individuals. AK symptoms include redness, irritation, tearing, photophobia, ocular pain, lid edema, corneal ring, perineural infiltrates, loose corneal epithelium, and blurred vision [2]. About 85-88% of AK cases are connected with contact lens wearers [4]. The treatment of ocular acanthamoebiasis is extremely difficult and protracted. The combination of cationic antiseptics and aromatic diamidines inhibit membrane functions and DNA synthesis [5, 6].

One of medicinal plants called Myrtus communis is a perennial shrub having a maximum height of 5 meters (m) that belongs to the Myrtaceae family. The leaves of this plant are mostly used in medicine [7]. Myrtus communis extract are useful against different pathogenic organisms and there are good results in terms of antibacterial [8], antiviral [9], bioactivity and antioxidant activity of this plant as well as its antiparasitic [10-12] and antifungal [13] properties. Anti-Acanthamoeba properties of Myrtus communis are not identified; thus, we focused to explain Anti-Acanthamoeba activity of this extract against trophozoites and cysts of Acanthamoeba.

Materials and Methods

Preparation of the plant
The dried leaves of Myrtus communis were purchased from the Kerman area in the southeast Iran. The plant was identified and approved by pharmacognosist (Faculty of Pharmacognosy, Shahid Beheshti University, Tehran, Iran).

Extraction of the ethanolic extract
The ethanolic extract of Myrtus communis was obtained by incubating 50 grams (g) of powdered dried leaves in 500 milliliters (ml) of 85-87% ethanol for 3 days. In all cases, the extracts were centrifuged (5000 rpm) for 30 minutes (min) and the supernatants were harvested and filtered using Whatman paper No. 1. The extract was then filtered. Afterwards, a rotary vacuum evaporator at 40°C was used in order to remove the solvent.

Extraction of the aqueous extract
Fifty grams of powdered dried leaves was kept in 200 mL of distilled water for half an hour. Then, the solvent from the extract was removed by rotary evaporator. The residues of extract were collected and kept in the freezer (-20°C) for the experiment.

Acanthamoeba strain
The sample used in this study were obtained from a patient with keratitis. AK diagnosis was based on culture, sequencing analysis and Basic Local Alignment Search Tool (BLAST) search. The sequencing results showed the existence of T4 genotype (accession number KU877552). The specimen was grown on non-nutrient agar (NNA) plates [10] coated with
Escherichia coli at 26°C. The Acanthamoeba strain was kept in non-nutrient agar culture for further use.

**Trophozoites**

Acanthamoeba was cultivated in NNA medium at 26°C. After 72 to 96 h, trophozoites were washed twice with sterile saline and concentrated at 1500 rpm for 5 min [14]. The number of viable trophozoites were calculated by a neobar lam [15]. The final amount was adjusted to $15 \times 10^4$ trophozoites per ml. Initial cultures were used for testing after 14-21 days and centrifuged at 2000 rpm for 5 min. Cysts were counted and the final amount was adjusted to $15 \times 10^4$ cysts per ml.

**Evaluation of activity**

In this study, 100 microliters (µl) of the calibrated cyst/ trophozoite suspension ($15 \times 10^4$/ml) was inoculated in each micro-centrifuge tube and 100 µl of each extract concentration (1.25, 2.5, 5, 10 mg/ml) was added to the tubes. Then, the tubes were kept at 26°C for 24, 48, and 72 hr. In this test, the control tubes included only trophozoites or cysts suspension and sterile distilled water. Three tubes were used for the evaluation of each concentration and measurements were repeated 3 times [16].

**Amoebicidal activity of the Myrtus communis on trophozoites and cysts**

The samples were incubated with different concentrations of the extract for 24, 48, and 72 h. Then, 25 µl from each test and control well was added into 25 µl from 0.4% trypan blue and the number of live and dead cysts was counted with a neobar lam. This study was approved by the ethical committee of Tarbiat Modares University, Tehran, Iran.

**Statistical analysis**

The statistical analysis of the data was made by one-way ANOVA and repeated measures tests (compare three or more dependent groups) using SPSS version 18.0. The number of trophozoites and cysts was expressed as mean±SD and percent survival. The significance level was considered as $p<0.05$.

**Results**

The results of this research are presented as survival percentage of trophozoites and cysts in Tables 1 and 2. The concentrations of 1.25, 2.5, 5 and 10 mg/ml of aqueous and ethanolic extracts of the Myrtus communis were used against trophozoites and cysts at three different times (24, 48 and 72 hr). The mortality of trophozoites and cysts exposed to the different extracts arised with increase in time of exposure and extract concentration (Fig. 1).

The ethanolic extract of Myrtus communis is more effective than the aqueous extract. After adding 10 mg/ml ethanolic extract of Myrtus communis to the medium culture, 0% trophozoites and 8.62% cysts were viable after 48 and 72 hr, respectively. In the case using 5 mg/ml ethanolic extract of Myrtus communis, 28.88% trophozoites and 35.80% of the cysts were detected in 72 hr. By adding 2.5 mg/ml of extract and after 72 hr percentages of trophozoites and cysts viability were 43.78% and 56.06%, respectively. Upon administration of extract at concentration of 1.25 mg/ml, 56.98% trophozoites and 75.59% cysts were
Antiamoebic activity of extract from *Myrtus communis* at 10 mg/ml on trophozoites and cysts of *Acanthamoeba* caused removal of all trophozoites, and 31.10% cysts were viable in 72 h. In the case of 5 mg/ml ethanolic extract of *Myrtus communis*, 42.22% trophozoites and 63.77% of the cysts were detected in 72 h. At another concentration, 2.5 mg/ml, 57.33% trophozoites and 69.58% cysts survived. Anti-amoebic activity at 1.25 mg/ml of the extract showed survival of 69.96% of trophozoites and 85.34% of cysts. The difference between the results of the effect of extract on parasite was statistically significant (p<0.05). Finally, among the extracts evaluated, ethanolic extract of *Myrtus communis* revealed the strongest anti-*Acanthamoeba* activity on the trophozoites and cysts.

### Table 1. Effect of *Myrtus communis* ethanolic extract on the survival and growth of *Acanthamoeba*

<table>
<thead>
<tr>
<th>Concentrations (mg/ml)</th>
<th>Effect on</th>
<th>24th hour</th>
<th>48th hour</th>
<th>72th hour</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trophozoites</td>
<td>19.99 ±5.44</td>
<td>00.00</td>
<td>00.00</td>
</tr>
<tr>
<td></td>
<td>Cysts</td>
<td>27.68±4.25</td>
<td>20.38 ±2.71</td>
<td>8.62±0.65</td>
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<tr>
<td>5.0 (mg/ml)</td>
<td>Trophozoites</td>
<td>37.77±3.14</td>
<td>33.33±00</td>
<td>28.88±3.14</td>
</tr>
<tr>
<td></td>
<td>Cysts</td>
<td>40.00±00</td>
<td>37.68±4.25</td>
<td>35.80±5.43</td>
</tr>
<tr>
<td>2.5 (mg/ml)</td>
<td>Trophozoites</td>
<td>48.66±8.37</td>
<td>46.66±00</td>
<td>43.78±8.80</td>
</tr>
<tr>
<td></td>
<td>Cysts</td>
<td>71.10±7.70</td>
<td>66.50±3.52</td>
<td>56.06±3.86</td>
</tr>
<tr>
<td>1.25 (mg/ml)</td>
<td>Trophozoites</td>
<td>64.44±3.13</td>
<td>60.31±9.01</td>
<td>56.98±6.32</td>
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<tr>
<td></td>
<td>Cysts</td>
<td>88.32±2.35</td>
<td>76.92±00</td>
<td>75.59±2.59</td>
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<tr>
<td>Control</td>
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<td>100±00</td>
<td>100±00</td>
<td>100±00</td>
</tr>
</tbody>
</table>

Data are expressed as mean±SD

### Table 2. Effect of *Myrtus communis* aqueous extract on the survival and growth of *Acanthamoeba*

<table>
<thead>
<tr>
<th>Concentrations (mg/ml)</th>
<th>Effect on</th>
<th>24th hour</th>
<th>48th hour</th>
<th>72th hour</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trophozoites</td>
<td>36.01±9.09</td>
<td>33.33±00</td>
<td>00.00</td>
</tr>
<tr>
<td></td>
<td>Cysts</td>
<td>52.22±1.56</td>
<td>46.66±6.66</td>
<td>31.10±3.14</td>
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<tr>
<td>5.0 (mg/ml)</td>
<td>Trophozoites</td>
<td>54.33±7.93</td>
<td>48.66±2.01</td>
<td>42.22±3.13</td>
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<tr>
<td></td>
<td>Cysts</td>
<td>66.50±3.52</td>
<td>64.09±3.62</td>
<td>63.77±7.38</td>
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<tr>
<td>2.5 (mg/ml)</td>
<td>Trophozoites</td>
<td>69.58±2.75</td>
<td>65.13±8.55</td>
<td>57.33±3.35</td>
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<td></td>
<td>Cysts</td>
<td>80.16±4.59</td>
<td>71.10±7.70</td>
<td>69.58±0.09</td>
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<tr>
<td>1.25 (mg/ml)</td>
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<td>74.52±1.69</td>
<td>71.10±7.70</td>
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<td>92.85±7.14</td>
<td>86.66±00</td>
<td>85.34±0.52</td>
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<tr>
<td></td>
<td>Cysts</td>
<td>100±00</td>
<td>100±00</td>
<td>100±00</td>
</tr>
</tbody>
</table>

Data are expressed as mean±SD
Discussion

AK is an infrequent serious complication in contact lens users that can lead to severe visual loss [17] and promotes with corneal abrasions, poor contact lens hygiene, and home-made saline solutions [2]. The disease is efficiently treated by using antibiotics, propamidine, chlorhexidine, and administering eye drops [18, 19]. Despite combination therapy, only half of the patients have been reported to improve after treatment with the therapeutic regimens when the disease is not early diagnosed [20]. Failure to treat Acanthamoeba infections is due to the following: 1) failure to achieve the optimum dose for the treatment of infections, 2) phenotypic switching (transformation of trophozoite to double-walled cyst), 3) unwanted side effects due to non-selective drugs [21]. Myrtus communis with the common name "myrtle" is a medicinal herb the leaves, branches, berries, and fruits of which have been used widely as a traditional medicine for the treatment of various diseases [22]. The leaves of Myrtus communis are useful in cerebral, stomach and liver diseases, pulmonary disorders, deep sinuses, hair fall, inflammation, haemorrhage, and diarrhea [23]. In this context, anti-Acanthamoeba effect of aqueous and ethanolic extracts of Myrtus communis against T4 genotype of Acanthamoeba was evaluated. The results of this study showed that aqueous and ethanolic extracts of Myrtus communis on trophozoites are more effective than cysts. Rigid double-layered wall of cyst causes a difference in the sensitivity to drug in the trophozoites and cysts [24].
Many plant extracts have been reported as potent inhibitors of parasites. In the case of \textit{Acanthamoeba}, different medicinal plants and herbal extracts have been studied as sources of amoebicidal agents. Nayeri Chegeni et al. in 2016 [25] demonstrated that in the presence of 10 mg/ml alcoholic extract in medium culture after 72 hr, 30.51% trophozoites and 91.40% cysts of \textit{Acanthamoeba} were viable. However, in the presence of 10 mg/ml aqueous extract of \textit{Artemisia annua}, 58.25% trophozoites and 81.53% cysts were alive in the medium culture after 72 hr. Furthermore, anti-amoebic effects of \textit{Peganum harmala} ethanolic extract were tested against \textit{Acanthamoeba in vitro} which ultimately with the effect of 10 mg/ml of extract, 0% trophozoites and 21.10% cysts were identified as alive after 72 hr [26]. Dodangeh et al. revealed that in the presence of 10 mg/ml Chloroformic extract of \textit{Trigonella Foenum Graecum}, all trophozoites and cysts were removed after 48 and 72 hr, respectively [27]. Polat et al. reported that methanolic extract of \textit{Thymus sipyleus subsp} was effective on \textit{Acanthamoeba castellanii}. Finally, 32 mg/ml of the methanolic extract eliminated all trophozoites in 3 h. At the same concentration, no viable cysts were recognized in 12 hr [28]. There are many investigations on effectiveness of plant extracts on parasites that show the importance of natural products for treatment of parasitic disease.

**Conclusion**

Our findings demonstrated that \textit{Myrtus communis} inhibits the growth rate of trophozoites and cysts of \textit{Acanthamoeba} with a dose of 10 mg/ml. It is recommended that cell culture be performed and the extract be used for the animal models in order to determine its exact efficacy and side effects on the human eye.

**Conflict of Interest**

There is no conflict to declare.

**Acknowledgments**

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