

\*\*

\*

\*\*\*

---

المبيضات البيض ، المبعثرة ، الشعروية البنفسجية، والمكورات الخبيثة

1 12 5 1

1.5

1.5

:

---

\*

\*\*

\*\*\*

---

## Antimicrobial Activity of Aqueous Zingiber Officinalis Root

Thamer M jasim\*

Ahammed Alkamel \*\*

Ihsan Abdul Aziz\*\*\*

---

### Abstract

The antimicrobial activity of aqueous extract of Zingiber Officinalis were tested for their antifungal activity against the following dermatophytes :Candida albicans, Cladosporium cladosporiosis , Cryptococcus neuphormans, Trichophyton violaceum and against other four bacteria : E. coli, Pseudomonas aeruginosa. Staphylococcus aureus, Streptococcus pyogenes. The extract used in traditional medicine for the treatment of nausea was tested in vitro through the Agar Disk Diffusion Method. The minimum inhibitory concentration (MIC) of extracts determined by the Agar dilution method ranged from 1.5 to 12.5 mcg. The most sensitive microorganisms to the extract were Candida albicans with MIC 1.5 and E coli with MIC 1.5 mcg.

**Key words:** Antimicrobial, Zingiber Officinalis

---

\* Dept. of Microbiology-Faculty of Pharmacy-University of Tekrit-Iraq

\*\* Dept. of Microbiology -Faculty of Pharmacy-University of Tekrit-Iraq

\*\*\* Dept. of Potany (Classification)-Faculty of Pharmacy-University of Tekrit-Iraq

## Introduction

Herbal medicine has a long history in the treatment of several kinds of diseases (1). This development has also led to focusing research activities toward the chemical and microbiological loads of herbal medicinal products (2). The Aerial parts of *Zingiber Officinalis* plant (Ginger) are used in traditional medicine in Iraq for the treatment of rheumatoid, arthritis, and stomach ulcer. (3,4,5,6). The aim of the present study was to evaluate antimicrobial activity of ginger plant against some bacterial and fungal pathogens.

## Materials and methods

Plant material : Fresh *Zingiber* were purchased from a local market in Tikrit

Extraction Rhizomes of ginger were cut into small pieces and dried in the Tray – Dryer over at 60. They were pulverized separately in a hammer mill and passed at 60-mesh sieve (7).

Fungal and bacterial isolates :

Five fungal and four bacterial isolates were tested, all the fungal isolates used in this study were isolated from clinical case which included *Candida albicans*, *Cladosporium cladosporioides*, *Cryptococcus neoformans*, *Trichophyton mentagrophytes* and *T. violaceum*. The other four tested bacteria were *Escherichia coli*, *Pseudomonas aeruginosa*, *Staphylococcus aureus*, and *Streptococcus pyogenes*.

Standard cultures and biochemical tests were used to identify all fungal and bacterial isolates (8,9,10).

## In vitro testing of the biological activity of the aqueous extract:

Study of the effect of aqueous extract on growth of fungi;

1- Preparation of fungal inoculum:

Fungal inoculum were prepared following the method of **MEG innis** (9). Normal saline solution was prepared by dissolving 0.89 of NaCl in 100ml of distilled water and distributed in test tube (5ml in each one) then sterilized in autoclave at 121 c and 15 (lib/inch) for 15 min. then left to cool to 25 c

2- The fungal isolates were reactivated by growing them on SDA medium at 25 c. fungal growth of 2-5 days old for yeasts and 2 weeks old for dermatophytes were taken by loop and transferred to test tubes containing sterile normal saline and shaken for short time.

3-Fungal inoculum of 10 *Candida* /ml was prepared using haemocytometer and measuring the optical density was done by using a

---

spectrophotometer (10) at 540 nm. Test tubes were labeled and stored in a cool place at 4 °C until use.

3- Preparation of agar plate to test the different concentrations of plant extract: Agar well diffusion method was used (11) by pouring 20 ml of SDA in a Petri dish (9 cm diameter). The medium was inoculated with 0.1 ml *Candida* /ml by spreading, the plates were left for 30 min then four wells (8mm diameter) were done by cork paper, 100 µl of plant extract was added to each well by micropipette. The plates were incubated at 25 °C. The results were read after 2-5 days of incubation by measuring the diameter of inhibition zone.

For studying antimicrobial activity of aqueous *Zingiber officinalis* root extract different dilutions of extract were used. The extract and standard antifungal were dissolved in dimethyl sulfoxide (DMSO) 100% (biologically inert substances and DMSO was also used as negative control).

Determinations of the minimal inhibitory concentrations were determined following the method of (12). By mixing 2 ml of each concentration (2, 1, 0.5, 0.25, 0.125, 0.062, 0.031, 0.015, 0.007, 0.003 mg/ml) with 18 ml of cooled SDA media then pouring in Petri dish. One Petri dish without extract was used to represent control. Fungal inoculum was prepared (10 *Candida*/ml) 0.1 ml of the inoculum was cultured as small spot on SDA as mentioned previously. The plates were incubated at 25 °C and the results were recorded.

Study of the effect of *Zingiber officinalis* root extract on the growth of bacteria:

The agar well diffusion method was used by pouring 20 ml of Mueller Hinton agar for each Petri dish. The medium was inoculated with 0.1 ml of 0.1 ml optical density of bacteria suspension. The procedure is the same that mentioned except that gentamycin (10 mg/disk, Oxoid) was used as positive control.

Determination of minimal inhibitory concentration of plant extract on bacterial growth

2 ml of each plant extract was used (2, 1, 0.5, 0.125, 0.062, 0.031, 0.015, 0.007, 0.003 mg/ml) with 18 ml of MHA. The mixture poured in Petri dish to obtain the final concentration. One Petri dish without extract added to represent control. Bacterial inoculum was prepared; 0.1 ml of the inoculum was cultured as small spot on MHA medium mixing with plant extract.

The plates incubated at 37 °C for 24 hrs and the results were recorded (12)

**Results:**

Table 1 summarize the colony growth of dermatophytes on subarads agar with and without the plant extract and similar medium containing nystatin . As is shown ,the dried aqueous extract of *Zingiber officinalis* were effective in inhibiting the growth of the fungi . The effect of nystatin and isoconazole nature on *T. mentagrophytes* was less than that on the others four fungi i.e. *Candida albicans*, *Cladosporium. Cladosporides*, *Cryptococcus neophormans*. *T. violaceum*. It is clear from table 1 that the tested fungi varied in their effect .

Table 2 shows MIC of the aqueous extract of *Zingiber officinal* roots against fungal isolate .The MIC ranges from 1.5 to 3.1. Table 3 shows the effects of *Zingiber officinalis* root against the growth of bacterial isolates.

Table 4 shows the MIC of the aqueous extract of *Zingiber officinalis* root against bacteria isolates ,the MIC ranges from 1.5 to 6.2.

**Discussion:**

Extract of *Z. officinalis* have been reported to posses numbers of biological activities (15,16) and have been used extensively in antinausea clinical trials (17,18) including trials conducted in pregnant women (19).

Dermatophytes have been studies in Iraq (20,21) and there are previous publication about the effects of some plants extract on such fungi and some bacteria (22,23). Our results support this direction as the presented results indicates that different plant aqueous extracts have different inhibitory effect on different species of fungi . For clinical purposes, we need to know exactly the causing fungal sepsis otherwise we should use a mixture of plant extract for the treatment.

This variation in antimicrobial effects also indicates presence of different effective compounds in the test plants, which could be extracted or purified from these plants (24). These results agree with Ficher (25,26) who reported that Ginger extract standardized on the basis of the identified compounds could be considered as antifungal agents in practical therapy . The results have encouraged us to undertake further studies regarding the isolation and characterization of the active compounds present in the active extract..

---

## References

- 1- Sankaranaruyana jagashri, jolly CL. phytochemical, antibacterial and pharmacological investigations on momordica charatia Linn Lmblica officinali Gaer tn and curuma linn Indian.3.pharma.sci (1) 6-13-1993.
- 2- Czech Erich, kneife wolfgang, koop Brigitte. Microbiological status of commercially available medicinal herbal drugs as screening study. Plant.med.67,263-269.2001.
- 3- Altman RD,marcussenck. Effects of aging extract on knee pain in patients osteoarthritis , Arthritis,rhem; 44(11);2531-2538.2001
- 4- Oke-ernst, pittler MH. Efficacy of ginger for nausea and vomiting :synergistic re randomized clinical trials .Br . j. Anaesth , 84(3): 367-371.2000.
- 5- MarcusDM, suarez- Almazorme. Is there a role for ginger in the treatment osteoarthritis. RheyM 44(11)2461-2462.2001.
- 6- Meyerk, schwrtzj, crater d.et al . Zingiber officinali used to prevernt associated nausea. Dermatol nurs. ; 7(4): 242 –244., 1995.
- 7- Cowan, S.T., and stell, K. J. Manual for indentification of medical bacteria. 2 Cambirdge university press. Cambirdge.London.
- 8- Mcginnis, M,R. Laboratory handbook of medical mycology. Academic press . NewYourk.U.S.A. 1980.
- 9- Coll, J; Fraser, A. Marmion, B. and Simon, A.. Makie and Mccartney. Practical medical microbiology. 14<sup>th</sup> edn. Churechill liverstone. Neyyork,U.S.A 1996.
- 10- Midgley, G; clayton, Y.M and Haty, R.J Medical mycology. Mosby – wolfe publishing. London.1997.
- 11- Navarro, V. Villarreal, M.L; Rojas, and Lozoya, Antimicrobial evaluation of some plant used in Mexico traditional medicine for the treatment of infectious disease. J ethnopharmacol. , 53:143-147.1996.
- 12- Noostro, A., Germano, M. P., Dangelo, V; Merino, A and cannatellie, M. A.Methods and Bioantography for evaluation of medical plant antimicrobial. App. Microbio. 30(5): 379-384. 2000.
- 13- National committee for clinical laboratory standards 1997 . methods for dilution antimicrobial susceptibility test for bacteria that grow aerarobically . approved standard M7,A4 national committee for clinical lab. Standards wayne.P.A.USA.
- 14- Olokej ,koalowle do, erhune wo. antimicrobial effectiveness of six paradocol a structure activity relationship study, j Ethnopharmacol 22:109-113.1989.
- 15- Habash M Amura M Mckreen Mm. et al. screening of Zingiber ineceaea xtracts for antimicrobial and antioxidant activities. J. Ethnopharmacol 72: 403- 410. 2000 .
- 16- Mowrey Db, Clayson DE. Motionsickness, ginger and pschophysics, Lancet. 20,525-527 . 1982.

- 17- Bone ME, Wilinsondi J, Young JR, Mcneilj, Charltons jinger root anew antiemetic, the effect of ginger root on postoperative nausea and vomiting after magour gynecological surgery . *Anasthesia* 45: 669-671. 1990.
- 18- Fisher Rasmussenw, K jaesk, Dahlc, Aspingu. Ginger treatment of hypermesis gravidramu. *Eur. Jobstetric Gynecological report Biol.* 38:19-24. 1990.
- 19- Al-Yazachi, Moyad and Al- Bassam, Al fisher. Dermatomycosis in Iraq. *J Fac. Med Baghdad* vol. 32(4): 431-437. 1989.
- 20- Gumar, Abdu-Whab, S and Guirgess. Y survey of aetiological agents of fungal hnfections of skin. *J Fac Med Baghdad* 20 (1): 19- 29. 1978.
- 21- Ghania HM, M Mand Ayub, MT crude extract from Lawwsonia inermis with antidermatophytes activity *Iraq Medical J* vol 35(1) :39-43. 1987.
- 22- Jwajj, H.M.S and Al Zohuri, A.M pharmacological phytochemical and antimicrobial studies on *Mytrus comminis* *J. Bio. Sci res* 19(1) 1988.
- 23- Dardage ihans, A Janabi A. H inhibition of colony of some dermatophytes by some plant extract. *Almustansiria. J Sc* vol 11 10. 2000.
- 24- Ap Martins , Lsalagueriro, J conclaves, Apcunha Rvilass canigural and Mazzoni, F Tomi. Essential oil composition and antimicrobial activity of three Zingibracea from some eprince *planta medica* 6(6) 580-584. 2001.
- 25- Ficker C, Smith MI Akpaganak, GbenssorM, Zhang J, Durast. Biossay- giaded isolation and identification of antifungal compounds of ginger *Assabguid photoreseaech* 17(8) 897-902. 2003.
- 26- Gail B Mehaady, Susanl. Pendland, Ginas.Yun.Zhi-zhen Lu and Adina stola. Ginger(*Zingiber Officinalis* Rosoce) and the Gingerols inhibit the growth of Ca strain *Helicobacter pylori* anticancer *Research* 23, 3699-3702. 2003.

Table1 the effect of aqueous extract of *Zingiber officinale* roots against the growth of fungal isolates

Mean inhibitory diameter(mm)					
Concentration Mg/ml	<i>Candida albicans</i>	<i>Eladospoium cladosporoides</i>	<i>Cryptococcus neoformans</i>	<i>Trichophyton mentagraphytes</i>	<i>Trichophyton violacium</i>
128	16.0	8.3+-1.0	12.0+-1.0	13.0+-0.5	11.3+-0.5
64	14.3	8.0+-1.0	11.6+-1.0	12.6+-0.5	11.0+-1.1
32	13.0	7.6+-0.5	11.0+-0.5	12.0+-1.1	10.6+-0.5
16	12.3	7.3+-0.5	10.6+-0.5	11.6+-1.1	10.3 +-1.0
8	12.0	6.6+-1.1	10.3+-0.5	11.3+-0.5	10.0+-0.5
4	11.0	6.3+-0.5	10.0+-1.1	11.0+-0.5	9.6+-0.5
2	10.6	6.0+-1.0	9.6+-0.5	10.6+-1.0	9.0+-1.0
1	10.3	5.6+-0.5	9.3+-0.5	10.3+-1.0	8.0+-0.5
0.5	9.6	5.3+-1.0	9.0+-1.0	10.0+-0.5	7.6+-1.1
0.25	8.6	5.0+-1.0	8.6+-1.0	9.0+-0.5	7.3+-0.5
Isoconazole Nitrate 0.25mg/ml	10.0	14.0+-0.5	10.0+-1.0	15.0+-1.0	9.0+-0.5
Nystafin 0.25mg/ml	11.0	0.0+-0.0	9.0+-0.5	12.0+-0.5	9.3+-1.0
Negative Control DMSO 100%	0.0	0.0	0.0	0.0	0.0

Table 2 MIC of the aqueous extract of *Zingiber officinal* roots against fungal isolate

Fungal species	MIC(mg/ml)for aqueous Extract of Ziniber officinal roots
<i>Candida albicans</i>	1.5
<i>Cladosporium cladosporides</i>	12.5
<i>Cryptococcus neophormans</i>	6.2
<i>Trichophyton mentagraphytes</i>	6.2
<i>Trichophyton violacium</i>	3.1

Table 4 MIC of the aqueous extract of *Zingiber officinal* roots against bacterial isolates

Bacterial species	MIC(mg/ml)for aqueous Extract of Ziniber officinal roots
<i>Echerichia coli</i>	1.5
<i>Pseudomonas aeruginosa</i>	6.2
<i>Staphylococcus aureus</i>	3.1
<i>Streptococcus pyogenes</i>	6.2



Table 3 the effect of aqueous extract of *Zingiber officinal* roots against the growth of bacterial isolates

Concentration Mg/ml	<i>Echerichia coli</i>	<i>Pseudomonas aeruginosa</i>	<i>Staphylococcus aureus</i>	<i>Streptococcus pyogenes</i>
128	10.0+-0.5	9.0+-1.0	10.3+-0.5	9.0+-0.5
64	9.6+-1.0	8.6+-1.0	10.0+-0.5	8.6+-0.5
32	9.0+-1.0	8.3+-1.1	9.3+-0.5	8.3+-1.0
16	8.6+-0.5	8.0+-0.5	9.0+-1.1	8.0+-1.0
8	8.3+-0.5	7.6+-0.5	8.6+-1.1	7.6+-0.5
4	8.0+-1.1	7.3+-0.5	8.3+-1.0	7.0+-1.1
2	7.6+-1.0	7.0+-1.0	8.0+-0.5	6.6+-1.1
1	7.3+-0.5	6.6+-0.5	7.3+-0.5	6.3+-0.5
0.5	6.6+-0.5	6.3+-1.1	7.0+-1.0	6.0+-0.5
0.25	6.3+-1.0	6.0+-0.5	6.6+-1.0	5.6+-1.1
Genfamyein 10 mg/disc	8.0+-0.5	8.3+-1.0	9.0+-0.5	7.0+-0.5
Negative Control DMSO 100%	0.0+-0.0	0.0+-0.0	0.0+-0.0	0.0+-0.0

.2005/10/31:

.2005/12/21 :