

INTERNATIONAL JOURNAL OF PHARMACY & PHARMACEUTICAL RESEARCH An official Publication of Human Journals



Human Journals **Research Article** August 2017 Vol.:10, Issue:1 © All rights are reserved by Nurdin SU et al.

# Antiglucosidase and Antioxidant Activities of Ginger, Cinnamon, Turmeric and Their Combination



Nurdin SU<sup>1,3\*</sup>, Sukohar A<sup>2</sup>, Ramadani OS<sup>3</sup>

1)Research Center for Nutrition, Health and Herbal, University of Lampung

2)Faculty of Medicine, University of Lampung, Lampung, Indonesia 6235145,

3) Department of Agricultural Technology, Faculty of Agriculture, University of Lampung

Submission:	29 July 2017
Accepted:	5 August 2017
Published:	30 August 2017





www.ijppr.humanjournals.com

**Keywords:** Cinnamon, Ginger, Turmeric, Anti-glucosidase, Antioxidant, Phenolic compound

# ABSTRACT

Background and Objective: Number of diabetic patients in Indonesia is expected to be 21.3% in 2030. Some traditional medicines have been using crude plant extracts for diabetes managements. Combination of extracts may have more complex effect on diabetes due to the interaction occurred among the individual components. The study aimed to evaluate the effect of combination of ginger, cinnamon and turmeric on anti-glucosidase and antioxidant activities. Material and Methods: The a-glucosidase inhibitory activity and antioxidant were measured by  $\alpha$ -glucosidase inhibitory and  $\alpha$ ,  $\alpha$ -diphenylß-dipicryl-hydrazyl (DPPH) free radical scavenging assay, respectively. The total phenolic content of the extracts was determined by folin ciocaletus reagent method. The IC50 value of the most potential extract was calculated. Observation, findings, and Conclusion: Turmeric extract was the most potent to inhibit alpha-glucosidase followed by extracts of ginger and cinnamon. Turmeric extract inhibited α-glucosidase by 68.44 % followed by extracts of ginger and cinnamon, 22.46% and 19.613% respectively. The potentiality of the extracts to sequence free radical was not in concomitant with their antiglucosidase activities as cinnamon sequenced 82.6% free radicals, was higher than ginger and turmeric (79.75% and 79.53%, respectively). Combination of the extracts did not exert synergetic or antagonistic effect on anti-glucosidase activity. Cinnamon extract has the highest ability to neutralize the free radical, followed by ginger and turmeric extracts and mixing of the extracts increase antioxidant activities. Extract containing higher total phenolic compound tend to have higher antioxidant activity but less effective to inhibit alpha glucosidase enzyme activity.

# **INTRODUCTION**

Diabetes mellitus (DM) is a metabolic disorder characterized primarily by abnormally high levels of blood glucose due to failure of glucose metabolism. Number of diabetic patients in Indonesia reached 7.0% in 2014 and has steadily increased since 1980 [1]. Around the world, prevalence of diabetes increases quadruplicate since 1980 in concomitant with the population growth and ageing [2].

Type 2 DM is characterized by two primary defects: insulin resistance (diminished peripheral tissue sensitivity to insulin) and relatively impaired beta-cell function (delayed or inadequate insulin release)[3]. In type 2 diabetic patient, blood glucose level should be controlled through increasing of insulin sensitivity or inducing of insulin release to decrease complications and provide better diabetes managements [4, 5]. Several types of glucose lowering drugs to sensitize tissue to insulin or induce insulin production have been developed such as metformin, sulphonylurea, alpha-glucosidase inhibitors, repaglinide, saxagliptin, empagliflozin, liraglutide, and pioglitazone [6, 7]. However, Most of the glucose-lowering drugs may have side effects, including severe hypoglycemia, lactic acidosis, idiosyncratic liver cell injury, permanent neurological deficit, digestive discomfort, headache, dizziness and even death [5-7]. Therefore, safe and effective pharmacological drugs should be developed especially from plant origin [8].

Some traditional medicines have been using crude plant extracts for diabetes managements. The plant extracts are generally considered safer than the synthetic one, less toxic, more accessible and cheap [8, 9]. Some compounds extracted from turmeric (*Curcuma longa*), for instance, has inhibition against alpha-glucosidase [10, 11], exhibited antioxidant defend in patients with T2DM [12] and been used for the treatment of diabetes in Ayurvedic and traditional Chinese medicine [13]. In combination with metformin, aqueous extract of *Curcuma longa* protects the islets  $\beta$  cells, decreases the insulin resistance and decreases the oxidative stress [14]. Ginger (*Zingiber officinale* (ROSC)) powder consumed daily, was used for patient with type 2 diabetes [13], and as a supplement, it effectively reduced fasting blood glucose concentrations and HbA1c levels[15]. Similarly, cinnamon (*Cinnamomum burmannii*) extract showed the strong anti-lipase and anti-amylase activities that may be important in the alleviation and prevention of the signs and symptoms of type 2 diabetes [16, 17]. These spices are not only used as medicine but also they have been used as condiments in Indonesia traditional foods and modern foods.

Plant extracts can be used as single herb or combination of herbs [16]. Combination of extracts may have more complex effect due to the interaction occurred among the individual components. Interaction is beneficial when the therapeutic effect of the combination is enhanced, however, combination does not always improve the efficacy of the extracts [16, 18]. Due to the fact that plant extract contains multiple compounds, effects of combinations are often unpredictable and complicated [18, 19]. One of mechanism how the plant extracts prevent increasing of blood glucose is by inhibition of starch metabolism through inactivating of starch hydrolysis enzymes such as alpha-glucosidase and alpha-amylase [8, 10, 15]. Some plant extracts also contain antioxidants that have been hypothesized to have a protective effect against the development of diabetes by inhibiting peroxidation chain reactions [12, 20, 21]. Therefore, we aimed to evaluate effect of combination of ginger, cinnamon and turmeric water extracts on anti-glucosidase and antioxidant activities, and elucidate the role of phenolic compound on the anti-glucosidase and antioxidant activities.

## MATERIALS AND METHODS

#### **Plant materials**

Ginger, cinnamon and turmeric were collected from local market (Bandar Lampung). Ginger and turmeric, immediately, after collection were thoroughly washed with water, peeled, sliced and dried in an oven at  $60^{\circ}$ C. Cinnamon was purchased as dried bark. All dried materials were powdered using grinder to produce coarsely powder

## **Preparation of extracts**

Dried plants powder (10 g) were boiled in 100 mL water for 20 minutes. The extract was filtered (extract 1), and the residue was reboiled in 100 mL for 20 minutes, then filtered to get extract 2. Extract 1 and extract 2 were then mixed and considered as 100% extract.

#### Chemicals, reagents and solvents

The materials needed for the analysis include sodium carbonate (Merck, Germany), Folin-Ciocalteau (Merck, Germany), pNPG (p-nitrophenyl-α-D-glucopyranoside) (Sigma Aldrich, Switzerland), crude enzyme α-glucosidase (Shandong Longda Bio-Products Co., Ltd.), DPPH (2,2-Diphenyl-1-Picrylhydrazyl) (Merck, Germany), ethanol (JT Baker), distilled water, acarbose (Dexa Medica, Indonesia) and gallic acid hydrate (Tokyo Chemical Industry Co., Ltd).

## Total phenolic analysis

Total phenolic content was determined using the Folin–Ciocalteu reagent [22] with slight modification. Briefly, 0.2 mL of plant extracts were thoroughly mixed with 0.2 mL of aquades and 0.2 mL 0f freshly diluted Folin–Ciocalteu reagent (1 N). Then 4 mL of sodium carbonate solution (2%) was added and the mixture was incubated for 30 min in the dark. The absorbance was measured at 760 nm using Spectrophotometer (Thermo Scientific Genesys 20, USA). Gallic acid (0.00-0.01 mg/mL) was used as a reference standard. The concentration of phenolic content was expressed as mg of gallic acid equivalents (GAE) per mL extract.

## Antioxidant activity measurement

The antioxidant activity of the extracts was measured using DPPH radical scavenging activity methods [23]. Plant extracts (0.25 mL) was added with 2 mL DPPH solution (3.3 mg of DPPH in 100 mL methanol) and 8 ml ethanol, then vortexed gently. The mixture was incubated for 30 min in the dark and the absorbance (A1) was read at 517 nm (Thermo Scientific Genesys 20, USA). The absorbance (A0) of a reaction control (methanol instead of plant extract) was also recorded at the same wavelength. Scavenging ability (%) was calculated by using the formula =  $[(A0 - A1)/A0] \times 100$ , where A0 was the absorbance of reaction control and A1 was the absorbance of extracts.

# Assay of α-glucosidase inhibitory activity

The effect of the plant extracts on  $\alpha$ -glucosidase activity was determined according to the method described by Rao et al. [24] using  $\alpha$ -glucosidase crude enzyme (Shandong Longda Bio-Products Co., Ltd.) with light modification. The substrate solution p-nitrophenylglucopyranoside (pNPG) was prepared in aquades (0.03012 g/100mL). 200  $\mu$ L of the plant extracts were preincubated with 2 mL of for 10min at 37<sup>o</sup>C. Then 1 mL of pNPG as a substrate added to start the reaction. The reaction mixture was incubated at 37<sup>o</sup>C for 30 min and stopped by adding 2 mL of 2 % Na<sub>2</sub>CO<sub>3</sub>. The  $\alpha$ -glucosidase activity was determined by measuring the yellow-colored paranitrophenol released from pNPG at 405 nm (Thermo Scientific Genesys 20, USA). Percentage inhibition is calculated as %Inhibition =

[(Abscontrol – Absextract)/Abscontrol ]  $\times$  100. Concentrations of extracts resulting in 50% inhibition of enzyme activity (IC50) were determined graphically.

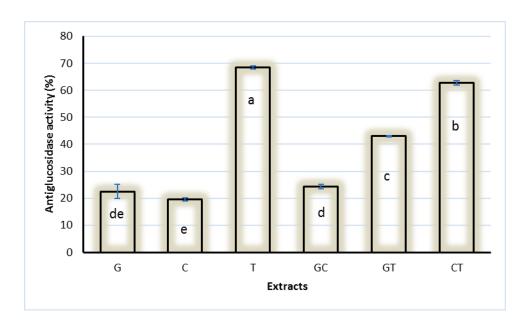
#### **Statistical Analysis**

Results are expressed as the mean of 3 replicates. Statistical analysis was carried out with a statistical program Minitab version 18. One way-ANOVA with Fisher test was used. Results were considered significant if p<0.05.

## **RESULTS AND DISCUSSION**

Alpha-glucosidase inhibitors were drugs for lowering blood glucose level that inhibits the digestion of carbohydrates in the gut and reduces postprandial hyperglycemia [25, 26]. Inhibition of the intestinal alpha-glucosidase by the drug cause prolongs starch digestion time, and thus reduces glucose absorption rate [24, 26]. Alpha-glucosidase inhibitors are an effective, safe and well tolerated treatment for diabetes [27] therefore, development of the drugs provides an interesting approach in the management of diabetes.

All of the extracts (single or combination) inhibit activity of alpha-glucosidase enzyme (Fig 1). Inhibitory activity of turmeric extract reached more than 50%, much higher than inhibitory effect of ginger or cinnamon extracts. Previously, turmeric ethyl acetate extract [28] and turmerin, as a turmeric water extract [20] were reported had higher alpha-glucosidase inhibitory effect than acarbose, a commercial glucose lowering drug. Bisdemethoxycurcumin, a curcuminoids compound isolated from turmeric, exhibited anti-glucosidase activity better than curcumin and has potentiality as new drug of diabetes [10]. Combination of ginger or cinnamon with turmeric increased their inhibitory activities but the percentages were lower than inhibitory effect of turmeric. Therefore, it is suggested that mixing of the extracts did not produce synergetic or antagonistic effect.



**Figure 1.** Effect of plant extracts on alpha-glucosidase inhibitory activities. Each value represents a mean  $\pm$  SEM (n = 3); G, C and T were ginger, cinnamon, and turmeric extracts, respectively. GC, GT and CT were combination G and C, G and T, C and T, respectively. The bars represent the mean of three replicates. Data points denoted by different superscripts differ significantly with p <0,05.

. M. N.

Effect of turmeric on alpha-glucosidase activity was dose dependent (Fig 2). Inhibitory activity against alpha-glucosidase was upregulated when the turmeric extract level increased. The IC<sub>50</sub> for turmeric extracts is 2,930 mg / dL. This value was lower than IC50 of turmeric ethyl acetate extract but higher than tumerin, a water soluble extract from turmeric, 1.71 mg/dL [28] and 8.1 mg/dL [20], respectively. IC<sub>50</sub> is the concentration of the sample that is able to inhibit the activity of  $\alpha$ -glucosidase as much as 50%.

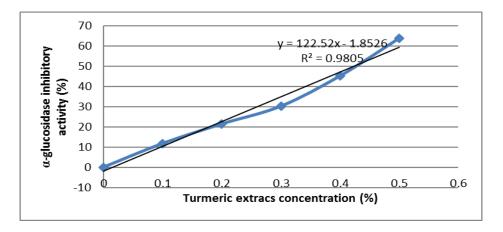
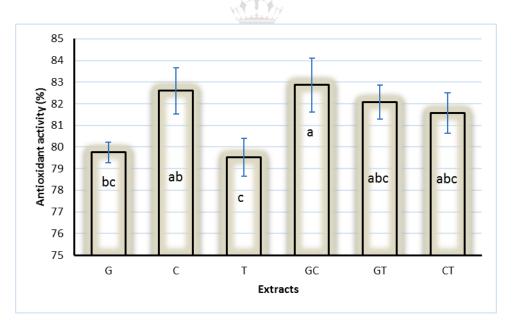


Figure 2. Effect of turmeric extracts concentration (%) on aplha-glucosidase inhibitory activities (%)

The aim of diabetes therapy is to reach normoglycemia to prevent complications. Alphaglucosidase inhibitors decrease blood glucose level through delaying the absorption of ingested starch, therefore, reduces the postprandial glucose and insulin concentrations [25, 29]. Some plant extracts or their bioactive compounds have been shown effective as alphaglucosidase inhibitors [10, 30, 31]. Kaempferol, a type of flavonoids found widely in the plant extracts, has high affinity against alpha-glucosidase and ultimately inhibiting the enzyme activity [32]. It is suggested that polyphenols in turmeric, cinnamon and ginger water extract also exhibit anti-alpha-glucosidase activity [33].

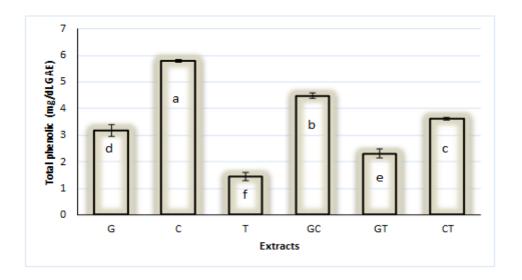
As the pathogenesis of DM involves oxidative stress, antioxidant therapies should have a potential value in its treatment [34, 35], therefore, the present work also involved the evaluation of the antioxidant activity of the single or combination of the extracts. Figure 3 shows a variation in free radical scavenging activities of the extracts which ranged from 79.53 to 82.86%. Among the single extract, cinnamon extract has the highest ability to neutralize the free radical (82.60%), followed by ginger and turmeric extracts (79.75% and 79.53% respectively). Mixing of the extracts increase antioxidant activities as seen in Fig 3, therefore, all combinations have antioxidant as high as cinnamon extract.



**Figure 3.** Effect of plant extracts on antioxidant activities. Each value represents a mean  $\pm$  SEM (n = 3); G, C and T were ginger, cinnamon, and turmeric extracts, respectively. GC, GT and CT were combination G and C, G and T, C and T, respectively. The bars represent the mean of three replicates. Data points denoted by different superscripts differ significantly with p <0.05.

Extraction method and fraction of the extracts determine antioxidant activity of cinnamon extracts. Infusion of the cinnamon bark had the higher antioxidant activity than ethanol extract, and after fractionated, water fraction of the infusion had better antioxidant activity than ethyl acetate fraction [23]. Previous research showed ginger extract has antioxidant compounds such as gingerol related compounds, diarylheptanoids [36] diarylheptanoids and epoxidicdiarylheptanoids [32] those were suggested involved in initiation of antidiabetic effect of the extract [37]. Meanwhile, ethyl acetate extract of turmeric was very effective to scavenge free radicals and to reduce LDL oxidation and cellular oxidative stress [28].

Total phenolic content of the extracts was measured using the Folin-Ciocalteu method and the results are presented in Fig 4. There was a wide range of phenol concentration in the extract as the value varied from 1.44% (GAE) for turmeric to 5.80% (GAE) for cinnamon. Free radical scavenging activity of the extracts may be attributed to their phenolic as indicated that their antioxidant activity levels were significantly positively correlated with their phenolic content (p = 0.037) (Table 1). Therefore, extract containing higher total phenolic compound, such as C and GC (Fig 4), tend to have higher antioxidant activity (Fig. 3). However, the phenolic compound of the extracts was significantly negatively correlated with anti-glucosidase activity (p = 0.001); extract containing low total phenolic compound was more effective in inhibiting of alpha glucosidase enzyme activity. Turmerin, that had the lowest phenolic content (Fig 4), exhibited the highest inhibitory action against alphaglucosidase (Fig 1).



**Figure 4.** Total phenolic content of plant extracts, single or combination. Each value represents a mean  $\pm$  SEM (n = 3); G, C and T were ginger, cinnamon, and turmeric extracts,

respectively. GC, GT and CT were combination G and C, G and T, C and T, respectively. The bars represent the mean of three replicates. GAE is galic acid equivalent. Data points denoted by different superscripts differ significantly with p < 0.05.

 Table 1. Correlation coefficients between total phenolic with antioxidant and antiglucosidase activities of the extracts.

	Total phenolic	
Activities	Pearson correlation	p-value*
Antioxidant	0.495	0.037
Percent inhibition of glucosidase activity	-0.694	0.001

\*Correlation is considered significant when p <0.05

# CONCLUSION

Turmeric extract was the most potent to inhibit alpha-glucosidase followed by extracts of ginger and cinnamon. Turmeric extract inhibited  $\alpha$ -glucosidase by 68.44 % followed by extracts of ginger and cinnamon, 22.46% and 19.613% respectively. The potentiality of the extracts to sequence free radical was not in concomitant with their anti-glucosidase activities as cinnamon sequenced 82.6% free radicals, was higher than ginger and turmeric (79.75% and 79.53%, respectively). Combination of the extracts did not exert synergetic or antagonistic effect on anti-glucosidase activity. Cinnamon extract has the highest ability to neutralize the free radical, followed by ginger and turmeric extracts and mixing of the extracts increase antioxidant activities. Extract containing higher total phenolic compound tend to have higher antioxidant activity but less effective to inhibit alpha glucosidase enzyme activity.

# ACKNOWLEDGEMENT

The authors wish to express their thanks to Fundamental Research Grants Commission of Ministry of Research, Technology and Higher Education of the Republic of Indonesia for providing financial assistance to carry out this work. The authors also would like to thank Dr. Siti Nurdjanah for valuable suggestions when carried out this research.

## **CONFLICT OF INTEREST**

We declare that we have no conflict of interest.

#### REFERENCES

1. WHO, Indonesia Diabetes country profiles, 2016., in www.who.int/entity/diabetes/country-profiles/idn\_en.pdf?ua=1, W.H. Organization, Editor. 2016. Accessed 1 June 2017.

2. (NCD-RisC), N.R.F.C., Worldwide trends in diabetes since 1980: a pooled analysis of 751 populationbased studies with 4-4 million participants. Lancet 2016. 387: p. 1513–30

3. Oh S, K.R., Dobs A, *Nutrition management of Diabetes mellitus*, in *Modern Nutrition in Health and Disease.*, C.B. Ross AC, Cousins RJ, Tucker KL, Ziegler TR, Editor. 2006, Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins, c2014.: United States.

4. Hasimun P, A.L., Valentina R, Lisnasari E., *Potential alpha-glucosidase inhibitor from selected Zingiberaceae family*. Asian Journal of Pharmaceutical and Clinical Research, 2016. 9: p. 164-167.

5. George CM, B.L., *Management of blood glucose with noninsulin therapies in type 2 diabetes*. Am Fam Physician, 2015. 92(1): p. 27-34.

6. Glucose-lowering treatment of type 2 diabetes. Part II--Glucose-lowering drugs after metformin: a choice based largely on adverse effects. Prescrire Int, 2015. 24(160): p. 130-5.

7. Paneni, F. and T.F. Luscher, *Cardiovascular Protection in the Treatment of Type 2 Diabetes: A Review of Clinical Trial Results Across Drug Classes.* Am J Med, 2017. 130(6S): p. S18-S29.

8. Ota, A. and N.P. Ulrih, An Overview of Herbal Products and Secondary Metabolites Used for Management of Type Two Diabetes. Front Pharmacol, 2017. 8: p. 436.

9. Arif T, S.B., Gahlaut A, Kumar V, Dabur R, Anti- diabetic agents from medicinal plants: A review. Chem Biol Lett 2014. 1: p. 1-13.

10. Kalaycioglu, Z., I. Gazioglu, and F.B. Erim, *Comparison of antioxidant, anticholinesterase, and antidiabetic activities of three curcuminoids isolated from Curcuma longa L.* Nat Prod Res, 2017: p. 1-4.

11. Hasimun P, A.L., Valentina R, Lisnasari E, *Potential alpha-glucosidase inhibitor from selected Zingiberaceae family*. Asian Journal of Pharmaceutical and Clinical Research 2016. 9: p. 164-167.

12. Panahi, Y., et al., Antioxidant effects of curcuminoids in patients with type 2 diabetes mellitus: a randomized controlled trial. Inflammopharmacology, 2017. 25(1): p. 25-31.

13. Zhang D, F.M., Gao SH, Liu JL, *Curcumin and Diabetes: A Systematic Review*. Evidence-Based Complementary and Alternative Medicine 2013. http://dx.doi.org/10.1155/2013/636053.

14. Adhikari R, J.Y., Bora D, Veena AV, *Combined effect of aqueous extracts of Curcuma longga Linn. with metformin in diabetes induced neuroptahic pain in rats.* Asian Journal of Pharmaceutical and Clinical Research 2015. 8: p. 166-170.

15. Daily JW, Y.M., Kim DS, Park S., *Efficacy of ginger for treating Type 2 diabetes: A systematic review and meta-analysis of randomized clinical trials.* Journal of Ethnic Foods, 2015. 2(1): p. 36-43.

16. Cheng, D.M., et al., *In vivo and in vitro antidiabetic effects of aqueous cinnamon extract and cinnamon polyphenol-enhanced food matrix.* Food Chem, 2012. 135(4): p. 2994-3002.

17. Hafizur, R.M., et al., *Cinnamic acid exerts anti-diabetic activity by improving glucose tolerance in vivo and by stimulating insulin secretion in vitro*. Phytomedicine, 2015. 22(2): p. 297-300.

18. Vinholes, J. and M. Vizzotto, Synergisms in Alpha-glucosidase Inhibition and Antioxidant Activity of Camellia sinensis L. Kuntze and Eugenia uniflora L. Ethanolic Extracts. Pharmacognosy Res, 2017. 9(1): p. 101-107.

19. Gauttam VK1, K.A., Development of polyherbal antidiabetic formulation encapsulated in the phospholipids vesicle system. J Adv Pharm Technol Res, 2013. 4(2): p. 108117.

20. Lekshmi, P.C., et al., Turmerin, the antioxidant protein from turmeric (Curcuma longa) exhibits antihyperglycaemic effects. Nat Prod Res, 2012. 26(17): p. 1654-8.

21. Qin, B., K.S. Panickar, and R.A. Anderson, *Cinnamon: potential role in the prevention of insulin resistance, metabolic syndrome, and type 2 diabetes.* J Diabetes Sci Technol, 2010. 4(3): p. 685-93.

Citation: Nurdin SU et al. Ijppr.Human, 2017; Vol. 10 (1): 296-306.

22. Faraji P, J.R., *The Study of Phenolic Compounds Antioxidant Activity in Methanolic and Aqueous Extracts of Several Plant Species of Urmia Lake Margin.* International Journal of Pharmacognosy and Phytochemical Research 2016. 8(2): p. 289-296

23. Ervina M, N.Y., Esar SY, Comparison of in vitro antioxidant activity of infusion, extract and fractions of Indonesian Cinnamon (Cinnamomum burmannii) bark. International Food Research Journal 2016. 23(3): p. 1346-1350.

24. Rao RR, T.A., Reddy PP, Babu KS, Ali AZ, Madhusudana K, Rao JM, New Furanoflavonoids, intestinal αglucosidase inhibitory and free radical [DPPH] scavenging activity from antihyperglycemic root extract of Derris indica (Lam). Bioorg Med Chem, 2009. 17: p. 5170–5175.

25. van de Laar, F.A., *Alpha-glucosidase inhibitors in the early treatment of type 2 diabetes*. Vasc Health Risk Manag, 2008. 4(6): p. 1189-95.

26. Liu, Z. and S. Ma, *Recent Advances in Synthetic alpha-Glucosidase Inhibitors*. ChemMedChem, 2017. 12(11): p. 819-829.

27. Patel, S.S., *Cerebrovascular Complications of Diabetes: Alpha Glucosidase Inhibitor as Potential Therapy*. Horm Metab Res, 2016. 48(2): p. 83-91.

28. Lekshmi, P.C., et al., *In vitro antidiabetic and inhibitory potential of turmeric (Curcuma longa L) rhizome against cellular and LDL oxidation and angiotensin converting enzyme*. J Food Sci Technol, 2014. 51(12): p. 3910-7.

29. Bischoff, H., *The mechanism of alpha-glucosidase inhibition in the management of diabetes.* Clin Invest Med, 1995. 18(4): p. 303-11.

30. Dehghan H, S.Y., Salehi P, Antioxidant and antidiabetic activities of 11 herbal plants from Hyrcania region, Iran. Journal of Food and Drug Analysis 2016. 24: p. 179-188.

31. Kim, J.S., C.S. Kwon, and K.H. Son, *Inhibition of alpha-glucosidase and amylase by luteolin, a flavonoid*. Biosci Biotechnol Biochem, 2000. 64(11): p. 2458-61.

32. Peng, F., et al., *Cytotoxic, cytoprotective and antioxidant effects of isolated phenolic compounds from fresh ginger.* Fitoterapia, 2012. 83(3): p. 568-85.

33. Kim, Y., J.B. Keogh, and P.M. Clifton, Polyphenols and Glycemic Control. Nutrients, 2016. 8(1).

34. Golbidi, S., S.A. Ebadi, and I. Laher, *Antioxidants in the treatment of diabetes*. Curr Diabetes Rev, 2011. 7(2): p. 106-25.

35. Lin, D., et al., An Overview of Plant Phenolic Compounds and Their Importance in Human Nutrition and Management of Type 2 Diabetes. Molecules, 2016. 21(10).

36. Masuda, Y., et al., *Antioxidant properties of gingerol related compounds from ginger*. Biofactors, 2004. 21(1-4): p. 293-6.

37. Rani, M.P., et al., *Zingiber officinale extract exhibits antidiabetic potential via modulating glucose uptake, protein glycation and inhibiting adipocyte differentiation: an in vitro study.* J Sci Food Agric, 2012. 92(9): p. 1948-55.