Antibacterial properties of leaves of *Pongamia pinnata* Linn. (Fabaceae) against enteric bacterial pathogens

S.B. Dahikar¹,²*, S.R. Arote¹, D.H. Tambekar², P.G. Yeole¹, S.A. Bhutada²

¹Department of Pharmaceutical Microbiology, Sanjivani College of Pharmaceutical Education and Research, Kopargaon-423603, (INDIA)

²Post Graduate Department of Microbiology, Sant Gadge Baba Amravati University, Amravati-444602, (INDIA)

Tel: +912423223362; Fax: +912423222682
E-mail: sbdahikar10@gmail

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**ABSTRACT**

Nature has been a source of medicinal agents for thousands of years and an impressive number of modern drugs have been isolated from natural sources, many based on their use in traditional medicine. Petroleum ether extract, chloroform extract, ethyl acetate extract and methanol extracts of leaves of *Pongamia pinnata* Linn. were prepared and antibacterial activity were studied by disc diffusion method against certain enteric bacterial pathogens such as *Escherichia coli*, *Staphylococcus aureus*, *Enterobacter aerogenes*, *Pseudomonas aeruginosa*, *Salmonella typhimurium*, *Salmonella typhi*, *Staphylococcus epidermidis* and *Proteus vulgaris*. The Methanol extracts had wide range of antibacterial activity on these bacterial pathogens than the petroleum ether extract. Ethyl acetate extract were slightly higher antibacterial activity against bacterial pathogens than chloroform extract. Antibacterial activity of various extract of leaves of *pongamia pinnata* was carried in attempt to support the use by medicinal practitioner for the treatment of enteric infection. © 2009 Trade Science Inc. - INDIA

**KEYWORDS**

Antibacterial activity; *Pongamia pinnata*; Enteric bacterial pathogens.

**INTRODUCTION**

India is endowed with a rich wealth of medicinal plants. Herbs have always been principal forms of medicine in India and presently they are becoming popular throughout developing countries, as people shrink to stay healthy in face of chronic stress and pollution and to treat illness with medicines that works in concert with body’s own defense. India recognizes more than 2500 plant species which have medicinal values, however large flora waiting for investigation for their medicinal properties[8].

*Pongamia pinnata* (L.), locally known as Karanja, is a mangrove plant belonging to the family Fabaceae. It is a medium size glabrous tree with a short bole and attaining an eight of round 18 m and is habitat in the littoral regions of South East Asia, Australia and Fiji[5,10]. Traditionally, its bark is used in pile; leaves are effective as medicated bath and rheumatic pains; seeds are used in hypertension, bronchitis, whooping cough, skin diseases and rheumatic arthritis[2,6,17]. In primitive areas of Malaysia and India root extracts are applied to ab-
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scesses; other plant parts, especially crushed seeds and leaves are regarded as having antiseptic properties[4].

In India, seeds were used for skin ailments. Today the oil is used as a liniment for rheumatism; their juice is used for colds, coughs, diarrhea, dyspepsia, flatulence, gonorrhea, and leprosy. Roots are used for cleaning gums, teeth, and ulcers also effective in fistulous sores and gonorrhea[14,7]. Ayurvedic medicine described the root and bark as alexipharmic, anthelmintic, and useful in abdominal enlargement, diseases of the eye, skin, and vagina, itch, piles, splenomegaly, tumors, ulcers, and wounds; the leaves, anthelmintic, digestive, and laxative, for inflammations, piles and wounds; the fruit and seed for keratitis, piles, urinary discharges, and diseases of the brain, eye, head, and skin[3]. Unani use the ash to strengthen the teeth, the seed, carminative and depurative, for chest complaints, chronic fevers, earache, hydrocele, and lumbago[1,18].

Enteric or diarrheal infections are major public health problems in developing countries and contribute to the death of 3.3 to 6.0 million children annually. Enteric bacteria comprised of Salmonella spp., Shigella spp., Proteus spp., Klebsiella spp., E. coli, Pseudomonas spp., Vibrio cholerae and Staphylococcus aureus which are major etiologic agents of sporadic and epidemic diarrhea both in children and adults. WHO[19,20], reported that 80% populations rely mainly on traditional therapies, involving the use of plant extracts or their active constituents[16].

Today there is wide spread Interest in drugs derived from plants for their potential antibacterial activity. Efforts are directed to identify plant product used in the treatment of various disease, which have broad spectrum antibacterial properties[12,13]. Therefore the study revealed that the leaves of Pongamia pinnata (L.), were used in various metabolic disorder, but far their antibacterial properties were not demonstrated. Hence attempt was made to find out antibacterial properties of leaves of Pongamia pinnata (L.), against enteric bacterial pathogens.

MATERIALS AND METHODS

Plant materials

Fresh plant or plant parts of Pongamia pinnata were collected in September 2007 from local region of Ahmednagar District in India. The leaves were identified by Mr. P.S.N. Rao, Join Director, Botanical survey of India, Koregaon road, Pune, by comparing morphological features (leaf arrangement, flower/in florescence arrangement, fruit and seed morphology etc.). The herbarium of the plant specimen has been deposited at B.S.I. Pune, the voucher specimen No. being BRD1. Fresh plant material were washed under running tap water, air dried for two week and then homogenized to fine powder and stored in airtight bottles.

Preparation of extracts

1.5 kg of the plant material in each batch was exhaustively extracted by soxhlet extraction method using petroleum ether, chloroform, ethyl acetate and methanol. The solvent used in each batch was recovered under pressure until dry extracts were obtained and then labeled and stored separately at 4°C in amber colored airtight bottles.

Bacterial cultures

The standard pathogenic bacterial cultures were procured from IMTECH, Chandigarh, India and used in the present study (TABLE 1). The bacteria rejuvenated in Mueller-Hinton broth (Hi-media laboratories, Mumbai, India) at 37°C for 18 h and then stocked at 4°C in Mueller-Hinton Agar. Subcultures were prepared from the stock for bioassay. A loopful of culture was inoculated in 10 mL of sterile nutrient broth and incubated at 370°C for 3 h. Turbidity of the culture was standardized to 10^5 CFU with the help of SPC and turbidometer.

Antibacterial activity using disc diffusion method

The modified paper disc diffusion[9] was employed to determine the antibacterial activity of solvent extract of leaves of Pongamia pinnata (L.). For antibacterial TABLE 1: Bacterial cultures used in study (IMTECH, Chandigarh, India)

<table>
<thead>
<tr>
<th>Bacterial pathogens</th>
<th>MTCC number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proteus vulgaris</td>
<td>426</td>
</tr>
<tr>
<td>Staphylococcus epidermidis</td>
<td>435</td>
</tr>
<tr>
<td>Staphylococcus aureus</td>
<td>96</td>
</tr>
<tr>
<td>Escherichia coli</td>
<td>739</td>
</tr>
<tr>
<td>Pseudomonas aeruginosa</td>
<td>424</td>
</tr>
<tr>
<td>Salmonella typhi</td>
<td>733</td>
</tr>
<tr>
<td>Enterobacter aerogenes</td>
<td>111</td>
</tr>
<tr>
<td>Salmonella typhimurium</td>
<td>98</td>
</tr>
</tbody>
</table>
properties, 0.1 ml bacterial suspension of 10^5 CFU ml^-1 was uniformly spread on Nutrient Agar plate to form lawn cultures. The petroleum ether, chloroform, ethyl acetate and methanol extracts were prepared in their respective solvents in such a manner that ultimate amount (in dry form) in each disc came to 10mg, 8mg, 6mg, 4mg and 2mg. The blotting paper discs (10mm diameter) were soaked in various diluted extract, dried in oven at 60°C to remove excess of solvent and tested for their antibacterial activity against bacterial pathogens by disc diffusion technique. After incubation of 24 h at 37°C, zone of inhibition of growth was measured in mm. Ampicillin 10mcg (Hi-Media disc) was used as positive control while discs soaked in various organsolvents and dried were placed on lawns as negative control.

**RESULTS AND DISCUSSION**

Herbal medicine represents one of the most important fields of traditional medicine all over the world. To promote the proper use of herbal medicine and to determine their potential as sources for new drugs, it is essential to study medicinal plants, which have folklore reputation in a more intensified way.

According to antibacterial profile shown (TABLE 2). The petroleum ether extract exhibited maximum antibacterial activity against Proteus vulgaris, Staphylococcus epidermidis. Staphylococcus aureus and, Enterobacter aerogenes, but mild inhibitory effect on Pseudomonas aeruginosa, Escherichia coli, Salmonella typhimurium and no inhibitory effect on Salmonella typhi.

Chloroform extract inhibited the growth of Staphylococcus aureus, Proteus vulgaris, Staphylococcus epidermidis and Salmonella typhimurium but mild or negligible effect on Escherichia coli, Pseudomonas aeruginosa, and Salmonella typhi.

Ethyl acetate extract showed maximum inhibitory effect on Staphylococcus aureus, Proteus vulgaris, Salmonella typhimurium, but no effect on Salmonella typhi.

Methanol extract shows showed maximum inhibitory effect on Staphylococcus aureus Proteus vulgaris, Staphylococcus epidermidis, Escherichia coli, Pseudomonas aeruginosa, Enterobacter aerogenes, Salmonella typhimurium but mild or negligible inhibitory effect on Salmonella typhi.

**CONCLUSION**

The result of the antibacterial assay showed promising evidence for the antibacterial effect of leaves of *Pongamia pinnata*. Form the above evidence, it is clear that plant extracts have great potential as antibacterial compounds against enteric pathogens and that they can be used in the treatment of enteric infectious. This plant can be used to discover bioactive natural products that may serve as leads for the development of new pharmaceuticals that address hither to unmet therapeutic needs. It is hoped that this study would lead to the establishment of some compounds that could be used to formulate new and more potent antimicrobial drugs of natural origin.
REFERENCES