



Research Article

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Efficacy and Safety of Combination Therapy of Zinc and Silver Oxide Nanoparticles in Streptozotocin-Induced Diabetic Rats

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ABSTRACT

In the present study, Zinc oxide nanoparticles and Silver Oxide nanoparticles were evaluated for their in vivo and in vitro antidiabetic activity. The resulting ZnO, Ag₂O were characterized via various methods like UV, XRD, FTIR, PSA and SEM, TEM, and ICP-OES. The synthesized NPs were tested sub-acute oral toxicity model by abiding by the OECD425 guidelines. The male Wistar rats with a weight ranging from 180-200 g were grouped as follows: normal control: those that didn't received any treatment, Diabetic control: who received a single intraperitoneal dose of streptozotocin (45mg kg⁻¹), Zinc Oxide Nanoparticles: received single daily oral dose of (30mg kg⁻¹), Silver Oxide Nanoparticles: received a single daily oral dose of (30mg kg⁻¹) Combine Zinc Oxide and Silver Oxide Nanoparticles (60mg kg⁻¹). Metformin received a single daily oral dose of 100mg kg⁻¹. Synthesized Zn and Ag₂O nanoparticles showed no toxic effect and were considered safe. From the experimental results, it may be concluded that the combined dose of ZnO and Ag₂O had more potent antihyperglycemic activity, further studies are required to establish the mechanism of action.

Key words: Normal control, Diabetic control, Acute toxicity, Antihyperglycemic activity, Zinc oxide nanoparticles, Silver oxide nanoparticles

INTRODUCTION

Diabetes can be treated with a variety of methods and doses, but resistance develops over time in diabetic patients. Nanotechnology is developing rapidly and widely used in healthcare. Unique properties of the NPs promote drug development leading to low dose, reduced side effects and convenience of use especially ; Because of their large surface area and unique composition, NPs are finding more effective than traditional methods. Diabetes is defined as a set of metabolic disorders where a person consist of elevated blood sugar level, also known as Diabetes mellitus (DM), either due to insufficient production of insulin by the body or because the cells lack response to the insulin that is released. Classic symptoms of diabetes are polyuria (increased frequency of urination), polydipsia (increased hunger and thirst), and polyphagia [1, 2].

Many research studies have demonstrated the role of metals in glucose metabolism and their association to diabetes deficiency [2, 3]. It was stated that vanadium [4, 5], chromium [5, 6], magnesium [6, 7], silver [8, 9], and zinc [9] play a role in blood sugar management and diabetes therapy [9].

Zinc is also known to improve the structural stability of insulin, which plays a part in insulin production, accumulation, and secretion [10, 11]. Zinc stimulates glucagon secretion and decreases gluconeogenesis and glycogenolysis.

Silver oxide NPs can be used to reduce inadequate diabetes mellitus insulin reaction. They cannot eliminate the lack of insulin (as in diabetes type 1), but they can minimize dependency on exogenous insulin, or maybe eliminate oral hypoglycemic agents in type 2 diabetes [12].

The role of chromium supplementation in improving glucose regulation when eating a regular diet is still debatable. Still, studies in deficiency states seem to have well-validated the role of chromium as an essential trace element needed for average glucose metabolic behavior [13].

MATERIALS AND METHODS

Materials

Silver nitrate, Zinc acetate, ethanol, triethylamine, and double-distilled water are employed in the synthesis process in their pure form. Streptozotocin, Nicotinamide, Metformin, and Citrate buffer were purchased from vendors/suppliers. Instruments used for the study were analytical balance (Schimadzu, ATX 224), UV visible spectrophotometer (JASCO V-730), Homogenizer (Biolab, B L244), cold centrifuge (Remi C-24BL), Ultrasonicator (Spectra Lab UCB- 40D), pH meter (Equip-Tronics, EQ-610), UV semi auto-analyzer (Retina Clinical chemistry analyzer, Delta lab). Analytical grade chemicals were used for synthesis.

Synthesis of silver oxide nanoparticles

In a beaker, 0.2M AgNO₃ was dispersed in 10 mL double distilled water to form a 1 M suspension. 0.18 M TEA was added to this solution. The solution's colour changed from colourless to black. The precipitates were washed repeatedly with ethanol following stirring of 200 minutes at room temperature, and centrifugation (6000 rpm, 10 minutes) was performed to eliminate unbounded TEA. Particles were vacuum-dried for 24 hours at room temperature. The suspensions of silver nanoparticles were made by re-dispersing the dried silver nanoparticles into alpha- terpineol [14].

Synthesis of zinc oxide nanoparticles

Chemical precipitation was utilized to prepare nanoparticles of zinc oxide. A magnetic stirrer was used to vigorously stir a 1M zinc sulfate heptahydrate solution. Drop by drop, 2 M of sodium hydroxide solution was added to this solution. After 18 hours of stirring, a significant amount of white precipitate was produced. This precipitate was collected by filtration and impurities were removed by washing with distilled water and ethanol before drying for 8-hour in a hot air oven at 1000⁰ C and converted fine powder with mortar and pestle [15].

Characterization

The optical properties of resulted ZnO and Ag₂O nanoparticles were analyzed by UV-Visible spectroscopy (Jasco 730, Japan). The functional group was determined by Fourier Infra-Red Spectroscopy (FT-IR, Jasco 4100 series, Japan). X-ray diffraction was used to determine the crystalline phase of nanoparticles (XRD, Rigaku, Ultima IV) synthesized at the Central Instrumentation Facility at Savitribai Phule Pune University (SPPU). A nanoparticle size analyzer was used to measure the particle size of the synthesized nanoparticles (NanophoxSympatech, Germany). Scanning electron microscopy was utilized to determine the morphology of nanoparticles (SEM, Carl zeiss, Supra 5, Germany) at Diya Labs, Mumbai. Zeta potential was based on DLVO theory. (Delsa Nano C by Beckmen Counter Inc). ICP-OES analysis was performed to determine the metal concentration in nanoparticles at Adarsh Lab, Navi Mumbai (5110 Agilent Technologies, California).

In vitro activity

Alpha-amylase inhibition assay

The Bernfeid method was used to investigate amylase inhibition in vitro [13, 14]. In summary, 100 µL of test extract (12.5, 25, 50, 100, 200, and 400 µg/ml) was combined with 200 µL of -amylase enzyme (Hi media Rm 638) and 100 µL of 2mM phosphate buffer (pH-6.9). Following incubation of 20 minutes, 100 µL of one percent starch solution was added. Similar procedure was used for controls, except that 200 µL of the enzyme was substituted with buffer. 500 µL reagent of dinitrosalicylic acid was added to both the test and the control. These solutions were immersed in boiling water bath for 5 minutes and the absorbance at 540 nm was measured

using a spectrophotometer, and the inhibition rate of amylase enzyme was calculated using the following formula [15-17].

$$\text{Inhibition (\%)} = \frac{\text{Abs540 (control)} - \text{Abs540 (extract)} \times 100}{\text{Abs540 (control)}} \quad (1)$$

Experimental animal

Male Wistar albino rats weighing 200 to 250 g procured from National Institute of Biosciences in Pune, India were used in the study. The animals were secured in polypropylene cages lined with husk. Food and water are freely available. The animals were fed a standard diet by Nutrivet Life Sciences, Pune, India. The experiment lasted 21 days and was carried out following the guidelines of the Committee for Control and Supervision of Experiments on Animals (CPCSEA), India. The study protocol was approved by the Sinhgad Institute of Pharmacy, Narhe Institutional Animal Ethics Committee in Pune, India (SIOP/IAEC/2021/01/01) on January 25, 2021.

Acute toxicity studies

Acute toxicity studies were done to determine the in vivo safety of developed ZnO and Ag₂O nanoparticles. Section 4 of OECD Guidelines 422 and 423 [18-20] was followed in these studies. Rats were divided into 3 groups of 5. Each rat group was given an increased dose of 500, 1000, 1500, and 2000 mg/kg (p.o). Rats were constantly observed for signs of death, abnormal behavior, or dietary changes. A conclusion was reached 14 days later.

Induction of diabetes in experimental rats

Diabetes was induced in overnight fasted rats with a single intraperitoneal injection (i.p.) of freshly prepared streptozotocin 45 mg/kg bw in 0.1 M citrate buffer (pH 4.5), 15 min after Nicotinamide (120 mg/kg bw in saline) i.p. All of the experimental rats' blood glucose levels were measured three days after STZ treatment, with a range of 250 mg/dl considered diabetic, and used for the experiment. Treatment began on the fourth day after the STZ injection and lasted 21 days [21-23].

Experimental design

The rats were separated into 6 groups (I-VI), with each group consisting of five rats (n=5) [24-26].

Group I: Normal Control Rats: For 30 days, rats were given free access to a standard pellet diet.

Group II: Diabetic control rats: For 30 days, diabetic rats were given free access to a standard pellet diet.

Group III: metformin-treated diabetic rats (positive control) were given 100 mg/kg p. o. for 21 days.

Group IV: Diabetic rats were given 30mg/kg of ZnO, p.o. for 21 days.

Group V: Diabetic rats were given 30mg/kg of Ag₂O, for 21 days (**Table 1**).

Group VI: Diabetic rats treated with a combination of ZnO and Ag₂O Nps.

Table 1. Experimental Design

Sr. No.	Treatment	Group	Route of administration	No. of animals used.
I	Normal (Saline)	I	i.p.	5 Rats
II	Diabetic control (DC) (Streptozotocin) (45mg/kg)	II	i.p.	5 Rats
III	Standard Metformin (50 mg)	III	p.o.	5 Rats
IV	Zinc oxide Nanoparticles (50mg)	IV	p.o.	5 Rats
V	Silver Oxide nanoparticles (30mg)	V	p.o.	5 Rats
VI	Combine (ZnO+Ag ₂ O) (30mg)	VI	p.o.	5 Rats
Total animals				30

Experimental procedure

At the terminal of the research, all animals (rats) were fasted overnight and anesthetized using Ketamine (55mg/kg) via IM injection before being sacrificed. The kidney, liver, and spleen were extracted and ice-cold normal saline was used for washing organs [27-29].

General condition, food and water consumption, body weight, urine volume, pH, and frequency

Each rat group's condition, including coat colour, skin infection, mental state, and psychological activities, will be monitored on a routing basis. Water and food intake, body weight, urine output for volume per hour and pH, and stool quality are all recorded regularly [17, 30].

Estimation of blood glucose

The diabetic status of the rat was determined by checking fasting blood glucose levels, weekly throughout the study period. Blood was collected by pricking the rats' tails with a sharp razor, and a glucometer was used to determine glucose levels (Accu-chek instant Glucometer by Roche Diabetes Care, India) [31-33].

RESULTS AND DISCUSSION*UV Visible spectroscopy*

The results of UV-Visible Spectroscopy are shown in **(Figure 1i)**. The absorption spectrum displayed the maximum absorption of ZnO nanoparticles at 374.5nm and Ag₂O nanoparticles at 238 nm.

FTIR

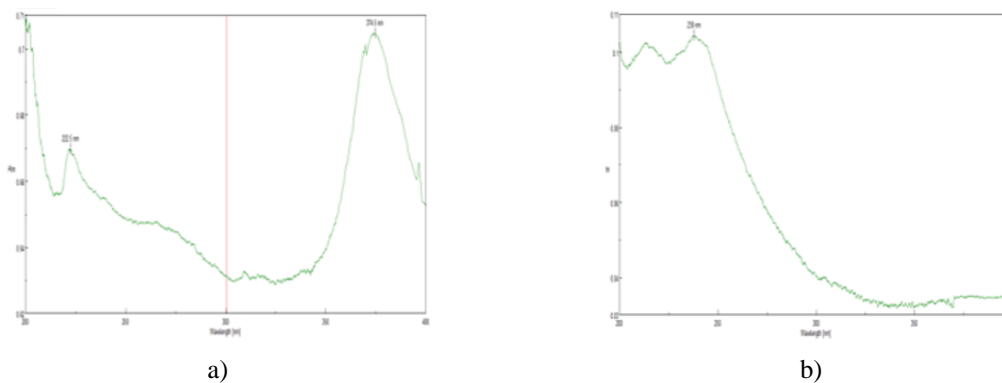
The spectra of FT-IR of synthesized nanoparticles are presented in **(Figure 1ii)**. Because of an adsorbed water molecule on ZnO nanoparticles, the band in ZnO spectra was observed in the 3444.24cm⁻¹ region which corresponds to O-H bonds for stretching vibration. The band at 1114.65cm⁻¹ peaks ascribed to symmetric C=O bond vibration. The presence of hydroxyl group in the sample shows band at 620cm⁻¹ and the band observed at 493.68cm⁻¹ conforms to the Zn-O stretching vibrations. In spectra of Ag₂O, peak at 3590.81cm⁻¹ correlated with H-O-H bending vibration due to adsorbed water molecule in the sample. 1697.05cm⁻¹ band attributed to H-O stretching vibrations which are assigned in the Ag-OH bond. The peaks at 1446.35cm⁻¹ and 1298.82cm⁻¹ correspond to stretching vibrations of Ag-O and Ag-OH respectively. The band at 873.59cm⁻¹ is associated with Ag-O-Ag stretching vibrations.

X-ray diffraction

The XRD diffractogram of ZnO and Ag₂O synthesized nanoparticles is shown in **(Figure 1iii)**. The narrow sharp peaks demonstrate that both ZnO and Ag₂O NPs are highly crystalline. XRD spectra of ZnO, **Figure 3a** displays the diffraction peaks occurring at 2 θ 12.3, 21.18, 26.0, 26.56, 32.48, and 35.08 have a highest intensity 690, 258, 371, 305, 315, 317 respectively. XRD spectra of Ag₂O **Figure 3b** reveals the strongest peaks at 2 θ values of 13.47, 14.4, 25.08, 27.3, 27.52, 35.18, corresponding the intensities 1680, 3360, 1186, 1362, 2280, 1034 respectively.

SEM analysis

SEM images of prepared ZnO and Ag₂O nanoparticles are presented in **(Figure 1iv)**. ZnO nanoparticles exhibit a needle-like shape **(Figure 4a)**. Whereas SEM of Ag₂O nanoparticles shown in **(Figure 4b)** illustrates rod-like morphology.



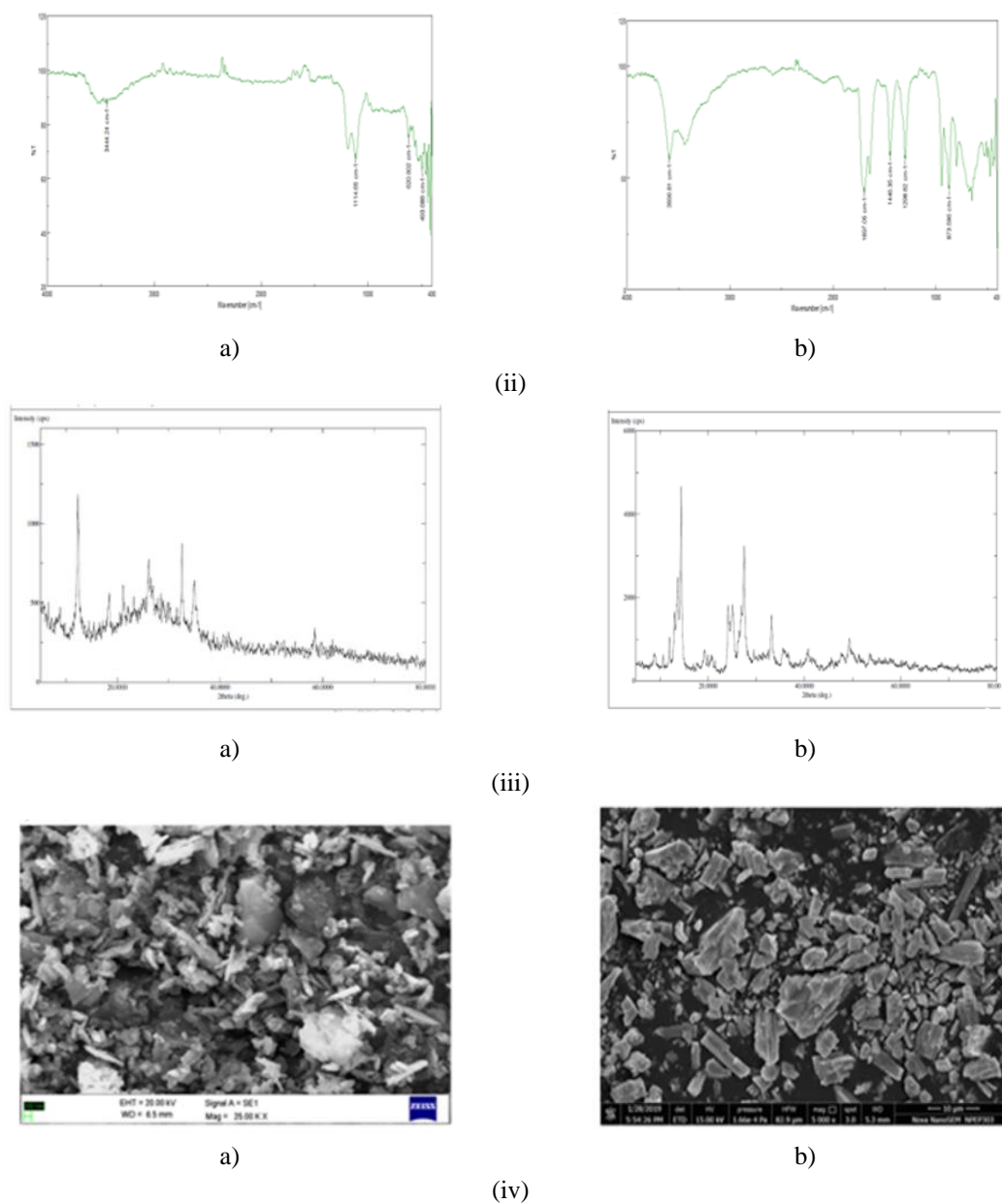


Figure 1. ZnO(A) and Ag₂O(B), (i) UV-Visible spectra, (ii) FT-IR spectra, (iii) XRD spectra, (iv) Scanning Electron Microscopy of nanoparticles.

Nanoparticles size analysis

The histogram of nanoparticle size analysis of ZnO and Ag₂O nanoparticles is shown in **(Figure 2i)**. The size of ZnO and Ag₂O nanoparticles from this analysis resulted in 17.06nm and 19.73nm respectively which has good compliance with particle size distribution results from Image J software.

Zeta potential

Zeta potential of ZnO and Ag₂O nanoparticles is shown in **(Figure 2ii)**. The zeta potential of ZnO and Ag₂O nanoparticles was found to be 49.19 mV and -19 mV. Indicating the stability of nanoparticles.

Inductive couple plasma – optical emission spectroscopy (ICP-OES)

Inductively coupled plasma elemental analysis (ICP –OES) was used to determine the concentrations of Zn and Ag. Zn yielded approximately 22.11 percent, while silver yielded approximately 0.08 percent. The results show that Ag NPs were well coupled with Zn NPs and that elution was minimal **(Figure 2iii)**.

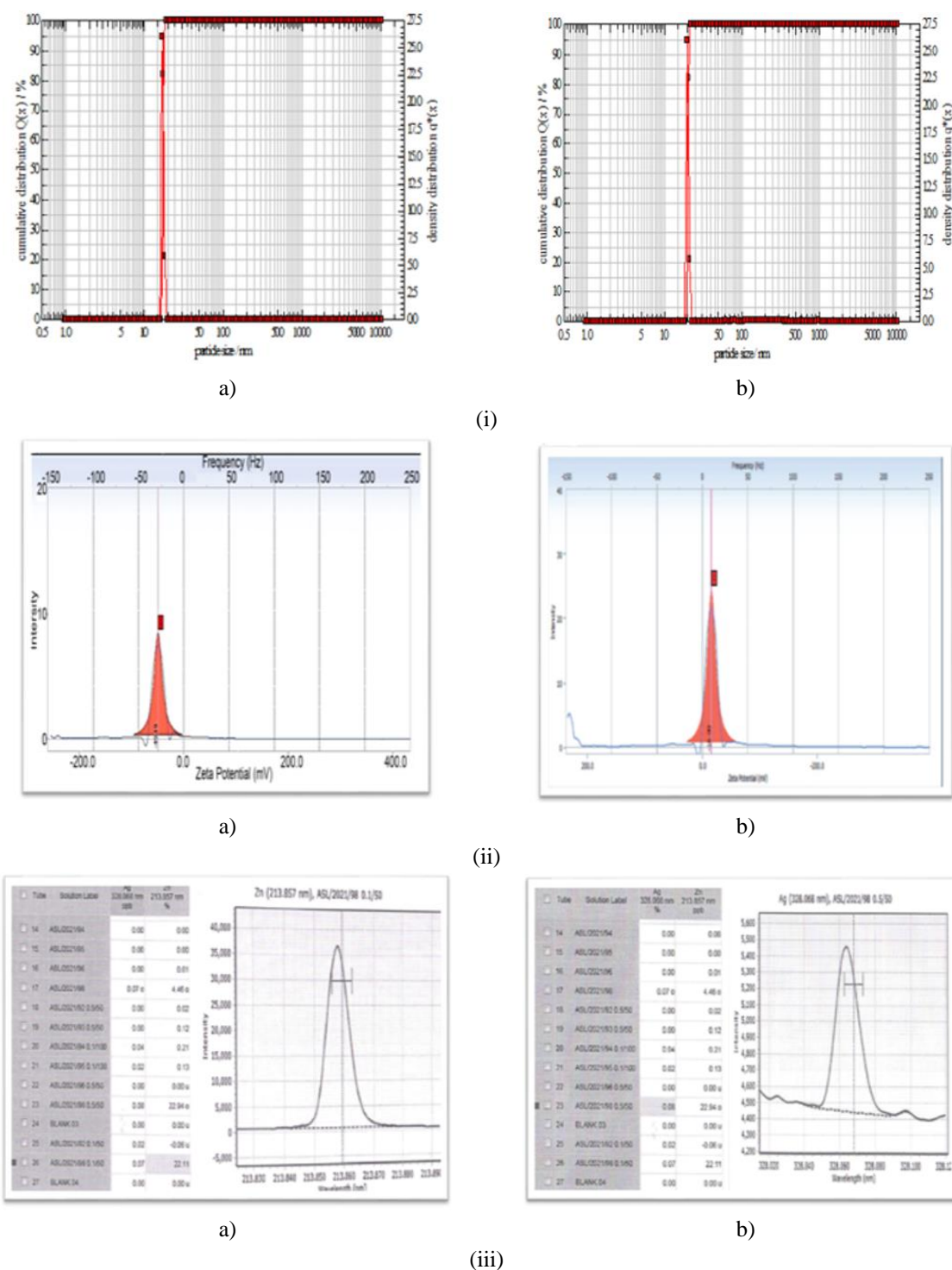


Figure 2. ZnO (A) and Ag₂O (B), (i) Particle size analyzer of nanoparticles, (ii) Zeta potential, (iii) ICP-OES graph

Acute toxicity studies

Prescription of ZnO, Ag₂O, and ZnO/Ag₂O NPs Orally was seen to have safe effect till a p.o. dose level of 1500 mg/kg, including lack of toxicity signs. Because there was no mortality after fourteen days, the Medial Lethal dose of ZnO, Ag₂O, and combined ZnO and Ag₂O nanoparticles was calculated to be greater than 1500 mg/kg body weight

Alpha-amylase inhibition assay

The alpha amylase inhibitory activity was expressed as percent inhibition, The positive control sample was prepared using Acarbose (1mg/ml). **Table 2** shows the results of assay.

Table 2. Comparative data of % inhibition of *Alpha- amylase* by ZnO, Ag₂O and combine ZnO and Ag₂O NPs

Concentration (µg/ml)	Silver oxide nanoparticles	Zinc oxide nanoparticles	Combine nanoparticles	% inhibition activity of ZnO NPs	% inhibition activity of Ag ₂ O	% inhibition activity of Combine NPs
12.5	0.22	0.42	0.46	26.31	61.40	19.29
25	0.22	0.41	0.42	28.07	61.40	26.31
50	0.22	0.37	0.40	35.08	61.40	29.82
100	0.21	0.37	0.33	35.05	63.15	42.10
200	0.21	0.34	0.29	40.35	64.91	49.12
400	0.16	0.21	0.24	63.15	71.92	57.89
Std Acarbose (1mg/ml)	0.22	0.22	0.22	63.25	61.4	62.69

*Antidiabetic study**Changes in body weight*

In the present study, the initial body weights of all experimental groups revealed no discernible difference among the groups. Diabetic control rats (Group II) gained less weight after 21 days (P0.01) than normal control rats (Group I). In comparison to diabetic control rats, the body weights of ZnO and combined ZnO and Ag₂O NPs (Group III and VI) (p0.01) (**Table 3 and Figure 3i**).

Table 3. Bodyweight Changes : Once weekly the body weights were recorded for all the groups of experimental rats.

Body weight(gram)	Quarantine week	Induction week	1 st week treatment	2 nd week treatment	3 rd week treatment
Normal	266.6	266	268.3	267.33	265.33
Diabetic control	254	183.66	179.66	174.33	169.66
Standard	257.33	184	189.33	197	202.66
ZnO NPs	158.66	170.33	178	186	190.33
AgO NPs	232.33	173.33	177.33	183.33	186.33
Combine NPs	252	192	201	205.66	206.33

Blood glucose level variation in diabetic rats after ZnO, Ag₂O and Combine ZnO and Ag₂O Np treatment

The diabetes-induced groups of rats (II, IV, V, and VI) were found to have higher blood glucose levels on the first day of the experiment when related to the control rats (Group I) and Standard (Group III). After 21 days of the experiment, diabetic STZ (Control Gr. II 347) rats had higher blood glucose levels than normal control rats (Group I). ZnO and ZnO/Ag₂O rats had lower blood glucose concentrations when compared to diabetic control (Group II) rats. Furthermore, blood glucose concentrations in rats given the standard drug Metformin decreased significantly (<P0.0001) (Group III). After 21 days of testing, which was the same for Groups III and VI (**Table 4; Figure 3ii**).

Table 4. Blood glucose estimation and urine output

Blood Glucose (mg/dl)	Normal	Control	ZnO	AgO	Combine NPs	Standard
Quarantine week	104.66	109	107	95	87.66	110.6
Induction week	102	184.66	351.66	403.33	381.66	449.33
1 week treatment	109.66	348.66	299	382	337.66	320.66
2 week treatment	110	423.66	284.66	356.66	262.33	190
3 week treatment	122	415	234.33	284.33	190.66	151
Urine(ml) (Output)	6	0.86	14.7	03	2.33	2.33

Urine output

All six groups' urine output volume was monitored from the quarantine week to the third week of treatment. The outcomes were presented in (**Table 5 and Figure 3iii**).

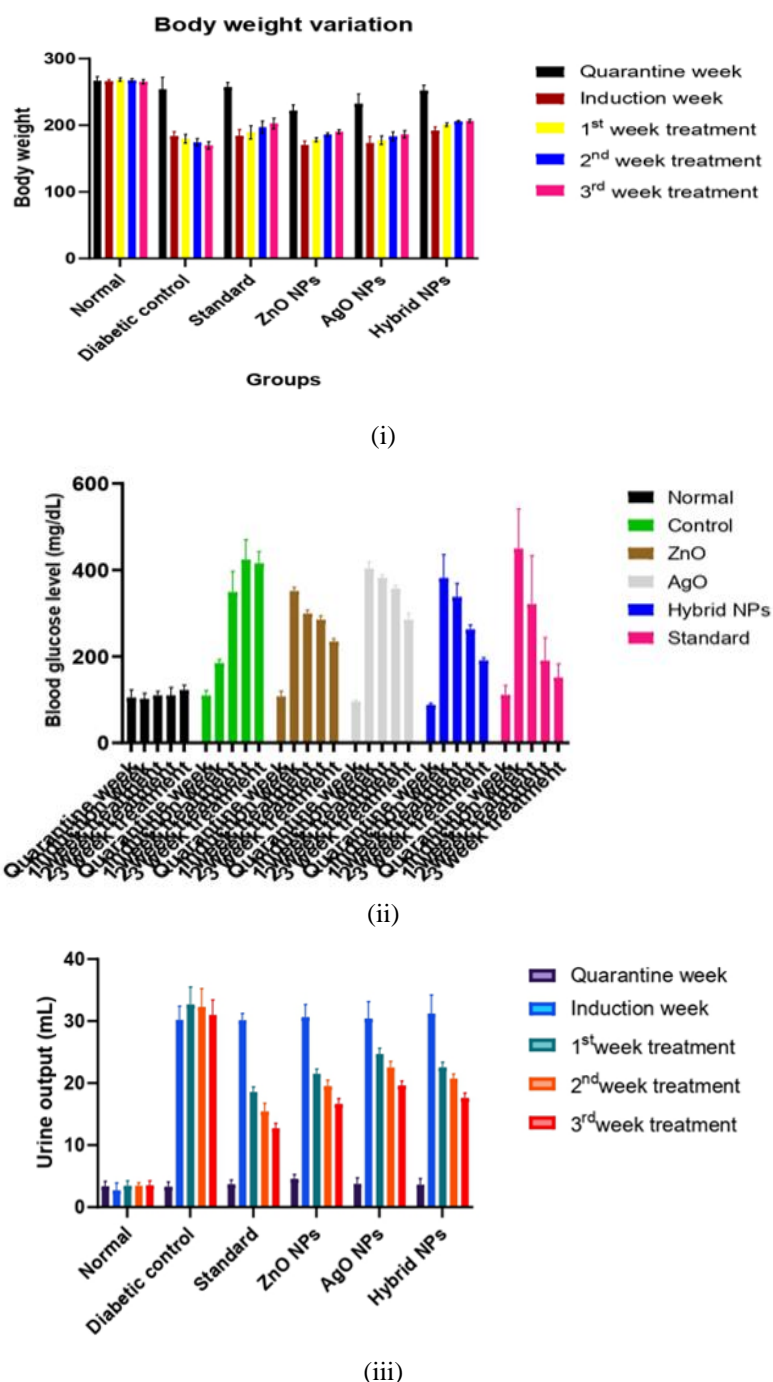


Figure 3. (i) Body weight variation of rats, (ii) Blood glucose level variation of rats, (iii) Urine output of rats

In the present study, STZ administration of 45 mg/kg to rats can destroy pancreatic beta cells which can lead to growth of constant hyperglycaemic conditions similar to type II diabetes in human beings. In the current evaluation prescription of STZ at 45 mg/kg to rats was seen to increase the blood glucose levels on the third day of the experimental period, this may be due to islet destruction and beta cell death. In diabetes, body cells cannot use glucose as an energy source, instead protein is used as an energy source. This reduces protein storage and weight loss. In this study, streptozotocin-induced diabetic rats showed weight loss throughout the experimental period. Oral treatment of ZnO NPs and combination ZnO & Ag₂ONPs to diabetic rats for 21 days yielded considerable increment in body weight in comparison to the Ag₂O NPs and control rats. The % inhibition values of alpha-amylase inhibitory activity of ZnO, Ag₂O, and Combine NPs were similar to that of Acarbose. Thus, the study suggested that NPs metal oxide NPs can be used as an Antidiabetic agent due to its significant effects to reverse blood glucose concentration. They exhibit remarkable alpha-amylase inhibitory activity, further investigation is needed to prove the antidiabetic mechanism.

CONCLUSION

The present study suggested that ZnO and Ag₂O NPs can be used as an Antidiabetic agent because of their significant role into reversing blood glucose concentration. The combined dose of ZnO and Ag₂O NPs exhibits remarkable alpha-amylase inhibitory activity, further investigation is needed to prove the antidiabetic mechanism.

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CONFLICT OF INTEREST : None

FINANCIAL SUPPORT : None

ETHICS STATEMENT : The experiment was carried out according to the guidelines of the Committee for Control and Supervision of Experiments on Animals (CPCSEA), New Delhi, India and approved by the Institute of Animal Ethics Committee (IAEC) (SIOP/IAEC/2021/01/01; dated 25/01/2021).

REFERENCES

1. Kumar S, Singh R, Vasudeva N, Sharma S. Acute and chronic animal models for the evaluation of anti-diabetic agents. *Cardiovasc Diabetol.* 2012;11(1):1-3.
2. He Y, Al-Mureish A, Wu N. Nanotechnology in the Treatment of Diabetic Complications: A Comprehensive Narrative Review. *J Diabetes Res.* 2021;2021. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8110427/pdf/JDR2021-6612063.pdf>
3. Mittal AK, Chisti Y, Banerjee UC. Synthesis of metallic nanoparticles using plant extracts. *Biotechnol Adv.* 2013;31(2):346-56. doi:10.1016/j.biotechadv.2013.01.003.
4. Thompson KH, Lichter J, LeBel C, Scaife MC, McNeill JH, Orvig C. Vanadium treatment of type 2 diabetes: a view to the future. *J Inorg Biochem.* 2009;103(4):554-8. doi:10.1016/j.jinorgbio.2008.12.003.
5. Wang ZQ, Cefalu WT. Current concepts about chromium supplementation in type 2 diabetes and insulin resistance. *Curr Diab Rep.* 2010;10(2):145-51. doi:10.1007/s11892-010-0097-3.
6. Naghsh N, Kazemi S. Effect of nano-magnesium oxide on glucose concentration and lipid profile in diabetic laboratory mice. *Iran J Pharm Sci.* 2014;10(3):63-8.
7. Jeevanandam J. *Enhanced synthesis and delivery of magnesium oxide nanoparticles for reverse insulin resistance in type 2 diabetes mellitus* (Doctoral dissertation, Curtin University). 2017.
8. Nithiya S, Sangeetha R. Amylase inhibitory potential of silver nanoparticles biosynthesized using *Breynia retusa* leaf extract. *World J Pharm Res.* 2014;3:1055-66.
9. Alkaladi A, Abdelazim AM, Afifi M. Antidiabetic activity of zinc oxide and silver nanoparticles on streptozotocin-induced diabetic rats. *Int J Mol Sci.* 2014;15(2):2015-23. doi:10.3390/ijms15022015.
10. Umrani RD, Paknikar KM. Zinc oxide nanoparticles show antidiabetic activity in streptozotocin-induced Type 1 and 2 diabetic rats. *Nanomedicine.* 2014;9(1):89-104. doi:10.2217/NNM.12.205.
11. Bedi P, Kaur A. An overview on uses of zinc oxide nanoparticles. *World J Pharm Pharm Sci.* 2015;4(12):1177-96.
12. Lushchak O, Zayachkivska A, Vaiserman A. Metallic nanoantioxidants as potential therapeutics for type 2 diabetes: A hypothetical background and translational perspectives. *Oxid Med Cell Longev.* 2018;2018. doi:10.1155/2018/3407375.
13. Amiri A, Dehkordi RA, Heidarnejad MS, Dehkordi MJ. Effect of the zinc oxide nanoparticles and thiamine for the management of diabetes in alloxan-induced mice: a stereological and biochemical study. *Biol Trace Elem Res.* 2018;181(2):258-64. doi:10.1007/s12011-017-1035-x.
14. Wang JB, Liu XR, Liu SQ, Mao RX, Hou C, Zhu N, et al. Hypoglycemic effects of oat oligopeptides in high-calorie diet/STZ-induced diabetic rats. *Molecules.* 2019;24(3):558. doi:10.3390.
15. Ahmed D, Kumar V, Verma A, Gupta PS, Kumar H, Dhingra V, et al. Antidiabetic, renal/hepatic/pancreas/cardiac protective and antioxidant potential of methanol/dichloromethane extract of *Albizzia Lebbeck Benth.* stem bark (ALEx) on streptozotocin induced diabetic rats. *BMC Complement Altern Med.* 2014;14(243):1-7.

16. Tabatabaei-Malazy O, Larijani B, Abdollahi M. Targeting metabolic disorders by natural products. *J Diabetes Metab Disord.* 2015;14(1):1-21. doi:10.1186/s40200-015-0184-8.
17. Zhou JY, Zhou SW. Protection of trigonelline on experimental diabetic peripheral neuropathy. *Evid Based Complement Alternat Med.* 2012;2012. doi:10.1155/2012/164219.
18. Choudhari VP, Gore KP, Pawar AT. Antidiabetic, antihyperlipidemic activities and herb–drug interaction of a polyherbal formulation in streptozotocin induced diabetic rats. *J Ayurveda Integr Med.* 2017;8(4):218-25.
19. Mahmoud AM. Hematological alterations in diabetic rats-role of adipocytokines and effect of citrus flavonoids. *Excli J.* 2013;12:647-57.
20. Ebaid H, Bashandy SA, Alhazza IM, Hassan I, Al-Tamimi J. Efficacy of a methanolic extract of *Adansonia digitata* leaf in alleviating hyperglycemia, hyperlipidemia, and oxidative stress of diabetic rats. *BioMed Res Int.* 2019;2019. doi:10.1155/2019/2835152.
21. Gallwitz B, Bretzel RG. How do we continue treatment in patients with type 2 diabetes when therapeutic goals are not reached with oral antidiabetes agents and lifestyle? Incretin versus insulin treatment. *Diabetes Care.* 2013;36(Supplement_2):S180-9.
22. Cavaiola TS, Pettus JH. Management of Type 2 Diabetes: Selecting Amongst Available Pharmacological Agents. In: Feingold KR, Anawalt B, Boyce A, et al., editors. *Endotext* [Internet]. South Dartmouth (MA): MDText.com, Inc.; 2017.
23. Medagama AB, Bandara R. The use of complementary and alternative medicines (CAMs) in the treatment of diabetes mellitus: is continued use safe and effective?. *Nutr J.* 2014;13(1):1-9. doi:10.1186/1475-2891-13-102.
24. Balaji P, Madhanraj R, Rameshkumar K, Veeramanikandan V, Eyini M, Arun A, et al. Evaluation of antidiabetic activity of *Pleurotus pulmonarius* against streptozotocin-nicotinamide induced diabetic wistar albino rats. *Saudi J Biol Sci.* 2020;27(3):913-24.
25. Mehenni C, Atmani-Kilani D, Dumarçay S, Perrin D, Gérardin P, Atmani D. Hepatoprotective and antidiabetic effects of *Pistacia lentiscus* leaf and fruit extracts. *J Food Drug Anal.* 2016;24(3):653-69.
26. Ghanbari E, Nejati V, Khazaei M. Improvement in serum biochemical alterations and oxidative stress of liver and pancreas following use of royal jelly in streptozotocin-induced diabetic rats. *Cell J (Yakhteh).* 2016;18(3):362-70.
27. Peng CH, Lin HC, Lin CL, Wang CJ, Huang CN. *Abelmoschus esculentus* subfractions improved nephropathy with regulating dipeptidyl peptidase-4 and type 1 glucagon-like peptide receptor in type 2 diabetic rats. *J Food Drug Anal.* 2019;27(1):135-44.
28. Asani SC, Umrani RD, Paknikar KM. In vitro studies on the pleotropic antidiabetic effects of zinc oxide nanoparticles. *Nanomedicine.* 2016;11(13):1671-87. doi:10.2217/nmm-2016-0119.
29. Saedi P, Petersohn I, Salpea P, Malanda B, Karuranga S, Unwin N, et al. Global and regional diabetes prevalence estimates for 2019 and projections for 2030 and 2045: Results from the International Diabetes Federation Diabetes Atlas. *Diabetes Res Clin Pract.* 2019;157:107843.
30. Yu LY, Shi WL, GuiGuo X. Cardio-protective role of gingerol along with prominent anti-diabetic cardiomyopathy action in a streptozotocin-induced diabetes mellitus rat model. *Cell J.* 2017;19(3):469-75. doi:10.22074/cellj.2017.4509.
31. Cavalcanti CL, Gonçalves MC, Alves AF, de Araújo EV, Carvalho JL, Lins PP, et al. Antidepressant, anxiolytic and neuroprotective activities of two zinc compounds in diabetic rats. *Front Neurosci.* 2020;13:1411. doi:10.3389/fnins.2019.01411.
32. Costa CA, Carlos AS, Santos AD, Monteiro AM, Moura EG, Nascimento-Saba CC. Abdominal adiposity, insulin and bone quality in young male rats fed a high-fat diet containing soybean or canola oil. *Clinics.* 2011;66(10):1811-6.
33. Geloan AL, Roy PE, Bukowiecki LJ. Regression of white adipose tissue in diabetic rats. *Am J Physiol Endocrinol Metab.* 1989;257(4):E547-53. doi:10.1152/ajpendo.1989.257.4.E547.