

In Vitro Study of the Litholytic Effects of *Zilla Spinosa* L. and *Leuzea Conifera* L. on Urinary Cystine Stones

R. Mecheri¹, A. Lekouaghat¹, D. Smati¹, A. Boutefnouchet¹, M. Daudon¹

Abstract— Aim: The present study aimed to evaluate and compare the litholytic effect of two medicinal species used in Algerian traditional medicine to treat the cystine stones: *Zilla spinosa* L. (leaves and roots), and *Leuzea conifera* L. (roots).

Material and methods: Aqueous extracts of the two plants were prepared and tested for their litholytic effect against cystine stones collected from different hospitals in East Algeria. Cystine stones of comparable masses and identical morphology were maintained in the aqueous extracts for eight weeks. NaCl (9g/L) was used as a control. Mass of the stones was measured every 15 days and pH of the solutions every 3 days.

Results: Our results showed a marked litholytic effect of both extracts. Indeed, *L. conifera* and *Z. spinosa* extracts resulted in a mass loss of 103.34 ± 36.6 and 98.05 ± 15.94 mg, respectively, whereas that of the control was found to be 40.6 ± 15.08 mg. On the other hand, pH values were maintained at 5.8 and 6.1.

Conclusion: The present study demonstrated that *L. conifera* and *Z. spinosa* aqueous extracts exhibited an important litholytic effect. Therefore, these plants could be promising sources of litholytic molecules.

Index Terms— Cystine stones, *Leuzea conifera* L., litholytic effect, *Zilla spinosa* L.,

I. INTRODUCTION

Nowadays, medicinal plants are used by more than 80% of African local populations to treat and/or prevent different diseases (WHO, 2002). Nonetheless, the use of such species without a scientific basis could generate dangerous adverse effects and may represent a real public health issue. Algerian populations still use different medicinal species as alternative treatments against health problems such as cancer (Benarba et al., 2014) or urolithiasis.

Urolithiasis is the formation of urinary calculi (stones) in the urinary system. These stones are characterized by different structures and chemical composition, and result from different factors such as genetic factors, metabolism, diet, and water intake (Ravichandiran et al., 2017). Most of the urinary calculi are oxalocalcic stones, in which the calcium oxalate is found in

the form of monohydrate ($\text{CaC}_2\text{O}_4 \cdot \text{H}_2\text{O}$), dehydrate ($\text{CaC}_2\text{O}_4 \cdot 2\text{H}_2\text{O}$) or a combination of both (Alelign et al., 2018). Although the use of medicinal species to treat this form of lithiasis was studied in different countries (Kachkoul et al., 2018; Bouanani et al., 2010; Meiouet et al., 2011), few previous works have been carried out regarding cystine lithiasis which accounts for 1% of the stones in adults and 10% in children (Lechevallier et al., 2008).

Cystinic lithiasis is the result of an inherited abnormality of renal transport (proximal convoluted tubule) of cystine and dibasic amino acids (ornithine, arginine and lysine). The defect of tubular reabsorption induces an abundant urinary excretion of these amino acids. Since cystine is low soluble in acidic and neutral urine, its excretion results in the formation of urinary cystine stones (Fattah et al., 2014; Traxer et al., 2008). The treatment of cystine stones must include both the treatment of the stones and their complications, and the prevention of recurrence. It therefore depends on a good knowledge of the natural history of this disease and of the different therapeutic possibilities available (Shim and Park, 2014). Unfortunately, despite considerable progress in the medical field, the therapy of this physico-chemical variety remains difficult at present. In addition to the repeated surgical interventions induced by a lack of early diagnosis, cystine stones are indeed particularly resistant to extracorporeal shock waves and almost inaccessible to pulsed dye laser (504 nm) (Shim and Park, 2014).

Medicinal plants represent a promising source of alternative molecules with anti-lithiasic properties. Indeed, several ethnobotanical studies have identified different medicinal species used by local populations to treat urolithiasis such as *Parietaria officinalis* L. and *Erica arborea* L. in Algeria (Benarba et al., 2015), *Alhagi maurorum* L. and *Tribulus terrestris* L. in Iran (Bahmani et al., 2016), or *Dolichos biflorus* L. in India (Yadav et al., 2011). Moreover, the antilithiasic effects of different medicinal plants have been demonstrated both in vitro and in vivo (Akram and Idrees, 2019; Yachi et al., 2018). Nevertheless, these studies are almost exclusively oriented towards calcium lithiasis (Atmani and Khan, 2000; Djaroud et al., 2012; Charafi et al., 2012).

The present study aimed to evaluate the in vitro effect of two Algerian medicinal plants: *Zilla spinosa* L. (Bassicaceae) and *Leuzea conifer* L. (Asteraceae) on the dissolution of cystine kidney stones.

¹Manuscript received on 26 octobr 2023. This work was supported by the Algerian Ministry of Higher Education as part of a doctoral thesis in medical science at the ANNABA Faculty of Medicine. (pharma_rym@yahoo.fr)

Department of Pharmacy, Faculty of Pharmacy, Laboratory of Medical Botany and Phytotherapy, Annaba, Algeria

II. MATERIALS AND METHODS

A. Vegetal Material

Two medicinal plants of the Algerian flora represented in fig 01 (a) and (b) and Table □, are the subject of this research. Roots and leaves of *Z. spinosa* were harvested in December 2014 in Tamanrasset, Southern Algeria. The roots of *L. conifera* were collected in the region of Taoura, Eastern Algeria, in April 2014. Both plants were botanically identified by a pharmacist botanist from the Faculty of Medicine of Annaba, Algeria.

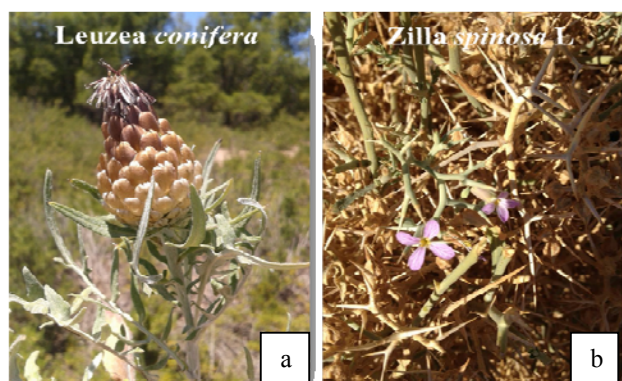


Fig 1: *Leuzea conifera* L (a) and *Zilla spinosa* L. (b) (Photos taken by A. Lekouaghet A and R. Mecheri , 2014)

TABLE □: Monograph Of The Two Plants Studied.

Scientific name	Vernacular name	Family	Way of use	Used Parts
<i>Zilla spinosa</i> L	Aftezzen	Brassicaceae	Infusion	Air parts
<i>Leuzea conifera</i> L	El kaze	Asteraceae	Maceration	Roots

B. Extraction

The extract of *L. conifera* roots was prepared by macerating 10 g of the dried roots in 100 ml of an aqueous solution of sodium chloride (NaCl) at 9 g/l, for 12 hours. The extract of *Z. spinosa* was prepared by infusion of 10 g in 100 ml of sodium chloride solution (NaCl) at 9 g/L previously boiled for 30 minutes. The extracts were then filtered.

C. Phytochemical Screening

The chemical screening carried out allows the detection of the different families of secondary metabolites existing in the studied part of the plant by qualitative characterization reactions based on precipitation or staining phenomena by reagents specific to each family of compounds as well as examinations by ultraviolet light (Bruneton, 2003).

D. Dissolution Test of Cystine Stones

Nine pure cystine kidney stones of subtype Va (Benarba et al, 2014) , of similar dimensions from the laboratory of the Faculty of Medicine of Annaba (Algeria) were tested (Fig 02). Their average size and mass are respectively 4 mm and 183.78±64.67mg.

The prepared solutions (extract and control solution of NaCl) were distributed in fractions of 30 ml in beakers containing an equal volume of phosphate buffer (Na₂HPO₄ at M/15 and KH₂PO₄ at M/15, pH = 6).

Each calculus was placed in a porous bag of braided fibers to avoid any contact with the container's wall. The extracts and NaCl control solution were changed every 3 days, after measuring their pH. The experiment was carried out in total for eight cumulative weeks, at room temperature under stirring in a shaker.

The weighing of the calculi was carried out using a precision balance (Schimatzu AUW 220 OD) every two weeks after being rinsed with distilled water, and dried for 18 hours at 40 ° C. For each type of extract, the experiments were repeated with six stones to determine the mass and pH averages. The dissolution rate of the calculi was determined using the following formula:

$$a\% = \frac{(m_i - m_f)}{m_i} \cdot 100$$

a%: Stone dissolution rate

m_i and **m_f**: Average mass of calculi before and after treatment

The experimental and measurement protocol, carried out for plant extracts, was rigorously followed for a sodium chloride (NaCl) solution at 9 g/L considered as control.



Fig 2 Cystine stones subtype Va

E. Micrographic Observations

The micrographic observations were carried out using a JEOL JSM-7100F field scanning electron microscope (SEM) at 2kV voltage.

F. Statistical analysis

Statistical analysis was performed using Minitab 16. The results are expressed as mean ± SD.

The statistical differences were evaluated by one-way ANOVA followed by Tukey test, and statistical significance was defined as p < 0.05.

III. RESULTS AND DISCUSSION

A. Results

Phytochemical Screening

As shown in TABLE □, different phytochemical compounds were detected in the roots of *L. confifera*, and leaves of *Z. spiosa*. Indeed, both aqueous extracts contain polyphenols, flavonoids, sterols, polyterpenes, and saponins.

TABLE □: PHYTOCHEMICAL SCREENING OF AQUEOUS EXTRACTS OF *ZILLA SPINOSA* L. AND *LEUZEA CONFIFERA* L.

Species	Plant part	Sterols and polyterpenes	Polyphenols	Tanins		Flavonoids	Saponins	Coumarins	Alkaloids
				gallic	catechic				
<i>Z. spinosa</i>	Aerial parts	+	+	+	-	+	+	-	+
<i>L. confifera</i>	Roots	+	+	-	+	+	+	+	-

(-) : Absence ; (+) : Presence

Our results showed that alkaloids and gallic tannins were present in *Z. spinosa* extract and absent in that of *L. confifera*, whereas catechic tannins and coumarins were detected only in *L. confifera*.

B. Dissolution of Cystine Stones:

Our results showed that exposure of cystine stones to *L. confifera* and *Z. spinosa* aqueous extracts was associated with a significant mass loss of 103.34 ± 36.6 mg and 98.05 ± 15.94 mg respectively. However, the mass loss of cystine stones treated with NaCl was found to be versus 40.6 ± 15.08 mg. Fig 3a shows the evolution of stones mass during the 8 weeks of experiment highlighting a progressive and sustained mass loss of cystine stones treated with the two plant extracts.

As illustrated in Fig 3b, the dissolution rate of cystine stones increased in a significant time-dependent manner. The dissolution rates were 66.7%, 63.4% and 23% for the cystine stones exposed to *L. confifera*, *Z. spinosa*, and NaCl, respectively.

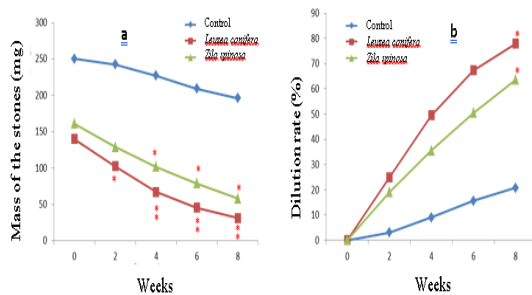


Fig 3: Evolution of mass (a) and mass loss rate (b) as a function of holding time in extracts of *Leuzea confifera* L. (100g/l), *Zilla spinosa* L. (100g/l) and control NaCl solution (9g/l).

*: Significant difference comparing to control ($P \leq 0.05$).

** : Highly significant difference comparing to control ($P \leq 0.01$).

C. pH evolution :

TABLE □ shows the evolution of pH values during the eight weeks. Measurements were performed every three days. According to the results obtained, there were no significant

changes of pH values following the exposition of cystine stones to both extracts.

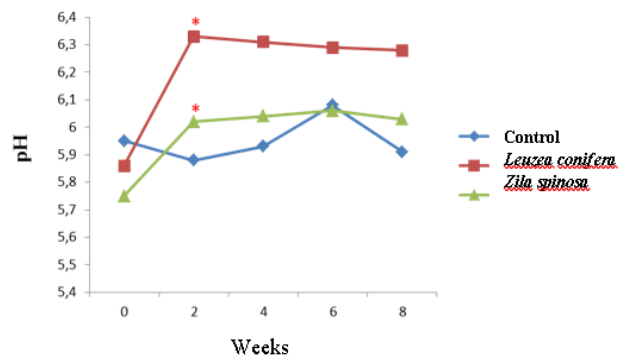


TABLE □: pH Values During The Eight Weeks Of Experimentation

Weeks Days	Two weeks		Four weeks				Six weeks				Eight weeks								
	3	6	9	15	18	21	24	27	30	33	36	39	42	45	48	51	54	57	60
Control solution	5.84	5.85	5.90	5.88	5.9	5.9	5.9	5.9	5.9	5.9	5.8	5.8	5.8	5.8	5.8	5.8	5.8	5.8	5.8
<i>Z. spinosa</i>	6.05	5.94	6.03	6.04	6.1	6.1	5.9	5.9	6.0	6.1	6.1	6.0	6.0	6.0	6.0	6.0	6.0	5.9	6.0
<i>L. confifera</i> L.	6.13	5.95	6.02	6.12	6.0	6.1	6.1	6.1	6.1	6.1	6.1	6.0	6.1	6.0	6.1	6.1	6.1	6.1	6.1

In fig 4 is shown the evolution of the pH of the three solutions as a function of the residence time of the cystinic stones. After a slight rise, recorded just two weeks after the maintenance, the pH stabilizes for both plant extracts, remaining below 6.38 for *Leuzea confifera* L and 6.03 for *Zilla spinosa* L. For the control solution, the pH fluctuates only slightly, varying between 5.86 and 6.08.

Fig 4: pH evolution of the two extracts and the control solution during the cystine stone holding stay.

*: Significant difference comparing to control ($P \leq 0.05$).

P: Threshold of significance.

D. Micrographic Observations:

The Scanning electron microscopy of cystine stones before and after eight weeks exposition is given in Figure 5. As can be seen from figure (5a, 5b), cystine stones showed a well-arranged crystallite surface, resulting in a surface compact appearance where crystallites have hexagonal-shaped facies, a feature typically observed in cystine stones at this scale. Growth twins also have a hexagonal shape with very straight edges.

Regarding the effect of NaCl solution, our results showed that the stones surfaces experienced a partial degradation and appeared with less relief. Nonetheless, stones dissolution was found since there was a consistent loss of the original hexagonal form of the cystine crystallites (Figs.5c-5d).

In fact, for *Z. spinosa* extract, stones surface showed an overall appearance in sheets, reflecting strong erosion, with a total loss of the initial hexagonal form of the cystine facies (Figs. 5e-5f).

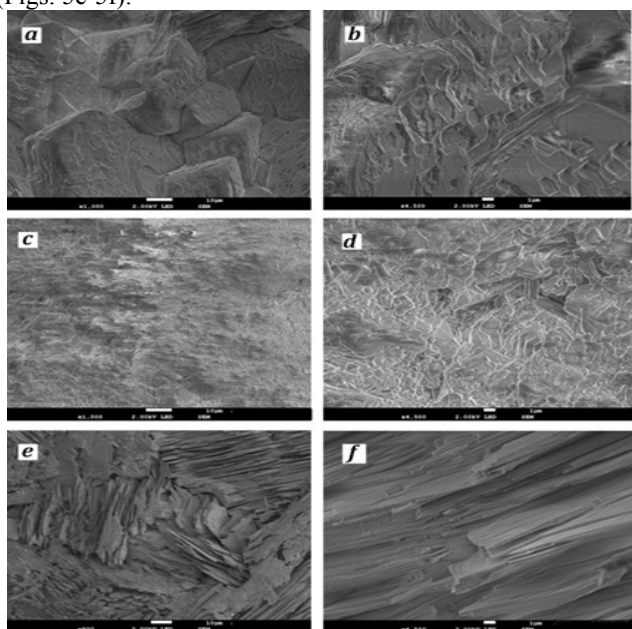


Fig 5: SEM micrographs of the surface condition of cystine stones: (a, b) before treatment, (c, d) after eight weeks in aqueous NaCl solution, (e, f) after eight weeks in *Zilla spinosa* L. extract.

IV. DISCUSSION

The use of medicinal plants to treat urolithiasis is common among the Algerian population. In fact, several ethnobotanical studies reported various local medicinal species used for the treatment of this pathology (Hammiche et al., 2006; Khitri et al., 2016; Sekkoum, 2011).

The main objective of the present study was to evaluate the *in vitro* litholytic effect of two medicinal species: *Z. spinosa* and *L. conifera*. The preparation methods and doses were similar to those currently practiced in Algerian pharmacopeia.

Our results showed that the cystine stones mass loss was significantly higher with plants extracts (65%) than with NaCl control (23%). This dissolution was carried out in the presence

of a phosphate buffer ensuring the extracts a slightly acidic pH, between 5.8 and 6.1. This finding is interesting since cystine is poorly soluble at these pH values, and its solubility limit does not exceed 1.2 mmol/l for pH <6.5 (Fig. 4). Cystine stones dissolution, as reported by similar studies (Meiouet et al., 2011), achieved without presence of a buffer allowing a free pH evolution to high values (Hannache et al., 2012). Accordingly, the stones mass loss was favored in several experiments by the medium alkalization. When the two species were compared, no significant differences were observed ($p = 0.44$).

The mesoscopic scale-microscopic observations revealed that *Z. spinosa* extract resulted in an erosion of the stones surface, attributed therefore to their inter-interaction (with the extract). These findings are consistent with those previously reported by Hannache et al (2012). Indeed, they demonstrated that cystine stones treated with *Arenaria ammophila* and *Parietaria officinalis* showed surface erosion, accompanied by partial or total loss of the hexagonal shape of cystine crystallites, and presence of leaves separated by more or less wide spaces (hannache et al., 2012). Similar characteristics (surface erosion, structure in leaves and loss of the typical hexagonal shape) were found in cystine stones of patients receiving sulfhydryl drugs bearing thiol (bazin et al., 2014). Although a classical alkalization such as trometamol could reduce the cystine crystallites size, it does not modify the crystals shape and it can generate the carbapatite formation (bazin et al., 2014; bazin, 2010).

The litholytic effect exerted by both *Z. spinosa* and *L. conifer* extracts could be attributed to their active phytochemical compounds since the pH values remained relatively unchanged. These active compounds can form "cystine-active ingredient" complexes more soluble than cystine inducing therefore a higher dissolution. Indeed, the phytochemical screening of the two species revealed the presence of several bioactive compounds. Aerial parts of *Z. spinosa* were found to contain coumarins, sterols, triterpenes, polyphenols, triterpene saponins. Moreover, seven flavonoids types were isolated from these plant part (El-Sharabasy et al., 2012). On the other hand, different phytochemicals were found in *L. conifer* such as inulin-type polysaccharides in addition to condensed tannins, saponins, phenols, polyphenols and a high concentration of flavonoids (Atmani and Khan, 2000).

Thus, the "cystine-active ingredient" complexes formed during the eight-week present study might be of cystine-flavonoids, cystine-tannins or cystine-saponosides types. This process could be enhanced by hydrogen, and hydrophilic bonds between the functional groups of the active phytochemicals, and the cystine carboxylic or amine functions as suggested by Meiouet et al (2011). The nature and abundance of these compounds vary from one plant to another, which may explain the observed differences in efficacy. A synergistic process involving many of the complexes evoked can also occur and allow a more efficient cystine dissolution.

V. CONCLUSION

In the present study, we demonstrate an important *in vitro* urolitholytic effect of *Z. spinosa* and *L. conifera* aqueous

extracts in the presence of a phosphate buffer (pH = 6). Both extracts resulted in significant mass losses of cystine stones demonstrating the efficiency of these species in the dissolution of this type of calculus in a slightly acid environment. This uro-litholytic effect could be attributed to the formation of active phytochemicals-cystine complexes.

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

REFERENCES

- [1] Akram, M., & Idrees, M. (2019). Progress and prospects in the management of kidney stones and developments in phyto-therapeutic modalities. *International journal of immunopathology and pharmacology*, 33, 2058738419848220.
- [2] Alelign, T., & Petros, B. (2018). Kidney Stone Disease: An Update on Current Concepts. *Advances in urology*, 2018, 3068365. <https://doi.org/10.1155/2018/3068365>
- [3] Bahmani, M., Baharvand-Ahmadi, B., Tajeddini, P., Rafieian-Kopaei, M., & Naghdi, N. (2016). Identification of medicinal plants for the treatment of kidney and urinary stones. *Journal of renal injury prevention*, 5(3), 129–133. <https://doi.org/10.15171/jrip.2016.27>
- [4] Benarba, B., Meddah, B., & Tir Touil, A. (2014). Response of Bone Resorption Markers to Aristolochia longa Intake by Algerian Breast Cancer Postmenopausal Women. *Advances in pharmacological sciences*, 2014, 820589. <https://doi.org/10.1155/2014/820589>
- [5] Fattah, H., Hambaroush, Y., & Goldfarb, D. S. (2014). Cystine nephrolithiasis. *Translational andrology and urology*, 3(3), 228–233. <https://doi.org/10.3978/j.issn.2223-4683.2014.07.04>
- [6] Kachkoul, R., Sqalli Houssaini, T., El Habbani, R., Miyah, Y., Mohim, M., & Lahrichi, A. (2018). Phytochemical screening and inhibitory activity of oxalocalcic crystallization of *Arbutus unedo* L. leaves. *Helvion*, 4(12), e01011. <https://doi.org/10.1016/j.helivion.2018.e01011>
- [7] Ravichandiran, V., Veerapandian, M., & Manisenthil Kumar, K.T. (2017). Kampo Medicine for Renal Inflammatory Conditions. *Japanese Kampo Medicines for the Treatment of Common Diseases: Focus on Inflammation*. 111 – 125.
- [8] Shim, M., & Park, H. K. (2014). Multimodal treatments of cystine stones: an observational, retrospective single-center analysis of 14 cases. *Korean journal of urology*, 55(8), 515–519. <https://doi.org/10.4111/kju.2014.55.8.515>
- [9] Yachi, L., Bennis, S., Aliat, Z., Cheikh, A., Idrissi, M. O. B., Draoui, M., & Bouatia, M. (2018). In vitro litholytic activity of some medicinal plants on urinary stones. *African Journal of Urology*, 24(3), 197-201.
- [10] Yadav, R. D., Jain, S. K., Alok, S., Mahor, A., Bharti, J. P., & Jaiswal, M. (2011). Herbal plants used in the treatment of urolithiasis: a review. *International Journal of Pharmaceutical Sciences and Research*, 2(6), 1412.

competition for assistant teachers July 2011

- Registration thesis of doctor of medical science November 2013.

- Access to the rank of Lecturer class B hospital-university January 2019

- Access to the rank of Class A hospital-university lecturer: National competition July 2019

Access to the rank of Professor hospital-university lecturer: National competition July 2023

Professional experience

1-Internships: End of cycle in pharmacy from September 2004 to September 2005

Places of internships: University Hospital Centers (CHU DORBON), Annaba, Algeria, internships under the supervision of professors who are heads of departments.

2-Specialty courses: From January 2006 to April 2010

*At the hospital level: Pharmacy service (CHU Ibn Sina, Annaba Algeria):

3- Pharmacist assistant specialist head of the central pharmacy of CHU BEJAIA -Algeria (October 2011 -April 2012)

4-Pharmacist assistant specialist in the central laboratory of the EPH Hakim OKBI Guelma-Algeria (April 2011-December 2011)

5-Teaching courses and responsible for the module as a temporary worker in the Faculty of Pharmacy Constantine October 2010 – December 2011).

6-Professor hospital-university teacher of courses and practical work in the Faculty of Pharmacy Annaba-Algeria from December 2011 until the day

7-Associate teacher of the modules of hygiene and safety and research methodology at the school paramedic Guelma September 2021.

Publications

Mecheri Rim, Boutefnouchet Abdelatif, Smati Dalila, Daudon Michel. Evaluation of the antilithiasic, cystinic and oxalo-calcic effect of aqueous extract of *Zilla spinosa* L. 2023. fhal-03952113f DOI : <https://hal.science/hal-03952113>

2. Rim Mecheri, Dalila Smati, Abdelatif Boutefnouchet, Michel Daudon. Ethnobotanical study of medicinal plants used in the treatment of renal lithiasis in the Algerian Northeast Plantes médicinales utilisées dans le traitement de la lithiase rénale dans le Nord-Est algérien. 2023. fhal-04064327f DOI:<https://hal.science/hal-04064327>

Books

1 Fighting Covid 19 in Algeria European University Publishing French 92 pages ISBN 10 6203449482 ISBN 13 978-6203449488

2 Food supplements European University Publishing French 88 pages ISBN 10 6203449490 ISBN 13 978-6203449495



MECHERI

born on 18-05-MECHERI Rim

1983 in GBorn on 18-05-1983 in Guelma

AlgeriaPharmacienne spécialiste,professor

Hospital-university in pharmacy,University of Badji

Mokhtar, Faculty of Medicine of Annaba, Algeria.

Route Zaafrania, B.P.205 Annaba, 23000 Algeria

Studies and degrees

-Diploma of secondary studies (BAC), series science of nature and life in 2000. Mention: Good

-State pharmacist diploma, Annaba Faculty of Medicine: November 2005.

-Diploma of specialized medical studies (DEMS): December 2009

- Access to the rank of hospital-university assistant teacher: National