

Comparative Study Of Synthetic Antibiotic Amoxicillin With Volatile Oil Extracted From Some Traditional Medicinal Plants On Bacteria Human Pathogen (Streptococcus pyogenes, Staphylococcus aureus, Pseudomonas aeruginosa, Escherichia coli)

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Abstract

The extensive utilization of antibiotics in clinical practice, agriculture, and veterinary settings contributes to the emergence of antibiotic resistance in infectious microorganisms. This escalating problem poses a significant challenge in effectively treating pathogenic microbes. The study assessed the comparative antibacterial effects of Amoxicillin, a modern drug, and various essential oils against both Gram-positive (*S. pyogenes* and *S. Aureus*) and Gram-negative (*P. aeruginosa* and *E. coli*) bacteria. Amoxicillin exhibited moderate inhibition, while essential oils, including Basil and Eucalyptus, showed variable effects. Basil oil displayed limited inhibition against *S. pyogenes* but strong inhibition (21 mm) against *S. aureus*. Eucalyptus oil demonstrated limited inhibition against *S. pyogenes*, strong inhibition (19 mm) against *S. aureus*, and moderate inhibition against *P. aeruginosa*. Cypress oil effectively inhibited *S. aureus* (20 mm) but was ineffective against other bacteria. Notably, Dill oil demonstrated robust inhibitory effects, especially against *S. pyogenes* (16 mm), *S. aureus* (18 mm), and *P. aeruginosa* (15 mm), with moderate inhibition against *E. coli* (13 mm). The study underscores the potential of essential oils, particularly Dill oil, as viable alternatives or supplements to traditional antibiotics, emphasizing their diverse antibacterial properties.

Keywords: Bactria, Amoxillin, Volatile oil, Medicinal plants, Antibacterial.

Introduction

Medicinal and aromatic plants constitute a large part of natural flora and are considered an important resource in various fields such as the pharmaceutical, flavor and fragrance, perfumery, and cosmetic industries (Swamy & Sinniah, 2015). At present, more than 80% of the global population depends on traditional plant-based medications for treating various human health problems (Sudipt, et al., 2012; & Arumugam, et al., 2016).

The proliferation of drug-resistant microbial pathogens poses a significant and critical challenge to the effective treatment of infectious diseases (Owlia et al., 2009). Gram-positive and gram-negative bacteria are responsible for severe and life-threatening infections, particularly in immune compromised patients (Lestari, 2004). Gram-positive bacteria like *S. aureus* play a predominant role in post-operative wound infections, toxic shock syndrome, and food poisoning, while gram-negative bacteria such as *E. coli*, naturally present in the human intestine, can lead to lower urinary tract infections, cholecystitis, or septicemia (Jose & Reddy, 2010). Numerous studies have showed that the escalating resistance rates of *S. aureus* and *E. coli* to antibiotics (Mubita et al., 2008; Arredondo & Cuevas, 2008; Chambers & Deleo, 2009).

Essential oils derived from Medicinal and Aromatic Plants possess aromatic qualities due to a diverse blend of chemical compounds belonging to different families, including terpenes, aldehydes, alcohols, esters, phenols, ethers, and ketones (Degenhardt et al., 2009; & Akthar et al., 2014). These essential oils hold significant global market potential due to their distinctive flavor, fragrance attributes, and biological activities (Swamy et al., 2015; & Swamy & Sinniah, 2016).

Utilized in aromatherapy and the treatment of various conditions such as cardiovascular disease, diabetes, Alzheimer's, and cancer, essential oils offer versatile therapeutic applications (Ali et al., 2015). Researchers have long acknowledged the antimicrobial effects of essential oils and their chemical constituents (Duschatzky et al., 2005; Lang & Buchbauer, 2012). Additionally, studies have shown the synergistic effects of combining two or more essential oil components against a variety of human pathogens (Koroch et al., 2007; & Nazzaro et al., 2013).

More recently, the prevalence of antimicrobial drug resistance has prompted researchers to discover novel antimicrobial lead molecules to treat various human pathogens (Rudramurthy et al., 2016). Some of the presently available synthetic drugs fail to inhibit many pathogenic microbes. In addition, the use of synthetic chemicals for the control of pathogenic microorganisms is limited because of their carcinogenic effects, acute toxicity, and environmental hazard potential. In this regard, the exploitation of essential oils to control epidemic multidrug resistant pathogenic microorganisms can be useful to combat various infectious diseases (Mulyaningsih et al., 2010).

Traditional plants have been proved to be a novel source in the search of antimicrobial compounds (Kaushik et al., 2010). Several types of essential oils have been studied to control a wide range of bacteria like Clove bud oil showed a strong antibacterial effect against Salmonella typhi, Staphylococcus aureus, and Pseudomonas aeruginosa (Conner, 1993). Likewise, carvacrol, eugenol, and thymol essential oils were inhibited E. coli (Kim et al., 1995). (Arora & Kaur, 1999) studied the antimicrobial activity of water extract of clove and black pepper on E. coli. In another study, Ocimum basilicum essential oils were strongly antimicrobial against B. thermosphacta, E. coli, L. innocua, L. monocytogenes, P. putida, S. phitimum, S. putrefaciens, M. flavus. (Teixeira et al., 2013).

Considering essential oils significant potential as natural sources of antimicrobial medications as an alternative to synthetic pharmaceuticals for the management of harmful microorganisms. This study aimed to investigate the antimicrobial effectiveness of Basil, Eucalypts, Monterey Cypress, and Dill plants essential oils against pathogenic bacteria S. pyogenes, S. aureus, P. aeruginosa, E. coli in vitro conditions. All of plants assayed in this study are commonly used as medicinal plants in different localities of Kurdistan, and other parts of the world.

Material and method

Plants collection

The fresh vegetative parts of the plant were collected in October 2023, as shown in **Table 1**, from fields in different regions of Duhok, Kurdistan, Iraq. The study was conducted at the Pharmacy Department of Duhok Polytechnic University, and the plants were identified by the authors

Essential oil extraction:

The volatile oil was obtained through hydrodistillation, following the method outlined by (Afrudin et al., 2015). One hundred grams of the fresh vegetative parts were cut into small pieces, mixed with 500 ml of distilled water, and then subjected to extraction using a Clevenger apparatus for 3 hours. After boiling for 3 hours, an extract containing essential oil, water, and other plant compounds was obtained. The essential oil was separated from the extract using 15 ml of chloroform, divided into 3 stages, with 5 ml of chloroform used in each stage. Subsequently, the chloroform was evaporated at 70°C, following the procedure outlined by (Harfouch et al., 2019)

Antibacterial activity:

We studied the antibacterial activity of the essential oil against Gram-positive strains (S. pyogenes, S. aureus) and Gram-negative strains (P. aeruginosa and E. coli). These strains were obtained from the laboratory section of Vajeen Hospital in Duhok city and were maintained on nutrient agar at a temperature of 4°C.

Culture preparation:

The Gram-positive S.pyogenes strains were isolated from urine collected from urinary tract infections. S. aureus was isolated from swabs collected from a wide variety of infected superficial skin and mucous membrane areas. The Gram-negative P.aeruginosa strains were isolated from infection areas or wound swabs, while E. coli strains were isolated from stool-urine

collected during intestinal infections (diarrhea). These strains were submitted to Vajeen Hospital and identified using standard bacteriological techniques. The cultures were maintained by subculture on Mueller-Hinton agar Petri dishes, which were then prepared using nutrient agar for the disc diffusion method.

Table 1 Medicinal plant tested for their antibacterial in the study.

Plants	Common name	Family	Part used	Origin	Traditional used
Ocimum basilicum L.	Basil	Lamiaceae	Leave, stem	Locally	Historically, basil has been used as a medicine to cure renal problems, warts, worms, constipation, headaches, coughs, and diarrhea. (Simon et al., 1971-1980)
Eucalypts tereticornis Sm.	Eucalypts	Myrtaceae	leaves	Locally	Traditional medicine uses the eucalyptus plant to treat diabetes, obesity, and insulin resistance. Insulin resistance is a result of chronic inflammation of adipose tissue. (Ceballos et al., 2018)
Cupressus macrocarpa Hortw.	Monterey cypress	Cupressaceae	leaves	Locally	Cypress leaves are used as a contraceptive and to cure laryngitis, diabetes, inflammation, toothaches, and stomach pain (Selim et al., 2014).
Anethum graveolens L.	Dill	Apiaceae	Leave, stem	Locally	Dill plants have helpful impacts on the control and management of diabetes and cardiovascular problems (Goodarzi et al., 2018).

Disc diffusion Method

The antibacterial screening of the plant extracts against (*Ocimum basilicum*, *Eucalypts tereticornis*, *Cupressus macrocarpa*, *Anethum graveolens*) bacteria was carried out by determining the zone of inhibition using disc diffusion method after 24 h (Sahoo et al., 2006).

Statistical analysis

Agar disc diffusion assay was performed in triplicate under strict aseptic conditions to ensure consistency of all findings.

Result and discussion

Our study showed that results in Table 2 presents the comparative zone inhibition for synthetic antibiotic Amoxicillina a modern drug, and various essential oils against Gram-positive (*S. pyogenes* and *S. Aureus*) and Gram-negative (*P. aeruginosa* and *E. coli*) bacteria.

Amoxicillin displayed moderate inhibitory effects, with values of (10 mm) against *S. pyogenes*, (12 mm) against *S. aureus*, (8 mm) against *P. aeruginosa*, and (9 mm) against *E. coli*. Among the essential oils, Basil and Eucalyptus exhibited variable inhibitory effects. Basil oil demonstrated limited inhibition against *S. pyogenes* (8 mm) but strong inhibition (21 mm) against *S. aureus* and (13 mm) against *P. aeruginosa*, while showing no inhibition against *E. coli*. Eucalyptus oil showed limited inhibition against *S. pyogenes* (8.5 mm), strong inhibition (19 mm) against *S. aureus*, and moderate inhibition (10 mm) against *P. aeruginosa*, while also not inhibiting *E. coli*. Cypress oil displayed strong inhibition (20 mm) against *S. aureus*

but was ineffective against the other bacteria. Dill oil exhibited robust inhibitory effects, particularly against *S. pyogenes* (16 mm), *S. aureus* (18 mm), and *P. aeruginosa* (15 mm), with moderate inhibition against *E. coli* (13 mm). These findings underscore the potential of essential oils, especially Dill oil, as effective alternatives or supplements to traditional antibiotics, highlighting their diverse antibacterial properties.

Many chemical compounds found in aromatic and medicinal plants have antibacterial properties. These are produced in order to shield the plants from microbial pathogens. Essential oils' antibacterial qualities are mostly determined by their chemical composition and the concentration of their primary ingredients (Nazzaro et al., 2013). These chemical substances are secreted in response to particular biotic and abiotic stressors through a sequence of molecular interactions (Holley & Patel, 2005). Every substance may have a unique way of working against microorganisms. Generally, a sequence of biochemical events in the bacterial cell mediate the mechanism of antibacterial action, and these reactions depend on the kind of chemical ingredients found in the essential oil (Burt, 2004; & Nazzaro et al., 2013). Furthermore, differing bacterial architecture, such as that of Gram-positive and Gram-negative bacteria, which have varied cell membrane compositions, also affects the antibacterial activity of essential oils (Hammer & Carson, 2011; & Raut & Karuppayil, 2014).

Numerous mechanisms have been proposed to explain the antibacterial action of essential oils. The main mechanism by which essential oils destabilise cells is by breaking down membrane integrity and increasing permeability. This causes a disruption in a variety of cellular processes, such as membrane-coupled energy production, membrane transport, and other metabolic regulatory activities. Essential oils may help a number of critical functions, including energy conversion, nutrition digestion, the production of structural macromolecules, and the secretion of growth regulators, by disrupting the cell membrane (Oussalah et al., 2006). Essential oils have the potential to impact both the cytoplasm and the cell's outer membrane (Kim et al., 1995; & Nazzaro et al., 2013). Essential oils readily permeate bacterial cell membranes because of their lipophilic nature. It has been found that the essential oils of different medicinal and aromatic plants increase the permeability of bacterial cell membranes, causing cellular components to flow out and ions to be lost (Saad et al., 2013; & Raut & Karuppayil, 2014). Additionally connected to lower membrane potentials, disrupted proton pumps, and ATP depletion are the antibacterial properties of essential oils. (Turina et al., 2006).

Table (2). Zone inhibition of synthetic antibiotic Amoxillin and essential oils used in the study (mm).

Plant volatile oil	Gram- positive		Gram- negative	
	Streptococcus pyogenes	Staphylococcus Aureus	Pseudomonas aeruginosa	Escherichia coli
Amoxillin	10	12	8	9
Ocimum basilicum	8	21	13	No inhibition
Eucalypts tereticornis	8.5	19	10	No inhibition
Cupressus macrocarpa	No inhibition	20	7	No inhibition
Anethum graveolens	16	18	15	13

Values of the well's diameter following a 24-hour incubation period against a Bacteria strain exposed to volatile oil extracts in an agar disc diffusion assay, as well as the observed diameter zone of inhibition (mm).

This alteration in the cell organization may cause a cascade effect, resulting in other cell organelles being affected (Carson et al., 2002). Likewise, Cox et al., (1999 and 2000) have shown that tea tree oil reduces *S. aureus* and *E. coli* growth by changing the permeability of cells, causing more intracellular K⁺ ions to leak out, and interfering with cell respiration. The cytoplasmic membrane and cell wall are penetrated by the essential oils, which may disturb the arrangement

of molecules of polysaccharides, phospholipid bilayers, and different fatty acids (Longbottom et al., 2004; & Raut & Karuppaiyil, 2014). All these events may be responsible for the coagulation of inner cellular components in the cytoplasm and break down of the bonds between the lipid and protein layers (Burt, 2004).

Gram- positive and gram- Negative bacteria are susceptible to the potent antibiotic properties of Dill essential oil, which may be attributed to plants that contain 4% essential oil. Major compounds found in dill essential oil include limonene (33%), carvone (30-60%), and α -phellandrene (20.61%), as well as dihydrocarvone, diterpene, pinene, cineole, myrcene, paramyrcene, dillapiole, isomyristicin, myristicin, myristin, apiol, furanocoumarin, and 5-(4''-hydroxy3''methyl-2''-butenyloxy) -6,7-furocoumarin, faltarindiol, oxypeucedanin, and oxypeucedanin hydrate (Saiman, 2004). The specific composition of plant volatile oils, the structural arrangement of those components and their functional groups, and any potential synergistic interactions between those components are all potential factors that could influence the oils' efficacy (Osman et al., 2009; & Dhama et al., 2014). This result agree with the previous study (Mahdi, 2016) reported the Dill essential oil significantly reduced the growth of test bacteria: *E. faecalis* (15-25mm), *P. mirabilis* (20-25mm), *P. aeruginosa* (17-27mm), *K. pneumonia* (15-35mm), *E. coli* (20-52mm), and the widest inhibition zone diameters was showed on *S. aureus* (70-72mm).

The effect antibacterial Basil essential oil on inhibition growth bacteria these result may be due to depending on the variations in chemotype, leaf, and flower color, aroma, and origin of the plant, Basil essential oils exhibit a wide and varying array of chemical compounds (Da-Silva et al. 2003). The chief constituents include chavicol methyl ether (or estragole), linalool, and eugenol (Omidbaigi et al. 2003; Hussain et al. 2008). Studies in the literature suggest that linalool, a monoterpene, is the main ingredient responsible for antibacterial activity (Ravid et al. 1997). However, Matasyoh et al., 2009; Begnami et al., 2010; Lawal et al., 2014; & Beatovic et al., 2015) studied on five species of basil plant include (*O. basilicum*, *O. gratissimum*, *O. kilimandscharicum*, *O. lamiifolium*, *O. suave*) reduced the growth or Inhibited microorganisms *C. albicans*, *C. tropicalis*, *C. glabrata*, *P. notatum*, *R. stolonifer*, *M. mucedo*, *A. ochraceus*, *A. versicolor*, *A. niger*, *A. fumigates*, *T. viride*, *P. funiculosum*.

The extract from the leaf of the Eucalyptus plant exhibited varying degrees of antibacterial activity against two clinical isolates. Based on the above experiment, it can be concluded that the extract has significant growth-inhibiting effects on both Gram-positive and Gram-negative bacteria. This could be explained by the presence of components such as 1,8-cineole, citronellal, citronellol, citronellyl acetate, p-cymene, eucamalol, limonene, linalool, pinene, terpinene, terpinol, alloocimene, and aromadendrene (Nezhad et al., 2009). These results are almost similar to those shown by other works on the antimicrobial activity of essential oil of Eucalypts leaves as well as those of similar species (Fit et al., 2019; Ait-Ouazzou et al., 2011; & Elaissi et al., 2011). These result agreed with previous study, Bachir & Benali (2012) on *E. globulus* plants the results obtained showed that essential oil of the leaves has antimicrobial activity against gram negative bacteria *E. coli* as well as gram positive bacteria *S. aureus*.

Cupressus macrocarpa oil displayed strong inhibition against *S. Aureus* but was ineffective against the other bacteria. According Salem et al., (2018) reported that the volatile oil from *C. macrocarpa* inhibited both *S. aureus* and *B. cereus*, with minimum inhibition concentrations of 0.31 and 0.12 mg ml⁻¹, respectively, and the bactericidal effect was at 0.2 and 0.41 mg ml⁻¹, respectively. The results varied, as previously mentioned, due to variations in the essential oil's chemical composition and its bioactive components. Moreover, this result may be due to the component of *C. macrocarpa* essential oil showed an antibacterial effect, e.g., α -phellandrene (Zhang et al., 2017), camphor and limonene (Han et al., 2019), γ -terpinene (Giweli et al., 2012). Terpenoids are biologically active compounds with higher effects on the resistance to pathogens (Sharma et al., 2019). Zhang et al., (2018) reported that terpinen-4-ol showed antibacterial activity against *S. aureus* and *S. agalactiae*. According to Huang et al., (2021), three isomeric terpeneols that were isolated from *Cinnamomum longepaniculatum* leaf oil—terpinen-4-ol, α -terpineol, and δ terpineol—have the potential to be employed as antibacterial chemicals since they cause bacterial cell death by rupturing their cell wall and membrane. Monoterpenoids disrupt the physiological and biochemical mechanisms that allow bacteria to grow and proliferate. (Pandey et al., 2016). However, El-Ghorab et al., (2007) reported that the volatile oil of Egyptian *C. macrocarpa* strongly inhibited the growth of *S. aureus*, *P. aeruginosa*, *E. coli*, *A. niger* and *C. albicans*, and concluded that, this may be attributed to the presence of neral, geraniol, eugenol dihydro, carvacrol acetate and phenol (2, 6-dimethoxy). Moreover, Manimaran et al., (2007) reported the potent antimicrobial activity of the volatile oil of the Indian *C. macrocarpa* and concluded that, such activity mainly due to the

volatile oil components i.e., caryophyllene, α terpineol etc. In addition, a comparative antimicrobial study was done on the volatile oils content of *Cupressus glauca*, *C. funebris*, *C. lawsonia*, *C. macrocarpa* and *C. sempervirens*. The results showed that *C. macrocarpa* possessed the potent antibacterial and antifungal activities at concentration of 100 mcg ml⁻¹ while against *C. albicans* was 50 mcg mL⁻¹ (Manivannan et al., 2005).

CONCLUSION

In conclusion, while synthetic antibiotic Amoxicillin exhibited moderate inhibitory effects, essential oils from Basil, Eucalyptus, and Monterey cypress plants showed that variable effects with notable inhibition against bacteria. Whereas, Dill oil demonstrated robust inhibitory effects, especially against *S. pyogenes*, *S. aureus*, and *P. aeruginosa*, with moderate inhibition against *E. coli*. These findings underscore the potential of essential oils, particularly Dill oil, as effective alternatives or supplements to traditional antibiotics, emphasizing their diverse antibacterial properties. Further research is necessary to validate these results and explore the underlying mechanisms of the observed antibacterial effects.

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