RESEARCH ARTICLE

Evaluation of antitrypanosomal properties and apoptotic effects of ochrolifuanine from *Dyera costulata* (Miq.) Hook. f against *Trypanosoma brucei brucei*

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ABSTRACT

Trypanosoma brucei parasites are flagellated kinetoplastid protozoan which is responsible for Human African Trypanosomiasis (HAT). Current chemotherapy drugs have a number of side effects and drug resistance has emerged as a major issue in current treatment. Active bisindole alkaloid compound ochrolifuanine was previously isolated from the leaves of Dyera costulata. In vitro antitrypanosomal activity of ochrolifuanine against Trypanosoma brucei brucei strain BS221 showed strong activity with an IC_{50} value of $0.05 \pm 0.01 \,\mu g/ml$. We compared the effect of ochrolifuanine and reference compound staurosporine in T. b. brucei apoptosis. The apoptosis-inducing activity of ochrolifuanine was evaluated using TUNEL assay and cell cycle analysis. Trypanosoma brucei brucei was shown to undergo apoptotic cells death as demonstrated by the appearance of several conical hallmarks of apoptosis. Ochrolifuanine was found to induce apoptosis in parasites in a dose- and time-dependent manner. The cell cycle study revealed 0.025 and 0.05 µg/ml of ochrolifuanine arrested the growth of T. b. brucei at two different growth phases (G_0/G_1 and in S phases). While at concentration 0.10 µg/ml arrested at the G2/M phase. In conclusion, the results indicate that ochrolifuanine displayed an antitrypanosomal effect on T. b. brucei by inducing apoptosis cell death and causing the arrest of parasite cells at different growth phases. The results suggested that ochrolifuanine may be a promising lead compound for the development of new chemotherapies for African trypanosomiasis.

Keywords: Ochrolifuanine; *Dyera costulata*; apoptotic; *Trypanosoma brucei brucei*.

INTRODUCTION

Human African Trypanosomiasis (HAT) also known as sleeping sickness is one of the Neglected Tropical Diseases (NTDs) group affected by kinetoplastid protozoa parasites from the subspecies of *Trypanosoma brucei* (Brun *et al.*, 2010). These protozoa parasites afflict both man and animals, causing a major impact on health and economic problems in rural sub-Saharan Africa. Every year, nearly 20,000 cases of this infection are reported and 70 million people are at the risk (Simarro *et al.*, 2012; WHO, 2013).

Pentamidine, suramin, melarsoprol, nifurtimox, and eflornithine, are commonly used for the treatment of HAT. However, these drugs have been reported to cause adverse drug reactions including difficulty in administration and loss of efficacy (Burri, 2010; Baker et al., 2013). To date, no vaccine is accessible for this disease and its control relies on case detection, treatment, and vector control. Hence, there is a crucial need for the development and discovery of new drugs that are safe, effective, affordable, easy-to-use, and have a unique mechanism of action.

Researchers have synthesized a wide variety of drugs for the treatment of parasitic diseases. However, years down the line, some

parasite strains have developed resistance against these drugs. Pharmaceutical companies have not prioritized the development of new antiparasitic drugs because many of these parasitic infections occur in a poor countries where the populace cannot afford such expensive drugs.

 $\textit{Dyera costulata} \ (\text{Miq.}) \ \text{Hook.} \ \textit{f} \ \text{a large tree from the Apocynaceae}$ family is locally known as jelutong in Malaysia. The bark and leaves of D. costulata have been traditionally used for the treatment of fever and inflammation (Subhadhirasakul et al., 2003). Besides that, it was also reported that leaf extracts of this plant showed antiplasmodial activity and in vivo analgesic effect in mice (Reanmongkol et al., 2002; Wong et al., 2011). Ochrolifuanine, a bisindole alkaloid group was discovered from leaf extracts of D. costulata (Mirand et al., 1983) and is also found in the root bark of Strychnos potatorum (Massiot et al., 1992). However, information on the bioactivity of ochrolifuanine is limited. Although ochrolifuanine has been reported to show antimalarial activity (Frederich et al., 2002), other indole alkaloids such as staurosporine, strictosidine, and acetylstrictosidine have also been reported to show antitrypanosomal properties towards Trypanosoma brucei brucei (Camacho et al., 2004; Pimentel-Elardo et al., 2010).

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Apoptosis is a type of programmed cell death (PCD) that affects trypanosome parasites. The process of programmed cell death in trypanosomes resulted in the regulation of parasite population size (cell density) as well as a mechanism to control genetic stability and cell differentiation (Welburn *et al.*, 1996). Although research on apoptosis in protozoa is limited, compounds such as concanavalin A, prostaglandin A, and staurosporine have been shown to induce PCD in *Trypanosoma* spp. (Figarella *et al.*, 2006; Barth *et al.*, 2014)

Staurosporine is a bisindole alkaloid, isolated from marine actinobacteria strain that has been shown to induce apoptosis in trypanosomes. The mechanism of staurosporine-induced apoptosis is unknown but it has been reported to involve alteration of phosphorylation changes, cell cycle control changes and DNA fragmentation (Barth *et al.*, 2014).

We had found a pronounced antitrypanosomal activity of ochrolifuanine on *T. b. brucei* parasites (Norhayati *et al.*, 2013, 2018). Determination of the effect and mechanism of antitrypanosomal actions of ochrolifuanine may lead to the development of novel drugs that can overcome the limitations of currently available antitrypanosomal drugs. Therefore, this study was undertaken to evaluate the effect of ochrolifuanine and staurosporine-induced cell death in *T. b. brucei* strain BS221 in a time- and dose-dependent manner. Ochrolifuanine significantly induced apoptosis-like cell death and resulted in a significant alteration of cell cycle and morphology of cells. Our finding indicate that ochrolifuanine has promising antitrypanosomal effects, which has implications for potential African trypanosomiasis therapeutic interversions.

MATERIAL AND METHODS

Materials and Parasite

TUNEL assay for DNA fragmentation *in T. b. brucei* strain BS221 cells was detected by using *In Situ* Cell Death Detection Kit AP (Cat No 11648795910; Roche, Germany) according to the protocols described by the manufacturer. Morphological changes in protozoa cells which are undergoing apoptosis were visualized and quantified by using a fluorescence microscope (BX53, Olympus, Japan). The cell cycle analysis was performed using the CycleTESTTM PLUS DNA Reagent Kit (Becton Dickson, USA) as described in the manufacturer's protocol.

The parasites *Trypanosoma brucei brucei* strain BS221, a derivative of S427 also known as MiTat 1.2/221 was obtained by the Swiss Tropical and Public Health Institute (Swiss TPHI), Basel, Switzerland. The bloodstream-form parasites were cultured in Balz Minimal Essential Medium (BMEM) containing Minimal Essential Medium (MEM) supplemented with 1 g glucose/L, 25 nM HEPES, 2.2 g NaHO $_2$ /L, and 10 mL MEM non-essential amino acids/L. Additional 0.14% (v/v) mercaptoethanol dilution with 10% (v/v) heatinactivated fetal bovine serum (FBS), 1 mM sodium pyruvate and 0.1 mM hypoxanthine (Baltz *et al.*, 1985) was added to the culture medium. The parasites were incubated at 37°C in a humidified atmosphere of 5% CO $_2$.

Test Compound

Ochrolifuanine was isolated from the leaves of *Dyera costulata* based on the previous method described in Norhayati *et al.* (2018) with minor modifications. The plant species were identified by Forest Research of Malaysia (FRIM) botanist, the voucher specimen was comparable with the reference specimen of FRIM Herbarium (Voucher no: FMS 29764).

The in vitro viability test for trypanosome parasites

Alamar Blue assay was performed to assess cell toxicity and viability when treated with the ochrolifuanine according to the method described by Norhayati *et al.* (2013). The ochrolifuanine and staurosporine were dissolved in absolute ethanol to produce

seven different final concentrations ranging from 0.001 to 0.100 $\mu g/ml$, while the standard drug (Pentamidine) was dissolved in 5% dimethyl sulfoxide (DMSO) for positive control. 5% DMSO, 25% Ethanol and deionized water were used as negative controls. All assays were performed in the flat-bottom 96-well microtiter plate. 5 μl of pre-dilution test compound, pentamidine, and negative control was added to each well of a 96-well microtiter plate. Subsequently, 95 μl of the trypanosome suspension at the density of 2.0 \times 10⁴ parasites ml⁻¹ were added to the plate in triplicates. The plates were then incubated for 72 h and assayed using Alamar Blue assay (Räz et al., 1997) and re-incubated for 4-5 h. Optical density (OD) values were determined using the Tecan Infinite M200 fluorescent plate reader and Magellan $^{\mathsf{TM}}$ data analysis software at excitation wavelength 528 nm and emission wavelength 590 nm. The IC_{50} values were determined from the dose-response curve (Räz et al., 1997; Otoguro et al., 2008).

TUNEL assay

In situ detection of DNA fragmentation following treatment of parasite cell (1×10^6 cells) with different concentration (0.025, 0.05 & $0.10 \,\mu\text{g/ml}$) of ochrolifuanine and staurosporine (0.01, 0.02 & 0.04 $\mu g/ml)$ for 6, 12 and 24 h was measured by TUNEL using Cell Death Detection kit (Roche) according to the manufacturer's instructions. Cells were centrifuged (1000 g, 10 min) and the supernatant was discarded. The cells pellet were fixed with paraformaldehyde (4% in PBS pH 7.4) for 1 hrs and washed with PBS. Thereafter, the cells were smeared on Poly L-lysin coated chamber slide and air-dried. The slides were washed again and permeabilized with 0.1% Triton X-100 solution for 5 min. Positive control cells were treated with DNase 1. Cells were washed twice with PBS and labeled with reaction mixture and incubated at 37°C in the dark for 1 hrs. The cells were visualized by fluorescence microscope (BX53, Olympus, Japan). Quantification of the apoptotic index was calculated based on the ratio of TUNEL positive cells over the total number of cells in the microscopic field.

Cell cycle analysis

Parasites cells (1 × 10⁶ cells) were treated with 0.025, 0.05 and 0.10 μ g/ml for 24 hrs. The cell cycle analysis was performed using CycleTESTTM PLUS DNA reagent kit BD (Becton Dickson) as described in the manufacturer's protocol. The cells were centrifuged at 300 g for 5 min). The pellet was washed with buffer solution twice. Thereafter, the pellet was added with 200 μ l trypsin buffer (solution A) and incubated for 10 min at 37°C to allow the reaction. Then the pellet was further re-suspended in 200 μ l solution B and incubated for 10 min at 37°C and stained with PI. Data acquisition was performed using flow cytometry (FACS Calibur, BD) at scan event 10 000 cells per sample and analyzed by ModFit LV.

Data analysis

Test samples were assayed in triplicate and the experiment was repeated at least three times. The data are represented as means \pm standard deviations (SD). Statistical analysis of data from TUNEL assay and cell cycle experiment was performed using the two-way Analysis of Variance (ANOVA), Turkey's and Dunnett's multiple comparisons test (GraphPad Prism 7.00 software).

RESULTS

Ochrolifuanine induces antitrypanosomal activity in T. b. brucei

The *in vitro* inhibitory effect of ochrolifuanine on *T. b. brucei* was evaluated using the Alamar Blue assay. For comparatives studies, staurosporine's *in vitro* antitrypanosomal effect was also evaluated. The findings revealed that ochrolifuanine and staurosporine reduced *T. b. brucei* growth when treated for 72 hours. The measured IC₅₀ values for ochrolifuanine, staurosporine and control drug pentamidine against *T. b. brucei* are presented in Table 1.

Table 1. The IC_{50} values determined for test compound and standard drug pentamidine against *T.b. brucei* strain BS221

Test compound/ standard drug	IC ₅₀ value (μg/ml)
Ochrolifuanine	0.05 ± 0.01
Staurosporine	0.02 ± 0.07
Pentamidine	0.002± 0.08

Ochrolifuanine induces apoptosis in T. b. brucei

To investigate the possibility that ochrolifuanine induces T. b. brucei death through apoptosis, T. b. brucei were treated at various concentrations for 6, 12, and 24 hours, then labeled with TUNEL assay and fluorescence stained cells were observed under fluorescence microscopy. DNase I was used as a marker for positive control cells to indicate and validate DNA fragmentation in T. b. brucei which was demonstrated by the detection of green fluorescence signal. Staurosporine was used as a comparison for apoptosis study in trypanosomes. Trypanosoma brucei brucei treated with ochrolifuanine markedly increased DNA fragmentation in the nucleus and apoptotic body formation, observed as green fluorescent stained cells (Figure 1). Apoptosis was identified in cells as early as 6 hours after exposure to ochrolifuanine, even at the lowest concentration tested. When T. b. brucei was treated at a concentration of 0.05 $\mu g/ml$ for 12 and 24 hours, apoptotic cells (appeared smaller and rounded shape (Figure 1C) compared to the non-treated/untreated cells (appeared in spindle shape). A similar pattern for DNA fragmentation also was observed on T. b. brucei treated with 0.02 μg/ml of staurosporine (Figure 1D). Both ochrolifuanine and staurosporine produced similar morphological

features in response to cell apoptosis were comparable with positive control DNase I, but not untreated ones.

As shown in Figure 2, the number of apoptotic cells in *T. b. brucei* treated with ochrolifuanine were observed in a concentration- and time-dependent manner (Figure 2). After 6 hours of ochrolifuanine treatment, the percentage of TUNEL-positive cells increased considerably from 18 to 94 %. Apoptotic cells rose from 25 to 96 % in the treated cells after 12 hours and increased from 38 to 97 % at the longest incubation time (24 hours). When the concentration of ochrolifuanine was increased to 0.05 and 0.10 μ g/ml, more than 50% of the cells were apoptotic. However, at the highest concentration (0.10 μ g/ml) of ochrolifuanine, no significant increase of apoptotic cells was observed over time, probably because a maximal death rate was reached.

Staurosporine increased the number of apoptotic cells in $\it{T.b.}$ brucei as the incubation time increased (Figure 3). Parasites cells treated with 0.02 µg/ml staurosporine demonstrated a significant increase in apoptotic cells from 61.0 to 72.8 %. Whereas, after 6 to 12 hours of incubation with 0.01 and 0.04 µg/ml staurosporine-treated cells, the percentage of apoptotic cells increased significantly from 20.5 to 26.2 % and 61.0 to 66.2 %, respectively, with no significant increase after 24 hours. Taken together, these findings revealed that ochrolifuanine induced apoptosis in a time-dependent manner but not at high concentrations (0.10 µg/ml), whereas staurosporine only induced apoptosis in a time-dependent manner at concentration 0.02 µg/ml. These findings suggested that ochrolifuanine could cause apoptotic cell death in $\it{T.b. b. brucei}$ parasites.

Ochrolifuanine induces cell cycle arrest in T. b. brucei

To investigate the possibility that ochrolifuanine inhibited *T. b. brucei* growth through cell cycle arrest, cell cycle analysis was performed.

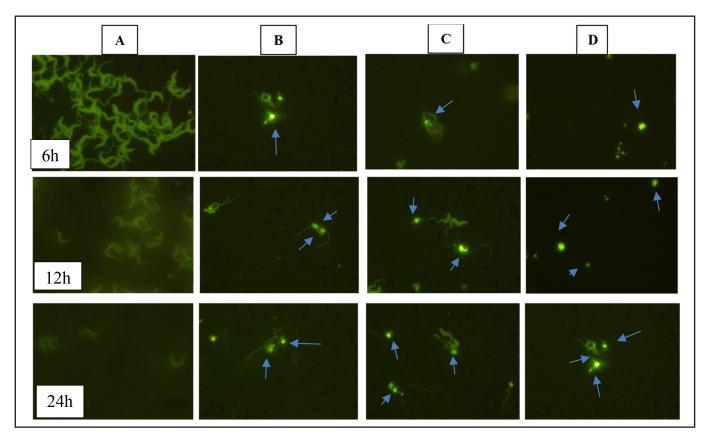


Figure 1. Apoptotic morphological changes of *T. b. brucei* strain BS221 induced by ochrolifuanine (Och) and staurosporine (STS). (A: untreated; B: DNase; C: Och; D: STS) Parasites were treated with 0.05 μ g/ml Och and 0.02 μ g/ml STS at 6, 12 and 24 hours incubations. The parasites morphology was observed under fluorescence microscope (400 and 1000 times magnification). Arrows showed DNA fragmentation by the green fluorescence nuclei.

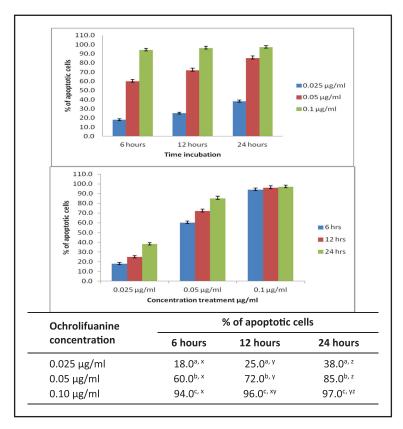


Figure 2. The effect of dose- (A) and time- (B) dependent pattern of treated *T. b. brucei* cells with ochrolifuanine as observed by TUNEL assay. ^{a, b, c} letters represent significant differences (p < 0.05) within the groups while the ^{x, y, z} letter represents significant differences (p < 0.05) between the groups as analyzed by two-way ANOVA, Tukey's multiple comparisons test.

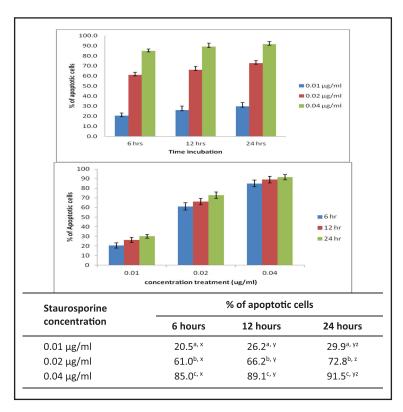


Figure 3. The effect of dose- (A) and time- (B) dependent pattern of treated *T. b. brucei* cells with staurosporine as observed by TUNEL assay. $^{a, b, c}$ letters represent significant differences (p < 0.05) within the groups while the $^{x, y, z}$ letter represents significant differences (p < 0.05) between the groups as analyzed by two-way ANOVA, Tukey's multiple comparisons test.

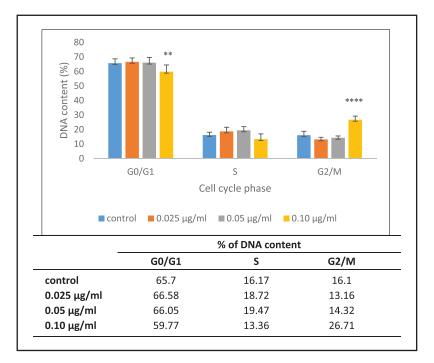


Figure 4. Effect of different concentrations of ochrolifuanine on cell cycle phase distribution in T. b. brucei. Parasite cells at density 1×10^6 cells/ml were incubated in the absence (control) or presence of different dose concentration of ochrolifuanine for 24 hours and then analyzed by flow cytometry. The asterisk (*) indicates a significant difference as analyzed by two-way ANOVA, Dunnett's multiple comparisons test (**p 0.0021, ***p 0.0002, ****p 0.0001).

Our data revealed that treatment with 0.025 µg/ml ochrolifuanine resulted in 66.58 ± 2.74 % cellular DNA content in the G_0/G_1 phase, $18.72 \pm 2.84 \%$ in the S phase and $13.16 \pm 1.49 \%$ in the G_2/M phase (Figure 4). Treatment with 0.05 $\mu g/ml$ ochrolifuanine showed that 66.05 \pm 3.61 % of cells were in the $\rm G_0/\rm G_1$ phase, 19.47 \pm 2.54 % in the S phase and 14.32 \pm 1.25 % in the G_2/M phase. Treatment with 0.10 μ g/ml showed that 59.77 \pm 4.70 % of the cells were in the G_0/G_1 phase, 13.36 ± 3.65 % in the S phase and 26.71 ± 2.54 % in the G_2/M phase. The percentage of cells in the late G_2/M phase significantly increased to 26.71 % after treatment with 0.10 μg/ml of ochrolifuanine for 24 hours as compared to control cells (16.10 %). Our data indicated that ochrolifuanine led to cell accumulation in the G_0/G_1 phase with a concomitant decrease in the number of cells in the S phase and G₂/M phases in a dose-dependent manner except for 0.10 $\mu g/ml$. These data indicated that the mechanism of ochrolifuanine in suppressing T. b. brucei viability is involved in arresting the cell cycle at the G_0/G_1 phase.

DISCUSSION

Alkaloids with potential therapeutic effects against trypanosomes have been studied extensively. Emetine, an isoquinoline alkaloid from *Cephaelis ipecacuanha* was found to have potent activity with an IC₅₀ value of 0.21 μ M against *T. b. brucei*. Besides that, quinoline alkaloids from *Cinchona* sp. bark (Rubiaceae) such as quinidine, cinchonine, quinine and cinchonidine were reported to have significant activity against *T. b. brucei* with IC₅₀ values of 0.8, 1.2, 4.9 and 7.1 μ M respectively (Hoet *et al.*, 2004). A recent study by Nnadi *et al.* (2017) found that 3 β -holaphyllamine, 3 α -holaphyllamine, conessimine, conessine, conessimine and holarrhesine alkaloids from *Holarrhena africana* showed significant activities with IC₅₀ values ranging from 0.08 – 0.67 μ M against *T. b. rhodesiense*, and selectivity indices ranging from 13 to 302. While, Zhang *et al.* (2018), reported that

aminomethyl-benzoxaboroles have potent antitrypanosomal against *T. brucei*.

The isolated compound identified as ochrolifuanine from the bisindole alkaloid group from previous studies showed a strong antitrypanosomal effect with IC $_{50}$ value 0.05 \pm 0.01 µg/ml (0.114 µM) (SI: 52). Previously ochrolifuanine was isolated from Ochrosia lifuana Guillaumin (Apocynaceae) by Peube-Locou et al. (1972) and Koch et al. (1975). It was later discovered in the leaves of D. costulata by Mirand et al. (1983). Besides that, ochrolifuanine has also been reported in other species such as in the root bark of Strychnos potatorum (Massiot et al., 1992) and the root bark of Aspidosperma excelsum (Verpoorte et al., 1983).

Generally, the observed activity of ochrolifuanine from *D. costulata* may be due to the presence of alkaloids. The high levels of antitrypanosomal activity observed in ochrolifuanine and the other reported bisindole alkaloid compounds suggested that these compounds may share the same target site in the parasites. Ochrolifuanine may be worth being developed as a possible new trypanocidal.

Over the years, much evidence has been accumulated to describe morphological and biochemical events displayed during the death of trypanosomatids which share certain characteristics with mammalian apoptosis phenomena (Debrabant *et al.*, 2003; Fernandez-Presas *et al.*, 2010; Menna-Barreto & Castro, 2015). The apoptotic features shown by these kinetoplastid parasites include DNA fragmentation, depolarization of mitochondrial membrane potential, protease activation, membrane blebbing, the exposure of phosphatidylserine in the outer leaflet of the plasma membrane, chromatin condensation and cytochrome c release.

Apoptosis or programmed cell death (PCD) in a multicellular organism such as protozoa mainly kinetoplastid parasites, have been described in *T. brucei, T. cruzi* and *Leishmania* spp. It was reported that PCD in kinetoplastid parasites could serve as a mechanism of adaption and defense against the host and might be

used to maximize their (parasites) biological fitness (Nguewa *et al.*, 2004). Besides that, PCD also plays a role in the regulation of cell density in parasitic protozoa. Therefore, PCD could be a potential pharmacological target for protozoan control.

Morphological differences in nuclear are commonly considered as the most excellent indicator of an apoptotic process. Currently, DNA fragmentation displayed by the formation of a multitude of DNA strand breaks is recognized as one of the distinguishing characteristics for identifying apoptosis in protozoa (Duszenko et al., 2006; van Zandbergen et al., 2010). In the present study, the morphology of parasites cells was affected by treatment with ochrolifuanine and staurosporine. The apoptotic cells were observed to be a smaller and rounded shape as compared to untreated cells, similar to what has been reported as morphological features of apoptosis (Jimenez et al., 2014).

Determination of therapeutic dose and success of anti-parasitic agents need a good understanding of the complex interaction that existed between the potency of an agent and exposure time within the host body (White, 2013, 2017). Thus, the effective dose and time for a given drug can be accomplished in preclinical studies by establishing a dose-response relationship. The correlation between drug concentrations, time-course, therapeutic strength and adverse effects, are known as pharmacodynamics (Kang & Lee, 2009; White, 2013). To achieve the admired therapeutic effect, the safety and efficacy of any drug must be optimized to determine the administered dosage presents minimal adverse effects (White, 2013).

The results presented herein provide evidence that ochrolifuanine induced biochemical and morphological alterations in *T. b. brucei* leading to the parasite's death. Since, ochrolifuanine had been shown to cause DNA fragmentation, indicated by the appearance of apoptotic cells in *T. b. brucei*, further studies need to be performed to support these findings. In addition to a better understanding of the molecular mechanism of apoptosis in trypanosome parasites, a series of signaling pathways involved in apoptotic cell death needs to be investigated to determine the role of ochrolifuanine in apoptosis of trypanosome parasites. The ability of ochrolifuanine to induce apoptosis in *T. b. brucei* warrants further investigation to establish its potential as a candidate compound for developing new antitrypanosomal drugs.

The relationship between cell cycle control and apoptosis is evident in trypanosome parasites. Pearson et al. (2000) reported that lectin concanavalin A (ConA) induced cell cycle arrested in T. brucei parasites. In addition, ConA also has been reported to induce apoptosis in the same parasites (Welburn et al., 1999). In different studies, the anti-microtubule drug, Rhizoxin, isolated from Rhizopus chinensis and the nuclear DNA synthesis inhibitor drug, aphidicolin an antibiotic isolated from Cephalosporum aphidicola were shown to affect cell cycle arrest in $\mathit{T.\ brucei}\ bloodstream$ form at G_0/G_1 and G₂/M phases (Ploubidou et al., 1999). Whereas, hydroxyurea drug also has been reported to inhibit cell cycle progression at G₀/G₁ and G₂/M phases in *T. brucei* parasites (Mutomba & Wang, 1996). Besides that, Uzcategui et al. (2007) found that T. brucei treated with dihydroxyacetone was involved in the inhibition of cell cycle progression at the G₂/M phase. Recently, clomipramine as an antidepressant drug has been described as a trypanothione inhibitor, found to be involved in cell cycle inhibition by arrested G_0/G_1 phase which led to apoptosis in T. b. brucei (Rodrigues et al., 2016).

In the present study, treatment of 0.10 µg/ml of ochrolifuanine significantly (p<0.05) arrested the G_2/M growth phase in T. b. brucei, after indicating possible down-regulation of CRK3 and CYC6. In addition, the accumulation of cells in G_0/G_1 and S phases induced after treatment with 0.025 and 0.05 µg/ml of ochrolifuanine may be affected by regulation of CYC2 and both CRK1 and CRK2 in G_0/G_1 and Orc1/Cdc6-like protein in S phase. The essential molecules regulating the parasite cell cycle can be exploited in the development of potential novel therapeutics.

CONCLUSION

The mechanisms of action of ochrolifuanine warrant further investigation because it was a potent apoptosis inducer and caused G2/M phase arrest in *T. b. brucei*. Exploration of unusual pathways and their novel regulators in trypanosomes will undoubtedly not only advance our understanding of the therapeutic target's mechanism but will also provide novel drug targets for trypanosomiasis disease treatment. The present finding suggested that the antitrypanosomal effect of the isolated compound, ochrolifuanine is mediated by induction of apoptosis, but the exact pathway involved is still unclear, which means further investigations on the mode of action need to be done. Exploration of ochrolifuanine effects *in vivo* study also should be considered as one of the target studies. In addition, the isomer of ochrolifuanine which has been reported in the past should be investigated in order to find compounds with a better cytotoxic/ trypanocidal ratio.

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Conflict of interests

The authors declare that is no conflict of interest in this study.

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