



**ORIGINAL RESEARCH PAPER**

**Homeopathy**

**CYTOTOXICITY ANALYSIS OF *MOMORDICA CHARANTIA* D5 IN KERATINOCYTES, OSTEOSARCOMA AND MESENCHYMAL STEM CELLS**

**KEY WORDS:** *Momordica charantia*, Homeopathy, cytotoxicity, *in vitro*

**Ana Catarina Viana Valle\***

Department of Research, IDIS Lamasson Institute, Integrative Medicine, Ribeirao Preto, Brazil, P.h.D. in Genetics and Biotechnology, UCB – Brasilia, Brazil \*Corresponding Author

**Samir Rahme**

Department of Research, Idis Lamasson Institute, Ribeirao Preto, Sao Paulo, Brazil

**Aloisio Cunha de Carvalho**

Department of Research, IDIS Lamasson Institute, Integrative Medicine, Ribeirao Preto, Brazil, P.h.D. in Ambiental Pathology, UNIP – Sao Paulo, Brazil

**ABSTRACT**

*Momordica charantia* has been used in folk medicine since ancient times, showing excellent efficacy when properly prescribed. However, like all medications, the dose used is essential to avoid possible poisoning in patients. Therefore, homeopathy is presented as a therapeutic tool, as it reduces the risk of direct toxicity to the patient while maintaining its medicinal properties, as described in homeopathic pharmacopeias. In addition to the diseases for which it is popularly used, *Momordica* has been tested in homeopathic dilutions by research groups regarding its activity in cancer cells. Assessing *in vitro* cell viability is a common practice in the biological evaluation of medicines and is fundamental for the initial analysis of their efficacy. In this study, the cytotoxic effect of *Momordica* was evaluated on osteosarcoma cell lines, keratinocytes, and mesenchymal stem cells. The results showed that *Momordica* had pronounced cytotoxicity activity on osteosarcoma cells even at low concentration.

**INTRODUCTION**

Several plants have been described throughout history with varied biological activities beneficial to re-establish human and animal health. *Momordica charantia* is among these plants and has been popularly used for medicinal purposes for thousands of years. This plant belongs to the Cucurbitaceae family and is popularly known as bitter gourd, balsam pear, bitter melon, Saint Caetano melon, kugua, or karela (Habicht et al., 2011). *Momordica* is widely cultivated in the tropical and subtropical regions of the world, such as some parts of Asia, Africa, Oceania, Central America, and South America (Shan et al., 2012). The whole plant has significant pharmacological effects, especially the seeds and fruits. Various medicinal properties of *M. charantia* have been studied over the years, including the hypoglycemic, antibacterial, antiviral, antitumor, immunomodulatory, antioxidant, antidiabetic, anthelmintic, antimutagenic, antipolypytic, hepatoprotective, anti-inflammatory, and antiulcerogenic activities (Habicht et al., 2011). Various fruit bioactive components of *Momordica* have been described in the literature, such as carbohydrates, proteins, lipids (Ayeni et al., 2015; Najafi & Toriki, 2010), flavonoids (Liang-juan & Wei-fen, 2007), triterpenoids (Zhao et al., 2014), saponins (Ma et al., 2014; Murakami et al., 2001), polypeptides (Ahmad et al., 2012), and sterols.

Despite the several pharmacological activities of *Momordica*, adverse effects have been reported in recent years that limit its wider application. In addition to some toxic signs, previous studies have concluded that this plant may induce clinical signs such as hypoglycemic coma in children and miscarriage or even death in laboratory animals (Grover & Yadav, 2004). For these reasons, it is important to evaluate the *in vivo* and *in vitro* efficacy of its therapeutic properties to offer the safest pharmaceutical form, reducing its toxic effects on patients and being effective in its indication.

Within this context, homeopathy, a therapeutic technique used for over 200 years with beneficial effects on health with reduced toxic effects, is becoming increasingly popular in many countries. However, there is still little knowledge about its experimental validation and mechanisms of action. Several doubts exist about using diluted and dynamized medicines (exceeding Avogadro's limit). Consequently, validation through well-designed experiments is needed to prove the safety and efficacy of these medicines (Samadder et al., 2013).

The *in vitro* assessment of cell viability is a common practice in the biological evaluation of products and medicines and is fundamental for the initial analysis of their efficacy. Exposing cultured cells to the substances of interest makes it possible to characterize the effects of cytotoxicity reactions (D. K. Lee et al., 1998). The tests can be performed with several cell lines. Keratinocytes, tumor lines, and mesenchymal stem cells (MSC) are well-established as models to evaluate the safety of products by evaluating cytotoxicity (C. W. Lee et al., 2022; Lin et al., 2022; Nicolas-Espinosa et al., 2022). Therefore, this study aimed to compare the cytotoxic effect of *Momordica* D5 on osteosarcoma cell lines, keratinocytes, and mesenchymal stem cells.

**METHODS**

**Cell Cultivation**

This study used mesenchymal stem cells (MSC) derived from adipose tissue, bone tumor lineage – osteosarcoma – (U2OS), and immortalized keratinocytes originating from human skin (HaCat). Per manufacturer recommendations, cells were grown in Dulbecco's Modified Eagle Medium (DMEM - Sigma-Aldrich).

**Preparation of homeopathic *Momordica***

The Mother Tincture was the starting point for preparing the tested medicine (*Momordica* D5). The Hahnemannian Decimal Method was used, as described in the Brazilian Homeopathic Pharmacopoeia. One part of the active ingredient was mixed with 9 parts of the inert ingredient, using a sterile isotonic solution, and succussed 100 times, yielding *Momordica* D1 ( $1 \times 10^{-1}$ ). Then, 1 part of *Momordica* D1 was used with 9 parts of the inert ingredient and succussed 100 times, yielding *Momordica* D2 ( $1 \times 10^{-2}$ ). The successive dilution continued until potency D5 was obtained. The medicine was then bottled in 1.1 mL ampoules.

**Cell Viability**

The cytotoxicity of the compound on mesenchymal stem cells, osteosarcoma cells, and keratinocytes was determined by the MTT test. The test is a colorimetric assay that measures the reduction of {[3-(4,5-dimethylthiazol-2yl)-2,5-diphenyl tetrazolium]} (MTT) from cellular mitochondrial activity. For this assay, cells were initially cultured in triplicate in 96-well plates containing  $1 \times 10^5$  cells/mL in culture medium and kept in an incubator at 37.5 °C, 5% CO<sub>2</sub> for 24 hours for stabilization and cell adhesion. After this period, the *in vitro* culture



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