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RESEARCH ARTICLE

ACUTE TOXICITY AND HEPATO-RENAL PROTECTION OF LIME JUICE, HONEY AND THEIR FLAVONOID-RICH FRACTIONS IN HIGH FAT-DIET INDUCED OBESE RAT MODEL

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Abstract



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Introduction: A major consideration for the use of alternative herbal medicine from natural compounds is the concern of safety due to possible toxicity. This study evaluated the safety and hepato-renal protection of fresh lime juice (FLJ), raw honey (RH) and their flavonoid-rich fractions in obese rat induced high fat-diet (HFD).

Methods: Oral acute toxicity (LD_{50}) study involved 24 female Wistar rats, divided into 8 groups of 3 rats, administered 300 mg/kg and 2000 mg/kg of FLJ, RH, methanol flavonoid rich fraction of lime juice (MFLJ) and ethyl acetate flavonoid rich fraction of honey (EAFH) respectively, for 14 days. Simultaneously, for the anti-obesity study, 24 neonate wistar rats of 21-days old, divided into 2 groups of 12 rats (for obesity induction phase-1, for two weeks), and regrouped into 4 groups of 4 rats (14 days treatment phase-2), were used.

Results: Result of LD₅₀ on FLJ, RH, MFLJ, and EAFH showed no toxicity, no motility, and body weight of rats was not adversely affected evenup to 2000 mg/kg. The increased body weight of the HFD-obese rats was significantly (p<0.05)reduced compared to control. There was significant (p<0.05) decrease in activities of aspartate aminotransferase and alanine aminotransferase after MIX, MFLJ and EAFH administration, compared with control. Also, total protein and bilirubin concentrations was not significantly (p<0.05) reduced the concentrations of creatinine, urea, potassium, and chloride; while MIX and EAFH significantly (p<0.05) increased their concentrations compared to control.

Conclusion: It may be concluded that FLJ, RH, MFLJ, and EAFH are safe for consumption and also possess liver and renal protection.

Keywords: Acute toxicity, high fat diet, honey, lime juice, liver function, renal function.

INTRODUCTION

Plant use and applications as alternative medicine by traditionists have experienced bias of late, owing to the arrival of orthodox or conversional medicine¹. However, it is reported that phytochemicals derivatives of plants and herbs make up greater than 25% chemical structure of pharmacological drugs, thus revealing the unparallel potentials of plants' biomolecule for targeted disease and drug development². In traditional medicine practice, therapeutic formulations are usually made by combining plants parts, with promising phytochemicals of medicinal health benefits, for the management and treatment of disease²⁻⁵. These include mixture of

honey and *Desmodium velutinum* as anti-ulcer therapy⁶, honey and lime juice mixture as anti-hypercholesterolemia³, and as anti-obesity⁵ therapies in rat's studies.

The rampant exploitation of natural medicinal plants and herbs in treating many diseases, against synthetic drug is due to the unbearable side effects synthetic drugs potentiate, making room for plant as alternative safe medicine⁷. Lemon juice was used to neutralize the toxic effect of veeram, during its preparation. Veeramis composed of mercury chloride (Hg₂Cl₂) employedin the treatment of gonorrhea, syphilis, stomach ulcer and⁸. Honey in combination with extract of *Mallotus oppostifollous* was reported to be a safe phytomedicine, possessing protective effects on the kidney and liver⁴. Currently, one crucial anchor of the patronage of herbal medicine as alternative to conventional medicine is antioxidant and anti-inflammatory defense mechanism, found in most phytocompounds, in tackling diseases⁵. Citrus aurantifolia fruit juice and honey, are reported to contain several phytochemicals including alkaloids, carbohydrates, terpenoids, flavonoid, proteins, glycosides, saponins, tannins, phlobtannins, phenols and amino acids^{9,10}. These phytochemicals are the agents responsible for the bioactivities in plants as alternative medicine for treatment, management and prevention of several diseases¹¹. These bioactivities include antioxidant and anti-hyperlipidemic⁵, antiinflammatory, antifungal, anti-microbial⁹, antidiabetes¹², and enzyme inhibitory and inductive activities¹¹. Flavonoids in citrus and honey, including neohesperidin, quercetin, coumarin, epigallocatechin, caffeic acid, sinapic acid, hesperidin, naphthoresorcinol, gallic acid, rutin, nobiletin, hesperitin, and apigenin and kaempferol are known for their significant antioxidant, anti-obesity, antihyperlipidemia, antiasth-matic, anti-tumor, anti-prostatitis, antianticancer^{5,13}. anti-inflammatory and allergic, Flavonoids impact their anti-obesity effect by their operation on the activity of sympathetic nervous system to control appetite, improve hepatic fatty acid oxidation by enzyme regulation and improvement of energy expenditure by lowering nutrient absorption¹⁴.

Although, majority of natural product medicine are reported safe for use, however, some are said to be toxic, with potential hideous side effects, depending on the quantity consumed⁸. In order to ascertain the safe dose and use of natural and synthetic medicinal products, researchers employ the use of oral acute toxicity and sub-acute toxicity study on animals. The median lethal oral dose, known as LD₅₀ is established in this study¹¹. The LD_{50} of a substance is the dose of that substance given orally, that result in 50 percent death of the test animals^{4,11}. It is statistically calculated and expressed in terms of weight of test substance per unit weight of test animal (mg/kg)¹¹. Thus, this study investigated and validated the speculated safety use of lime juice, honey, and their flavonoid rich fractions with hepatic and renal protectionin HFD induced obese rat model.

MATERIALS AND METHODS

Experimental Design and Induction of Obesity

At phase I, male neonate albino Wistar rats (twentyfour, of 21 days old) were divided into 2 groups of 12 rats each for induction of obesity, for two weeks. In phase II, animals were regrouped into 4 groups of 4 rats each, to commence treatment orally, with (50% FLJ and 50% honey mixture) MIX, MFLJ, and EAFH, for two weeks. Rats were sacrificed and blood samples and organs collected for biochemical analysis at the end of each phase.

Phase I

Group 1: Control, fed a normal diet and clean water (12 rats).

Phase II

Group 1: Control, fed normal feed + clean water.

Group 2: High-Fat diet-obese rats^a+ 200 mg/kg oral administration of 50% FLJ and 50% honey mixture (MIX)

Group 3: High-Fat diet-obese $rats^{b}$ + 200 mg/kg oral administration of MFLJ

Group 4: High-Fat diet-obese rats^e+ 200 mg/kg oral administration of EAFH

Body weight and length of rats was measured and used for the determination of Lee indices by the method of Nakagawa *et al.*¹⁵, using the formula;

Lee indices of animal = $\frac{\sqrt[8]{Body Weight (g)}}{Nose to Anus Lenght (cm)}$

Obesity was established if a rat had Lee index ≥ 0.3 . % Adiposity index (% AI) was calculated by the formula expressed below^{5,15}.

Adiposity index (% AI)

 $=\frac{\text{Total weight of epididymal, visceral and retroperitoneal fat}}{x_{100}}$

Body weight

Oral Acute Toxicity (LD₅₀) study of FLJ, RH, MFLJ and EAFH

Twenty-four female rats of 10 weeks old (75-167 g) were used to determine the LD_{50} of fresh lime juice (FLJ), raw honey (RH) and their flavonoid rich fractions (MFLJ and EAFH) (Table 1). Animals were allowed to fast, by withholding food, not water overnight. After fasting, rats were weighed and extracts administered; and thereafter, weight was taken weekly. This study was done following the method described by the organization for economic co-operation development $(OECD)^{16}$, with little modification, and 300 mg/kg was selected as the starting dose. Thus, 300 mg/kg and 2000 mg/kg of extracts were given to 3 rats each, and food was withdrawn for 2 hours. Doses were given after 24 hours and animals were individually observed every 30 minutes of the 1st 24 hours, especially within the 1st 4 hours, and then daily for 14 days. Observation of toxic symptoms was done, such as changes in skin and fur, behavioral changes, tremors, eyes and mucous membranes, loco-motion, salivation, diarrhea, convulsion, lethargy, sleep, coma and mortality, immediately after oral administration of single dose. The LD_{50} of a substance is the dose of that substance given orally, that result in 50 percent death of the test animals. It is statistically calculated and expressed in terms of weight of test substance per unit weight of test animal (mg/kg).

Blood and tissue collection

Rats were made to fast overnight and anesthesized via subjection to mild chloroform before blood was collected into plain and EDTA tubes by cardiac puncture. Serum was separated by a retro fraction and plasma the erythrocytes after centrifuging the whole blood at 5000 rpm for ten minutes. All samples were stored at -20°C until analyzed.

Preparation and composition of high-fat diet in g/1000 g

High fat diet was prepared following the method of Idoko *et al.*, with a little modification: pelletized

Group 2: Fed High-Fat diet (12 rats).

commercial feed: 300, Chichen skin: 84, Skin of pork: 161, Butter: 85, and Yoke of egg: 370.

Body weight measurement of rat

The neonate's rat average body weight prior to and after obesity induction was recorded to be 25 - 133 g. During treatment with MIX, MFLJ and EAFH, (67 - 130 g) were the measured average body weight on day 1, day 7 and day 11.

Liver and kidney function tests

Randox Kit was used to carry out the liver and renal function tests. Alanine aminotransferase (ALT) activity, by method of Reitman and Frankel¹⁷, aspartate aminotransferase (AST) activityby method of Reitman and Frankel¹⁷, alkaline phosphatase (ALP) activity by Englehardt¹⁸ method, concentrations of total protein (TP) and bilirubin (Bil) byJendrassik and Grof¹⁹ method. Urea and creatinine concentrations by Bartels and Bohmer²⁰, concentrations of chloride and potassium by Henry *et al.*²¹.

Statistical analysis

Data was analyzed by T- test pare wise comparison of means, using both one and two-ways analysis of variance (ANOVA) in Statistical Product and Service Solutions (SPSS), version 20 and results were presented as Mean \pm SD. Mean value with p<0.05 was considered significant and Duncan's new multiple range test was used to separate significant means at 95% level of probability.

RESULTS

Oral Acute Toxicity Study (LD₅₀)

Table 1 shows the result of oral acute toxicity test on FLJ, RH, MFLJ and EAFH. No sign of toxicity and no mortality observed at doses of 300 mg/kg and 2000 mg/kg. This confers a level of safety on FLJ and RH, and MFLJ and EAFH. Hence, it implies that the dose of 2000 mg/kg of the fraction is safe. Therefore, 1/10th (200 mg/kg) and 1/8th (250 mg/kg) doses of the fractions were considered to evaluate the biological activity.

Table 1: Result of acute oral toxicity study (LD50) on FLJ, RH, MFLJ and EAFH at 300 mg/kg and 2000
mg/kg.

Group	No of	Dose	Duration	No of	No of	Effect on Body
	Rat	(mg/kg)		Death	Survival	Weight
FLJ	3	300	14 days	0	3	SI
	3	2000	14 days	0	3	SD
RH	3	300	14 days	0	3	SI
	3	2000	14 days	0	3	SD
MFLJ	3	300	14 days	0	3	SD
	3	2000	14 days	0	3	SD
EAFH	3	300	14 days	0	3	SI
	3	2000	14 days	0	3	MD

SI: Slightly Increased; SD: Slightly Decreased; MD: More Decrease; FLJ=Fresh lime juice; EAFH= Ethyl acetate flavonoid rich fraction of honey; MFLJ=Methanol flavonoid rich fraction of lime juice.

The body weight (Table 2) of rats in this oral acute toxicity study was not adversely affected as no significant (p<0.05) declined weight loss (Tables 1 and 2), when either 300 mg/kg or 2000 mg/kg dosage group was compared with control group. Rather, rats significantly (p<0.05) gained weight, compared to control group. However, the effects of EAFH and MFLJ on body weight of rats in LD₅₀ study dosing at 300 and 2000 mg/kg significantly (p<0.05) reduced bodyweight compared with FLJ and RH.

Body weight, Lee indices, and adiposity indices of treated rats

Figure 1 and Figure 2 show the body weight of rats both after obesity induction (AOI) and treatment with

MIX, MFLJ and EAFH. In HFD – obese treated rats, which was significantly (p<0.05) reduced (especially on day 11) when each treatment group was compared with either control group or AOI group. Figure 2reveal the weight gain after treatment with MIX, MFLJ and EAFH.

The HFD– obese rats gained more weight (Figure 2) and consumed more feed (Table 3) than the control rats, but after treatment with MIX, MFLJ and EAFH, weight gain was significantly (p<0.05) reduced. Lee index and adiposity index (Table 2) were significantly (p<0.05) increased in HFD– obese rats when compared with control and treated rats, establishing obesity.

Table 2: Effects of FLJ, RH, MFLJ and EAFH on body weight of rats after LD ₅₀ study at 300 and 2000 mg	/kg
doses (n=3, <i>n<</i> 0.05).	

Group	Arrival Day	Day 1	Day 7	Day 14
Control	27.00±3.56 ^a	97.25±4.29 ^a	112.25±11.59 ^a	114.75±3.86 ^a
FLJ 300 mg/kg	91.50±10.60 ^b	107.50±3.53 ^b	110.00±4.24ª	124.00±7.07 ^b
FLJ 2000 mg/kg	99.50±9.19°	115.00±7.07 ^b	$113.00{\pm}14.14^{a}$	110.50±6.36 ^a
RH 300 mg/kg	86.00±11.31 ^b	105.00±7.07 ^b	111.00±11.31ª	124.00±7.07 ^b
RH 2000 mg/kg	101.00±4.24°	120.50±3.53°	128.50±26.16 ^b	117.50±3.53ª
MFLJ 300 mg/kg	111.50±13.44°	129.50±20.51d	128.50±19.09b	124.00±14.14b
MFLJ 2000 mg/kg	75.50 ± 4.95^{d}	119.00±7.07°	115.00±1.41 ^a	107.00 ± 2.83^{a}
EAFH 300 mg/kg	125.50±0.70e	134.50±0.71 ^d	98.00±1.41°	113.00±2.82 ^a
EAFH 2000 mg/kg	161.50±54.44 ^f	143.50±33.23e	125.00±28.28 ^b	78.50±2.12°

FLJ=Fresh lime juice; EAFH= Ethyl acetate flavonoid rich fraction of honey; MFLJ=Methanol flavonoid rich fraction of lime juice.



Figure 1: Effects of MIX, MFLJ, and EAFH on body weight of HFD-obese treated rats (n=4, p<0.05). HFD-obese: High fat diet-obese rats; MFLJ: Methanol Flavonoid Rich Fraction of Lime Juice; MIX: Mixture of FLJ (50%) and RH (50%); EAFH: Ethyl acetate Flavonoid Rich Fraction of Honey.

Liver function and kidney function tests

In HFD-obese treated rats (Figure 3 and Figure 4), MIX, MFLJ and EAFH treated rats had their TP concentrations significantly (p<0.05) lower than control and higher than AOI group. AST activity was significantly (p<0.05) lowered in rats treated MIX and MFLJ than both control and AOI groups. AST activity was significantly (p<0.05) higher in EAFH rats than control, but significantly (p<0.05) lowered than AOI

group. There was significant (p < 0.05) reduction in ALT activity in rats treated MIX and MFLJ, and increase in rats treated EAFH than control and AOI groups. D-BIL and T-BIL were significantly (p < 0.05) reduced in rats treated MIX, MFLJ and EAFH than control and AOI groups. ALP was significantly (p < 0.05) increased in rats treated MIX, MFLJ and EAFH than control and AOI groups. ALP was significantly (p < 0.05) increased in rats treated MIX, MFLJ and EAFH than control and AOI rats.



Figure 2: Effects of MIX, MFLJ and EAFH on weight gain of HFD diets obese treated rats (n=4, p<0.05). HFD-obese: High fat diet-obese rats; MFLJ: Methanol Flavonoid Rich Fraction of Lime Juice; MIX: Mixture of FLJ (50%) and RH (50%); EAFH: Ethyl acetate Flavonoid Rich Fraction of Honey.

In HFD-obese treated rats, administration of MIX and MFLJ significantly (p < 0.05)increased the concentrations of creatinine, urea and potassium than in control and AOI groups. There was significant (p < 0.05) high concentration of urea in rats treated EAFH than control and AOI groups. Rats treated EAFH had their creatinine and potassium concentrations reduced than control and AOI groups, in a significant (p < 0.05) level (Figure 5). Chloride concentration in HFD-obese treated rats (Figure 6), was reduced by MIX and MFLJ treatment than in control and AOI groups, and was increased by EAFH than AOI group but reduced than control group, in significant (p < 0.05) way.

DISCUSSION

In the oral acute toxicity study (Table 1), it was found that there was no sign of toxicity or mortality observed at doses of 300 mg/kg and 2000 mg/kg of administered FLJ, RH, MFLJ and EAFH, within two weeks of LD_{50} study, and thus LD_{50} was not determined or calculated for FLJ, RH, MFLJ and EAFH administered to rats in this study. This implied that the LD_{50} value would be higher than 2000 mg/kg body weight. Based on the Globally Harmonized System of Classification and Labeling of chemicals (GHSCLC), FLJ, RH, MFLJ and EAFH at 2000 mg/kg body weight may be classified as Category 5¹⁶.



Figure 3: Effects of MIX, MFLJ and EAFH on serum TP, AST, ALT, D-BIL and T-BILHFD-obese treated rats (n=4, *p*<0.05).

AOI: After Obesity Induction; HFD-obese: High fat diet-obese rats; MFLJ: Methanol Flavonoid Rich Fraction of Lime Juice; MIX: Mixture of FLJ (50%) and RH (50%); EAFH: Ethyl acetate Flavonoid Rich Fraction of Honey; TP: Total protein; AST: Aspartate Aminotransferase; ALT: Alanine Aminotransferase; D-BIL: Direct Bilirubin; T-BIL: Total Bilirubin.

Table 3: Lee index,	adiposity	index and	diet intake of rat

	LB	LA	Adipose Index	Diet intake
Control	0.25±0.035ª	0.28±0.01ª	1.30±1.13 ^a	46.07 ± 9.04^{a}
HFD	0.26±0.01 ^a	0.51 ± 0.00^{b}	5.93 ± 0.58^{b}	184.00±13.39 ^b

The safety of FLJ, RH, MFLJ and EAFH in this study is confirmed by recent studies, which reported that the LD₅₀ of honey was up to 5000 mg/kg for two days⁴, and lime juice was up to 5000 mg/kg for 14 days¹². In the course of this study, administration of FLJ, RH, MFLJ and EAFH does not cause any observable abnormal physical toxicological symptoms such as loss of fur, diarrhea, sleep, aggressiveness, fatigue, coma or mortality. For EAFH, the studies of Samat *et al.*²², and Suhana *et al.*²³, agree with this observation, who both reported that 2000 mg/kg dose of Gelam and Acacia honey administered to rats did not result in any toxicological signs. However, for MFLJ, the report of Obiajulu *et al.*²⁴, does not agree with the observation of this study. In their report, rats which received dose of 60 and 100 ml/kg showed signs of toxicity and eventually, resulted in mortality. Meanwhile, 300 and 2000 mg/kg MFLJ were administered to rats in this study, which was far higher than that of Obiajulu *et al.*²⁴, and no mortality was recorded. The conferred safety on EAFH and MFLJ could be due to the anti-toxicity, anti-inflammatory and antioxidant property of flavonoids in the MFLJ flavonoid rich fraction⁸.





During the LD₅₀ study (Table 2), the body weight of rats administered FLJ, RH, MFLJ and EAFH was not adversely affected. Judging from the last day of the study, rats significantly (p<0.05) gained weight, compared to control in all 300 mg/kg dose and significantly (p<0.05) decreased in weight compared to control in all 2000 mg/kg dose of FLJ, RH, MFLJ and EAFH administered. However, on the contrary, Zulkhairi *et al.*²⁵, reported that in either dose case, there was no significant (p<0.05) change in body weight of rats in their acute toxicity study. The body weight of HFD-obese treated rats was significantly (p<0.05) reduced compared with the HFD-obese rats (AOI), as seen in Figure 1 and Figure 2 and there was significant (p<0.05) increase of body weight in MFLJ and EAFH treated rats compared with control. Again, the studies of Samat *et al.*²², and Suhana *et al.*²³, supported this observation, were Gelam and Acacia honey were observed to increase the body weight of rats when test group was compared with normal control group. The gain in body weight could be attributive to the fact that honey is a rich source of amino acids and other nutrients, which could support buildup of body mass²². The Lee index values (Table 3) which established obesity in rats in this study is consistent with the report of Idoko *et al.*⁵. In this study, HFD-obese rats ate food the most, compared with control. This model of obesity in association with hyperphagia (excessive eating) in neonatal fed high fat diet is connected with increased lipogenesis, decreased adipose tissue lipolysis and raised plasma corticosterone concentration²⁶.



Figure 5: Effects of MIX, MFLJ, and EAFH on serum CREA, Urea, and POT in HFD-obese treated rats (n=4, *p*<0.05).

AOI: After Obesity Induction; HFD-obese: High fat diet-obese rats; MFLJ: Methanol Flavonoid Rich Fraction of Lime Juice; MIX: Mixture of FLJ (50%) and RH (50%); EAFH: Ethyl acetate Flavonoid Rich Fraction of Honey; CREA: Creatinine; POT: Potassium.

The percentage adiposity index of rats treated HFD (Table 3) was found to be higher than normal control rats, but treatment with MIX, MFLJ and EAFH, reduced the % adiposity index as compared with normal control and AOI. This result agrees with the report of Suhana *et al.*²³, as the relative organ weight of high fat diet group was reduced by treatment with Gelam honey, Acacia honey and orlistat.

Figure 3 and Figure 4 reveal the result of liver function test. There was no significant (p<0.05) decrease in concentration of TP in rats treated MIX, MFLJ and EAFH compared with control, but was higher compared with AOI group (HFD-obese rats). This study agrees with the report of Úrsula *et al.*²⁷, who reported the concentrations of total protein and albumin to be higher in healthy rats than in obese rats treated fruit purees. Obiajulu *et al.*²⁴, reported a non-significant (p<0.05) effect of *C. aurantifolia* fruit juice on serum concentrations of total protein, albumin, total bilirubin, K⁺, Na⁺, Cl⁻ and HCO³⁻ for the 3 doses tested when

compared to the normal control in a toxicological study. In obese and overweight individuals, serum total protein concentration was reported to be associated with the onset of prehypertension and hypertension²⁸. While ALT activity in HFD-obese treated EAFH rats was significantly (p<0.05) higher. The observations of this study are in agreement with El-Haskoury *et al.*²⁹, who reported reduced activities in serum AST, ALT and ALP in aqueous and ethyl acetate extract of carob honey in streptozotocin -induced diabetic rats; and Obiajulu *et al.*²⁴, who also reported significant (p<0.05) decreased in serum activities of AST, ALT and ALP for the three groups of rats administered different doses of *C. aurantifolia* fruit juice.

Damage to the liver by a substance or a plant extract (fractionated or crude) is determined by assaying the cerum activities/concentrations of liver function parameters which include ALT, AST, ALP, TP, Abumin, T-Bil and D-Bil³⁰.



Figure 6: Effects of MIX, MFLJ and EAFH on serum CHL in HFD-obese treated rats (n=4, p<0.05). AOI: After Obesity Induction; HFD-obese: High fat diet-obese rats; MFLJ: Methanol Flavonoid Rich Fraction of Lime Juice; MIX: Mixture of FLJ (50%) and RH (50%); EAFH: Ethyl acetate Flavonoid Rich Fraction of Honey; CHL: Chloride.

The healthy and functional state of the liver is specifically linked to the cellular cytoplasmic release of ALT²⁴. Thus, the higher serum activities of ALT, AST and ALP in the various obesity models in this study suggest hepatocellular injury, as compared to the nonobese control rats. Meanwhile, treatment with MIX, MFLJ and EAFH reduced the higher levels of AST, ALT and ALP as revealed in obese rats²⁹. The hepatoprotective ability demonstrated by MIX, MFLJ and EAFH could be attributed to the antioxidant compounds (flavonoids) present in both C. aurantifolia fruit juice and honey and was found to reduce damage to tissue in the treated obese rats by antioxidant free radical scavenging of free radicals; thus, decreased amount of free radical in tissue could also implies restoration of cellular architecture due to decreased amount of metabolites²⁷. The serum concentrations of D-Bil and T-Bil HFD-obese rats treated MIX, MFLJ and EAFH was significantly (p < 0.05) decreased than in control and AOI rats. The result of this study is consistent with the study of Úrsula et al.27, who reported that the serum concentrations of T-Bil and D-Bil in obese rats was higher than in healthy control rats and rats treated with fruit purees. But on the contrary, results from Obiajulu *et al.*²⁴, revealed that serum T-Bil and D-Bil concentrations was reduced in C. aurantifolia fruit juice treated rats than in normal control rats. It was reported that obesity and serum concentration of bilirubin are bi directionally related³¹, and serum concentration of bilirubin is not dependently and directly associated with adiposity or body mass index³². Obesity and bilirubin are bidirectionally related such that in obesity, serum total bilirubin concentration may decrease by gut microbiota modification³³, and decrease in serum total bilirubin concentration may prevent insulin resistance by improving visceral obesity and adipose tissue inflammation³¹.

Administration of MIX and MFLJ significantly (p < 0.05) increased the concentrations of creatinine, urea and potassium than in control and AOI groups. EAFH had significant (p < 0.05) elevated effect on the concentration of urea than control and AOI groups. Rats treated EAFH had their creatinine and potassium concentrations significantly (p < 0.05) reduced than control and AOI groups (Figure 5). There was significant (p < 0.05) decrease in chloride concentration in HFD-obese rats treated MIX and MFLJ (Figure 6), compared with control and AOI groups, and increase in EAFH treated rats than AOI group, but decrease than control group. Akpevwoghene et al.³⁴, gave a different report, of significant (p < 0.05) rise in serum chloride concentration in rats treated honey than control. No significant (p < 0.05) change in serum chloride in rats administered lime fruit juice compared with control²⁴. A physiological factor that determines a balance homeostasis of chloride concentration is the balance of sodium concentration³⁵. In obesity, chlorine imbalance may result from the following; excess fats accumulation, resulting in high blood circulation volume, heart beats faster and raised cardiac output, caused by hemodilution from high blood pressure in obese state³⁶. The result of serum creatinine and urea

concentrations in this study is consistence with Akpevwoghene et al.³⁴, where excess Bee honey, fed rats had their creatinine and urea concentrations significantly (p < 0.05) higher in test rats than in control. Similarly, Suhana et al.23, reported that serum urea was significantly (p < 0.05) lower in high fat diets obese rats, treated with Gelam and Acacia honey than in normal control while serum creatinine concentration was significantly (p < 0.05) higher in high fat diets obese rats, treated with Gelam and Acacia honey. Renal function is mostly measured by creatinine and urea concentrations, and not necessarily a measure of renal toxicity³⁷. An indication of creatinine in the blood suggests the ability of the kidney to remove and produce same³⁸. The glomerular filtration rate (GFR), a more reliable measure of kidney function than independent estimation of creatinine or urea, measures the ration of urea: creatinine, and it is reported to be reduced in elevated creatinine concentration, resulting in renal disease (chronic and acute renal disease)^{38,39} Honey and lime juice contain appreciable content of amino acid and protein, and this could support the increased serum concentration of urea, as breakdown product of protein³⁹. Thus, urea concentration might be high in the blood, in none renal disease state due to the amount produced by the liver and cleared by the kidney via excretion in urine³⁷. This study is consistent with the report of Brurya et al.⁴⁰, where increase in dietary intake of K was significantly associated with loss of weight and reduced BMI. Thus, MIX, MFLJ and EAFH, confer electrolyte-protective ability, supporting cellular electrolyte balance²⁴.

Limitations of the study

Isolation of these flavonoid rich fractions should be done, and molecular docking and simulation studies may be carried out to investigate the anti-obesity potential of these flavonoids on a targeted obesity receptor protein, for drug development.

CONCLUSIONS

In this study, the oral acute toxicity study on lime juice, honey and their flavonoid rich fractions, revealed they can be consumed safely, without toxic side effect. Also, the anti-obesity study on high fat-obese rats reveal they were also found to possess liver and kidney protective effects, due to the rich flavonoids they contain. Thus, MFLJ and EAFH could be potential source of anti-obesity agents.

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AUTHOR'S CONTRIBUTION

Idoko A: writing original draft, methodology, investigation. Parker JE: conducted the fieldwork as part of his PhD studies. Njoku OU: writing, review and editing, methodology. **Ugwudike PO:** formal analysis, supervision. **Jennifer NC:** writing, review, and editing, methodology, data curation. All authors revised the article and approved the final version.

DATA AVAILABILITY

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

CONFLICT OF INTEREST

There is no conflict of interest in connection to this paper.

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