APOPTOSIS EFFECT OF *LUVUNGA SCANDENS* AGAINST HUMAN SKIN CANCER A431 CELL LINE

BY

SAMA NAZIYAH SHABAN

INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

2017

APOPTOSIS EFFECT OF *LUVUNGA SCANDENS* AGAINST HUMAN SKIN CANCER A431 CELL LINE

BY

SAMA NAZIYAH SHABAN

A thesis submitted in fulfilment of the requirement for the degree of Master in Pharmaceutical Science (Pharmaceutical Technology)

> Kulliyyah of Pharmacy International Islamic University Malaysia

> > **APRIL 2017**

ABSTRACT

Epidermal carcinoma cell line is one of the neoplastic cell that are characterized by abnormalities in cell differentiation and growth. Epidermal carcinoma is reported as one of the most common types of cancer with increasing numbers of occurrence. Luvunga scandens is one of the plants found in Malaysia, this plant is known to possess many bioactivities and general health effects, yet its anti-proliferative effect is generally under reported and need to be scientifically evaluated. The aim of this study is to evaluate the anti-proliferative and apoptotic effects of Luvunga scandens plant leaves against human epidermal carcinoma cell line. MTT assay was used to assess the cytotoxicity of the plant against human epidermal carcinoma cells in addition to the safety assessment for normal cell lines (HaCaT and HDF). Scratch assay was carried out to monitor the cell growth. The morphological changes of L. scandens treated epidermal carcinoma cells has been confirmed by SEM, and the apoptosis of the plant against epidermal carcinoma cells has been tested using caspase 3/7 assay, followed by cell cycle analysis done using a flow-cytometer on epidermal carcinoma cells treated with the IC50 does of L. scandens plant. Western blot was preformed to confirm the anti-carcinogenic effect of L. scandens against human epidermal carcinoma cells. The results of the tests done illustrated that the extract and compound possesses cytotoxic effect against epidermal carcinoma cells with IC₅₀ readings; (methanol= 37.5 µg/mL, DCM= 38 µg/mL, hexane= 37.5 μ g/mL and compound= 27.5 μ M), and no cytotoxic activity in both HaCaT and HDF cells. The IC₅₀ dose of *L. scandens* can restrict the growth of epidermal carcinoma cells more than Cisplatin (anti-cancer drug), the SEM results demonstrate that L. scandens treated cells showed an overall change in the cell shape, alteration of surface morphology, absence of microvilli and appearance of blebs. Caspase 3/7 assay results shows that L. scandens DCM extract produce the highest level of apoptosis against epidermal carcinoma cell. For cell cycle analysis, all the L. scandens treated epidermal carcinoma cells show high readings in the sub- G_1 phase. For western blot the L. scandens extract and compound show high apoptosis effects against human epidermal carcinoma cells. This in vitro study has proved that L. scandens plant exhibit antiproliferative effects against human epidermal carcinoma cells, hence, it can be considered as a new promising potential anti-cancer therapy.

ملخص البحث

خلايا سرطان الجلد الخبيثة هي واحدة من الخلايا الورمية التي تتميز بتشوهات في تمايز الخلايا والنمو. ذكرت معظم الدراسات السابقه ان سرطان الجلد يعد واحدا من اكثر أنواع السرطان شيوعا و نسبه الافراد المصابين في تزايد ملحوض. لفونجا سكاندس هي احد النباتات المنتشره في ماليزيا، هذه النبته تحتوي الكثير من المنشطات الحيويه و تساعد عامه في تحسين الصحة، لكن لا توجد دراسات حول تأثير هذه النبتة ضد السرطان، لذلك من المهم ان نقوم بتقييم تأثير هذا النبات ضد السرطان بشكل علمي. الهدف من هذه الدراسة هو لتقييم التأثير المضاد لخلايا سرطان الجلد الناتج من أوراق اللفونجا سكاندس. لقد قمنا بعمل اختبار ال م.ت.ت لتقييم مقدار السمية الناتجة من النبتة لخلايا سرطان الجلد، بالإضافة إلى نوعين اخرين من خلايا جسم الانسان الطبيعيه (خلايا الجلد الليفية والخلايا الكيراتينيه) لتحديد ما إذا كانت هذه النبته امنه للاستخدام مع باقي خلايا الجسم الطبيعيه. نفذ اختبار الخدش لمراقبة نمو الخلايا ، بواسطه المجهر الالكتروني كان بوسعنا مشاهدة التغييرات الشكليه لخلايا سرطان الجلد النابحه عن معالجة الخلايا بالنبات المستخلص. باستخدام فحص كاسباس ٧/٣ لقد تمت عملية مراقبة موت الخلايا المبرمج تلك المعالجه بنبات اللفونجا سكاندنس. بعد ذلك تم تحليل دورة الخلايا باستخدام جهاز تدفق الكريات لخلايا سرطان الجلد المعالجة بنسبة محددة من نبات ال ل. سكاندنس. استخدمنا أيضا لطخة وسترن كاحد التقنيات لتاكيد تاثير النبات في مكافحة خلايا الجلد السرطانية. نتائج الاختبارات التي أجريت أوضحت أن مستخلص و مركب نبات ال ل. سكاندنس يمتلك تأثير سمى ضد خلايا سرطان الجلد الخبيثة مع قراءات أي سي ٥٠؛ (الميثانول = ٣٧.٥ مايكروجرام / مليلتر و دي.سي.ام = ٣٨ مايكروجرام / مليلتر و الهكسان = ٣٧.٥ مايكروجرام / مليلتر والمركب = ٢٧.٥ مايكرومولي)، بالنسبة للخلايا الطبيعية (خلايا الجلد الليفية و الخلايا الكيراتينيه) فمركب النبات و مستخلصه اظهروا قراءات امنه. اظهرت نتائج اختبار الخدش ان جرعة ال أي سي ٥٠ من النبات يمكن أن تحد من نمو خلايا سرطان الجلد الخبيث أكثر من سيسبلاتين (علاج مستخدم ضد السرطان) ، نتائج المجهر الالكتروني أظهرت تغير شامل في شكل الخلية السرطانية و تغيير في مورفولوجيا السطح وغياب الزغيبات الصغيرة وظهور الفقاعات. فحص الكاسباس ٧/٣ اظهر ان مستخلص ال ل. سكاندنس دي. سي. ام هو الأكثر فعالية بتحفيز موت الخلايا المبرمج لدى خلايا سرطان الجلد الخبيثه. بالنسبه لتحليل دورة الخليه النتائج أظهرت بان نبتة ال ل. سكاندس بمستخلصاتها الثلاثه و المركب المعزول رفعت قرائة المرحله ما قبل ال ج۱ في دورة الخلايا السرطانيه. نتائج اختبار لطخة وسترن أتت بان ال ل. سكاندنس قد حقق الموت المبرمج لخلايا الجلد السرطانيه البشريه. وقد أثبتت هذه الدراسة التي تم تنفيذها في المختبر أن نبات ال ل. سكاندنس اظهر تأثيرات مضادة لخلايا سرطان الجلد الخبيث، وبالتالي، فإنه من الممكن ان تكون هذه النبته كعلاج جديد لمكافحة السرطان في المستقبل.

APPROVAL PAGE

I certify that I have supervised and read this study and that in my opinion, it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a thesis for the degree of Master in Pharmaceutical Science (Pharmaceutical Technology).

Muhammad Taher b. Bakhtiar Supervisor

Solachuddin Jauhari Arief Ichwan Co-Supervisor

I certify that I have read this study and that in my opinion it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a thesis for the degree of Master in Pharmaceutical Science (Pharmaceutical Technology).

Internal Examiner

External Examiner

This thesis was submitted to the Department of Biotechnology Engineering and is accepted as a fulfilment of the requirement for the degree of Master in Pharmaceutical Science (Pharmaceutical Technology).

Mohd. Rushdi Bin Hj. Abu Bakar Pharmaceutical Technology

This thesis was submitted to the Kulliyyah of Engineering and is accepted as a fulfilment of the requirement for the degree of Master in Pharmaceutical Science (Pharmaceutical Technology).

Juliana Bt. Mohd Jaffri Dean, Kulliyyah of Pharmacy

DECLARATION

I hereby declare that this thesis is the result of my own investigations, except where otherwise stated. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at IIUM or other institutions.

Sama Naziyah Shaban

Signature

Date

INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

DECLARATION OF COPYRIGHT AND AFFIRMATION OF FAIR USE OF UNPUBLISHED RESEARCH

APOPTOSIS EFFECT OF *LUVUNGA SCANDENS* AGAINST HUMAN SKIN CANCER A431 CELL LINE

I declare that the copyright holders of this dissertation are jointly owned by the student and IIUM.

Copyright © 2017 Sama Naziyah Shaban and International Islamic University Malaysia. All rights reserved.

No part of this unpublished research may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise without prior written permission of the copyright holder except as provided below

- 1. Any material contained in or derived from this unpublished research may be used by others in their writing with due acknowledgement.
- 2. IIUM or its library will have the right to make and transmit copies (print or electronic) for institutional and academic purposes.
- 3. The IIUM library will have the right to make, store in a retrieved system and supply copies of this unpublished research if requested by other universities and research libraries.

By signing this form, I acknowledged that I have read and understand the IIUM Intellectual Property Right and Commercialization policy.

Affirmed by Sama Naziyah Shaban

Signature

Date

ACKNOWLEDGEMENTS

First of all, praise is due to almighty Allah S.W.T with His compassion and mercifulness to allow me to complete this research, and may His peace and blessings be upon our beloved prophet Muhammad (S.A.W).

It is my pleasure to dedicate this work to my family, who trusted me and believed in my ability to achieve my ambition, thank you for your support and patience. I would like to express the deepest appreciation and gratitude to my supervisor Assoc. Prof. Dr. Muhammad Taher for his guidance, advise, encouragement and patience that enabled me to accomplish the master program in Pharmaceutical Sciences (Pharmaceutical Technology) smoothly. I would also like to thank my co-supervisor, Assoc. Prof. Dr. Solachuddin Ichwan who took so much of his time and effort to make sure that this research was carried out in the best way possible.

Lastly I would like to thank the research laboratories' members who assisted me during the project. I have to express my appreciation to every single member of the staff in the Department of Pharmaceutical Technology, postgraduate research office, Faculty of Pharmacy, IIUM Kuantan, and all my colleagues. May God bless them and ease their way.

TABLE OF CONTENTS

Abstractii		ii	
Abstract in Arabic i		. iii	
Approval p	Approval pageiv		
Declaration	 1	v	
Acknowled	lgements	. vii	
	les		
	ures		
	previation		
CHAPTE	R ONE: INTRODUCTION	1	
1.1			
1.2	Problem Statement and Significance of the Study		
1.3	Research objectives		
1.4	Research hypothesis		
1.5	Research Methodology		
1.5	Scope of Research		
		,	
CHAPTE	R TWO: LITERATURE REVIEW	8	
2.1	Introduction		
	Skin Cancer		
2.2	2.2.1 Skin Cancer Epidemiology		
	2.2.2 Treatment of Skin Cancer		
	2.2.2.1 Chemotherapy Treatment		
	2.2.2.2 Bio-Chemotherapy Treatment		
	2.2.2.3 Immunotherapy		
	2.2.2.4 Gene-therapy		
23	Natural Products and Cancer		
2.5	2.3.1 Luvunga scandens / Indian luvunga		
	2.3.1.1 Luvunga scandens isolated compound		
	2.3.1.2 Triterpenoids		
2.4	Methods in Discovery of Anticancer Drugs from Natural Products		
2.4	2.4.1 Natural Plant Extract		
	2.4.2 Extraction		
	2.4.3 Solvent System		
	2.4.4 In Vitro Study		
	2.4.5 In Vivo Study		
	2.4.6 Cell Line.		
	2.4.7 Mammalian Cell Culture Anti-Cancer Assay		
	2.4.8 Cytotoxicity Assay (MTT)		
	2.4.9 Half Maximal Inhibitory Concentration (IC ₅₀)		
	2.4.10 In Vitro Wound Healing Assay (Scratch Assay)		
	2.4.11 Morphological Analysis (SEM)		
	2.4.12 Caspase 3/7 Assay (Apoptosis)		
	2.4.13 Flow Cytometry (Cell Cycle Analysis)		
	2.4.14 Western Blotting (Protein Analysis)	. 31	

CHAPTE	R THREE: MATERIALS AND METHODS	32
3.1	Materials	32
	3.1.1 Apparatuses	32
	3.1.2 Chemicals	32
	3.1.3 Equipment	32
	3.1.4 Cell Lines	
	3.1.5 Plant Collection	34
3.2	Methods	
	3.2.1 Cell Preparation and Handling	
	3.2.1.1 Cell Thawing and Culturing	
	3.2.1.2 Cell Sub-Culturing	
	3.2.1.3 Cell Lines and Culture Media	36
	3.2.2 Growth Curve	
	3.2.3 MTT Assay	
	3.2.4 In Vitro Wound Healing Assay (Scratch Assay)	
	3.2.5 Morphological Analysis (Scanning Electron Microscopy (SEM)).	
	3.2.6 Caspase 3/7 Assay	
	3.2.7 Cell Cycle Analysis	
	3.2.8 Western Immunoblotting	
	3.2.9.1 Cell culture and treatment	
	3.2.9.2 Whole cell extract	
	3.2.9.3 Protein concentration measurement	
	3.2.9.4 Gel running	
	3.2.9.5 Membrane transfer	
	3.2.9.6 Membrane analysis	
	•	
	3.2.9.7 Membrane stripping 3.2.1 Statistical analysis	
		. 43
CHAPTE	R FOUR: RESULTS AND DISCUSSION	. 47
	Introduction	
4.2	Growth Curve	47
4.3	Cytotoxicity Screening (MTT Assay)	48
4.4	In Vitro Wound Healing Assay (Scratch Assay)	60
	Morphological Analysis (SEM)	
	Caspase 3/7 Assay	
	Cell Cycle Analysis (Flowcytometry)	
	Western Blotting Analysis	
	R FIVE: CONCLUSION	03
	Conclusion	
5.2	Recommendations	. 94
REFERE	NCES	. 95
	X A <i>LUVUNGA SCANDENS</i> TREATMENT CONCENTRATION F	
	AY X B SAMPLE DISTRIBUTION PLATE FOR PROTI	103 103
APPENDI		
CUNCEN	TRATION MEASUREMENT	100

APPENDIX C DESCRIPTIVE DATA ANALYSIS	107
APPENDIX E ONE-WAY ANOVA ANALYSIS (POST-HOC TURKEY	TEST)
	,

LIST OF TABLES

Table 2.1	List of drugs originated from natural products used in	15
	cancer therapy	

Table 4.1IC50 values for different L. scandens treatments against A55431 cells55

LIST OF FIGURES

Figure 1.1	Flow chart of the study	6
Figure 2.1	Mortality and morbidity rates of the top 10 cancer types in both genders (Siegel et al., 2016)	11
Figure 2.2	L. scandens leaves (ydvn.net, 2016)	19
Figure 2.3	Structure of 3-oxotirucalla-7,24-dien-21-oic acid	19
Figure 2.4	Mammalian intrinsic apoptotic pathway explained involving BCL-2, Bax and Cytochrome C	33
Figure 4.1	Growth curve of A 431 cells obtained by cell counting	50
Figure 4.2	Cell lines used in the experiment; A) A 431. B) HaCaT. C) HDF	51
Figure 4.3	96-well plate contains A 431 treated cells with a) <i>L.</i> <i>scandens</i> methanol extract, b) <i>L. scandens</i> DCM extract, c) <i>L. scandens</i> hexane extract and d) <i>L.</i> <i>scandens</i> 3-oxotirucalla-7,24-dien-21-oic acid compound, with the positive control (+VE) and negative control (-VE)	52
Figure 4.4	Dose dependent effect of <i>L. scandens</i> methanol, DCM and hexane extracts (MLS, DLS, HLS) on A 431 cells in comparison with untreated A 431 cells (Basal). Error bars represent standard error from mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3). All data are significantly difference as compared to untreated cells with <i>p</i> value <0.05	52
Figure 4.5	Dose dependent effect of <i>L. scandens</i> 3-oxotirucalla- 7,24-dien-21-oic acid compound (ODO) on A 431 cells in comparison with untreated A 431 cells (Basal). Error bars represent standard error from mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3). All data are significantly difference as compared to untreated cells with <i>p</i> value <0.05	53
Figure 4.6	Dose dependent effect of Cisplatin (Cis) positive control on A 431 cells and the untreated A 431 cells (Basal) negative control. Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3).	54

All data are significantly difference as compared to untreated cells with P value <0.05

- Figure 4.7 Dose dependent effect of *L. scandens* methanol, DCM 56 and hexane extract (MLS, DLS, HLS) on HDF cells in comparison untreated HDF cells (Basal). Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3)
- Figure 4.8 Dose dependent effect of *L. scandens* 3-oxotirucalla-7,24-dien-21-oic acid compound (ODO) on HDF cells in comparison untreated HDF cells (Basal). Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3)
- Figure 4.9 Dose dependent effect of Cisplatin (Cis) positive 58 control on HDF cells and untreated HDF cells (Basal) negative control. Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean \pm SD (n=3). All data are significantly difference as compared to untreated cells with *P* value <0.05
- Figure 4.10 Dose dependent effect of *L. scandens* methanol, DCM 59 and hexane extract (MLS, DLS, HLS) on HaCaT cells in comparison with untreated HaCaT cells (Basal). Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean ± SD (n=3)
- Figure 4.11 Dose dependent effect of Cisplatin (Cis) positive 60 control on HaCaT cells and untreated HaCaT cells (Basal) negative control. Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean ± SD (n=3)
- Figure 4.12 Dose dependent effect of *L. scandens* 3-oxotirucalla-7,24-dien-21-oic acid compound (ODO) on HaCaT cells in comparison untreated HaCaT cells (Basal). Error bars represent standard error mean cell proliferation as determined by repeated experiments. Values are expressed as Mean ± SD (n=3)
- Figure 4.13 A 431 cells treated with the methanol extract labeled 64 with the scratch area for 5 days
 - xiii

Figure 4.14	A 431 cells treated with DCM extract labeled with the scratch area for 5 days	66
Figure 4.15	A 431 cells treated with hexane extract labeled with the scratch area for 5 days	68
Figure 4.16	A 431 cells treated with the isolated compound labeled with the scratch area for 5 days	70
Figure 4.17	Positive control pictures labeled with the scratch area and captured for 5 days	72
Figure 4.18	Negative control (untreated A 431 cells) labeled with the scratch area for 5 days	74
Figure 4.19	Morphology of A 431 cells treated with IC ₅₀ dose of <i>L</i> . <i>scandens</i> methanol extract	76
Figure 4.20	Morphology of A 4321 cells treated with IC_{50} dose of <i>L. scandens</i> DCM extract	77
Figure 4.21	Morphology of A 431 cells treated with IC_{50} dose of <i>L</i> . <i>scandens</i> hexane extract	78
Figure 4.22	Morphology of A 431 cells treated with IC_{50} dose of <i>L</i> . scandens 3-oxotirucalla-7,24-dien-21-oic acid compound	79
Figure 4.23	Morphology of A 431 cells treated with Cisplatin (anti- cancer commercialized drug) as a positive control	80
Figure 4.24	Morphology of untreated A 431 cell as a negative control	81
Figure 4.25	Elevation of caspase 3/7- selective inhibitors in A 431 cells after 6 hours' treatment. Error bars represent standard error of triplicate values	83
Figure 4.26	Elevation of caspase 3/7- selective inhibitors in A 431 cells after 12 hours' treatment. Error bars represent standard error of triplicate values	84
Figure 4.27	DNA content of A 431 cells after 24 hours' treatment obtained via PI stained-flow cytometry cell cycle analysis. Values are expressed as Mean \pm SD (n=3)	85
Figure 4.28	DNA content frequency histogram of A 431 cells A) A 431 cells treated with MLS. B) A 431 cells treated with DLS. C) A 431 cells treated with HLS. D) A 431 cells	86

treated with ODO. E) A 431 cells treated with Cisplatin. F) untreated A 431 cells. Cells were stained with PI and analyzed with flow cytometer for DNA content

- Figure 4.29Puncea S stain (red color). A) cells treated for 24 hours.89B) cells treated for 48 hours
- Figure 4.30 A 431 treated cells (24 hours) A) expression of BCL-2
 and the band intensity quantitative analysis. B)
 expression of Cytochrome C and the band intensity
 quantitative analysis. C) expressed by Bax and the band
 intensity quantitative analysis. The bars represent ±SD
- Figure 4.31 A 431 treated cells (48 hours) A) expression of BCL-2 93 and the band intensity quantitative analysis. B) expression of Cytochrome C and the band intensity quantitative analysis. C) expression of Bax and the band intensity quantitative analysis. The bars represent ±SD
- Figure 4.32 Bax/ BCL-2 band ratio A) 24 hours' treatment. B) 48 94 hours' treatment

LIST OF ABBREVIATIONS

ATCC	American Type Culture Collection
Cis	Cisplatin
DCM	Dichloromethane
dH ₂ O	Distilled water
DTT	Dithiothreitol
DLS	Dichloromethane Luvunga Scandens
DMEM	Dulbecco's Modified Eagle Medium
DMSO Dimethyl Sulfoxide	
ECL	Enhanced Chemiluminescence
FBS	Fetal Bovine Serum
HLS	Hexane Luvunga Scandens
HMDS Hexar	nethyldisilazane
MLS	Methanol Luvunga Scandens
MTT	3-(4,5-Dimethylthiazol-2-yl)-2,5 Diphenyltetrazolium Bromide
ODO	3-oxotirucalla-7,24-dien-21-oic acid
PBS	Phosphate buffer solution
PMSF	Phenylmethylsulfonyl fluoride
PVDF	Polyvinylidene Fluoride
Rpm	Revolutions per minute
SD	Standard deviation
SEM	Scanning Electron Microscope
TBS	Tris-Buffer Saline
WHO	World Health Organization

CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

Cancer is a disease that is characterized by abnormal cell differentiation and maturation, uncontrolled cell growth, and is the most significant cause of death in recent years (Ginestier et al., 2007).

Skin cancer, which includes both melanoma and non-melanoma are considered among some of the most common types of cancer among the white population. Skin cancer has now reached epidemic proportions. In Australia, studies have showed that there are over 50 new cases of melanoma skin cancer per 100,000 people, and the incident rate is 2% basal cell carcinoma and 1% squamous cell carcinoma in the male population (Diepgen & Mahler, 2002).

The main cause for this malignancy is not specifically known or identified, however like other types of cancer two main factors contribute in its development. These two factors are the external factor (environment) and the internal factor (genetics) (Houghton & Polsky, 2002). Though it has been proven that sunlight does play a big role in skin cancer whereby the ultraviolet (UV) rays of sunlight is very carcinogenic and is considered the main factor in squamous cell carcinoma (SCC), it has been studied that sunlight-related tumor progression could be caused by mutations that can only be precipitated by UV. It has been determined that 58% of invasive SCC have mutations in the p53 tumor suppressor gene, affecting the amino acid sequence. To indicate that the tumor mutations are caused by UV light, we observed CC----TT double-base change occurring at dipyrimidine sites, and high a frequency of C----T substitution. The p53 mutations in

other malignancies that are not UV related, such as those in breast cancer, does not show these UV related factors (Brash et al., 1991).

There are three main types of skin cancers; basal cell carcinoma (BCC), squamous cell carcinoma (SCC)/epidermoid carcinoma and melanoma. It is believed that these three types of cancers are caused by the exposure to sunlight (UV), and it is recorded that the occurrence is higher in individuals with fairer and more sensitive. Epidermoid carcinoma/SCC and BCC both occur 18 to 20 times more than malignant melanoma (Leiter & Garbe, 2008). As a prevention of skin cancer; habits like sun protection and decreased sun exposure should be practiced (Armstrong & Kricker, 2001).

After studying these facts, a serious thought leading to safe treatment should be considered. For many years various types of human cancer cell lines have been broadly used as an *in vitro* model to understand the mechanism of carcinogenesis and to discover new treatment methods. Even once involving the use of natural compounds which are assumed to have anticancer effects and at the same time safe towards the healthy cells of the human body (Shukla & Mehta, 2015; Prakash et al., 2013).

Plants are being used with a wide range of biologically active compounds in the treatment of mild to serious diseases since ancient times. This has provided researchers today with a new sight for the use of natural products on its own, or by adding it to synthetic drugs or products, to modify them for better results and less serious side effects. "Drug discovery from natural products for confronting cancer has brought in the rational opportunity to attain the newest clinical applications of plant secondary metabolites and their derivatives" (Hamedeyazdan et al., 2012).

The very first study on anticancer agents from plants was carried out in the 1950s on vinca alkaloids, vinblastine, and vincristine. Since then three thousand plant species were tested and used

for its anticancer properties and for its cancer treatment ability. Nowadays, natural sources are the main focus and play a major role in discovering anticancer agents (Ashraf et al., 2013).

Discovering and testing for new and better ways for treatment is an obligation of every true scientist, and as God created a cure for every disease it is our responsibility to find that cure.

Abu Baker Al Sedeeq, may Allah be pleased with him, reported: Prophet Mohamad (SAW) said;

"Ask Allah for forgiveness and health, for after being granted certainty, one is given nothing better than health" (Al- Albani, 1988).

And health we shall seek and it is where we are heading to in this research which is based on finding a cure for cancer and that is not impossible.

Abi Hurairah may Allah be pleased with him, reported: Prophet Mohamad (SAW) said;

"God did not come down with any disease but revealed its healing, his knowledge of his knowledge and his ignorance of his ignorance, and He did not put any disease but put its cure, or medication" (Al- Askalani, 1986).

Medicine of plant origin is known to be safe and effective because it is and has been used in conventional medicine. Which is important and widely used worldwide.