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DESCRIPTION

FIELD OF THE INVENTION

[0001] The invention generally relates to herbal compositions. More particularly, the invention relates to herbal compositions derived from *Mangifera indica* and methods for their use in the treatment and management of obesity and/or weight.

BACKGROUND

[0002] Obesity is a condition manifesting almost directly as a consequence of a modern day lifestyle that encompasses sedentary work-culture, high fat, calorie-rich diet, dearth of regular exercise or physical activity, addiction to habit forming substances such as tobacco and alcohol and high day-to-day stress levels. Obesity has reached epidemic proportions globally, with more than 1 billion adults overweight - at least 300 million of them clinically obese - and is a major contributor to the global burden of chronic disease and disability. Ischemic heart disease and cardiovascular diseases are the conditions, often referred to as lifestyle diseases, have obesity as one of their root causes. Ischemic heart disease is the number one cause of death in the world today, according the World Health Organization (WHO). Cardiovascular diseases (CVDs) have killed nearly 17 million people in the year 2011 which amounts to 3 in every 10 deaths. CVDs are among the top causes of death, in India as well, as per the WHO. The importance of managing obesity is, thus, evident.

[0003] Often coexisting in developing countries with under-nutrition, obesity is a complex condition, with serious social and psychological dimensions, affecting virtually all ages and socioeconomic groups. Obesity and being overweight pose a major risk for other serious chronic diseases, including type 2 diabetes, hypertension, stroke and certain forms of cancer. The health consequences range from increased risk of premature death, to serious chronic conditions that reduce the overall quality of life.

[0004] It is, therefore, safe to state that managing obesity would substantially aid in reducing global mortality, increasing life expectancy and increasing the quality of life. Dietary changes, exercise and activity, behavioral change, prescription weight-loss medications and weight-loss surgery are the common treatment arms for managing obesity. The treatment method to be undertaken often depends on the preferred choice of an individual undergoing treatment as well as the level of obesity.

[0005] The preferred treatment modality for weight loss is dieting and physical exercise. However, due to busy schedules and sedentary lifestyles, following-up with the first two methods seems to be practiced in an irregular manner. Weight loss surgery, on the other hand, is ruled out by a host of the population due to high costs involved. Therefore, there is a gradual shift towards an increase in the use of drugs.

[0006] Drugs used for weight-loss generally alter one of the fundamental processes of the human body such as weight regulation by altering appetite, metabolism or absorption of calories. Orlistat is the only anti-obesity medication that is approved for long-term use by the FDA. It reduces the intestinal fat absorption by inhibiting the pancreatic enzyme lipase. Rimonabant and Sibutramine are the other drugs that had initially been approved for the treatment of obesity, but were banned eventually due to safety concerns. Because of the potential side effects, it is recommended that anti-obesity drugs only be

prescribed for obesity where it is hoped that the benefits of the treatment outweigh its risk.

[0007] In view of the above, nutrition-based interventions are being hailed as an inexpensive alternative to aid weight loss and to manage weight in a better way. Medicinal herbal supplements, being cost-effective and exerting less to no toxic side-effects, are being extensively utilized due to their effectiveness in managing many chronic disorders.

[0008] The inventors of the present disclosure, therefore, envisage a cost-effective and safe herbal composition or a dietary supplement which is used for the management of obesity based on the extract of *Mangifera indica*. *Mangifera indica* is a large evergreen tree belonging to Anacardiaceae which is native to tropical Asia and has been cultivated in the Indian subcontinent for over 4,000 years. Chemical constituents of *Mangifera indica* are always of an interest especially the polyphenolics, flavonoids and triterpenoids. The bark is reported to contain protocatechic acid, catechin, mangiferin, alanine, glycine, γ -aminobutyric acid, kinic acid, shikimic acid etc. *Mangifera indica* leaves extract revealed the presence of steroids, flavonoid, reducing sugar and cardiac glycosides in the hexane extract; anthraquinone, tannin and reducing sugar in the ethyl acetate extracts and saponin, steroids, tannin, flavonoid, reducing sugars and cardiac glycosides in the methanolic extracts [Aiyelaagbe et al., 2009]. Fruit skin has been found to be a good source of phytochemicals, such as polyphenols, carotenoids, vitamin E and vitamin C [Ajila et al., 2007a].

[0009] The relative biochemical complexity of *Mangifera indica* stem bark and leaf extract may produce a pleiotropic action on several lipid and carbohydrate metabolism targets simultaneously, making them as multifunctional botanical therapeutics useful in weight control. They may also provide effective biochemical tools for studying the complex relationships between energy balance, adiposity and endocrine function [Moreno et al., 2005]. Also, mango fruit skin and flesh extracts affect adipogenesis in 3T3-L1 cells [Taing et al., 2012].

[0010] Mangiferin a xanthone glycoside major bio-active constituent, isomangiferin, tannins & gallic acid derivatives [Shah et al., 2010]. It is a major C-glucosylxanthone from *M. indica* stem bark, leaves, heartwood, roots and fruits [Wauthoz et al., 2007]. Mangiferin, a natural polyphenol, has been shown to have hypolipidemic effect in rat and mouse [Guo et al., 2011]. Presence of mangiferin in the herbal composition could be one of the factors for the anti-obesity action. Hence in view of this herbal composition containing extract of *Mangifera indica* was evaluated for its anti obesity property.

SUMMARY OF THE INVENTION

[0011] It is an object of the invention to provide a composition for use in managing obesity in a subject comprising administering to the subject a composition comprising an extract of *Mangifera* extract in an amount effective to manage obesity and/or weight in the subject.

[0012] Subject of the invention are compositions and uses according to claims 1 to 11.

[0013] Subject of the invention is a composition comprising an extract of *Mangifera* extract for use in treating obesity, wherein the extract is an extract of *Mangifera indica* bark, leaf and fruit skin. As used herein, the term "treating" also relates to prevention of obesity.

[0014] Subject of the invention is a non therapeutic use of a composition comprising an extract of

Mangifera for managing weight in a subject, wherein the extract is an extract of Mangifera indica bark, leaf and fruit skin, comprising administering to the subject in an amount effective to manage weight in the subject. The term "managing weight" especially means achieving weight loss or preventing weight gain.

[0015] In some aspects of the invention, the amount effective to manage obesity and/or weight in the subject ranges between 50-500 mg/kg body weight.

[0016] In some aspects of the invention, the amount effective to manage obesity and/or weight in the subject ranges between 50-500 mg/kg body weight.

[0017] In some aspects of the invention, managing obesity and/or weight in the subject comprises decreasing at least one of appetite, body weight gain, metabolism and absorption of calories.

[0018] In some aspects of the invention, administering the composition modulates at least one of insulin levels, lipase levels and lipid peroxidation.

[0019] In some aspects of the invention, administering the composition modulates at least one of serum glucose, total cholesterol, triglyceride, HDL-c and LDL-c levels.

[0020] In some aspects of the invention, the composition comprises an extract of Mangifera indica bark, leaf and fruit skin in a ratio of 80:10:10 respectively.

[0021] In some aspects of the invention, the composition comprises, by weight, 29% flavonoids and 19% polyphenols.

[0022] In some aspects of the invention, the composition comprises, by weight, 22% mangiferin, 4% catechin, 3% epicatechin, and 0.4% quercitin dihydrate.

[0023] In some aspects of the invention, the composition inhibits super oxide dismutase in the subject.

[0024] In some aspects of the invention, the composition is administered as a powder, pill, tablet, pellet, capsule, thin film, solution, spray, syrup, linctus, lozenge, pastille, chewing gum, paste, vapor, suspension, emulsion, ointment, cream, lotion, liniment, gel, drop, topical patch, buccal patch, bead, gummy or injection.

[0025] It is a further object of the invention to provide a composition for use in managing obesity and/or for managing weight in a subject, wherein the composition comprises by weight, 22% mangiferin, 4% catechin, 3% epicatechin, and 0.4% quercitin dihydrate.

[0026] In some aspects of the invention, the composition is formulated as a powder, pill, tablet, pellet, capsule, thin film, solution, spray, syrup, linctus, lozenge, pastille, chewing gum, paste, vapor, suspension, emulsion, ointment, cream, lotion, liniment, gel, drop, topical patch, buccal patch, bead, gummy or injection.

BRIEF DESCRIPTION OF THE DRAWINGS

[0027]

Fig. 1 shows HPLC chromatograms of herbal composition showing phenolic and flavonoidal constituents.

Fig. 2 shows a HPLC chromatogram of a herbal composition showing mangiferin peak.

Fig 3 shows the in-vitro evaluation of H₂O₂ scavenging, SOD, anti-oxidant, Anti-lipase, lipid peroxidation inhibitory and Carbonic anhydrase activity."

DEFINITIONS

[0028] The term "about" as used herein refers to a quantity, level, value, number, frequency, percentage, dimension, size, amount, weight or length that varies by as much as 30, 25, 20, 15, 10, 9, 8, 7, 6, 5, 4, 3, 2 or 1 % to a reference quantity, level, value, number, frequency, percentage, dimension, size, amount, weight or length. In particular embodiments, the terms "about" or "approximately" when preceding a numerical value indicates the value plus or minus a range of 15%, 10%, 5%, or 1%, or any intervening range thereof.

[0029] As used herein, the phrase "*Mangifera indica* material" refers to material from the *Mangifera indica* plant, which is bark, leaves and fruit skin.

[0030] As used herein, the phrase "managing obesity" comprises treating or preventing obesity.

DETAILED SPECIFICATION

[0031] The invention generally relates to herbal compositions and methods for their use in a variety of therapeutic and preventative applications. More particularly, the invention relates to compositions comprising *Mangifera indica* extract and methods for their use in the management of obesity and/or for managing weight.

[0032] The herbal compositions of the present invention may be administered by various routes including but not limiting to topical, oral, buccal, sub-lingual, parenteral, rectal, and inhalation. The compositions may be in a dosage form that includes but is not limited to powders, pills, tablets, pellets, capsules, thin films, solutions, sprays, syrups, linctuses, lozenges, pastilles, chewing gums, pastes, vaporizers, suspensions, emulsions, ointments, creams, lotions, liniments, gels, drops, topical patches, buccal patches, beads, gummies, gels, sols, injections and the like. Typically, the composition comprises at least one pharmaceutically acceptable excipient.

[0033] The herbal compositions of the present invention find use in a variety of therapeutic and preventive applications. In some embodiments of the invention, the herbal compositions are for use in administration, or non-therapeutically administered, to a subject for preventing oxidation (antioxidant activity). In other embodiments of the invention, the herbal compositions find use in treating, preventing or managing obesity and/or weight. The phrase "managing obesity and/or weight" as used herein refers to preventing or reducing body fat, preventing or reducing weight gain, preventing or reducing the

absorption of fat in the diet, reducing body mass index (BMI), reducing abdominal fat, preventing weight gain from a high fat diet and combinations thereof. In embodiments of the invention, herbal compositions are for use in administration, or non-therapeutically administered, in the management of hyperlipidemic conditions, including but not limited to, reducing serum low density lipids, cholesterol and triglycerides, raising high density lipids (HDL) and combinations thereof. In other embodiments of the invention, the herbal compositions are for use in administration, or non-therapeutically administered, to prevent or reduce the accumulation of fat in the liver. In other embodiments, the herbal compositions of the invention are for use in administration, or non-therapeutically administered, to reduce oxidative stress or regulating blood glucose levels. The term "reduce" as used herein refers to any measurable decrease that is produced as a result of administering the compositions of the invention, relative to the absence of such administration. Significantly, the compositions of the invention are non-toxic and non-mutagenic. Similarly, the term "increase," or "raise," refers to any measurable increase that is produced as a result of administering the compositions of the invention, relative to the absence of such administration.

[0034] An aspect of the invention concerns portions of *Mangifera indica* that are used in preparation of the herbal composition. Accordingly, the herbal composition are prepared from *Mangifera indica* bark, leaf and fruit skin. In yet another embodiment of the invention, the compositions are prepared from *Mangifera indica* bark, leaves and fruit skin in a ratio of about 80:10:10 respectively.

[0035] Another aspect of the invention concerns the dosage of the herbal composition that is used. The dosage of the composition will depend on the nature of the condition to be treated or managed, and the degree or advancement of the condition being addressed. Some non-limiting examples of dosages for use with the invention include 50-500 mg/kg body weight. In one aspect of the invention, the dosage is 500 mg/kg body weight. The dosages disclosed herein may be administered between one and four times daily. In one aspect of the invention, the selected dosage is administered three times a day.

[0036] Another aspect of the invention concerns methods for making the subject herbal compositions. In some aspects, the herbal compositions are made by ethanol extraction. In other aspects of the invention, the compositions are made by aqueous extraction. In still other embodiments, the compositions of the invention are prepared by compressing a *Mangifera indica* material.

EXAMPLE 1 - EXTRACTION PROCEDURE OF HERBAL COMPOSITION

[0037] Dried parts of *Mangifera indica* bark, leaf and fruit skin (80:10:10 ratio) were cut in to small pieces, approximately 10 mm in length, to form a 100 kg mass. This mass was pulverized to form a coarse powder in a hammer mill and stacked in a vertical 1.0 KL extractor. The lower end of the extractor contained a perforated plate on which a filtration cloth was fixed. The bottom of the extractor was connected to a transfer pump input and the output of the transfer pump was connected to a T bend. One end was connected to the extractor top for circulation of the extraction mass during the extraction period and the other end of the T bend was connected to a receiver tank.

[0038] The above-mentioned coarse powder was initially extracted with six bed volumes of 70% v/v ethyl alcohol. The extraction was carried out at 75-78°C for about 7-8 hours with continuous circulation of the extract with a transfer pump. After completion of extraction, the extract was filtered through a 5 micron SS candle filter and the resultant clear extract was collected in a receiver tank. The bed was re-extracted by adding 4 bed volumes of 70% ethyl alcohol 3 more times at a temperature of 75-78°C for

about 7-8 hours. All the extracts were then collected in a receiver tank and the combined extract was concentrated in a reactor under vacuum at 80-85°C till the extract mass- total dissolved solids (TDS) reached 60-70%. The extract mass was further dried in a vacuum tray drier at 80-85°C until the completion of drying. The yield of the extract, the herbal composition (HC) was found to be 14±0.5 w/w%. The extract was further subjected to phyto-chemical analysis through spectrophotometric and HPLC estimations. The studies confirmed that the HC is associated with good percentage of antioxidant constituents.

Table 1 Results of phyto-chemical analysis

S. N.	Phyto-constituents	Percentage	Analysis Method
1	Total flavonoids	28.56±0.93w/w%	Spectrophotometric
2	Total polyphenols	18.9±1.8 w/w%	Spectrophotometric

[0039] The composition of the total flavonoids was determined by the HPLC method and the following results were obtained:

Table 2 Composition of the determined flavonoids

S. N.	Constituents	Percentage
1	Mangiferin	21.5±0.82 w/w%
2	(+)-Catechin	3.84±0.31 w/w%
3	(-)-Epicatechin	2.67±0.25 w/w%
4	Quercetin dihydrate	0.43±0.06 w/w%

[0040] The composition of the total polyphenols was determined by the HPLC method and the following results were obtained:

Table 3 Composition of the determined polyphenols

S.N.	Constituents	Percentage
1	Gallic acid	4.5±0.42 w/w%
2	3, 4-Dihydroxy benzoic acid	0.93±0.23 w/w%
3	Methyl gallate	1.2±0.34 w/w%
4	Propyl gallate	2.31±0.73w/w%
5	Pyrogallol	0.48±0.08 w/w%
6	Parahydroxy benzoic acid	1.43±0.07 w/w%
7	Vanillic acid	0.33±0.06 w/w%
8	Syringic acid	0.82±0.13 w/w%
9	Ferulic acid	0.12±0.02 w/w%
10	Ethyl gallate	0.76±0.14 w/w%
11	Ellagic acid	0.16±0.05 w/w%

Table 4 Peak Table showing phenolic and flavonoids in HC

Name	Ret. Time	Area	Height	Area %	Lambda max
Mangiferin	3.936	1120914	479844	94.067	257/241/318/366/580
(+)- Catechin	7.598	58049	20738	9.623	203/278/366/657/622

Name	Ret. Time	Area	Height	Area %	Lambda max
(-)-Epicatechin	7.245	197931	62255	15.075	208/274/662/623
Quercetin dihydrate	5.314	29209	12881	1.038	254/370/199
Gallic acid	4.629	132932	36837	22.038	215/270/387/656/404
3, 4-Dihydroxybenzoic acid	3.352	245290	75658	8.716	260/206/222/295/365
Methyl gallate	1.114	32395	13176	6.362	215/271
Propyl gallate	2.680	53767	15055	10.559	216/273
Pyrogallol	0.598	37015	11721	100.000	202/257/240/315/362
Parahydroxy benzoic acid	3.683	127757	54283	4.540	256/315/198
Vanillic acid	1.269	4780	2177	0.939	204/260
Syringic acid	3.795	211448	79433	7.513	271/226
Ferulic acid	4.062	190504	74471	6.769	261/360
Ethyl gallate	3.975	46246	17396	1.643	261/245
Ellagic acid	7.990	43005	18447	6.750	253/366/662/623

EXAMPLE 2 - UPLC ANALYSIS FOR HERBAL COMPOSITION

Reagents required

[0041] Mangiferin (98% purity) was procured from Sigma Aldrich. Chemicals required for the analysis Acetonitrile (ACN), Methanol (MeOH), Formic acid, double distilled water was of LC grade.

Solution Preparation

[0042] Around 10 mg of HC was weighed into a 10 mL standard flask. Approximately 3 mL of 70 % methanol (LC grade) was added. The mixture was sonicated for 10 minutes, and made up to the mark with the same solvent. The sample solution was filtered through a 0.20 µm a nylon filter.

Standard preparation

[0043] Around 10 mg of standard (98%) was weighed into a 10 mL standard flask and dissolved in 70 % methanol (LC grade). The mixture was sonicated for 10 minutes, and made up to mark with the same solvent. The sample solution was filtered through a 0.20 µm nylon filter.

UPLC Analysis of Herbal Composition

[0044] A sensitive and selective ultra performance liquid chromatography (UPLC) method was used for the fingerprint analysis of herbal composition. The LC system consisted of a Shimadzu LC MS/MS # 8040 system. The column used was SHIM-PACK XR-ODSIII, 5 μ m, 150X 2.1 mm with mobile phase consisting 0.1% Formic acid in LCMS grade water: Acetonitrile with isocratic gradient system at run time of 8 min. The flow rate was maintained at 0.35 mL/min at 25 $\pm$ 2°C. The eluate was monitored at 254 nm. Retention time was as mentioned in Table 5.

Table 5 Optimized Chromatographic Conditions

S.NO	PARAMETERS	SPECIFICATION
1	Instrument	LC MS/MS # 8040
2	Detector	SPD-M20A PDA
3	Mobile phase A:B	0.1% Formic acid in LCMS grade water : Acetonitrile
4	Column	SHIM-PACK XR-ODSIII, 5 μ m, 150X 2.1 mm
5	Pump	Nexera X2, LC-30AD Shimadzu
6	Wavelength	254 nm
7	Flow rate	0.35 mL / min
8	Volume of injection	1 μ L
9	Run time	8 min

Table 6 Peak Table showing mangiferin in Herbal composition

Name	Ret. Time	Area	Height	Area %	Lambda max
Mangiferin	3.936	1120914	479844	94.067	257/241/318/366/580
Neo-mangiferin	4.195	70695	29923	5.933	259/243/319/364/579
Total		1191609	509767	100.00	

EXAMPLE 3 - IN-VITRO EVALUATION OF HERBAL COMPOSITION

Antioxidant activity studies:

Hydrogen peroxide (H₂O₂) scavenging activity:

Procedure:

[0045] Hydrogen peroxide scavenging activity of the HC was estimated in this study where initially, HC solutions were prepared at different concentrations in distilled water and the resultant solutions were mixed in 0.6 ml of 40 mM H₂O₂ solution prepared in phosphate buffer (0.1 M pH 7.4) and incubated for 10 min. The absorbance was measured at 230 nm against a blank solution containing H₂O₂. Similar procedure was repeated for HC, Mangiferin and Quercetin. The amount of hydrogen peroxide radical inhibited was calculated using the following equation. The result is expressed as % H₂O₂ radical scavenging activity.

$$\text{H}_2\text{O}_2 \text{ radical scavenging activity} = \left\{ \frac{(\text{Abs control} - \text{Abs sample})}{(\text{Abs control})} \times 100 \right\}$$

where:

Abs control - Absorbance of H_2O_2 radical

Abs sample - Absorbance of sample extract/ standard (the HC, mangiferin and quercetin)

Observation:

[0046]

Table 7 H_2O_2 scavenging activity

H_2O_2 scavenging activity				
Samples	Concentration in $\mu\text{g/ml}$			
	10	20	30	40
Quercetin (Standard)	5.6	14.55	18.86	33.96
Mangiferin 98%	8.49	33.01	64.15	76.41
HC	16.43	19.17	53.42	75.34

[0047] Conclusion: The HC exhibited good H_2O_2 scavenging activity in concentration dependent manner.

Superoxide Dismutase (SOD) Activity:

Procedure:

[0048] The superoxide anion scavenging activity of the HC was measured in this test. 1 ml (156 μM) of Nitro blue tetrazolium (NBT), 1 ml (468 μM) of nicotinamide adenine dinucleotide (NADH) and 3 ml of the HC at 100 $\mu\text{g/ml}$ concentration were admixed in phosphate buffer (pH 7.4). The reaction was started by adding 100 μl of phenazine methosulfate (PMS) (0.18mg/ml) and the mixture was incubated at 25°C for 5 min followed by measuring the absorbance at 560 nm. Similar solutions were prepared for quercetin and mangiferin and the percentage of inhibition was calculated by using the formula provided herein-below; the result was expressed as % superoxide dismutase scavenging activity.

$$\% \text{ superoxide dismutase inhibition} = \left\{ \frac{(\text{Abs control} - \text{Abs sample})}{\text{Abs control}} \times 100 \right\}$$

where:

Abs control - Absorbance of control

Abs sample - Absorbance of sample extract/ standard (the HC, mangiferin and quercetin)

Observation:**[0049]**

Table 8 SOD activity results

SOD activity	
Sample Concentration in µg/ml	% Inhibition
Quercetin (Standard)	51.03
Mangiferin 98%	7.50
HC	83.40

[0050] Conclusion: HC exhibited significant SOD activity in comparison with 98% Mangiferin and quercetin.

Total antioxidant assay:**Procedure:**

[0051] The total antioxidant activity of the HC was determined by the phosphomolybdenum method where 0.3 ml of the HC (100µg/ml) was combined with 3ml of a reagent solution (0.6M sulfuric acid, 28mM sodium phosphate and 4mM ammonium molybdate). The resultant reaction mixture was incubated at 95°C for 90 min and cooled to room temperature. The absorbance of the solution was measured at 695 nm against a blank solution (water). The total antioxidant capacity was expressed as the milligram equivalents of ascorbic acid.

Observation:**[0052]**

Table 9 Total antioxidant assay

Total antioxidant assay	
Sample Concentration µg /ml	mg equivalent ascorbic acid
Mangiferin 98%	31.23
HC	41.06

[0053] Conclusion: The total antioxidant capability of the HC was found to be 41.06 mg equivalent ascorbic acid. The HC exhibited good antioxidant property. The antioxidant ability of HC was confirmed through hydrogen peroxide radical scavenging activity, superoxide radical scavenging activity and the total antioxidant capacity.

In vitro* Anti-obesity studies:*Anti-lipase assay:****Procedure:**

[0054] A suspension containing 1% (V/V) of triolein and 1% (V/V) of tween 40 in 0.1M phosphate buffer (pH-8) was prepared and emulsified. The assay was initiated by adding 800µl of the Triolein emulsion to 200µl of Porcine Pancreatic Lipase (0.5 g Pancreatic Lipase in 15 ml of 0.1 M phosphate buffer at pH-8) and 200 µl of the HC extract (100 µg/ml concentration). The resultant mixture was mixed and the absorbance was measured immediately at 450 nm (T^0). The mixtures were then incubated at 37 °C for 30 min and the absorption was measured at 450 nm (T^{30}).

$$\text{Inhibition \%} = \left\{ \frac{A(\text{cont}) - A(\text{test})}{A(\text{cont})} \times 100 \right\}$$

where:

A(cont) - is the absorbance of the control ($T_C^0 - T_C^{30}$)

A(test) - is the absorbance of the sample test /standard ($T^0 - T^{30}$) (the HC, mangiferin and quercetin)

Observation:**[0055]**

Table 10 Anti-lipase assay results

Anti-lipase assay	
Sample Concentration: 1.2 mg/ml	% Inhibition
Orlistat	75.27
Mangiferin 98%	41.78
HC	42.30

[0056] Conclusion: The HC showed good anti-lipase property.

Carbonic Anhydrase Assay:**Procedure:**

[0057] The HC at 250 µg/ml and 98% Mangiferin were independently mixed in 1.4 ml of tris buffer and 2.5 ml of carbonic anhydrase. The resultant mixtures were incubated at room temperature for 5 min. After incubation, 1 ml of 4-NPA was added to the mixtures and further incubated for 15-20 min at 37 °C. The absorbance of the reaction mixtures were measured at 400 nm.

$$\text{Inhibition \%} = \left\{ \frac{A(\text{cont}) - A(\text{test})}{A(\text{cont})} \times 100 \right\}$$

where:

A (cont) - is the absorbance of the control

A (test) - is the absorbance of the test sample /standard

Observation:

[0058]

Table 11 Carbonic Anhydrase test results

Carbonic Anhydrase	
Sample Concentration: 100µg	% inhibition
Mangiferin 98%	47.06
HC	52.31

[0059] Conclusion: The HC showed enhanced anti-lipase property as compared to Mangiferin.

Lipid peroxidation inhibitory assay:

Procedure:

[0060] A modified Thiobarbituric acid reactive species (TBARS) assay (Ohkawa et al., 1979) is used to measure lipid peroxidation formed using egg yolk homogenate as lipid rich media (Ruberto et al., 2000).

[0061] Take 0.5ml of egg homogenate (10%in distilled water) and 0.1 ml of test sample in the concentration range 100-500µ g/ml in a test tube and volume made up to 1 ml by adding distilled water. Finally add 0.05 ml ferrous sulphate (0.07M) to the above mixture and incubate for 30 min to induce the lipid peroxidation. Thereafter add 1.5 ml of 20% acetic acid (pH 3.5) and 1.5 ml of (0.8%in 1.1% SDS) TBA and 0.05 ml (20%) TCA then heated in boiling water bath for 60 min. After cooling 5 ml of butanol will be added to all the test tubes and centrifuged at 3000 rpm for 10 min. Measure the absorbance of the organic upper layer at 532 nm. The percentage inhibition of lipid peroxidation calculated from the formula,

$$\% \text{ Inhibition} = \left(\frac{A_{\text{control}} - A_{\text{test sample}}}{A_{\text{control}}} \right) * 100$$

$$Ab_{\text{control}}$$

where:

Ab (cont) - is the absorbance of the control

Ab (test sample) - is the absorbance of the test sample /standard

Table 12 Lipid peroxidation inhibitory assay test results

Lipid peroxidation inhibitory assay	
Sample Concentration: 100-500 μ g/ml	% inhibition
HC	56.52
Mangiferin 98%	74.9
Quercetin (STD)	53.44

[0062] Conclusion: The HC showed enhanced lipid peroxidation property as compared to Quercetin. Herbal composition possesses good hypolipidemic and anti-obesity activity, which may be due to its antioxidant and free radical scavenging potential.

Example Acute oral toxicity study in rats with the HC

[0063] Single-dose oral toxicity of the HC was evaluated in albino Wistar rats. A limit test was performed in which female rats received a single oral administration of the HC at a dose of 2000 mg/kg body weight. Following dosing, the limit test rats were observed daily and weighed weekly. A gross necropsy examination was performed on all limit test animals at the time of scheduled euthanasia (day 14). No mortality occurred during the duration of the limit test. Further, no significant gross internal findings were observed at necropsy on study day 14.

[0064] Conclusion: Under the conditions of this test, the acute oral lethal dose (LD_{50}) of the HC was estimated to be greater than 2000 mg/kg in rats.

Repeated Dose 28 Day Oral Toxicity Study of the HC

[0065] Repeated dose 28 day oral toxicity study, with the HC in rats followed by 14 day recovery period, was performed. The objective of the study was to assess the safety of the HC when administered orally to female and male rats. Another objective was to determine the target organ toxicity, no observed effect level (NOEL) and reversibility of signs of toxicity after the recovery period.

[0066] Wistar female and male rats were treated with the HC 250,500 and 1000 mg/kg/b.w for 28 days by oral gavage, followed by 14 day recovery period.

[0067] Observations: 1) all the male and female animals from control and all the treated dose groups up to 1000 mg/kg survived throughout the dosing period of 28 days and the recovery period of 14 days; 2) no signs of intoxication were observed in male and female animals from different dose groups during the dosing period of 28 days and during the recovery period of 14 days; 3) male rats showed a significant

decrease in body weight gain with 250 and 500 mg/kg b.w. of the HC and a significant decrease in body weight gain were seen with 500 and 1000 mg/kg b.w. of the HC in females when compared with the control on day 29. During the reversal period the animals restored to normal when compared with control reversal group on day 43; 4) food consumption of control and treated animals was found to be comparable throughout the dosing period of 28 days and the recovery period of 14 days; 5) haematological analysis conducted at the end of the dosing period on day 29 and at the end of recovery period on day 43, revealed no abnormalities attributable to the treatment; 6) biochemical analysis conducted at the end of the dosing period on day 29 and at the end of recovery period on day 43, revealed no attributable changes to the treatment, except there was a significant increase in high density lipoproteins (HDL) levels in female rats treated with 250, 500 and 1000 mg/kg/b.w. of the HC; 7) functional battery observation tests conducted at termination revealed no abnormalities; 8) urine analysis, conducted at the end of the dosing period in week 4 and at the end of recovery period in week 6, revealed no abnormality attributable to the treatment; 9) organ weight data of male and female sacrificed at the end of the dosing period and at the end of the recovery period was found to be comparable with that of respective controls, gross pathological examination did not reveal any abnormality; histopathological examination did not reveal any major abnormality except congestion of blood vessels in few organs.

[0068] Conclusion: Based on the above findings, the no observed adverse effect level (NOAEL) of the HC was found to be 1000 mg/kg/b.w. for both female and male Wistar rats when given orally for 28 days followed by a 14 day recovery period.

EXAMPLE 4 -Anti-obesity activity of the HC w.r.t Standard:

[0069] Objective: The objective was to investigate the effect of the HC against high fat diet fed rats.

Procedure:

[0070] Animals: Male Wistar rats (160 to 200 g); No of animals: 36; Housing: 3/ cage, 12 hrs light/dark cycle; Temperature: 25±2°C;

Model & Composition of the Diet: High fat diet in rats: 25% Lard, 5% Soyabean oil; 5% starch; 65% Normal commercial available rat feed;

Groups: Male Wistar rats were divided into six groups with six animals in each group

Group	Diet
Group 01:	Normal feed + Vehicle (distilled water)
Group 02:	High fat diet
Group 03:	High fat diet + Standard drug (Orlistat 30 mg/kg)
Group 04:	High fat diet + HC (50 mg/kg)
Group 05:	High fat diet + HC (100 mg/kg)
Group 06:	High fat diet + HC (150 mg/kg)

Observations:

Effect of the HC on body weight gain in male rats**[0071]**

Table 13 Results of the effect of the HC on body weight gain in male rats

Groups	Final weight	Initial weight	Difference in body weight gain
Group I	251.70±2.02	181.70±1.99	70.00±2.60
Group II	292.50±1.81	181.50±1.31	111.0±2.20 ^{***a}
Group III	261.80±2.53	182.00±0.96	79.82±2.58 ^{***b}
Group IV	254.80±1.87	182.30±1.99	72.43±3.16 ^{***b}
Group V	250.50±2.53	183.30±0.88	67.15±2.75 ^{***b}
Group VI	259.20±6.06	184.70±0.80	74.50±5.77 ^{***b}

Values are expressed in terms of SEM ±Mean. Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group. ***P<0.001.

[0072] Conclusion: The HC at all doses showed significant reduction (P<0.001) in body weight gain when compared to the high fat diet group.

Effect of the HC on the average food intake in male rats**[0073]**

Table 14 Results of the effect of the HC on the average food intake in male rats

Groups	Average food intake g/rat
Group I	17.21±0.38
Group II	13.56±0.36 ^{***a}
Group III	13.45±0.28 ^{nsb}
Group IV	12.13±0.24 ^{**b}
Group V	11.26±0.24 ^{***b}
Group VI	13.18±0.31 ^{nsb}

Values are expressed in terms of SEM ±Mean. Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group.

***P<0.001 ***P<0.001 **P<0.01 ^{ns} non significant.

Conclusion:

[0074] The HC at 50 and 100mg/kg b.w showed significant reduction ($P<0.01$, $P<0.001$) in food intake when compared to the high fat diet group.

Effect of the HC on liver organ weight and mesenteric, brown adipose tissue (BAT), perirenal fat pads and epididymal fat pad

[0075]

Table 15 Results of the effect of the HC on liver organ weight and mesenteric, brown adipose tissue (BAT), perirenal fat pads and epididymal fat pad

Groups	Liver	Mesenteric fat	BAT	Perirenal fat pad tissue		Epididymal fat pad	
				Right	Left	Right	Left
Group I	2.8±0.01	0.59±0.02	0.13±0.01	0.25± 0.02	0.21± 0.01	0.38± 0.01	0.33± 0.02
Group II	3.5±0.15 ***a	1.14±0.07 ***a	0.30±0.01***a	1.05± 0.13***a	1.07± 0.11***a	0.63± 0.04***a	0.56± 0.05***a
Group III	2.8±0.08 ***b	1.02±0.07 nsb	0.28± 0.01 ^{nsb}	0.77±0.08* ^b	0.77± 0.08* ^b	0.55± 0.02 ^{nsb}	0.52± 0.03 ^{nsb}
Group IV	2.7±0.07 ***b	0.80±0.03 **b	0.17± 0.01***b	0.49± 0.01***b	0.44± 0.03***b	0.51± 0.01* ^b	0.42± 0.01* ^b
Group V	2.8±0.03 ***b	0.83±0.03 **b	0.17± 0.01***b	0.47±0.02***b	0.67±0.02*** ^b	0.51± 0.02* ^b	0.39± 0.02***b
Group VI	2.9±0.02 ***b	0.84±0.03 **b	0.17±0.01***b	0.63±0.07**b	0.69±0.04**b	0.51± 0.02* ^b	0.42± 0.03* ^b

Data were analyzed by one way ANOVA followed by Dunnett's *t* test. Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group.

*** $P<0.001$ ** $P<0.01$ * $P<0.05$ ^{ns} non significant.

[0076] Conclusion: The HC at all doses showed significant reduction ($P<0.001$) in liver organ weight, Perirenal fat pads and BAT, Mesentric fat ($P<0.001$), epididymal fat pad ($P<0.05$) when compared to the high fat diet group.

Effect of the HC on serum glucose, total cholesterol, triglyceride, HDL-c and LDL-c levels (mg/dL)

[0077]

Table 16 Results of the effect of the HC on serum glucose, total cholesterol, triglyceride, HDL-c and LDL-c levels (mg/dL)

Groups	Glucose	Total cholesterol	Triglyceride	HDL-c	LDL-c
Group I	81.63±2.96	47.53±1.15	52.61±2.14	22.61±0.56	14.40±1.51
Group II	114.20±7.63 ^{***a}	61.39±2.47 ^{***a}	104.6±4.16 ^{***a}	17.27±0.51 ^{***a}	23.20±2.96 ^{*a}
Group III	92.00±2.89 ^{**b}	50.91±0.62 ^{***b}	79.96±1.13 ^{***b}	21.72±1.22 ^{**b}	13.20±1.71 ^{**b}
Group IV	96.23±2.72 ^{*b}	48.96±1.90 ^{***b}	71.48±5.42 ^{***b}	23.77±0.99 ^{***b}	10.89±1.02 ^{***b}
Group V	82.37±2.82 ^{***b}	48.93±2.23 ^{***b}	55.92±2.03 ^{***b}	24.97±0.87 ^{***b}	12.77±1.75 ^{***b}
Group VI	96.70±0.96 ^{*b}	52.55±1.42 ^{**b}	79.77±5.3 ^{***b}	24.25±0.48 ^{***b}	12.35±2.13 ^{**b}

Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group.

***P<0.001 **P<0.01 * P<0.05

Conclusion:

[0078] The HC at 50 and 150 mg/kg b.w. showed a significant reduction ($P<0.05$), at 100mg/kg b.w. showed significant reduction ($P<0.01$) in glucose levels when compared to high fat diet group. The HC at 50 and 100 mg/kg b.w. showed a significant reduction ($P<0.001$), at 150mg/kg b.w. showed significant reduction ($P<0.01$) in total cholesterol and low density lipoproteins (LDL) levels when compared to high fat diet group. The HC at all doses showed a significant reduction ($P<0.001$) in total triglycerides and an increase in the HDL levels when compared to the high fat diet group (Group II).

Effect of the HC on atherogenic index

[0079]

Table 17 Results of the effect of the HC on atherogenic index

Group	Atherogenic Index
Group I	1.11±0.08
Group II	2.57±0.18 ^{***a}
Group III	1.39±0.15 ^{***b}
Group IV	1.07±0.06 ^{***b}
Group V	0.96±0.06 ^{***b}
Group VI	1.17±0.08 ^{***b}

Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group. ***P<0.001

[0080] Conclusion: The HC at all doses showed a significant reduction (P<0.001) in atherogenic index when compared to the high fat diet group.

Effect of the HC on liver triglyceride levels

[0081]

Table 18 Results of the effect of the HC on liver triglyceride levels

Group	Liver triglycerides
Group I	63.85±0.42
Group II	96.47±1.67*** ^a
Group III	87.77±2.28* ^b
Group IV	78.57±1.93*** ^b
Group V	86.47±2.11** ^b
Group VI	85.46±2.31** ^b

Data were analyzed by one way ANOVA followed by Dunnett's *t* test.
 Number of animals in each group n=6.
^aComparison made with control group.
^bComparison made with high fat diet group.
 ***P<0.001 **P<0.01 * P<0.05

[0082] Conclusion: The HC at 50 mg/kg b.w. showed a significant reduction (P<0.001), at 100 & 150mg/kg b.w. showed significant reduction (P<0.01) in liver triglycerides levels when compared to the high fat diet group.

Effect of the HC on insulin hormonal levels

[0083]

Table 19 Results of the effect of the HC on insulin hormonal levels

Group	Insulin (mU/L)
Group I	0.27±0.023
Group II	0.15±0.008*** ^a
Group III	0.15±0.005 ^{nsb}
Group IV	0.14±0.005 ^{nsb}
Group V	0.22±0.016* ^b
Group VI	0.23±0.021** ^b

Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group.

***P<0.001 **P<0.01* P<0.05 ^{ns} non significant.

[0084] Conclusion: The HC at 100 & 150mg/kg b.w. showed significant increase (P<0.05, P<0.01 respectively) in insulin levels when compared to the high fat diet group (Group II).

Effect of the HC on the fecal fatty acid estimation

[0085]

Table 20 Effect of the HC on the fecal fatty acid estimation

Group	Fecal fatty acid estimation
Group I	1.0±0.05
Group II	3.3±0.13*** ^a
Group III	4.1±0.26* ^b
Group IV	2.3±0.13** ^b
Group V	2.4±0.26** ^b
Group VI	3.1±0.26 ^{nsb}

Data were analyzed by one way ANOVA followed by Dunnett's *t* test.

Number of animals in each group n=6.

^aComparison made with control group.

^bComparison made with high fat diet group.

***P<0.001 **P<0.01* P<0.05 ^{ns} non significant.

[0086] Conclusion: The HC at 50 & 100mg/kg b.w. showed significant reduction (P<0.01) in fecal fatty acids when compared to the high fat diet group.

[0087] Therefore, the *in vivo* anti-obesity studies of the HC revealed the following results.

The Herbal Composition:

[0088]

- reduces body weight gain,
- reduces food intake
- removes abdominal fat tissue
- causes thermogenesis

- improves the HDL levels
- restores glucose levels
- Has liver protection.

EXAMPLE 5 - CLINICAL STUDIES OF HERBAL COMPOSITION

[0089] A Prospective, Randomized, Double blind, Placebo controlled clinical trial to evaluate efficacy and safety of HC tablets in reducing the bodyweight in obese patients was carried out.

[0090] A total 30 numbers of subjects were included in the study as per inclusion criteria. Subjects were randomized and equal number of subjects were assigned in HC treatment group A and placebo treatment group B. The clinical study conducted for 56 days at Sampoorna Healthcare and Amruth Poly clinic, Bangalore, India. The study was performed in fulfillment with Declaration of Helsinki, 2002. The protocol and patient informed consent form was reviewed and approved by appropriate independent ethics committees of Sampoorna Healthcare and Amruth Poly Clinic before the starting of the study. Subjects were on a treatment for 56 days and examined at weeks 0, 2, 4, 8 of the study. Volunteers followed up for the two weeks after treatment period that was 10th week of the study. On 0th week, subjects were examined for physical examination, anthropometric measurements, quality of life assessment and multiple laboratory tests which include biochemical parameters, HbA1c measurements and hematology parameters as baseline data. During 2nd and 4th visits anthropometric measurements, physical examination and any adverse events were reported. On 8th week visit, physical examinations, anthropometric measurements, lipid profile, fasting blood glucose, HbA1c, quality of life assessment, adverse events, concomitant medications were recorded. All subjects were counseled for diet and exercise compliance at every visit. 10th week visit was meant to examine vital Signs, physical Examination, recording of adverse effects or serious adverse events, concomitant medications, weight, BMI & waist circumference, Waist to hip ratio and waist to height ratio. The subjects were asked to take one tablet containing 500 mg of either HC or placebo three times a day for 08 weeks before breakfast and meals.

Table 21 Primary and secondary outcome of HC treated group

No.	Parameters	Visit 1	Visit 4	Difference in %
1	Body weight(kg)	82.5±12.3	77.25±12.9	6.36
2	Body mass index(BMI kg/m ²)	30.96±1.76	28.92±2.0	6.59
3	Waist circumference(cm)	101.25±6.67	94.92±5.9	6.25
4	Hip circumference(cm)	106.33±2.05	101.91±1.67	4.16
5	Triglycerides(mg/dL)	168.5±73.56	143.83±46.13	14.64
6	Cholesterol(mg/dL)	214.08±33.2	187.91±21.2	12.22
7	LDL(mg/dL)	138.27±34.9	104.33±25.73	24.55
8	VLDL(mg/dL)	33.7±14.71	28.76±9.22	14.66
9	HDL	42.1±8.4	54.81±5.2	30.19

Table 22 Primary and secondary outcome of Placebo treated group

No.	Parameters	Visit 1	Visit 4	Difference in %
1	Body weight(kg)	85.5±10.9	84.95±10.88	0.643
2	Body mass index(BMI kg/m ²)	32.33±1.88	32.04±1.81	0.90
3	Waist circumference(cm)	104.79±5.36	104.42±5.33	0.35
4	Hip circumference(cm)	108.83±1.70	108.46±1.73	0.34
5	Triglycerides(mg/dL)	188.5±75.4	185.75±74.68	1.46
6	Cholestrol(mg/dL)	204.91±43.8	201.16±43.2	1.83
7	LDL(mg/dL)	108.85±59.7	107.75±59.16	1.01
8	VLDL(mg/dL)	37.7±15.08	37.15±14.93	1.46
9	HDL	41.92±4	41.93±3.52	0.02

[0091] Clinical data suggest that HC is safe and has shown significant efficacy to reduce body weight and other obesity related complications.

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Patentkrav

- 1.** Sammensætning omfattende et ekstrakt af *Mangifera* til anvendelse ved behandling af fedme, hvor ekstraktet er et ekstrakt af *Mangifera indica*-bark, -blad og -frugtskind.
- 5
- 2.** Ikke-terapeutisk anvendelse af en sammensætning omfattende et ekstrakt af *Mangifera* ved styring af vægt i et individ, hvor ekstraktet af *Mangifera* er et ekstrakt af *Mangifera indica*-bark, -blad og -frugtskind.
- 10 **3.** Sammensætning til anvendelse ifølge krav 1 eller til anvendelsen ifølge krav 2, hvor ekstraktet af *Mangifera* er til stede i en mængde på 500mg.
- 4.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav til modificering af mindst en af appetit, kropsvægtforøgelse,
- 15 **metabolisme eller absorption af kalorier.**
- 5.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav til modulering af mindst en af insulinniveauer, lipaseniveauer og lipidperoxidering.
- 20 **6.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav til modulering af mindst en af serumglucose-, totalkolesterol-, triglycerid-, HDL-c- og LDL-c-niveauer.
- 25 **7.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav, hvor ekstraktet af *Mangifera indica*-bark, -blad eller -frugtskind er et ekstrakt af *Mangifera indica*-bark, -blad eller -frugtskind i et forhold på henholdsvis 80:10:10.
- 30 **8.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav, hvor sammensætningen omfatter, efter vægt, 29% flavonoider og 19% polyphenoler.
- 9.** Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de
- 35 **foregående krav, hvor sammensætningen omfatter, efter vægt, 22% mangiferin,**

4% catechin, 3% epicatechin og 0,4% quercitindihydrat.

10. Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav, hvor sammensætningen inhiberer superoxiddismutase i
5 individet.

11. Sammensætning til anvendelse eller anvendelsen ifølge mindst et af de foregående krav, hvor sammensætningen er et pulver, en pille, en tablet, en pellet, en kapsel, en tyndfilm, en opløsning, en spray, et sirup, et linctus, en
10 pastille, en pastil, et tyggegummi, en pasta, en damp, en suspension, en emulsion, en salve, en creme, en lotion, et liniment, en gel, et drop, et topisk plaster, et bukkalt plaster, en kugle, et gummi eller injektion.

DRAWINGS

Fig. 1a

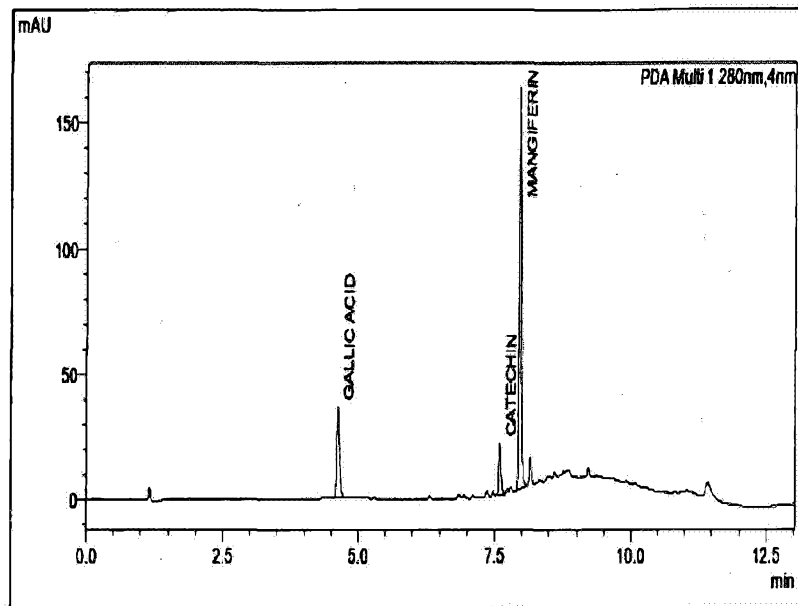


Fig 1b

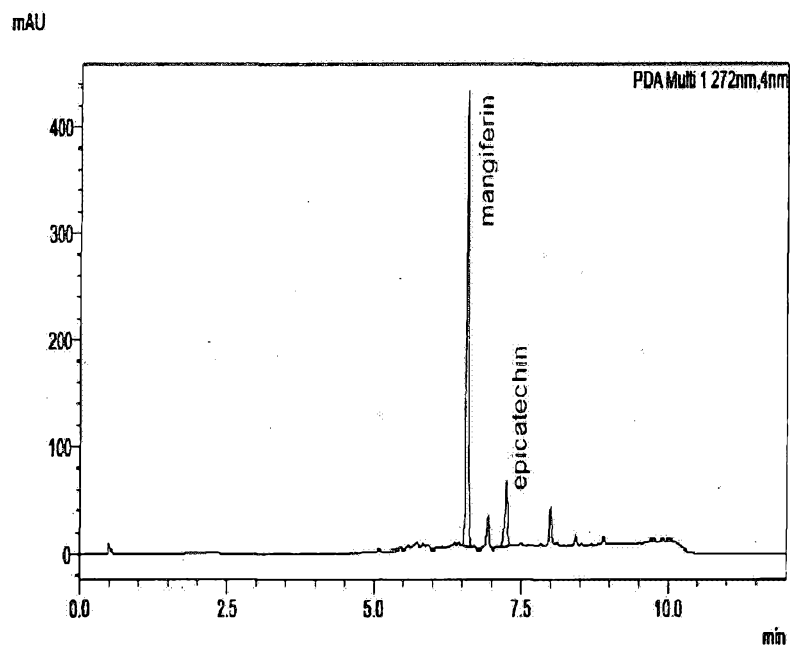


Fig. 1c

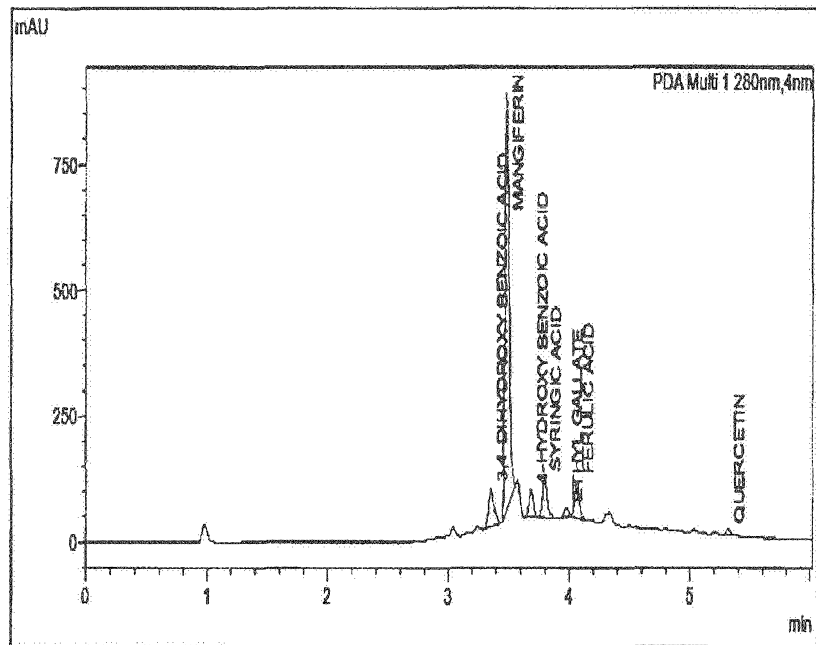


Fig 1d

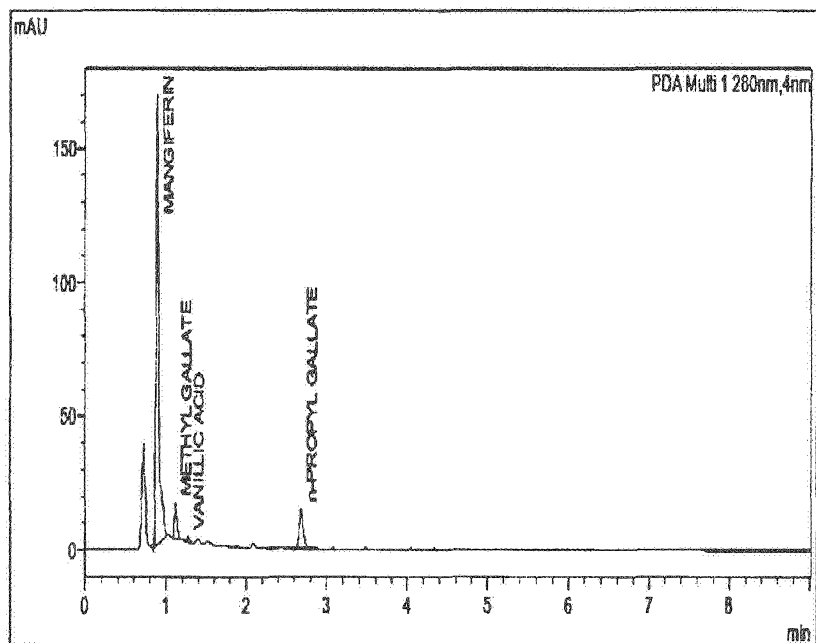


Fig. 1e

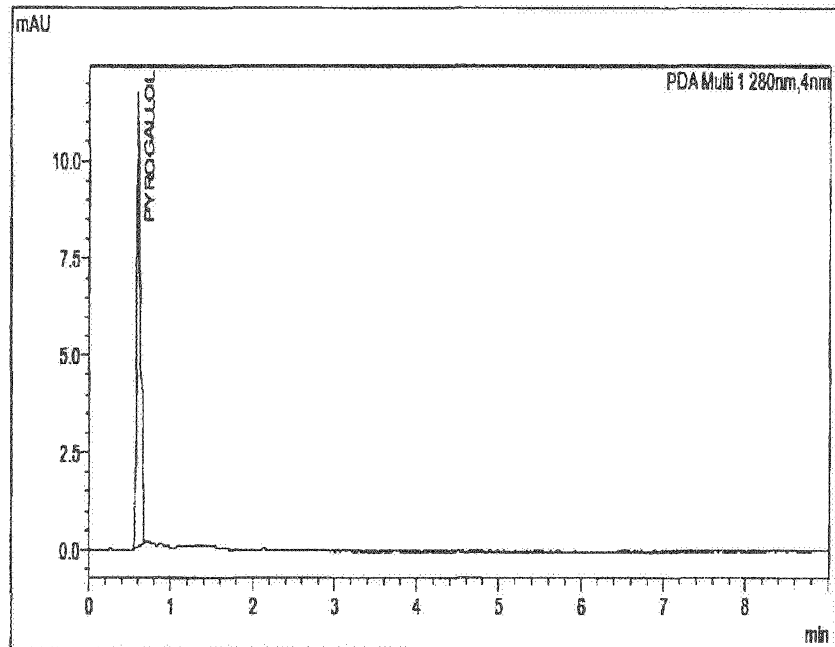


Fig. 1f

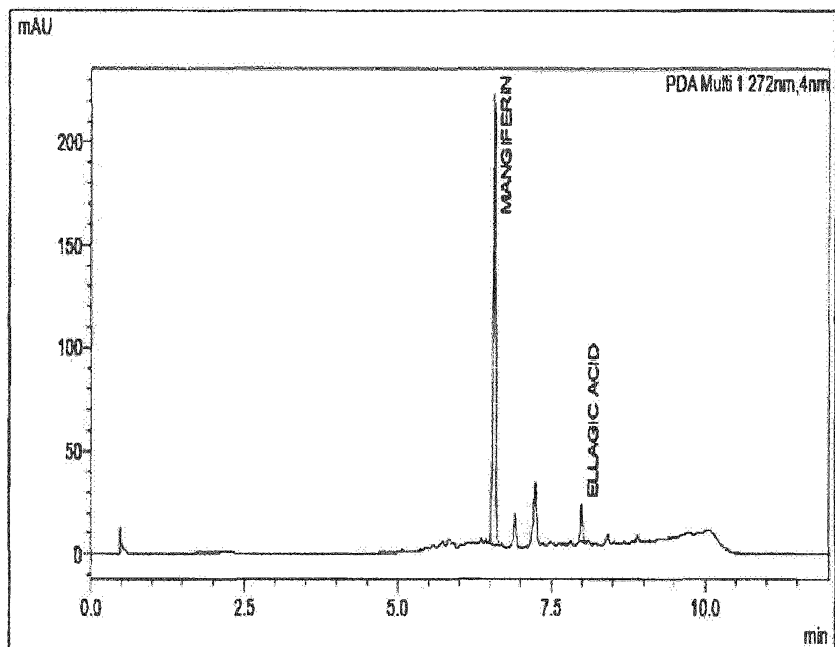


FIG. 2

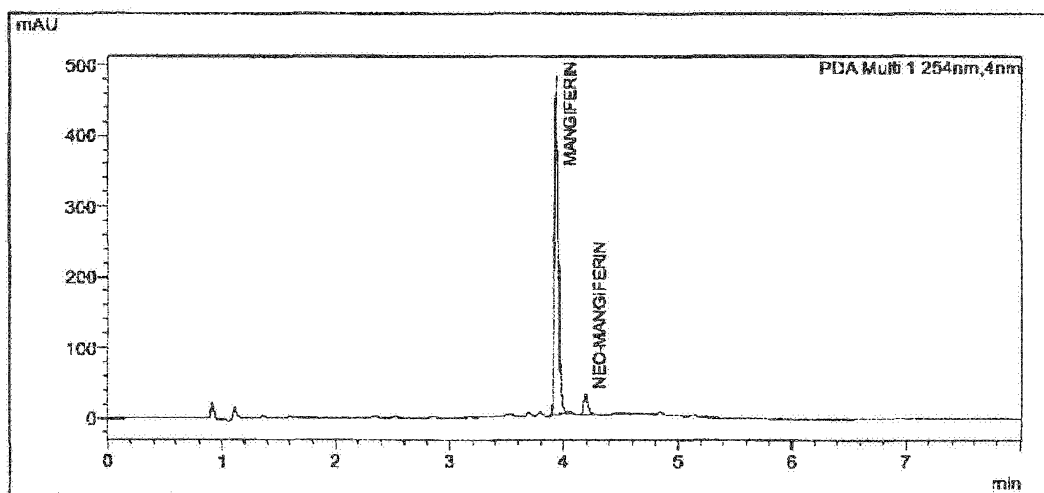


Fig. 3a

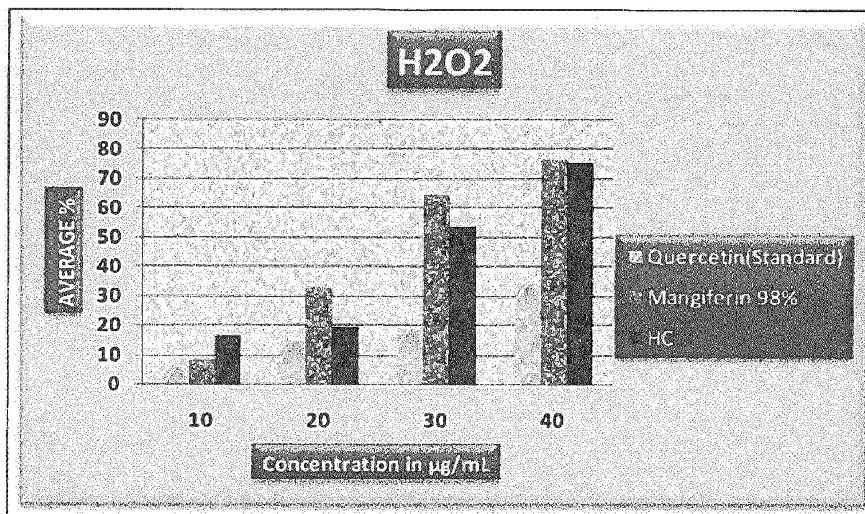


Fig 3b

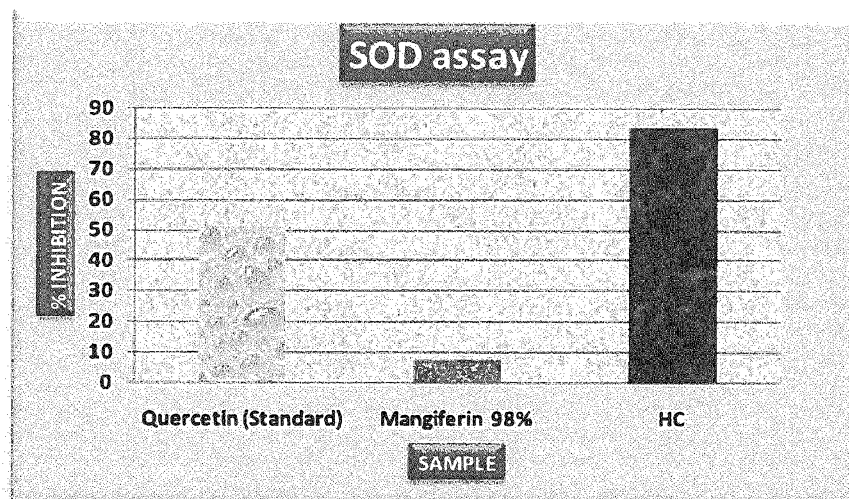


Fig. 3c

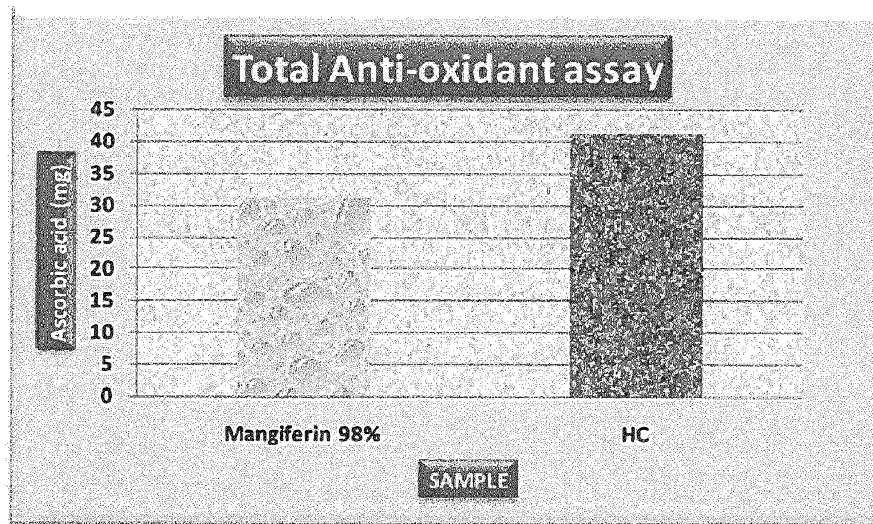


Fig 3d

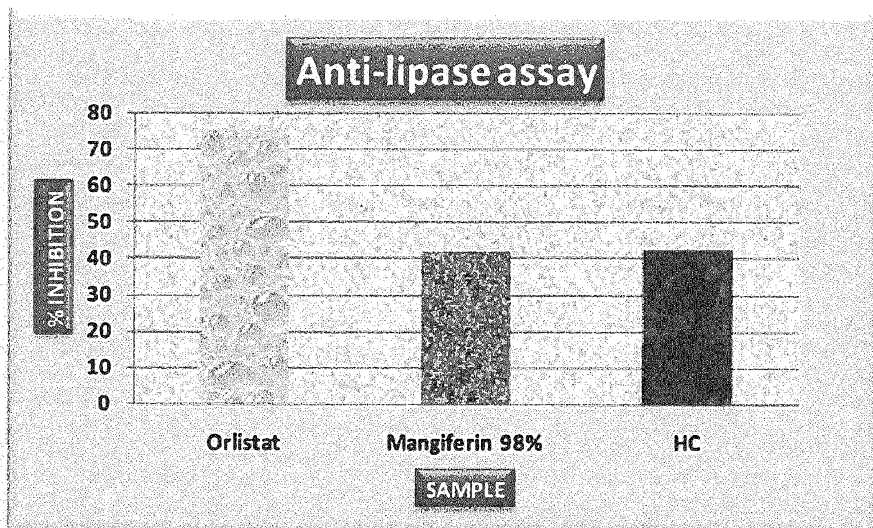


Fig. 3e

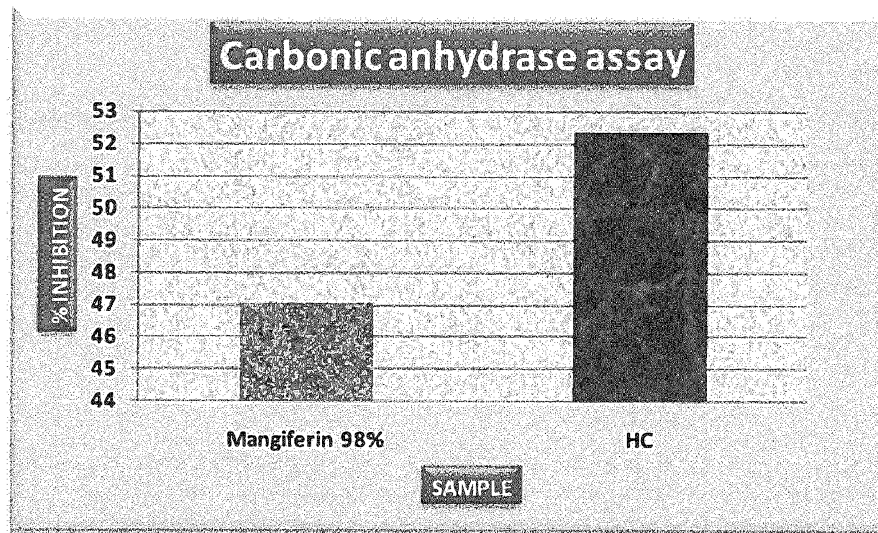


Fig. 3f

