

## **Ashwagandha (*Withania somnifera*) and Their Effects on the Reproductive Hormones of Male Rats**

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### **Abstract**

Effect of Ashwagandha (powder, extract and their mixtures) on feed intake, body weight gains, feed efficiency ratio, lipid profile, liver enzymes, kidney functions and fertility hormones in rats were examined. Forty-two adult male rats weighing (115±5 g) were divided into 2 main groups. The first main group fed on basal diet as a (negative control group) consisted of (7) rats, while the second main group consisted of (35) rats divided into five similar subgroups were injected with sodium valproate to induce testicular injury at a dose (500 mg/kg) body weight. The first subgroup was then maintained as positive control (+Ve), the second subgroup was fed on basal diet plus Ashwagandha powder (100 g/kg diet), the third subgroup was fed on basal diet plus Ashwagandha extract (10 mg/kg b.w/rat) orally, the fourth subgroup was fed on basal diet plus L-carnitine (150 mg/kg b.w/rat) orally, the fifth subgroup was fed on basal diet plus Ashwagandha powder and (Ashwagandha extract & L-carnitine/rat orally) for one month. At the end of the experimental period, blood samples were collected from each rat and separate the serum which used for determination of some biochemical analysis. Tests specimens were taken for examination. The results of Ashwagandha powder, extract and combination orally to rats revealed that non-significant differences in body weight gains, feed efficiency ratio, feed intake and decreased serum lipid profile and increased in HDL-c. It also decreased in liver enzymes, kidney functions and fertility hormones serum Testosterone, Follicle Stimulating Hormone, Lutenizing Hormone in induced rats which feed on combination of Ashwagandha powder, extract and L-carnitine. So this study recommended using Ashwagandha in improving fertility for patients.

### **Keywords**

Ashwagandha, Rats, Fertility Hormones, Lipids profile, Liver enzymes, Kidney functions, Biochemical analysis.

## INTRODUCTION

Ashwagandha (*Withania somnifera* Dunal) belonging to Solanaceae family is a small woody shrub or herb that grows to usually 30 to 50 cm height (maximum of 150 cm) **Sapra et al.**, (2020). It is an adaptogenic herb and its roots, seeds and leaves are used in ayurvedic and unani medicines to promote “youthful vigor,” enhance muscle strength and endurance, and improve overall health **Kulkarni and Dhir** (2008).

Ashwagandha, also known as *Withania somnifera*, Indian ginseng and winter cherry, has been an important traditional herbal medicine for over 3000 years **Mishra et al.**, (2005).

The extract of (*W. somnifera*) is a complex mixture of a large number of phytochemicals including phenolic compounds and flavonoids. However, the pharmacological effect of the roots of *W. somnifera* is attributed to withanolides **Udayakumar et al.**, (2010). Polyphenols are the biggest group of phytochemicals, and many of them have been found in plant-based foods. Polyphenols have been found to be strong antioxidants that can neutralize free radicals by donating an electron or hydrogen atom **Rice-Evans et al.**, (2000). In addition to radical scavenging, polyphenols chelate metal ions such as Fe<sup>+2</sup> directly and reduce the rate of Fenton reaction, thus preventing oxidation caused by highly reactive hydroxyl radicals **Perron and Brumaghim** (2009).

The extract of the Ashwagandha root has many biological implications due to its diverse phytochemicals **Dar et al.**, (2015), so it has been used, singly or in combination with other natural plants, in many research studies for its properties: anti-diabetic **Chukwuma et al.**, (2019), anti-inflammatory **Sun et al.**, (2016), anti-microbial **Tripathi et al.**, (2018), anti-tumor **Hassannia et al.**, (2019), anti-stress **Kaur et al.**, (2001), cardioprotective **Kaur et al.**, (2015), or neuroprotective **Yenissetti et al.**, (2016). It also displays enhanced endothelial function **Dar et al.**, (2015), reduces reactive oxygen species **Sun et al.**, (2016), regulates apoptosis **Ahmed et al.**, (2018), and modulates mitochondrial function **Dar et al.**, (2015), showing to be effective to treat aging effects **Pradhan et al.**, (2017), cognitive functions and memory **Choudhary et al.**, (2017), skin diseases **Li et al.**, (2016) and thyroid function, **Sharma et al.**, (2018),

Ashwagandha has the antioxidant property that can reduce free radicals induced oxidative stress; **Singh et al.**, (2002); **Mishra** (2009<sup>a</sup>) and **Bhattacharya et al.**, (2010). Thus, some of the useful effects of dietary intake Ashwagandha roots on triglyceride level are attributable to the reduction of stress oxidative and lipid peroxidation.

hormones regularly occur as men age. After the age of 40, as an average males experience a decrease in testosterone levels at the rate of 1%–2% per

annum **Stanworth and Jones, (2008)**. Dehydroepian- drosterone sulfate (DHEA-S) concentrations also decline by an average of 1%–4% per year between the ages of 40 and 80 **Walther et al., (2016)**. Testosterone and DHEA have several important roles in the body as they affect sexual health, lean body mass, mental health, cognition, bone density, cardiovascular function, and metabolic activity, just to name a few **Kelly and Jones (2013)** and **Rutkowski et al., (2014)**. Testosterone can be turned by the enzyme aromatase into estradiol. Estradiol is a hormone that is usually associated with females, it also drops down as men age **Orwoll et al., (2006)**. It has several crucial roles in males, which involves a crucial impact in male sexual function, levels of adiposity, neurological activity, immunity and cardiovascular health **Schulster et al., (2016)** and **Cooke et al., (2017)**.

Adding aqueous extract of Ashwagandha had a huge effect. As the FSH serum level declined and LH level increased in rats **Abdel-Magied et al., (2001)**. Besides, it has been proven that this administration had a major impact in men as both serum and LH levels increased & FSH levels decreased **Ahmad et al., (2009)**. Furthermore, some studies have shown that aqueous extract of Ashwagandha causes some hypophysial gonadotropines to change as well as sperms in male rats and follicleogenesis in immature female rats to increase **Al-Qarawi et al., (2011)**.

This study was conducted to investigate the effect of the Ashwagandha (*Withania somnifera*) and their effects on the reproductive hormones of male rats.

## Materials and Methods

### Materials

- Ashwagandha was obtained from Agriculture Research Center, Dokki, Giza, Egypt.
- Casein, cellulose, choline chloride powder, vitamins, minerals, DL methionine powder, L-Carnitine and Sodium valproate were purchased from El-Gomhoria Company for chemical, Drugs and Medical Instruments, Assiut, Egypt. Oil and corn starch were obtained from local market in Assiut, Egypt. The kits were supplied by Bio Diagnostics Company Cairo, Egypt.
- Forty-two adult male albino rats Sprague Dawley strain weighing (115±5g) were obtained from the animal house of the Faculty of Medicine, Assiut University.

## Methods

### Preparation of Ashwagandha extract

Ashwagandha was prepared daily as tea by steeping in boiling water for 5 minutes. It was given to rats at dose (10 mg/kg. Bwt /rat).

### Scavenging effect on 2, 2-diphenyl-1-picrylhydrazyl (DPPH) radicals

The effect of Ashwagandha on DPPH radical was studied, employing the modified method described earlier by **Yamaguchi *et al.*, (1998)**. Briefly, 1.5 ml of DPPH solution (0.1 mM, in 95% Ethanol) was incubated with varying concentrations of the extract (Ashwagandha, 0.75 - 5.0 mg). The reaction mixture was shaken well and incubated for 20 min at room temperature and the absorbance of the resulting solution was read at 517 nm against a blank. The radical scavenging activity was measured as a decrease in the absorbance of DPPH and was calculated using the following equation:

$$\text{Scavenging effect \%} = \frac{\text{A Sample (517nm)} \times 100}{\text{A Control (517nm)}}$$

### Experimental design

Forty-two adult male albino rats, weighing 115±5g were used in the study. The animals were obtained from the animal house of the Faculty of Medicine, Assiut University, Rats were housed in individual stainless steel cages under controlled environmental conditions, in the animal house and fed one week on basal diet according to **Reeves *et al.*, (1993)**. After the adaptation period, the experimental animals were divided into 2 main groups. The first main group fed on basal diet as a (negative control group) consisted of (7) rats, while the second main group consisted of (35) rats divided into five similar subgroups were injected with sodium valproate to induce testicular injury as described by **Bairy *et al.*, (2010)** at a dose (500 mg/kg) body weight. The first subgroup was then maintained as positive control (+Ve), the second subgroup was fed on basal diet plus Ashwagandha powder (100 g/kg diet), the third subgroup was fed on basal diet plus Ashwagandha extract (10 mg/kg b.w/rat) orally, the fourth subgroup was fed on basal diet plus L-carnitine (150 mg/kg b.w/rat) orally, the fifth subgroup was fed on basal diet plus Ashwagandha powder and (Ashwagandha extract & L-carnitine / rat orally) for one month.

During the experimental period (30 days), each rat was weighed every week and food consumption was recorded. The body weight gain% (BWG%) and food efficiency ratio (FER) were estimated outlined by **Chapman *et al.*, (1959)**. At the end of the experimental period rats were fasted over night before sacrificing blood was collected then centrifuged serum was separated and stored at -20° C for biochemical analysis.

## Biochemical Analysis

### Lipids profile

Serum total cholesterol (TC), triglycerides (TG), high density lipoprotein (HDL-c), low density lipoprotein (LDL-c) and very low density lipoprotein (VLDL-c) were determined according to the colorimetric method described by **Roeschlau *et al.*, (1974)** & **Fossati and Principe, (1982)**.

### Calculation of very low density lipoprotein cholesterol (VLDL-c)

VLDL-c was calculated in mg/dl according to **Lee and Nieman (1996)** was using the following formula:

$$\text{VLDL-c (mg/dl)} = \text{Triglycerides} / 5$$

### Determination liver functions

Determination of serum alanine amino transferase (ALT), serum aspartate amino transferase (AST), serum alkaline phosphatase (ALP) were carried out according to the method of **Hafkenscheid (1979)**; **Clinica Chimica Acta (1980)** and **Moss (1982)**; respectively.

### Determination of kidney functions

Serum urea and serum creatinine were determined by enzymatic method according to **Henary (1974)**; **Patton and Crouch (1977)** & **Han *et al.*, (1984)**.

### Determination of serum fertility hormones

Testosterone (T), Lutenizing Hormone (LH) and Follicle Stimulating Hormone (FSH) were determined according to the method of **Maruyama, (1987)**.

### Determination of the gonadosomatic Index

The body weight of each rat was determined immediately before sacrificing. After sacrifice and dissection, the testes were removed, and individual testes were weighed to determine the gonadosomatic index according to the method of **Anderson *et al.*, (1983)**.

### Tissue sampling for biochemical analysis

Immediately after weighing the genitalia, each testis was homogenized for the biochemical analysis of antioxidant enzymes, including superoxide dismutase activity (SOD), glutathione activity (GSH) were determined according to **Beutler *et al.*, (1963)** and **Nishikimi *et al.*, (1972)**; respectively.

### Statistical analysis

The obtained data were statistically analyzed using computerized **SPSS, (1988)**. Effects of different treatments were analyzed by one way ANOVA (Analysis of variance) test using Duncan's multiple range test and  $p < 0.05$  was used to indicate significance between different groups as described by **Snedecor and Cochran (1967)**.

## Results and Discussion

(DPPH) radical scavenging activity % of Ashwagandha extract was shown in **Table (1)**. The measured radical scavenging activity % of Ashwagandha extract were 59.73, 87.46, 90.43 and 96.06; respectively

DPPH is a stable free radical that easily accepts an electron or hydrogen, when an antioxidant reducing agent reacts with the DPPH which converts it to  $\alpha$ ,  $\alpha$ -diphenyl- $\beta$  picryl hydrazine and solution loses its colour depending upon the number of electrons taken up **Shahriar et al., (2013)**. The radical scavenging activity of *Withania somnifera* in the present study was similar to the reports of **Kumar et al., (2018)**. Who found radical scavenging activity could be due to content of phenols in the extracts. The antioxidant activity of phenolics is mainly due to their redox properties which make them act as reducing agents, hydrogen donors and singlet oxygen quenchers and also may have a metallic chelating potential **Rice-evans et al., (1995)**.

Data presented in **Table (2)** show the effect of Ashwagandha powder, extract, L-carnitine and their combination of them on body weight gain, feed intake and feed efficiency ratio on rats. It is clear to notice that, the mean value of body weight gain (g) of positive control group (+Ve) was significantly lower than negative control group (-Ve), which were 55.64 and 101.76 g; respectively. Also, the mean value of treated subgroups 3, 4, 5 and 6 recorded a significant increased in body weight gain, which were 83.59, 85.13, 88.77 and 93.44 g; respectively, with significant difference when compared with positive control (+Ve). The best result were recorded for subgroup (6) which fed on basal diet with Ashwagandha powder, extract and L-carnitine & combination of them.

As for feed intake and feed efficiency ratio it could be noticed that the mean value of positive control group (+Ve) was significantly lower than that of negative control group, which were 13.94 & 17.94 g/day and 0.06 & 0.10; respectively. The mean value of treated subgroups 3, 4 and 5 indicated non-significant differences between them and a significant difference when compared with positive control group (+Ve) which were 16.80, 16.66, 16.65 and 0.09, 0.08, 0.09 in feed intake and feed efficiency ratio; respectively. These results are agreement with **Malik et al., (2013)** who found that the Ashwagandha to improve cardiorespiratory fitness can be the significant effects observed on mitochondrial and energy levels, by reducing the succinate dehydrogenase enzyme activity in the mitochondria and benefiting Mg-ATPase activity **Begum and Sadique (1987)**. Previous studies showed that Ashwagandha significantly enhanced the hemoglobin concentration and red blood cells in animals **Ziauddin et al., (1996)** and also in humans , with the

subsequent increase in the capacity to transport oxygen to the muscles. Moreover, it should be considered that Ashwagandha has shown to have anti-fatigue **Mishra (2003)** and **Biswal et al., (2013)** and anti-stress **Lopresti et al., (2019)** actions.

The effect of Ashwagandha powder, extract, L-carnitine and combination of them on the serum cholesterol, triglyceride, high density lipoprotein (HDL-c), low density lipoprotein (LDL-c) and very low density lipoprotein (VLDL-c) of rats are shown in **Table (3)**. The obtained results showed that the mean value of TC of positive control group (+Ve) was significantly higher than the negative control group (-Ve), which were 180.19 mg/dl and 120.21 mg/dl; respectively. The mean values of treated subgroups 3, 4, 5 and 6 were 116.27, 117.14, 125.48 and 103.27 mg/dl; respectively and showed a significant difference when compared with positive control group (+Ve).

Concerning triglycerides, results showed that the mean value of serum triglycerides of positive control group (+Ve) was significantly higher than negative control group (-Ve), it was 80.43 and 50.03 mg/dl; respectively. The mean values of treated subgroups 3, 4, 5 and 6 were 55.27, 56.17, 64.32 and 56.19 mg/dl; respectively and showed a significant difference when compared with positive control group (+Ve). The best result was recorded for subgroup (3). These results agree with **Mishra et al., (2009<sup>b</sup>)** who found that triglyceride level indicate VLDL metabolism decrease in serum triglycerides level is indicative of decreased formation and increased utilization. Ashwagandha per se may have enhancement of triglycerides utilization in the body leading to decrease in its level in serum.

On the other hand, the mean value of HDL-c of positive control group (+Ve) was significantly lower than negative control group (-Ve); it was 14.58 and 46.86 mg/dl; respectively. The mean values of treated subgroups 3, 4, 5 and 6 were 34.97, 33.60, 32.02 and 31.97 mg/dl and showed a significant difference when compared with positive control group (+Ve).

As for LDL-c results showed that the mean value for positive control group (+Ve) was significantly higher than negative control group (-Ve), which was 149.52 and 63.34 mg/dl; respectively. The mean values of treated subgroups 3, 4, 5 and 6 were 70.25, 72.31, 80.60 & 60.06 mg/dl and showed a significant difference when compared with positive control group (+Ve).

Concerning VLDL-c, results indicated that the mean value of positive control group (+Ve) was significantly higher than negative control group (-Ve). Which were 16.09 and 10.01 mg/dl; respectively. The mean values of treated

subgroups 3, 4, 5 and 6 were 11.05, 11.23, 12.86 and 11.24 mg/dl and showed a significant difference when compared with positive control group (+Ve).

Our results are agreement with **Anwer *et al.*, (2017)** who reported the *Withania Somnifera* (WS) (200 and 400 mg/kg) was administered orally once a day for 5 weeks, resulted in a significant ( $P < 0.001$ ) reduction in glucose, TC, TG, LDL-c, VLDL-c levels with significant elevation of HDL-c levels.

**Jha and Paul (2020)** reported that the (*Withania Somnifera*) at the dose of 1000 mg/Kg b.w. was orally administered for 4 weeks. The lipid profile study showed inclination in the Total cholesterol level ( $117 \pm 6.686$  mg/dl), Cholesterol (LDL) ( $78.83 \pm 4.151$  mg/dl), level and Triglycerides level ( $60.83 \pm 2.613$  mg/dl), while declination in Cholesterol (HDL) ( $13.50 \pm 1.33$  mg/dl), level after Endosulfan exposure. But, upon *W. somnifera* treatment to the endosulfan treated group showed significant ( $P < 0.001$ ) normalization in the lipid profile levels.

Data given in **Table (4)** show the mean values of AST liver enzyme level (u/l) of rats fed on various diets. It could be noticed that the mean values of AST liver enzyme level of control (+Ve) group was higher than control (-Ve) group with a significant difference, it was 193.57 and 80.80 u/l; respectively. All rats fed on various diets, showed significant differences in mean values as compared to control (+Ve) group with a significant difference. The values were 126.86, 123.08, 125.82 and 118.08 (u/l); respectively. The best treatment AST liver enzyme level (u/l) was recorded for subgroup 6 fed on basal diet with combination of Ashwagaha powder, extract and L-carnitine.

Concerning ALT enzyme results indicated that the mean values of positive control group (+Ve) was significantly higher than that of negative control group (-Ve), which was 142.86 and 65.21 (u/l); respectively with significant difference. On the other hand, the mean values of treated subgroups fed on Ashwagaha powder, extract, L-carnitine and their combination were lower than positive control group which were 74.76, 72.03, 80.75 and 65.83 (u/l); respectively. Rats in subgroup (6) fed on combination of L-carnitine and Ashwagaha (powder & extract) showed non-significant difference as compared with negative control group (-Ve) and recorded the best treatment.

As for ALP enzyme, it could be noticed that the mean value of positive control group (+Ve) was significantly higher than of negative control group (-Ve), which were 164.39 and 96.26 (u/l); respectively with significant difference. The mean value of treat subgroups 3, 4, 5 and 6 were lower than positive control group (+Ve) which were 119.33, 124.74, 128.89 and 114.74 (u/l); respectively. The best result was recorded for subgroup (6) rats fed on

combination of Ashwagandha powder, extract and L-carnitine. These results supported by published by **Ichikawa *et al.*, (2006)** who found Ashwagandha root extract contains withanolides, which have anti-inflammatory property, thus may be helpful in protecting the liver damage and can decrease its weight. Also, **Sultana *et al.*, (2012)** reported that there were significantly lower levels of serum AST and ALT which come almost normal level in the Ashwagandha pretreated and gentamicin treated rats provides an evidence that, this root extract may have hepatoprotective effects against gentamicin toxicity. All these effects are most likely due to presence of some active ingredients in Ashwagandha root which have antioxidant property.

Data tabulated in **Table (5)** show the mean value of kidney functions (uric acid, urea and creatinine) level (mg/dl) of rats fed on various diets. It could be noticed that the mean value of uric acid (mg/dl) level of positive control group (+Ve) was higher than control negative control group (-Ve), it was 5.20 and 1.53 mg/dl; respectively with a significant difference. All rats fed on various diet, showed significant differences in mean values as compared to control positive (+Ve) group. The values were 2.79, 2.82, 2.07 and 1.98 mg/dl; respectively.

On the other hand, it could be noticed that the mean value of urea (mg/dl) level of control (+Ve) group was higher than control (-Ve) group, it was 40.93 and 25.88 mg/dl; respectively with a significant difference. All rats fed on various diets, showed significant differences in mean values as compared to control (+Ve) group. The values were 34.14, 31.17, 30.21 and 31.90 mg/dl; respectively. Numerically, the best treatment urea level (mg/dl) was recorded 30.21 mg/dl for subgroup (5) fed on basal diet with L-carnitine (150 mg/kg) when compared to control (+Ve) group.

In case of creatinine level, it could be noticed that the mean value (mg/dl) of control (+Ve) group was higher than control (-Ve) group, it was being 5.62 and 1.16 mg/dl; respectively with a significant difference. Rats in subgroups 3, 4, 5 and 6 fed on variance diet showed significant differences in mean values as compared to control (+Ve) group. The values were 3.87, 2.83, 2.72 and 2.65 mg/dl; respectively. Numerically, the best treatment creatinine level was recorded for subgroup (6) fed on basal diet with combination of Ashwagandha, powder, extract and L-carnitine when compared to positive control group (+Ve). The results are agreement with that obtained by **Rahman *et al.*, (2019)** who said treated male and female rats of Ashwagandharishta showed a trend of increment (although it was not statistically significant) in the three parameters 0.625, 5.0 and 40.0 ml/kg of body weight, serum urea, creatinine and uric acid than their corresponding control group. But a

statistically significant increase was observed in serum urea in all three doses of Ashwagandharishta treated female rats (low:  $\uparrow$  17.18 %\*, medium: 14.85 %\* and high:  $\uparrow$  24.15 %\*,. For the serum creatinine level, a statistically significant increase was observed only for the medium dose male rat ( $\uparrow$  67.979 %\*) than their corresponding control group. And no statistically significant increase was observed for the uric acid level.

Data tabulated in **Table (6)** show the effect of Ashwagandha powder, extract, L-carnitine and combination of them, on the reproductive hormones of male rats. Concerning testis weight (g/100g), data revealed that the mean value of positive control group (+Ve) was significantly lower than that of the negative control group (-Ve). On the other hand the mean values of subgroups 3, 4, 5 and 6 were 1.85, 1.95, 1.55 and 1.60 (g/100g); 0.73, 0.72, 0.71 and 0.73; 59.33, 55.25, 45.42 and 60.50 ( $10^6$ /ml) in testis weight, gonado somatic and sperm number; respectively, which are higher than the positive control (+Ve). Subgroup (4) showed the best result was recorded 1.95 g/100g on testis weight and subgroup (5) was 0.71 on gonado somatic when compared with the negative control group (-Ve), while sperm number was 60.50 in subgroup (6) when compared the negative control group (-Ve).

Data in **Table (7)** showed that positive control group (+Ve) had lower serum testosterone, follicle stimulating hormone and luteinizing hormone when compared with negative control group (-Ve), while subgroup (6) fed on basal diet with combination of Ashwagandha powder, extract and L-carnitine, showed higher values in testosterone, follicle stimulating hormone and luteinizing hormone when compared with the positive control group (+Ve). Our results agreed with **Sahin et al., (2016)** who said all of the extracts were found to be significantly effective in sexual functioning and antioxidant capacity. Ashwagandha supplementation improves sexual function in male rats via activating Nrf2/ HO-1 pathway while inhibiting the NF- $\kappa$ B levels.

Low serum testosterone levels in men are strongly related to the increase in morbidity **Maggi et al., (2007)** and men are commonly in accordance with major depressive disorder **Joshi et al., (2010)**, cardiovascular disease, obesity **Di Vincenzo et al., (2018)**; **Traish and Zitzmann (2015)**, and type 2 diabetes **Yao et al., (2018)**. Lower testosterone concentrations have a negative impact on the quality of life **Khera, (2016)**.

The data given in **Table (8)** revealed that there were significant differences at ( $P < 0.05$ ) between positive control group (+Ve) and negative control group (-Ve) these results recorded significant increase in total antioxidant, superoxide dismutase enzymes (SOD) and plasma glutathione transferase (GST) in the negative control group compared with the positive

control group (+Ve). All treated groups recorded significant increase in these parameters, as compared to the positive control group. These results is agreement with **Mishra, (2000)** and **Singh *et al.*, (2010)**, which reported that Ashwagandha root contains sitoindosides VIIX and withaferin A, have antioxidant activity by enhancing the free radical scavenging enzymes such as, superoxide dismutase (SOD), catalase (CAT), glutathione peroxidase (GPx).

It has been reported that phenolic compounds show antioxidant properties in vivo via modulation of glutathione (GSH) content, superoxide dismutase (SOD), catalase (CAT) activities, and malondialdehyde equivalent (MDA) **Sasidharan *et al.*, (2010)**. Therefore, phenolic compounds from medical plants can be used as antioxidant agents for preventing, reversing and delaying the occurrence and development of tumors. Flavonoids and phenolic acids all contain hydroxyl groups that play a role in scavenging free radicals. These phenolic compounds were metabolized in vivo via many bio-activating enzymes **Jirovsky *et al.*, (2007)**.

**Table (1): Effect (DPPH) radical scavenging activity (%) of Ashwagandha extract.**

Parameters	0.5 mg	1mg	1.5mg	2mg
DPPH	59.73±3.07	87.46±1.2	90.43±1.69	96.06±0.94

SD: standard Deviation.

**Table (2): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on nutritional parameters of rats.**

Parameters Groups	Body weight gain (g)	Feed intake (g/day)	FER
Control (-Ve)	101.76±8.11a	17.94± 2.20 a	0. 10±0.03a
Control (+Ve) Subgroup 1	55.64±8.11d	13.94± 2.20d	0. 06±0.06d
Ashwagandha powder (100 mg/kg) Subgroup 2	83.59± 6.11 c	16.80± 2.03 a	0.09±0.02 c
Ashwagandha extract (10 mg/kg) Subgroup 3	85.13±9.13 c	16.66±2.32 a	0.08±0.04c
L –Carnitine (150 mg/kg) Subgroup 4	88.77±9.17 c	16.65±2.21 a	0.09±0.03c
L –Carnitine+Ashwagandha (powder and extract) Subgroup 5	93.44±9.17 b	17.68±2.92 a	0.09±0.04 b

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

**Table (3): Effect Ashwagandha, powder, extract, L-Carnitine and their combination on lipids profile of rats.**

Parameters Groups	TC. (mg/dl)	TG. ( mg/dl)	HDL-c (mg/dl)	LDL-c (mg/dl)	VLDL-c (mg/dl)
<b>Control (-Ve)</b>	120.21± 24.33 a	50.03± 12.62 a	46.86± 3.11 a	63.34± 3.61 a	10.01± 0.97a
<b>Control (+Ve) Subgroup 1</b>	180.19± 27.12 d	80.43± 14.82 d	14.58± 2.54 d	149.52± 7.91d	16.09± 1.81d
<b>Ashwagandha powder (100 mg/kg) Subgroup 2</b>	116.27± 26.54 b	55.27± 23.03 b	34.97± 2.66 b	70.25± 4.72b	11.05± 1.01b
<b>Ashwagandha extract (10 mg/kg) Subgroup 3</b>	117.14± 27.65 b	56.17± 24.34 b	33.60± 1.93 b	72.31 ± 5.13b	11.23± 1.04b
<b>L -Carnitine (150 mg/kg) Subgroup 4</b>	125.48± 4.28 c	64.32± 3.08 c	32.02± 2.76 b	80.60 ± 6.31c	12.86± 1.43c
<b>L -Carnitine+ Ashwagandha (powder and extract) Subgroup 5</b>	103.27± 4.54 b	56.19± 3.46 b	31.97± 2.75 bc	60.06± 4.98a	11.24± 1.32b

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

**Table (4): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on liver functions of rats.**

Parameters Groups	AST (u/l)	ALT (u/l)	ALP (u/l)
<b>Control (-Ve)</b>	80.80± 2.11 a	65.21± 1.78 a	96.26± 3.97 a
<b>Control (+Ve) Subgroup 1</b>	193.57± 5.58 d	142.86± 3.27 d	164.39± 6.49 d
<b>Ashwagandha powder (100 mg/kg) Subgroup 2</b>	126.86± 4.75 b	74.76± 3.13 b	119.33± 3.65 b
<b>Ashwagandha extract (10 mg/kg) Subgroup 3</b>	123.08± 4.28 b	72.03± 3.43 b	124.74± 5.65 b
<b>L -Carnitine (150 mg/kg) Subgroup 4</b>	125.82± 3.02 b	80.75± 2.14 c	128.89± 2.62 b
<b>L -Carnitine + Ashwagandha (powder and extract) Subgroup 5</b>	118.08± 4.28 b	65.83± 3.43 b	114.74± 5.65 b

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

**Table (5): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on kidney functions of rats.**

Parameters Groups	Uric acid (mg/dl)	Urea (mg/dl)	Creatinine (mg/dl)
Control (-Ve)	1.53± 0.78 e	25.88±4.72 e	1.16± 1.18 e
Control (+Ve) Subgroup 1	5.20±0.52 a	40.93±3.20 a	5.62±2.47 a
Ashwagandha powder (100 mg/kg) Subgroup 2	2.79±0.72 bc	34.14±3.29 b	3.87±1.32 b
Ashwagandha extract (10 mg/kg) Subgroup 3	2.82±0.57 b	31.17±3.59 c	2.83±1.25 c
L –Carnitine (150 mg/kg) Subgroup 4	2.07±0.93 c	30.21±3.43 c	2.72±1.15 c
L –Carnitine + Ashwagandha (powder and extract) Subgroup 5	1.98±0.14 d	31.90±2.38 c	2.65±0.13 d

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

**Table (6): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on serum testis weight, gonado somatic and sperm number of rats.**

Parameter Groups	Testis weight (g/100g b.wt)	Gonado somatic index	Sperm number (106/ml)
Control (-Ve)	2.22±0.23a	0.68±0.07 c	74.25±18.01a
Control (+Ve) Subgroup 1	1.1±0.20 d	0.40±0.03d	25.33±3.09d
Ashwagandha powder (100 mg/kg) Subgroup 2	1.85±0.20 b	0.73±0.07 b	59.33±24.09b
Ashwagandha extract (10 mg/kg) Subgroup 3	1.95±0.26b	0.72±0.16 b	55.25±15.01b
L –Carnitine (150 mg/kg) Subgroup 4	1.55±0.14c	0.71±0.06 b	45.42±20.01c
L –Carnitine + Ashwagandha (powder and extract) Subgroup 5	1.60±0.26c	0.73±0.11 b	60.50±14.29b

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

**Table (7): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on serum fertility hormones of rats.**

Parameter Groups	T. T (ng/mL)	FSH (ng/mL)	LH (ng/mL)
Control (-Ve)	30.2±1.7 a	155.38±6.75 a	4.9±0.76 a
Control (+Ve) Subgroup 1	16.03±2.01 d	98.17±7.55 d	1.8±1.16 d
Ashwagandha powder (100 mg/kg) Subgroup 2	20.12±3.01 b	118.98±0.65 b	2.92±0.96 c
Ashwagandha extract (10 mg/kg) Subgroup 3	19.33±14.81c	114.42±0.80 c	2.54±0.52 c
L -Carnitine (150 mg/kg) Subgroup 4	21.01±14.10 b	116.60±0.09 c	2.47±0.37 c
L -Carnitine + Ashwagandha (powder and extract) Subgroup 5	25.81± 19.64 b	125.59±0.80 b	3.8±0.96 b

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

T.T: Testosterone , FSH: Folicle Stimulating Hormone , LH: Lutenizing Hormone

**Table (8): Effect of Ashwagandha, powder, extract, L-Carnitine and their combination on serum total antioxidants, superoxide dismutase and glutathion of rats.**

Parameters Groups	Total Antioxidants (U/mg)	SOD (U/mg)	GSH (U/mg)
Control (-Ve)	5.4±0.75 a	1.67±0.1 a	0.14±0.01 a
Control (+Ve) Subgroup 1	1.17±0.55 d	0.33±0.01 d	0.10±0.01 d
Ashwagandha powder (100 mg/kg) Subgroup 2	2.98±0.65 b	1.0±0.04 b	0.15±0.04ab
Ashwagandha extract (10 mg/kg) Subgroup 3	2.58±0.80 b	1.2±0.06 b	0.13±0.06ab
L -Carnitine (150 mg/kg) Subgroup 4	2.61±0.09 b	0.90±1.10 c	0.12±1.10 b
L -Carnitine + Ashwagandha (powder and extract) Subgroup 5	3.69±1.80 ab	1.33±0.08 ab	0.18±0.08ab

Means with different letters in each column are significantly different at  $P < 0.05$ .

SD: standard Deviation.

SOD: Superoxide dismutase

GSH: Glutathion

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**REFERENCES**

- Abdel-Magied, E.M.; Abdel-Rahman, H.A. and Harraz, F.M. (2001):** The effect of aqueous extracts of *Cynomorium coccineum* and *Withania somnifera* on testicular development in immature Wistar rats, *J. Ethnopharmacol.*,(75):1-4.
- Ahmad, M.K.; Mahdi, A.A.; Shukla, K.K.; Islam, N.; Rajender, S. and Madhukar, D. (2009):** *Withania somnifera* improves semen quality by regulating reproductive hormone levels and oxidative stress in seminal plasma of infertile males, *Fertil. Steril.*
- Ahmed, W.; Mofed, D.; Zekri, A.R.; El-Sayed, N.; Rahouma, M. and Sabet, S. (2018):** Antioxidant activity and apoptotic induction as mechanisms of action of *Withania somnifera* (Ashwagandha) against a hepatocellular carcinoma cell line, *J. Int. Med. Res.* (46): 1358–1369.
- Al-Qarawi, A.A.; Abdel-Rahman, H.A.; El-Badry, A.A.; Harraz, F.; Razig, N.A. and Abdel-Magied, E.M. (2011):** The effect of extracts of *Cynomorium coccineum* and *Withania somnifera* on gonadotrophins and ovarian follicles of immature Wistar rats, *Phytother. Res.*,(14): 288-290.
- Anderson; Richard, O.; Gutreuter and Stephen, J. (1983):** Chapter 15. Length, weight and associated structural indices, In Nielsen, Larry A.; Johnson, David Lawrence (eds.), *Fisheries techniques*, Bethesda, Md., American Fisheries Society, 283-300.
- Anwer, T.; Sharma, M.; Khan, G.; Alam, M. F.; Alam, N.; Ali, Md. S. and Alam, Md. S. (2017):** Preventive role of *Withania somnifera* on hyperlipidemia and cardiac oxidative stress in streptozotocin induced type 2 diabetic rats; *Tarique Tropical Journal of Pharmaceutical Research*, 16 (1): 119-125.
- Bairy, L.; Paul, V. and Rao, Y. (2010):** Reproductive toxicity of sodium valproate in male rats, *Indian J. Pharmacol*, 42(2): 90-94.
- Begum, V.H. and Sadique, J. (1987):** Effect of *Withania somnifera* on glycosaminoglycan synthesis in carrageenin-induced air pouch granuloma, *Biochem. Med. Metab. Biol.*, (38): 272–277.
- Beutler, E.; Duron, O. and Kelly, M.B. (1963):** Determination of reduced glutathione in tissue homogenate, *J. Lab. Clin. Med.*, (61): 882.
- Bhattacharya, A.; Ghosal, S. and Bhattacharya, S.K. (2010):** Antioxidant effect of *Withania somnifera* glycowithanolides in chronic footshock stress-induced perturbations of oxidative free radical scavenging enzymes and lipid peroxidation in rat frontal cortex and striatum, *J. Ethnopharmacol.*, (74): 1-6.

- Biswal, B.M.; Sulaiman, S.A.; Ismail, H.C.; Zakaria, H. and Musa, K.I. (2013):** Effect of *Withania somnifera* (Ashwagandha) on the development of chemotherapy-induced fatigue and quality of life in breast cancer patients, *Integr. Cancer Ther.*, (12): 312–322.
- Chapman, D. G.; Castilla, R. and Champell, J. A. (1959):** Evaluation of protein efficiency ratio, *Can. J. Biochem. Physiol.*, (37): 679-686.
- Choudhary, D.; Bhattacharyya, S. and Bose, S. (2017):** Efficacy and safety of Ashwagandha (*Withania somnifera* (L.) Dunal) root extract in improving memory and cognitive functions, *J. Diet. Suppl.*, (14): 599–612.
- Chukwuma, C.I.; Matsabisa, M.G.; Ibrahim, M.A.; Erukainure, O.L.; Chabalala, M.H. and Islam, M.S. (2019):** Medicinal plants with concomitant anti-diabetic and anti-hypertensive effects as potential sources of dual acting therapies against diabetes and hypertension: a review. *J. Ethnopharmacol.* (235): 329–360.
- Clinica Chimica Acta (1980):** (105): 147-172, (Chemical kits).
- Cooke, P. S.; Nanjappa, M. K.; Ko, C.; Prins, G. S. and Hess, R. A. (2017):** Estrogens in male physiology, *Physiological Reviews*, 97(3), 995–1043.
- Dar, N.J.; Hamid, A. and Ahmad, M. (2015):** Pharmacologic overview of *Withania somnifera*, the Indian Ginseng *Cell. Mol. Life Sci.*,(72): 4445–4460.
- Di Vincenzo, A.; Busetto, L.; Vettor, R. and Rossato, M. (2018):** Obesity, male reproductive function and bariatric surgery, *Frontiers in Endocrinology*, (9): 769.
- Fossati, P. and Prencipel, L. (1982):** Determination of triglycerides, *Clinical Chemistry*, (28): 2077-2078
- Hafkenschied, J.C. (1979):** Determination of GOT. *Clin. Chem.*, (25): 155.
- Han, B.H.; Park, M.H.; Han, Y.N. and Shin, S.C. (1984):** Studies on the antioxidant components of Korean ginseng Antifatigue active components, *Yakhakhoe Chi.*, (28): 231–235.
- Hassannia, B.; Logie, E.; Vandenabeele, P.; Vanden Berghe, T.; Vanden Berghe, W. and Withaferin A (2019):** From ayurvedic folk medicine to preclinical anti-cancer drug, *Biochem. Pharm.*
- Henry, R.J. (1974):** *Clinical Chemist: principles and Techniques*, 2<sup>nd</sup>, Edition, Hagerstoun (MD), Harcer, ROW, 882.

**Ichikawa, H.; Takada, Y.; Shishodia, S.; Jayaprakasham, B.; Nair, MG. and Aggarwal, BB. (2006):** Withanolides potentiate apoptosis, inhibits invasion and abolish osteoclastogenesis through suppression of nuclear factor-kappa B (NF-B) activation and NF-kappa B- regulated gene expression, Mol. Cancer Ther., 5(6): 1434-1445.

**Jha, S. K. and Paul, D. K. (2020):** Efficacy of *Withania somnifera* on lipid profile of endosulfan induced toxicity in swiss albino mice, Journal of Applied and Natural Science, 12(3): 454 – 459.

**Jirovsky, D.; Kosina, P.; Myslinova, M.; Styskala, J.; Ulrichova, J. and Simanek, V. (2007):** HPLC analysis of rosmarinic acid in feed enriched with aerial parts of *Prunella vulgaris* and its metabolites in pig plasma using dual-channel coulometric detection, J. Agric. Food Chem., (55): 7631-7637.

**Joshi, D.; Van Schoor, N. M.; de Ronde, W.; Schaap, L. A.; Comijs, H. C.; Beekman, A. T. and Lips, P. (2010):** Low free testosterone levels are associated with prevalence and incidence of depressive symptoms in older men, Clinical Endocrinology, 72(2): 232–240.

**Kaur, G.; Singh, N.; Samuel, S.S.; Bora, H.K.; Sharma, S.; Pachauri, S.D.; Dwivedi, A.K.; Siddiqui, H.H. and Hanif, K. (2015):** *Withania somnifera* shows a protective effect in monocrotaline-induced pulmonary hypertension, Pharm. Biol., (53): 147–157.

**Kaur, P.; Mathur, S.; Sharma, M.; Tiwari, M.; Srivastava, K.K. and Chandra, R. A. (2001):** Biologically active constituent of *withania somnifera* (ashwagandha) with antistress activity, Indian J. Clin. Biochem., (16): 195–198.

**Kelly, D. M. and Jones, T. H. (2013):** Testosterone: a metabolic hormone in health and disease, Journal of Endocrinology, 217(3).

**Khera, M. (2016):** Male hormones and men's quality of life. Current Opinion in Urology, 26(2), 152–157.

**Kulkarni, S. K. and Dhir, A. (2008):** *Withania somnifera*: An Indian ginseng. Progress in Neuro-Psychopharmacology and Biological Psychiatry, 32(5): 1093–1105.

**Kumar, K. P.; Reddy, V. R.; Prakash, M. G. and Kumar, K. (2018):** In vitro estimation of total phenolics and DPPH radical scavenging activity of *Withania somnifera* extract, The Pharma Innovation Journal, 7(3): 588-590.

**Lee, R. and Nieman, D. (1996):** Nutrition Assessment. 2<sup>nd</sup> Ed. Mosby, Missouri, USA, 591-594.

- Li, W.; Zhang, C.; Du, H.; Huang, V.; Sun, B.; Harris, J.P.; Richardson, Q.; Shen, X.; Jin, R. and Li, G. (2016):** Withaferin a suppresses the up-regulation of acetyl-coA carboxylase 1 and skin tumor formation in a skin carcinogenesis mouse model., *Mol. Carcinog.*, (55): 1739–1746.
- Lopresti, A.L.; Smith, S.J.; Malvi, H. and Kodgule, R. (2019):** An investigation into the stress-relieving and pharmacological actions of an ashwagandha (*Withania somnifera*) extract: a randomized, double-blind, placebo-controlled study, *Medicine*. (98): 17186.
- Maggi, M.; Schulman, C.; Quinton, R.; Langham, S. and UhlHochgraeber, K. (2007):** The burden of testosterone deficiency syndrome in adult men: Economic and quality-of-life impact, *The Journal of Sexual Medicine*, (4): 1056–1069.
- Malik, A.; Mehta, V. and Dahiya, V. (2013):** Effect of ashwagandha (*withania somnifera*) root powder supplementation on the vo2 max. and hemoglobin in hockey players, *Int. J. Behav. Soc. Mov. Sci.*, (2): 91–99.
- Maruyama, Y. (1987):** Sex-steroid binding, plasma protein (SBP), testosterone, estradiol and DHEA in prepuberty and puberty., *Acta. Endocrinol.*, (114): 60-67.
- Mishra, L.C. (2000):** Scientific basis for the therapeutic use of *Withania somnifera* (Ashwagandha): a review, *Altern Med. Rev.*, 5(4): 334-346.
- Mishra, L.C. (2003):** Scientific basis for ayurvedic therapies, CRC Press: Boca Raton, FL., USA.
- Mishra, L.C.; Singh, B.B. and Dagenais, S. (2005):** Scientific basis for the therapeutic use of *Withania somnifera* (Ashwagandha): a review. *Alternative Medicine Review*, (11): 340-346.
- Mishra, L.C.; Singh, B.B. and Dagenais, S. (2009<sup>a</sup>):** Scientific basis for the therapeutic use of *Withania somnifera* (Ashwagandha): a review, *Alternative Medicine Review*, (5): 334-346.
- Mishra, R. K.; Ashok, B. K.; Ravishankar, B. and Pandya, M. A. (2009<sup>b</sup>):** Effect of Ashwagandha ghrita and Ashwagandha granules on lipid profile in albino rats, *AYU-VOL.*, (30): 333 – 336.
- Moss, D.W. (1982):** Alkaline Phosphates isoenzymes, *Clin. Chem.*, (28): 2007- 2016.
- Nishikimi, M.; Roa, N.A. and Yogi, K. (1972):** Determination of superoxide dismutase in tissue homogenate, *Biochem. Bioph. Res. Common.*, (46): 849 – 854.

- Orwoll, E.; Lambert, L. C.; Marshall, L. M.; Phipps, K.; Blank, J.; Barrett-Connor, E. and Cummings, S. (2006):** Testosterone and estradiol among older men, *The Journal of Clinical Endocrinology and Metabolism*, 91(4): 1336– 1344.
- Patton, C. and Crouch, S. (1977):** Determination of serum urea enzymatically, *J. Ana. Chem.*, (49): 464 – 469.
- Perron, NR. and Brumaghim, JL. (2009):** A review of the antioxidant mechanisms of polyphenol compounds related to iron binding. *Cell*.
- Pradhan, R.; Kumar, R.; Shekhar, S.; Rai, N.; Ambashtha, A.; Banerjee, J.; Pathak, M.; Dwivedi, S.N.; Dey, S. and ; Dey, A.B. (2017):** Longevity and healthy ageing genes FOXO3A and SIRT3: Serum protein marker and new road map to burst oxidative stress by *Withania somnifera*, *Exp. Gerontol*, (95): 9–15.
- Rahman, T.; Rakib Hasan, Md. and Choudhuri, M. S. K. (2019):** Effect of Ashwagandharista (*Withania somnifera*) on the kidney functions of male and female rats, *Jahangirnagar University J. Biol. Sci.*, 8(1): 1-7,
- Reeves, P.G.; Nielson, F.H. and Fahmy, G.C.(1993):** Reports of the American Institute of Nutrition, Adhoc Wiling Committee on reformulation of the AIN 93, Rodent Diet. *J. Nutri.*, (123): 1939-1951.
- Rice-evans, CA.; Miller, NJ.; Bolwell, PG.; Bramley, PM. and Pridham, JB. (1995):** The relative antioxidant activities of plantderived polyphenolic flavonoids, *Free radical research*, 22 (4): 375-383.
- Rice-Evans, CA.; Millerm, NJ. and Paganga, G. (2000):** Structureantioxidant activity relationships of flavonoids and phenolic acids, *Free Radic. Biol. Med.*,(20): 933-956.
- Roeschlau, P.; Bernt, E. and Gruber, W. (1974):** Enzymatic colorimetric test with lipid clearing factor (LCF), *J. Clin. Chem. & Clin. Biochem.*, (12): 403-408.
- Rutkowski, K.; Sowa, P.; Rutkowska-Talipska, J.; Kuryliszyn-Moskal, A. and Rutkowski, R. (2014):** Dehydroepiandrosterone (DHEA): Hypes and hopes., *Drugs*, 74(11), 1195–1207.
- Sahin, K.; Orhan, C.; Akdemir, F.; Tuzcu, M.; Gencoglu, H.; Sahin, N.; Turk, G.; Yilmaz, I.; Ozercan, I. H. and Juturu, V. (2016):** Comparative evaluation of the sexual functions and NF-κB and Nrf2 pathways of some aphrodisiac herbal extracts in male rats, *BMC., Complementary and Alternative Medicine*, (16): 318.

- Sapra, NC.; Kalyanrao, P.; Sasidharan, N.; Arna Das and Susmitha, P. (2020):** Effect of mechanical, chemical, growth hormone and biofertilizer treatments on seed quality enhancement in Ashwagandha (*Withania somnifera* Dunal), Med. Aromat Plants, Los Angeles, Vol. (9): 35.
- SAS (1988):** SAS Users Guide: Statistics version 5<sup>th</sup> Ed. SAS., Institute Inc., Cary N.C.
- Sasidharan, S.; Aravindran, S.; Latha, L.Y.; Vijenthi, R.; Saravanan, D. and Amutha, S. (2010):** In vitro antioxidant activity and hepatoprotective effects of Lentinula edodes against paracetamol-induced hepatotoxicity, Molecules, (15): 4478-4489.
- Schulster, M.; Bernie, A. M. and Ramasamy, R. (2016):** The role of estradiol in male reproductive function, Asian Journal of Andrology, 18(3): 435–440.
- Shahriar, M.; Ismail Hossain, Md.; Sharmin, F. A. Akhter, S.; Haque, Md. A.; Bhuiyan, M. B. and Iosr (2013):** Invitro antioxidant and free radical scavenging activity of *withania somnifera* root, Journal of Pharmacy, Volume (3), 38- 47.
- Sharma, A.K.; Basu, I. and Singh, S. (2018):** Efficacy and safety of Ashwagandha root extract in subclinical hypothyroid patients: a double-blind, randomized placebo-controlled trial., J. Altern. Complement. Med., (24): 243–248.
- Singh, A.; Naidu, P.S.; Gupta, S. and Kulkarni, S.K. (2002):** Effect of natural and synthetic antioxidants in a mouse model of chronic fatigue syndrome, J. Med. Food, (5): 211-220.
- Singh, G.; Sharma, PK. and Singh, S. (2010):** Biological activities of *Withania somnifera*, Annals of Biological research, 1(3): 56-63.
- Snedecor, G.W. and Cochran, W.G. (1967):** Statistical Methods. 7<sup>Ed</sup>, the Iowa State University Press, Ames, Iowa, U.S.A.
- Stanworth, R. D. and Jones, T. H. (2008):** Testosterone for the aging male; current evidence and recommended practice, Clinical Interventions in Aging, 3(1): 25–44.
- Sultana, N.; Shimmi, S. C.; Parash, MT. H. and Akhtar, J. (2012):** Effects of Ashwagandha (*Withania somnifera*) Root Extract On Some Serum Liver Marker Enzymes (AST, ALT) In Gentamicin Intoxicated Rats, J. Bangladesh Soc. Physiol, 7(1): 1-7.

**Sun, G.Y.; Li, R.; Cui, J.; Hannink, M.; Gu, Z.; Fritsche, K.L.; Lubahn, D.B. and Simonyi, A. (2016):** *Withania somnifera* and its withanolides attenuate oxidative and inflammatory responses and up-regulate antioxidant responses in BV-2 microglial cells, *Neuromol. Med.*, (18): 241–252.

**Traish, A. M. and Zitzmann, M. (2015):** The complex and multifactorial relationship between testosterone deficiency (TD), obesity and vascular disease, *Reviews in Endocrine and Metabolic Disorders*, 16(3): 249–268.

**Tripathi, N.; Shrivastava, D.; Ahmad Mir, B.; Kumar, S.; Govil, S.; Vahedi, M. and Bisen, P.S. (2018):** Metabolomic and biotechnological approaches to determine therapeutic potential of *Withania somnifera* (L.) Dunal: a review, *Phytomedicine*, (50): 127–136.

**Udayakumar, R.; Kasthuriengan, S.; Vasudevan, A.; Mariashibu, TS.; Rayan, JJS. And Choi, CW. (2010):** Antioxidant effect of dietary supplement *Withania somnifera* L. reduce blood glucose levels in alloxan-induced diabetic rats, *Plant foods for human nutrition*, 65(2): 91-98.

**Walther, A.; Philipp, M.; Lozza, N. and Ehlert, U. (2016):** The rate of change in declining steroid hormones: A new parameter of healthy aging in men? *Oncotarget*, 7(38): 60844–60857.

**Yamaguchi, T.; Takamura, H.; Matoba, T. and Terao, J. (1998):** HPLC method for evaluation of the free radical-scavenging activity of foods by using 1,1,-diphenyl-2-picrylhydrazyl, *Bioscience Biotechnology Biochemistry*,(62): 1201 -1204.

**Yao, Q. M.; Wang, B.; An, X. F.; Zhang, J. A. and Ding, L. (2018):** Testosterone level and risk of type 2 diabetes in men: a systematic review and meta-analysis, *Endocrine Connections*, 7(1): 220–231.

**Yenisetti, S.C.; Manjunath, M.J. and Muralidhara, C. (2016):** Neuropharmacological properties of *Withania somnifera* - Indian ginseng: an overview on experimental evidence with emphasis on clinical trials and patents, *Recent Pat. CNS. Drug Discov*, (10): 204–215.

**Ziauddin, M.; Phansalkar, N.; Patki, P.; Diwanay, S. and Patwardhan, B. (1996):** Studies on the immunomodulatory effects of Ashwagandha, *J. Ethnopharmacol*, (50): 69–76.

## المخلص العربي

### الأشواجندا وتأثيرها على الهرمونات التناسلية لذكور الجرذان

تم دراسة تأثير الأشواجندا (مسحوق، مستخلص، خليط منهما) على المأخوذ الغذائي ومعدل كفاءة الغذاء وزيادة وزن الجسم ودهون الدم ووظائف الكبد والكلية وهرمونات الخصوية في سيرم الجرذان. تم تقسيم اثنين وأربعين من ذكور الفئران البالغة والتي يتراوح أوزانها ما بين (115 ± 5 جم) إلى مجموعتين رئيسيتين. المجموعة الأولى الرئيسية تم تغذيتها على نظام غذائي أساسي كمجموعة ضابطة سالبة وتتكون من (7) فئران بينما المجموعة الثانية الرئيسية تتكون من (35) من الفئران قسمت إلى خمسة مجموعات فرعية متساوية تم حقنهم بمادة صوديوم فالبورات لإصابة الخصية بجرعة (500 ملجم/كجم). المجموعة الأولى الفرعية المصابة تم الاحتفاظ بها كمجموعة ضابطة موجبة، المجموعة الثانية الفرعية المصابة تم تغذيتها على النظام الغذائي الأساسي مضاف له مسحوق الأشواجندا (100 جم/كجم) من الغذاء، المجموعة الثالثة الفرعية المصابة تم تغذيتها على النظام الغذائي الأساسي ومستخلص الأشواجندا (10 ملجم/كجم) من وزن الجسم لكل فأر بالفم، المجموعة الرابعة الفرعية تم تغذيتها على النظام الغذائي الأساسي والكارنتين (150 ملجم/كجم) من وزن الجسم لكل فأر بالفم، والمجموعة الخامسة الفرعية تم تغذيتها على النظام الغذائي الأساسي مضاف له مسحوق الأشواجندا وإعطاء مستخلص الأشواجندا والكارنتين لكل فأر عن طريق الفم لمدة شهر. وفي نهاية التجربة تم جمع عينات الدم لفصل السيرم المستخدم في التحاليل البيوكيميائية، كما أخذت عينة من الخصية لإجراء الفحوص عليها. وأوضحت النتائج عدم وجود فروق معنوية في المأخوذ الغذائي ومعدل كفاءة الغذاء وزيادة نسبة وزن الجسم وانخفاض مستويات السيرم من الكوليسترول الكلي (TC) والدهون الثلاثية (TG) والبروتينات الدهنية منخفضة الكثافة (LDL-C)، والبروتينات الدهنية منخفضة الكثافة جداً (VLDL-C)، وزيادة في البروتينات الدهنية عالية الكثافة (HDL-C). كما حدث انخفاض في إنزيمات الكبد، ووظائف الكلية. كما زادت هرمونات الخصوية في السيرم من Testosterone, Follicle Stimulating Hormone, Lutenizing Hormone في الفئران المصابة التي تغذت على خليط من مسحوق ومستخلص الأشواجندا والكارنتين.

لذا توصي الدراسة باستخدام الأشواجندا لتحسين هرمونات الخصوية للمرضى.

### الكلمات المفتاحية

الأشواجندا، الفئران، هرمونات الخصوية، دهون الدم، إنزيمات الكبد، وظائف الكلية، التحاليل الكيميائية الحيوية.