



## Antibacterial and Antioxidant Effect from Nanoparticle of *Andrographis paniculata* Extract on Wistar Rat Infected with *Listeria monocytogenes*

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### Abstract

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**Background :** *Listeria* infection triggers the production of ROS (Reactive Oxygen Species) and radical-waste accumulation such as Malondialdehyde (MDA). *Andrographis paniculata*, triggers the production of Superoxide Dismutase (SOD) as antioxidant and suppresses the bacteria multiplication in host's body. However, these active-phytochemical have poor destruction due to their large size and molecular weight. Nanoparticle technology may overcome this problem to increase bioavailability and benefit of herbal pharmacology. This study was aimed to evaluate the effectivity nanoparticle of *A. paniculata* extract to increase bacteria elimination, increase SOD level, and reduce MDA level in rat infected with *L. monocytogenes*.

**Methods :** Experimental research with post-test only controlled trial design was conducted using white rats (*Rattus norvegicus* strain Wistar) into Normal (N), Negative Control (K-), *A. paniculata* extract (EAP-200), and Nanoparticle of *A. paniculata* extract Group (nEAP-100, nEAP-200, and nEAP-400). Colony was measured using total plate count method. SOD & MDA level were measured using colorimetric method

**Results :** *L. monocytogenes* bacterial count from group with extract *A. paniculata* was significantly lower than those in negative control ( $p<0.05$ ). SOD level from group with extract *A. paniculata* was very significantly higher than those in negative control ( $p<0.01$ ), while MDA level from group with extract *A. paniculata* was very significantly lower than those in negative control ( $p<0.01$ ). Dose of 200 mg/kgBW in nanoparticle form was the most optimum dose.

**Conclusion :** Extract of *A. paniculata* at various doses and form, increase bacterial clearance, increase SOD level, and reduce MDA level in rat infected with *L. monocytogenes*.

**Keywords :** Antibacterial, *Andrographis paniculata*, Antioxidant, *Listeria monocytogenes*, Nanoparticle

## INTRODUCTION

WHO reports that 600 million people are suffered from foodborne infection with 175.000 people were died in Southeast Asia.<sup>1</sup> *Listeria monocytogenes* has highest mortality rate among other foodborne pathogen bacteria in United States (16,9%) and Europe (18,8%).<sup>2</sup> *Listeria* infections cause diseases such as sepsis, meningitis, and die in some individuals such as children and pregnant woman.<sup>3-7</sup>

Free radical such as *Reactive Oxygen Species* (ROS) are side products of aerobic metabolism, which reactive, destructive, and causing oxidative stress. Infection of *L. monocytogenes* increase production of ROS for killing bacteria. However, an excessive of ROS in host body, causes oxidative stress along with the accumulation of radical waste in the host body such as fatty acid radicals or Malondialdehyde (MDA) that resulted from lipid peroxidation in cell membrane or tissues. Its presence, provides effects such as DNA damage and protein degradation which causes apoptosis, neuro-inflammation, and cancer.<sup>8-11</sup> The cell requires antioxidant enzyme such as Superoxide Dismutase (SOD), which is able to neutralize ROS into oxygen (O<sub>2</sub>) and hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) and also to prevent ROS adverse effect and protect cells from oxidative stress.<sup>12,13</sup>

Various medicine plants which contains natural active compounds have been used and developed in health sector as one of the alternative therapy for patient with antibiotic resistant.<sup>14,15</sup> *A. paniculata* is one of the Indonesia traditional medicines used for antimalarial, antimicrobial,<sup>16</sup> anti-inflammatory,<sup>17</sup> antioxidant, anti-parasitic,<sup>18</sup> antidiabetic, and anticancer agents in Asia.<sup>19</sup> *A. paniculata* contains active phytochemical such as diterpenoid lactone, flavonoid, quinic acid, tannins, and alkaloid.<sup>20,21</sup>

The active pharmacological effects of herbal plants on various disease are still not optimum in host body because poor distribution due to their large size and molecular weight.<sup>22</sup> Nanoparticle are one of the technology-based product utilization which control the optical, physical and chemical properties of the compound to increase drug absorption in body (increase bioavailability).<sup>23</sup> Chitosan is a natural polymer biomaterial derived from chitin compounds which low side effects on humans. *A. paniculata* extract with chitosan may also increase antioxidant capacity.<sup>24</sup>

Studies about the benefit of nanoparticle of *A. paniculata* extract still limited as in vitro studies, therefore this research focus on the effectivity of nanoparticle of *A. paniculata* extract to determine the optimal dose for increasing bacterial clearance and SOD level, also reducing MDA level in rat infected with *L. monocytogenes* (in vivo).

## METHODS

An experimental study was done with a post-test-only randomized controlled group design. The study was conducted at the Research and Animal Laboratory, Muhammadiyah Semarang University, Semarang for 7 days after obtaining ethical approval from the Health Ethics Committee. The Ethical clearance issued by The Health Research Ethics Committee Faculty of Medicine Universitas Diponegoro. Colony count from the blood and liver samples of rat was measured at Microbiology Laboratory, Faculty of Medicine, Diponegoro University while the analysis of SOD and MDA level was measured at Ecotoxicology Laboratory, Faculty of Biology, Jenderal Soedirman.

### Animals and Experimental Groups

The study used 36 male Wistar Rat aged 812 weeks with a body weight of 200-300 grams, divided into 6 groups.

The research group division was as follows:

Normal group (N) : Healthy Rat (only general feed)

Negative control group (K-) : Rat infected by *L. monocytogenes*

Treatment group I (EAP) : Rat infected by *L. monocytogenes* and treated with 200 mg/kg *A. paniculata* extract

Treatment group II (nEAP-100) : Rat infected by *L. monocytogenes* and treated with 100 mg/kg Nanoparticle of *A. paniculata* extract

Treatment group III (nEAP-200) : Rat infected by *L. monocytogenes* and treated with 200 mg/kg Nanoparticle of *A. paniculata* extract

Treatment group IV (nEAP-400) : Rat infected by *L. monocytogenes* and treated with 400 mg/kg Nanoparticle of *A. paniculata* extract

The experimental animals were inoculated with *Listeria monocytogenes* ATCC 7644 from Gadjah Mada University. 0.5 mL of *L. monocytogenes* in PBS (10<sup>9</sup> CFU/mL) was intravena injected into each rat on the first day.<sup>25,26</sup> After bacterial infection, nanoparticles of *A. paniculata* dissolved in 1% DMSO were given orally (gastric tube) on treatment groups at the same time of Biorat feeding on each day for a week. After one week, blood (whole blood and serum) and liver tissue was isolated for analysis.<sup>25</sup>

### Preparation of *A. paniculata* extract

The methanol extract of *A. paniculata* was prepared by maceration using 70% methanol as solvent. In this study, the dried *A. paniculata* leaf powder was obtained from Balai Besar Penelitian dan Pengembangan Tanaman Obat dan Obat Tradisional (B2P2TOOT), Tawangmangu, Central Java, Indonesia. Approximately 20 g of simplisia was macerated with 200 mL of 70% methanol (w:v = 1:10). After maceration, this mixture was filtered using

Whatman filter paper number No.1. The filtrate was evaporated using a Vacuum rotary evaporator at 50°C until crude extract was obtained.<sup>27</sup>

### Preparation of Nanoparticle of *A. paniculata* leaf extract

The nanoparticle of *A. paniculata* leaf extract was produced by using ionic gelation and ultrasonication method followed by addition of chitosan (polimer) and sodium tripolyphosphate (STPP as crosslinker). The 1% chitosan was dissolved in a 1% acetic acid solution and homogenized. About 0.15 gram of *A. paniculata* extract was diluted in 5 drops of 70% methanol. The diluted *A.paniculata* extract was then added to the chitosan solution. The crosslinker in the form of STPP was dissolved in distilled water until reached 1.5% concentration and a mixture of bitter extract + chitosan was added to the solution and then homogenized. The homogeneous solution was then centrifuged at a speed of 10,000 rpm for 10 minutes and then the natant was separated from the supernatant. The natan solution was then sonicated at a frequency of 20 kHz for 60 minutes.<sup>28</sup> Morphological analysis including the size and shape of the nanoparticle compound was measured using a Particle Size Analyzer (PSA) and Scanning Electron Microscope (SEM).<sup>29</sup>

### Total Bacteria Colony Count

Blood and liver samples approximately 1 mL/1 gr were diluted in 9 mL of NaCl solution (ratio 1:9).<sup>30</sup> 1 mL of the 10<sup>-3</sup> to 10<sup>-5</sup> dilution tubes, 1mL was taken and transferred into a petri dish. Next, 20 mL of Nutrient Agar (NA) media was poured into a petri dish and then homogenized. The media was incubated at 37°C for 2x24 hours.<sup>31</sup> The colony formed were then counted using the TPC formula.<sup>32</sup>

$$\text{TPC (CFU/mL)} = \text{total colony} \times \text{volume sample} \times \frac{1}{\text{Dilution factor}}$$

### SOD and MDA Level

Measurement of superoxide dismutase (SOD) level was analyzed using the Superoxide Dismutase commercial Kit (Elabsience).<sup>33</sup> A 20 µL of plasma was added 1 mL of SOD buffer solution and 100 µL of xanthine oxidase solution. A blank solution was prepared by adding and mixing 1 mL of SOD buffer solution and 100 µL of xanthine oxidase solution. The absorbance value at λ520 nm was measured using a UV-Vis spectrophotometer. The activity of the SOD enzyme was measured using the following formula.<sup>34</sup>

$$\text{Activity of SOD (U/mL)} = \frac{As}{Ao} \times Ks$$

Note: As: absorbance value of sample solution;  
Ao: absorbance value of a standard solution;  
Ks: standard concentration (30.65).

Measurement of malondialdehyde (MDA) level was analyzed using the Superoxide Dismutase commercial Kit (Elabsience).<sup>33</sup> A 400 µL of plasma was added 400 uL of TCA 20% solution in reaction tube then centrifuge. After centrifuged, 400 uL supernatant of the mixture added 1 mL of TBA 0,67% solution then incubated on water bath for 10 minutes. A blank solution was prepared by adding and mixing 1 mL of TBA 0,67% solution and 400 µL of TCA 20% solution. The mixture was measured by spectrophotometry at λ532 nm.<sup>35</sup>

### Statistical Analysis

The data normality was tested using the Shapiro-Wilk test. The average of *Listeria* colony in blood, SOD, and MDA level were normally distributed, then were analyzed using One Way Anova and followed by Post Hoc LSD. The average of *Listeria* colony in hepar was not normally distributed, then were analyzed using Kruskal-Wallis test followed by the Mann-Whitney test to determine the differences between groups in this study. The result of *p-value* was considered significant, if *p* < 0.05.

## RESULTS

The condition after 7 days experiment, rats in the Negative Control Group showed different behaviors and clinical conditions from the treatment groups. The rat appeared weak and less active as the day went on, the hair was dirty, and the feces became loose, while in the Treatment Group (EAP-200, nEAP-100, nEAP-200, and nEAP-400), the rats were active with clean hair, normal feces, and physically similar to the mice in the Normal Group.

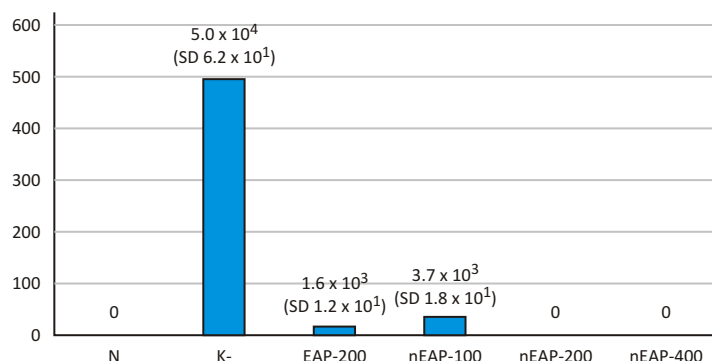
### *Listeria monocytogenes* Colony Count

The total number of bacteria in the blood and liver samples after being treated for 7 days are shown in Figure 1 and Figure 2. Bacterial colony count was carried out with a dilution until 10<sup>-3</sup> for blood samples and 10<sup>-6</sup> for liver samples.

### *L. monocytogenes* Colony Count in Blood

The average number of *L. monocytogenes* bacterial colony in the blood (Figure 1), the treated group (EAP-200, nEAP-100, nEAP-200, and nEAP-400) showed a very low graph compared to the Negative Control.

The result of LSD test showed that the average of *L. monocytogenes* colony in blood for treatment group (EAP-200, nEAP-100, nEAP-200, and nEAP-400) was



**Figure 1.** Average Number of *L. monocytogenes* Colony in Blood (CFU/mL)

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract))

TABLE 1

**Statistical Analysis of Average Number of *L. monocytogenes* in Blood**

	N	K-	EAP-200	nEAP-100	nEAP-200	nEAP-400
N	—	<0.001*	0.370	0.043	1	1
K-	<0.001	—	<0.001*	<0.001*	<0.001*	<0.001*
EAP-200	0.370	<0.001*	—	0.233	0.370	0.370
nEAP-100	0.043*	<0.001*	0.233	—	0.043*	0.043*
nEAP-200	1	<0.001*	0.370	0.043*	—	1
nEAP-400	1	<0.001*	0.370	0.043*	1	—

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract); \*different results are statistically significant)

significantly lower than of Negative Control group ( $p < 0.01$ ; Table 1). The average of *L. monocytogenes* colony for nEAP-200 and nEAP-400 groups was significantly lower than of EAP200 and nEAP-100 ( $p < 0.05$ ; Table 1), and there was no significant difference in the nEAP-200 group with nEAP-400 ( $p > 0.05$ ; Table 1). The average number of colony in EAP200 was lower than of nEAP-100, but was not statistically significant ( $p > 0.05$ ; Table 1).

#### *L. monocytogenes* Colony Count in Liver

The average number of *L. monocytogenes* bacterial colony in the liver (Figure 2), the treated group (EAP-200, nEAP-100, nEAP-200, and nEAP-400) showed a very low graph compared to the Negative Control.

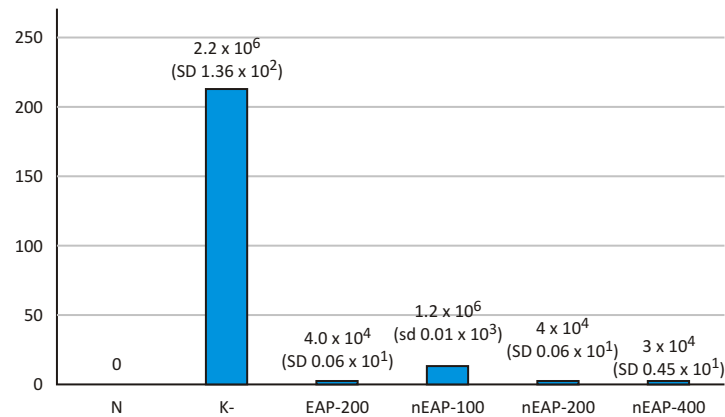
The result of Mann Whitney test showed that the average number of *L. monocytogenes* colony in the blood for EAP-200, nEAP-200, and nEAP-400 groups was very significantly lower than of Negative Control group

( $p < 0.01$ ; Table 2) while the nEAP-100 group was significantly lower than the Negative Control group ( $p < 0.05$ ; Table 2). The average number of *L. monocytogenes* colony in the EAP-200, nEAP-100, and nEAP-200 groups showed there was not statistically significant difference ( $p > 0.05$ ; Table 2).

#### Superoxide Dismutase (SOD) Plasma Level

Figure 3 shows that the average of SOD plasma level in the treated group (EAP-200, nEAP-100, nEAP-200, and nEAP-400) were higher compared to the Negative Control and Normal Group.

The result of LSD test showed that SOD plasma level in the EAP-200, nEAP-100, nEAP-200, and nEAP-400 groups were very significantly higher than the Normal and Negative Control Groups ( $p < 0.01$ ; Table 3). SOD level in the EAP-200 and nEAP-100 groups were very significantly higher than Negative Control Group,



**Figure 2.** Average Number of *L. monocytogenes* Colony in Liver (CFU/mL)

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract))

TABLE 2

**Statistical Analysis of Average Number of *L. monocytogenes* in Blood**

	N	K-	EAP-200	nEAP-100	nEAP-200	nEAP-400
N	–	0.003*	1	0.869	1	1
K-	0.003	–	0.069	0.992	0.069	0.047*
EAP-200	1	0.060	–	1	1	1
nEAP-100	0.869	0.992	1	–	1	1
nEAP-200	1	0.069	1	1	–	1
nEAP-400	1	0.047*	1	1	1	–

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract); \*different results are statistically significant)

but this increase was still significantly lower than of nEAP-200 and nEAP-100 ( $p < 0.05$ ; Table 3). The increase of SOD level between nEAP-200 and nEAP-400 was not statistically significant ( $p > 0.05$ ; Table 3).

#### Malondialdehyde (SOD) Plasma Level

Figure 4 shows that the average of MDA plasma level in the treated group (EAP-200, nEAP-100, nEAP-200, and nEAP-400) was slightly lower than Negative Control.

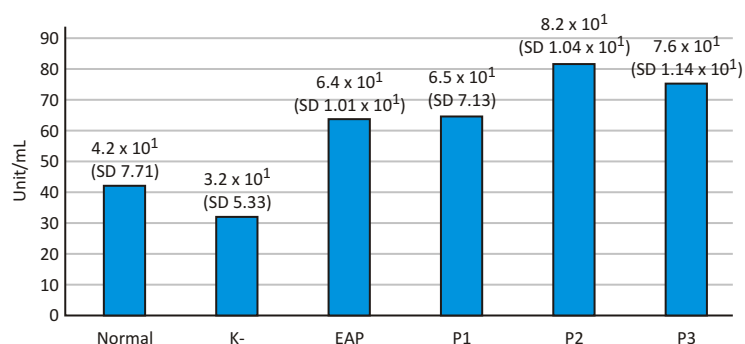
The result of LSD test showed that MDA plasma level in all treatment groups (EAP-200, nEAP-100, nEAP-200, and nEAP-400) were significantly lower than of the Negative Control Group ( $p < 0.05$ ; Table 4). The MDA level in nEAP-200 and nEAP-400 groups were significantly lower than of EAP200 group ( $p < 0.05$ ; Table 4). The MDA level between nEAP-200 and nEAP-400 were not statistically significant ( $p > 0.05$ ; Table 4).

#### DISCUSSION

This study proved that EAP in both crude extracts and nanoparticle form increased the elimination (clearance) of *Listeria monocytogenes* bacteria in wistar rat infected-*L. monocytogenes*. The effect of bacterial clearance were seen on 200 mg/kgBW of crude extract and nanoparticle form. The bacterial clearance effect from active metabolite compounds in EAP might be caused by antibacterial effects and / or the ability to stimulate phagocytosis and intracellular bacterial killing. At this point, we are not sure which mechanism caused effective bacterial clearance in this study.

Previous studies reported that andrographolide (diterpenoid) content in *A. paniculata* has antibacterial activity to inhibit bacterial biofilms form in the host, damage bacterial cell membranes and walls through inhibition of diffux pumps, inhibit the hemolytic





**Figure 3.** Superoxide Dismutase Serum Level (Unit/mL)

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract))

**TABLE 3**  
**Statistical Analysis of SOD Plasma Level**

	N	K-	EAP-200	nEAP-100	nEAP-200	nEAP-400
N	—	0.155	0.001*	<0.001*	<0.001*	<0.001*
K-	0.155	—	<0.001*	<0.001*	<0.001*	<0.001*
EAP-200	0.001*	<0.001*	—	0.676	<0.001*	0.014*
nEAP-100	<0.001*	<0.001*	0.676	—	0.003*	0.035*
nEAP-200	<0.001*	<0.001*	0.001*	0.003*	—	0.299
nEAP-400	<0.001*	<0.001*	0.014*	0.035*	0.299	—

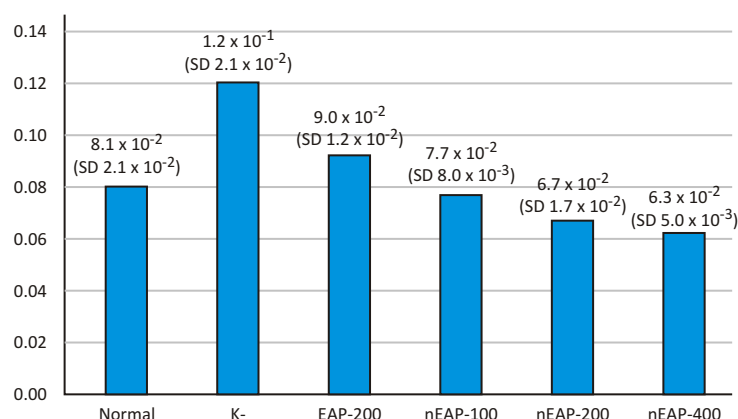
(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract); \*different results are statistically significant)

activation of Listeriolysin O (LLO), and inhibit communication between bacterial cells.<sup>36–39</sup> The Flavonoid in *A. paniculata* able to damage cell walls bacteria, inhibit synthesis of nucleic acid (through inhibition of the topoisomerase enzyme) and inhibit energy metabolism (through inhibition of NADH-cytochrome C reductase).<sup>40</sup> Previous studies proved that supplementation of silver-nanoparticle *A. paniculata* was effective to inhibit Gram-positive bacteria (*Staphylococcus aureus* with MIC: 25 ug/mL) and Gram-negative bacteria (*E. coli* with MIC: 12.5 ug/mL) in dilution agar method.<sup>41</sup> Paramasivam<sup>42</sup> reported that Aurum(Au)-nanoparticles *A. paniculata* showed a trend of increasing antibacterial effects from a dose of 50 ug/mL to 100 ug/mL using agar diffusion method. On the other hand, andrographolide also triggers lymphocyte proliferation, increases migration of macrophages towards the site of infection, phagocytosis and intracellular killing.<sup>43</sup>

Our findings also showed that *A. paniculata* in various doses and forms increased SOD level very significantly. Dose of 200 mg/kgBW in nanoparticle was

significantly more efficaciously increased SOD level compared to dose of 200 mg/kgBW in crude extract form, thus, it can be concluded that the nanoparticle form on dose of 200 mg/kgBW is more effective in increasing SOD level than the crude extract form. There was no significant differences of SOD level between dose of 200 mg/kgBW and 400 mg/kgBW in nanoparticle, implying that the dose of 200 mg/kgBW in nanoparticle form is optimum for increasing SOD level.

SOD is an enzyme which stabilize free radicals of ROS which produced by phagocyte cells in vacuoles to kill bacteria intracellularly and prevent cell/tissue damage due to oxidative stress.<sup>44</sup> According to Bhattacharya's research,<sup>45</sup> ROS is produced after bacteria are phagocytized intracellularly. However, excessive ROS production causes damage to the cells and tissue, therefore SOD production was increased to suppress ROS production and inhibit the apoptosis pathway through the BAX and BCL-2 protein inhibition. In this study, the SOD level was increased on 200 mg/kgBW and 400 mg/kgBW dose in nanoparticle form indicating that



**Figure 4.** Malondialdehyde Plasma Level (Unit/mL)

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract))

**TABLE 4**  
**Statistical Analysis of MDA Plasma Level**

	N	K-	EAP-200	nEAP-100	nEAP-200	nEAP-400
N	—	<0.001*	0.228	0.745	0.187	0.076
K-	<0.001*	—	0.008*	<0.001*	<0.001*	<0.001*
EAP-200	0.228	0.008*	—	0.131	0.016*	0.005*
nEAP-100	0.745	<0.001*	0.131	—	0.313	0.141
nEAP-200	0.187	<0.001*	0.016*	0.313	—	0.626
nEAP-400	0.076	<0.001*	0.005*	0.141	0.626	—

(N (Normal), K- (Negative Control), EAP-200 (*A. paniculata* Extract 200 mg/kgBW), nEAP-100 (100 mg/kgBW Nanoparticle of *A. paniculata* Extract), nEAP-200 (200 mg/kgBW Nanoparticle of *A. paniculata* Extract), and nEAP-400 (400 mg/kgBW Nanoparticle of *A. paniculata* Extract); \*different results are statistically significant)

ROS production also increased during bacterial infection. This finding indirectly implied that there has been an increase in phagocytosis and intracellular bacterial killing activity, or other words, the clearance of *L. monocytogenes* bacteria after treatment with *A. paniculata* caused by antibacterial effect and also the immunostimulation effect of *A. paniculata*. Another study is needed to prove that the phagocytosis and intracellular killing are increased by *A. paniculata*. Previous study of Venkata *et al.*,<sup>46</sup> stated that nanoparticle of *A. paniculata* extract at a dose of 80 mg/kgBW increase SOD level in the brains of Rats induced with pentylenetetrazole (PTZ). Research by Kumari *et al.*,<sup>47</sup> showed that Cerium Oxide Nanomaterial of *A. paniculata* extract (cAP-CNP) that contains andrographolid and flavonoid can increase SOD activities until 43.03% by in vitro method through Nitroblue Tetrazolium (NBT) reduction.

Another finding in this study is the *A. paniculata* both in crude extract and nanoparticle also has an

antioxidant effect by significantly reduces MDA level. Dose of 200 mg/kgBW and 400 mg/kgBW in nanoparticle form has reducing MDA level better than dose of 200 mg/kgBW in crude extract form and also the effect dose of 200 mg/kg BW in nanoparticle form was equivalent to reduce MDA level in dose of 400 mg/kgBW, implying that, dose of 200 mg/kgBW in nanoparticle form is the most optimal dose for lowering MDA level in the blood. MDA is the end product of peroxidation of unsaturated fatty acids which is used as an indicator of free radicals (ROS) accumulation in the process of intracellular bacterial killing.<sup>48</sup> A high MDA level indicates an increase of ROS content, whereas a low MDA level indicates that the ROS level is also low. MDA, which tends to be low while antioxidant level (SOD) are high, indicates that there is a balance in the cell to minimize cell damage and prevent cell death due to oxidative stress.<sup>8</sup> According to Ibrahim *et al.*,<sup>49</sup> the flavonoids and alkaloids in EAP trigger SOD production in the body,

suppress the metabolism of toxic substances, and decrease lipid peroxidation (MDA). The study of Venkata *et al.*,<sup>46</sup> also stated that nanoparticle of *A. paniculata* extract at a dose of 80 mg/kgBW decreased MDA level in the brains of pentylenetetrazole-induced rats (PTZ).

This study proved that nanoparticle of *A. paniculata* extract is able to clearance bacterial in liver and blood indirectly through increasing phagocytosis and intracellular killing and also proved antioxidant effects of *A. paniculata* extract by showing the increase of SOD level and decrease of MDA level. The results of this study proved that the nanoparticle form is better than the crude extract form. The weakness of this study is the interval of research doses are wide. Through this study, authors hoped that nanoparticle of *A. paniculata* extract can be develop as supporting therapies for listeria infection.

## CONCLUSION

Nanoparticle of *A. paniculata* at various doses and form, increases bacteria clearance and SOD level, and reduce MDA level in rat infected with *L. monocytogenes*. Dose of 200 mg/kgBW in nanoparticle form was the most optimum dose to increases bacteria clearance and SOD level, and reduce MDA level in rat infected with *L. monocytogenes*.

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