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<u>Sciences</u>

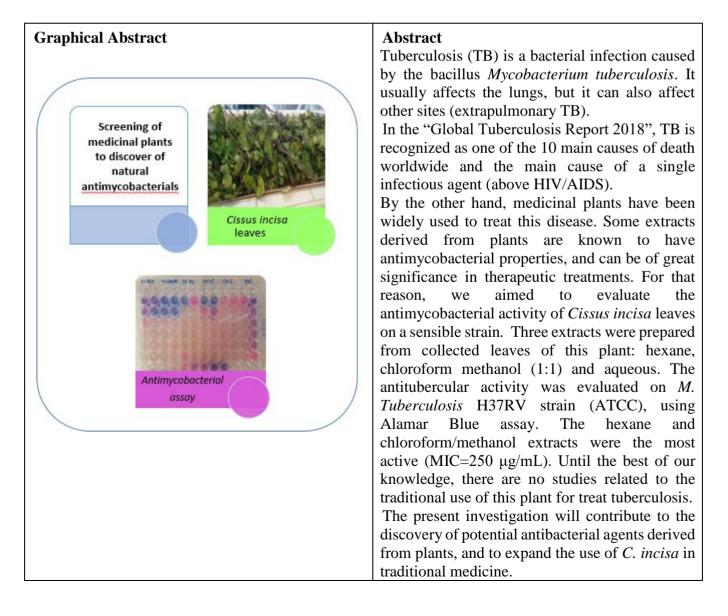
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# Promising activity of *Cissus incisa* extracts against Mycobacterium Tuberculosis H37RV strain

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## Introduction

According with WHO estimations, a quarter of the world population suffers from latent tuberculosis, a term applied to people infected with the bacillus but who have not yet become ill, and cannot transmit the infection. People infected with the bacillus, they have a lifetime risk of falling ill with tuberculosis (5-15%). In contrast, immunocompromised people, for example those with HIV, malnutrition, diabetes, and tobacco users are at a much higher risk of falling ill with TB. The dosage regimens for the treatment of this disease are prolonged, for that reason, more effective drugs are needed, and they are less vulnerable to antimicrobial resistance. [1, 2, 3,4].

The aim of this study was to evaluate the antimycobacterial activity of extracts from *C. incisa* leaves on a sensible strain *of M. Tuberculosis*.

## Materials and Methods (optional)

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## **Results and Discussion**

Samples	H37Rv M. tuberculosis
Hexane extract	250
CHCl <sub>3</sub> /MeOH extract	250
Aqueous extract	>500
Isonizide	> 50
Rifampicin	> 50
Ethambutol	50

Table 1. Antimycobacterial results of C. incisa extracts. MIC (µg/mL)

## Conclusions

The antimycobacterial potential of the extracts from *C. incisa* leaves on a sensible strain, is reported for first time. The results obtained encourage to further investigation to isolate and separate individual phytochemicals. This is because novel active phytocompounds on same strain, can be obtained, which will contribute to improve current anti-tuberculosis regimen.

## References

[1] Global Tuberculosis Report 2018. Geneva: World Health Organization (2018).

www.who.int/tb/publications/global\_report/en/. (Accessed 4 June 2020)

[2] WHO. Resistance to antibiotics. <u>http://who.int/mediacentre/factsheets/antibiotic-resistance/es/</u>. (Accessed 4 June 2020).

[2] Silva, C.; Bermúdez, V.; Arraiz, N.; Bermúdez, F. Front-line medicines used in the treatment of tuberculosis. *Arch. Venez. Farmacol. Ter*, 2007, 26 (1).

[3] WHO. Tuberculosis. Descriptive note. http://origin.who.int/mediacentre/factsheets/fs104/es/ (Accessed 4 June 2020).