

# New method to separation and purification of two bioactive compounds from powder of turmeric plant by RP-HPLC technique

Dhuha Jumah	1	Albasrah university College of Science Department				
Dakhal		of pathological analyzes/ jmtdhy93@gmail.com				
Ramadan						
Huda Zaid Ibraheem		Samarra University College of Applied Science				
Moha	imed	Department of pathological analysis/				
		h.zaid7700@gmail.com				
Kawthar Mut		Sumer University College of Science Department of pathological				
Kha		analyzes / Kwthrmtshr8@gmail.com				
Mariam Mana	f Qasim Jaber	University of Basra, College of Science, Department				
		of Pathological Analysis/				
		mariammunaf6@gmail.com				
Ahmed Abbas Hilal Hazza		University of kufa College of science Department of pathological				
		analyzes/ aahmedabass659@gmail.com				
Ture	. compounde wo	re separated successfully. The used method was suitable				
for a		rified compound for each one . There is the ability to get				
		purified compound from alcoholic extract for curcumin				
g for g mor	e than one night					
AE						
Keyw	ords	turmericplant. RP-HPLC, separation, purification				
itcy w	UI USI					

## Introduction

#### Turmeric

Turmeric is a product of Curcuma longa, a rhizomatous herbaceous perennial plant belonging to the ginger family Zingiberoside, which is native to tropical South Asia. Asmany as 133 species of Curcuma have been identified worldwide . Most of them havecommon local names and are used for various medicinal formulations. The turmericplant needs temperatures between 20°C and 30°C and a considerable amount of annual rainfall to thrive. Individual plants grow to a height of 1 m, and have long, oblong leaves. Plants are gathered annually for their rhizomes, and are reseeded fromsome of those rhizomes in the following season. The rhizome, from which the turmeric is derived, is tuberous, with a rough and segmented Skin The rhizomes mature beneath the foliage in the ground. They are yellowish brown with a dull orangeinterior. The main rhizome is pointed or tapered at the distal end and measures 2.5–

7.0 cm (1–3 inches) in length and 2.5 cm (1 inch) in diameter, with smaller tubers branching off. When the turmeric rhizome is dried, it can be ground to a yellow powder with a bitter, slightly acrid, yet sweet, taste.

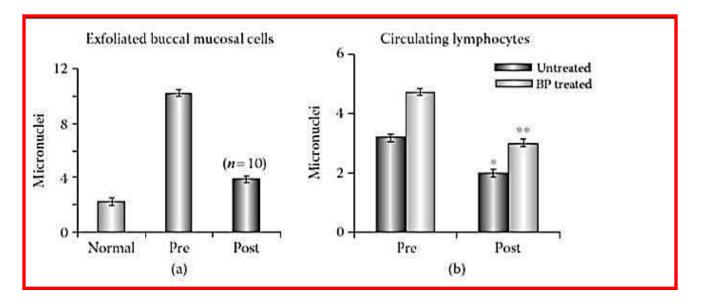
## **Clinical Studies Using Turmeric**

Turmeric has been tested against various diseases in humans (Table 1-1). In one study, the antimutagenic effects of turmeric were examined in 16 chronic smokers (Polasa etal. 1992). Turmeric was given in doses of 1.5 g/day for 30 days, and this was found to significantly reduce the urinary excretion of mutagens in these smokers. In six nonsmokers, on the other hand, no change in urinary excretion of mutagens was noted. These results suggest that dietary turmeric is an effective antimutagen and maybe useful in chemoprevention.

In another study, the effect of turmeric was examined on patients with irritable bowel syndrome. When 1 or 2 tablets of a standardized turmeric extract were given daily for 8 weeks, the prevalence of irritable bowel syndrome was significantlydecreased, as was the abdominal pain/discomfort score (Bundy et al. 2004). Alcoholic extract of turmeric offered protection against BaP-induced increase in micronuclei incirculating lymphocytes of healthy individuals (Hastak et al. 1997). In a subsequent study, the authors treated patients suffering from oral submucous fibrosis (OSF) with turmeric extract (3 g/day) for 3 months. The number of micronuclei from oral exfoliated cells of OSF patients before and after treatment with turmeric extract wasrecorded. They found that the number of micronuclei in oral exfoliated cells decreased substantially and was comparable with that of normal, healthy individuals as in Figure 1-1.

Diseases	Dose	Response
Asthma	NC	Relief from bronchial asthma and cough
Cancer	Topical application	Reduction in itching, pain, and size in external cancerous lesions
Mutation	1500 g/day × 30 days	Reduction in urinary excretion of mutagens in smokers
Micronuclei	600 mg/day	Inhibition in micronuclei formation in oral mucosal cells and lymphocytes
Abdominal pain	TRE	Reduction of dumpy and colicky pain
Ulcer	1500 mg	Reduction of peptic ulcer
IBS	144 mg/daily × 8 weeks	Reduction of abdominal pain
Infection	Topical application	Umbilical cord care after cutting
Breathing	500 mg in diet	Activation of hydrogen-producing bacterial flora in the colon, increase in breath hydrogen

## Table 1-1: Human Studies with turmeric



**Figure 1-1:** the number of micronuclei in oral exfoliated cells decreased substantiallyand was comparable with that of normal, healthy individuals

Inhibition of micronuclei formation in oral submucous fibrosis (OSF) patients: (a) Incidence of micronuclei in exfoliated buccal mucosal cells of OSF patients before and after treatment with turmeric and of normal healthy individuals. (b) Incidence of micronuclei in circulating lymphocytes of OSF patients before and after turmeric treatment. (n = 10). The symbol \* indicates statistical significance when compared with untreated pretreatment group (p < .001). The symbol \*\* indicates statistical significance when compared with benzo[a]pyrene-treated pretreatment group (p <

.001). (Redrawn from Hastak, K., N. Lubri, S. D. Jakhi et al. 1997. Cancer Lett 116:265-

9. With permission.)

#### Separation of materials

Recent research in separations has been directed towards extending the molecular weight range for these high-resolution methods, while at the same time improving reproducibility and convenience of operation. This overview summarizes some of

these developments and provides insights into the inherent resolution, range, speed, and limitations of these methods.

Important advances in HPLC (Figure 1-2)include the development of better siliceous supports, as well as fresh approaches for producing both covalently-bondedand crosslinked, mechanically-immobilized organic stationary phases that provide a new level of reproducibility and stability for separations. Very wide-pore packings nowpermit separations of species with molecular weights up to about 107 daltons, and columns of particles in the 1–2  $\mu$ m range allow rapid separations of macromolecules.

Required on a routine basis, and it is also an important industrially applied Separation process for the isolation and purification of natural compounds,

Pharmaceuticals, and other valuable products. However, for achiev-Ing higher purity and recovery yield, high resolution and selectivity are re-Quired. The high resolution in preparative HPLC is highly dependent on Column length. The elongation of columnlength is a simple way to get a Good resolution. However, this will lead to an increase in pressure in the Systems and amount of stationary phase in columns. In addition, changing The length of columns in an industrial place is not available, because of pro-Ducing them in specific dimensions. So, the increase of the columns length Is not economically desirable. The necessity of applying an operating Method that can overcome these limitations while obtaining higher resolu-Tion is attractive. RecyclingHPLC is one way of realizing this. In this technique, the Target compounds return to the column after being in the detector several Times to achieve a higher purification. The benefits of these techniques in-Clude increase of column resolution, higher product purity, and recovery Yield. Also, saving on operating costs may be achieved bynecessity to no Fresh solvents in the recycling periods .

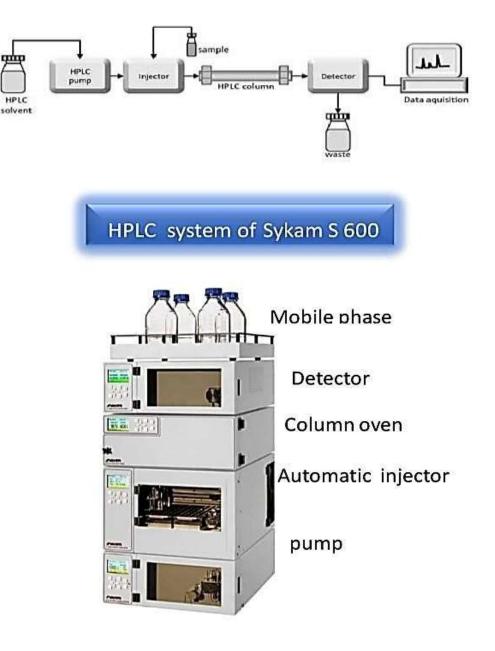


Figure 1-2: Principle and parts of HPLC machine

#### The result and discussion

Figure 2.1 represents HPLC chromatogram of crude curcumin sample (methanol extracted). There are two significant peaks, the fist is single, high intensity and sharppeak at the retention time 4.4 min. the second is single, sharp but less intensity as a comparison to the first one, the retention time of this peak is 7.2 min. the third low intensity peak at the retention time less than 10 min could be one of the compoundsof the crude curcumin sample or contamination in one of the HPLC parts (injector, column, solvents, ....). This result is indicator for easy separation the two compoundsas there is no overlap between them

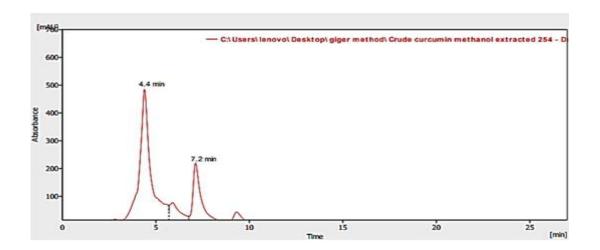
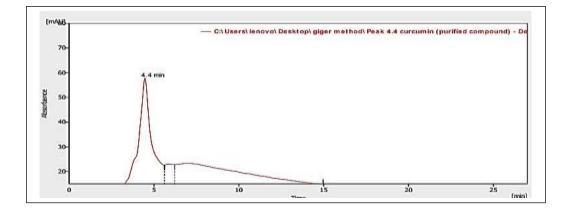


Figure 2-1: HPLC chromatogram of crude curcumin sample (methanol extracted)

Figure 2.2 shows HPLC chromatogram of purified compound at the retention time 4.4 min. The single, sharp and high intensity peak which is consistent with the peak in the figure 2.1 for the crude curcumin sample gives good signal that the used method to separate and purify of this compound was successful. In addition to that, the peak was not broad so this peak represents one compound. Moreover, the retention time of this peak is 4.4 min so it will not be loss of the solvents during collection of the peak as the retention time is not far away.



**Figure 2-2**: HPLC chromatogram of purified compound at theretention time 4.4 min

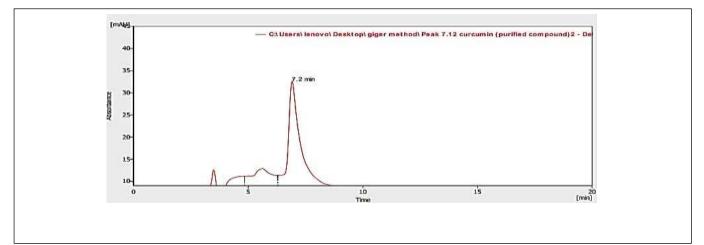


Figure 2.3 clarifies HPLC chromatogram of purified compound at the retention time 7.2 min. the used method to separate of this compound was successful as in thisFigure (2.3), there is single, sharp, high intensity and narrow peak (the starting to ending of the peak is less than one min). according to this result, the process of the collection and purification of this compound is by hand. The other very low intensity peaks at the retention time less than the target peak are could be contaminations or some of the compounds of the crude curcumin sample were separated but the used method was not suitable for this compounds.

## **3-Experimental**

## **Analytical methods RP-HPLC**

HPLC analysis was performed by a the sykam HPLC S 600,GermanyRP-C18E, 4.6  $\times$  250mm, a 5µL coulum (Germany), injection 10 uL and a flow rate of 0.7 ml min-1. The detector wavelength was set at 220 nm. The column oven temperature was set at 30

°C. Unless stated otherwise, solvent A was 5%  $H_2O$  with 95% acetonitrile and add formic acid 0.1% add to the solvents.

#### Procedure

1- 250 mg of curcumin powder was grind.

**2-** 10 mg of curcumin powder was weight and dissolved with methanol.3- The solution was mixed well by the vortex.

4- The sample was sonicated by sonicater for 3 minutes then mixed again by vortex.

**5-** The sample was centrifuged for 3 minutes then 1 ml of the clear solution wasmoved from eppendrof vial to HPLC vial to be ready for run for HPLC.

**6-** From result of HPLC 2 purified soluble compounds was collected each alone withcertain volume.

7- The compound was put in the freezer for 24 hour then collected with the freezdryer.

8-1 mg of the purified compound was weight and dissolved by methanol and checkedby HPLC.

	Gradient Table						
	Time (min.)	A (%)	B (%)	C (%)	D (%)	Flow (ml/min)	
1	Initial	5.0	95.0	0.0	0.0	0.700	
2	15.00	20.0	80.0	0.0	0.0	0.700	

## References

1-<u>https://www.ncbi.nlm.nih.gov/books/NBK92752/</u> Herbal Medicine: Biomolecularand Clinical Aspects. 2nd edition.

**2.** Jain J. P, Bhatnagar L. S, Parsai M. R. Clinical trials of haridra (Curcuma longa) in cases of tamak swasa and kasa. Jour Res Ind Med Yoga & Homeop. 1979;14:110–20.

**3.** Kuttan R, Sudheeran P. C, Joseph C. D. Turmeric and curcumin as topical agents incancer therapy. Tumori. 1987;73:29–31

**4.** Polasa K, Raghuram T. C, Krishna T. P, Krishnaswamy K. Effect of turmeric onurinary mutagens in smokers. Mutagenesis. 1992;7:107–99

**5.** Hastak K, Lubri N, Jakhi S. D. Et al. Effect of turmeric oil and turmeric oleoresin on cytogenetic damage in patients suffering from oral submucous fibrosis. Cancer Lett. 1997;116:265–9.

**6.** Niederau C, Göpfert E. The effect of chelidonium and turmeric root extract on upper abdominal pain due to functional disorders of the biliary system: Results from a placebocontrolled double-blind study. Med Klin. 1999;94:425–30. (Munich)

**7.** Prucksunand C, Indrasukhsri B, Leethochawalit M, Hungspreugs K. Phase II clinicaltrial on effect of the long turmeric (Curcuma longa Linn.) on healing of peptic ulcer. Southeast Asian J Trop Med Public Health. 2001;32:208–15

8. Bundy R, Walker A. F, Middleton R. W, Booth J. Turmeric extract may improve

irritable bowel syndromesymptomology in otherwise healthy adults: A pilot study. J Altern Complement Med. 2004;10:1015–8.

**9.** Alam M. A, Ali N. A, Sultana N. Et al. Newborn umbilical cord and skin care inSylhet District, Bangladesh: Implications for the promotion of umbilical cord

cleansing with topical chlorhexidine. J Perinatol. 2008;28:S61–8.

**10.** Shimouchi A, Nose K, Takaoka M, Hayashi H, Kondo T. Effect of dietary turmericon breath hydrogen. Dig Dis Sci. 2008;54(8):1725–9.

**11.** Kirkland, J.J., McCormick, R.M. Liquid phase separation methods: HPLC, FFF,electrophoresis. Chromatographia 24, 58–76 (1987).

https://doi.org/10.1007/BF02688468

12. H.K. Teoh, E. Sorensen, and N. Titchener-Hooker, Chem. Eng. Sci, 58, 4145 (2003)

**13.** S. Hellsten, J. Siitonen, M. Mänttäri, and T. Tuomo-Sainio, J. Chromatogr. A, 1251,122 (2012)