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EXPLORING THE THERAPEUTIC POTENTIAL OF CAPSICUM ANNUUM EXTRACT AGAINST BREAST CANCER IN SPRAGUE DAWLEY RATS

Zain ul Abedin^{1*}, Imran Pasha¹, Masood Sadiq Butt¹, Muhammad Naeem Faisal²

¹National Institute of Food Science and Technology, University of Agriculture, Faisalabad, Pakistan, ipasha2001@uaf.edu.pk, drmsbutt@yahoo.com

²Institute of Physiology and Pharmacology, University of Agriculture, Faisalabad, Pakistan, m.naeem.faisal@uaf.edu.pk

*Corresponding Authors: Zain ul Abedin zaing0092@gmail.com

ABSTRACT

Ethnopharmacological relevancy: Many studies showed that various segments of Capsicum annuum L, has therapeutic and ameliorative potential against cancer which is one of the major contributor for causing oxidative stress, adduct formation in genetic material and cell proliferation, etc.

Aim of study: Current research was carried out to analyze anti-cancerous potential of Capsicum annuum extract in breast cancerous rats.

Material and methods: Capsicum annuum ethanolic extract was attained via employing Soxhlet apparatus. This obtained extract was further utilized for research trial on rats. For this purpose, 50 healthy female rats were chosen for study, the rats were segregated into five groups, 10 rats in each group; G0 (negative control group), G1 (positive control group), G2 (doxorubicin as a standard drug), G3 and G4 (rats receiving capsicum extracts). Breast cancer in rats was induced by administering the single dose of DMBA (50mg/kg) through gavage. Blood samples were investigated for breast cancer biomarkers and serum biomarkers to analyze the outcome of treatments. Furthermore, tumor weight, volume, burden and incidence was also noticed along with histopathological examination of tissues.

Results: The Capsicum annuum extracts prevented the rise in concentration of biomarkers of breast cancer in rats that are CA 15.3, CA 27.29 and CEA. Furthermore, the capsicum extracts also significantly improved the level of serum biomarkers such as TAC (Total antioxidant capacity) and TOS (Total oxidative stress) in breast cancerous rats. The tumor weight, volume, burden and incidence was significantly decreased in G₂, G₃ and G₄ groups treated with doxorubicin and Capsicum annuum extracts. Histopathological examination of breast tissues showed that tissue damage was reversed in groups G3 and G4 treated with capsicum extracts.

Keywords: Capsicum annuum, breast cancer, anti-cancerous, therapeutic potential, functional food

List of abbreviations:

DMBA= 7, 12 Dimethyl Benz (A) Anthracene

CA= Cancer antigen

CEA= Carcinoembryonic antigen

TAC= Total antioxidant capacity

TOS= Total oxidative stress

GC = Negative control

PC = Positive control

ABTS= (2,2'-azino-bis(3-ethylbenzothiazoline-6-sulfonic acid)

CRD= Completely randomized design

1. Introduction

Cancer as devastating human disease causes huge mortalities worldwide each year. Cancer produces myriad effects on metabolism and enables cells proliferation inappropriately in order to adapt to tumor generation (Schmidt et al., 2021). Previous mortalities and experiences describes the hallmarks of cancer as a multistep developmental process including dodging growth inhibitors, maintaining proliferative signaling, combating cell death, promoting angiogenesis, turning on metastasis and invasion, changing energy metabolism and avoiding immune devastation (Lu and Zhan, 2018). According to World Health Organization, cancer is currently the 2nd noncommunicable cause of death worldwide. In 2020, there were 19.3 million new cases of cancer worldwide (18.1 million without skin cancer). Based on the statistics breast malignancy is the most common cancer in Pakistan having 23.1% cases particularly among women of middle age (Zaheer et al. 2019). Around two out of every five people today will have cancer at some point in their lives. Breast carcinoma is the major form of tumor that prevails in higher percentage among women particularly in Asian and African countries. It is divided into various types depending upon the hormones and expression of various genes that are involved in its progression (Laya et al., 2021). Cancer targets the surrounding cells and migrates to other body cells through lymphatic system (Hassanpour and Dehghani, 2017). In Pakistan the prevalence of cancer is 1.3% the cases reported on breast cancer in Pakistan are 2.09 million (Saleh et al., 2018). According to NCI mortality rates due to cancer are 8.2 billion particularly in South Asian and African countries. In 2020 an estimated death rate due to all type of cancers was 9.6 million (Siegel et al., 2020). Breast cancer is one of the most prevalent types of cancer in the world. Moreover, it is the major cause and primary killer of female cancer patients worldwide. Cancer can be induced by administering DMBA through oral route and it is suggested that the therapeutic effects of medicinal plants i.e. Aegle marmelos, Capsicum annuum and drugs i.e. simvastatin has some anti-cancerous effects which are moderately like that of tamoxifen in breast cancer (Akhouri et al., 2020; Karimi et al., 2019).

Owing to the expeditious rise in diseases and behavioral disorders, public health is becoming a major element in the existing society and human well-being. Health promoting foods are now considered as an important factor that can prevent and cure many diseases, especially organic foods. Natural foods are a rich source of components with health enhancing and promoting activities. Consequently plants remain the major source of active compounds and research concentrated on their activity is gaining popularity in the last few decades (Basharat *et al.*, 2020). Diet rich in fruits and vegetables is a healthy way of preventing diseases like diabetes, cancer and obesity. Among fruits and vegetables capsicum, grapes, berries, onion, ginger and garlic are most commonly used as a therapeutic diet (Laya *et al.*, 2021). Capsaicin in *Capsicum annuum* is a well-known cancer fighter, reduces the speed of cancer cell growth, inhibits DNA synthesis, vessel sprouting and chemotactic mobility of endothelial cells as well as acts as a mitotic inhibitor. In addition dihydrocapsaicin and nor-dihydrocapsaicin are the most abundant capsaicinoids in *Capsicum*

annuum having anti-cancerous, anti-mutagenic and immunomodulatory properties (Akhouri et al., 2020).

In experimental trials, many carcinogenic chemicals are used for the induction of breast cancer. 7, 12-dimethylbenz[a]anthracene (DMBA) owing to its carcinogenic and immunosuppressive properties it is most commonly employed to induce mammary cancer. The DMBA oxidative metabolism leads to the generation of free radicals which in turn disrupts redox balance. The free radicals bind to the cell level macromolecules via nucleophilic sites resulting in carcinogenic reactions. Zingue *et al.* (2016) and Gueyo *et al.* (2020) used DMBA and observed 100 % breast cancer in rats. Depending on the above mentioned evidences, this research work is designed to evaluate the anticancer characteristics of *C. annuum* against breast cancer induced by DMBA in an animal modeling.

2. Material and Methods

The current study was conducted at Faculty of Food Nutrition and Home Sciences (FFNHS) in National Institute of Food Science and Technology (NIFSAT), University of Agriculture Faisalabad (UAF), Pakistan.

2.1. Sample preparation

Fresh *Capsicum annuum* fruits were purchased from the local market of Faisalabad, Pakistan. Fruits were rigorously washed with distilled or purified water, exposed to sun drying and transformed into a powder. A dehydrated capsicum samples were extracted by employing 95% ethanol via Soxhlet apparatus and later on solvent was eliminated by using rotary evaporator by adopting the method as described by Ahmad *et al.* (2022). *Capsicum annuum* fruits produced 22.13% extract.

2.2. Induction of breast cancer

Breast cancer in Sprague dawley rats was induced by gavage using 50 mg per kg body weight of the chemical DMBA (7, 12 Dimethyl Benz (A) Anthracene) mixed with 1ml of corn oil by using the method as described by Anna *et al.* (2021).

2.3. Efficacy trial plan

Defatted prepared ethanolic extract of *Capsicum annuum* was used for research study to analyze its anti-cancerous characteristics. The welfare and care of rats was affirmed by following the guidelines and protocols of ethical committee along with persistent monitoring throughout the study. For efficacy trial, 50 rats (n=10) weighing 250 grams were chosen randomly from the animal room located at National Institute of Food Science and Technology (NIFSAT), UAF. Rats were acclimatized for the period of 1 week and were being provided with ordinary drink and food. Temperature range in animal room was in the range of 20 to 35 °C and humidity level was also set up to 75%. Rats were further segregated into five groups with ten rats (n=10) in every group depending on the type of feed they were being administered, G0 (negative control group) receiving normal diet; G1 (positive control group) diseases rats administered normal diet; G2 (rats receiving 0.55mg/kg doxorubicin as a standard drug via intravenous route); G3 and G4 received two different concentrations of *Capsicum annuum* extract including 500 and 1000mg/kg, correspondingly (Kim *et al.* (2019) and Kurnijasanti *et al.* (2017). Table 1 depicts the grouping of rats and feed they were being provided.

2.4. In vivo examination

On the 45th day, the rats were anesthetized, blood was assembled through the coagulant and anticoagulant vials via heart puncture. The blood was exposed to clotting for thirty minutes; centrifuged for 15 minutes at 3000 rpm to separate serum. The serum acquired was utilized for the analysis of breast cancer biomarkers and serum biomarkers by following the method as described by Shao et al. (2015). The enzyme linked solid phase immunosorbent assay and radioimmunoassay were used for analysis. The reagents used were namely acetate buffer and ABTS (2, 2 azinobis 3 benzoethylthiazoline sulfonic acid). Initially 220 μ l of reagent 1 was assorted with 0.5 μ l of serum sample and was incubated for 30 seconds; absorbance was recorded at 425 nm. Later on 20 μ l of reagent 2 was mixed and added with the samples and absorbance was recorded at 425 nm Oh *et al.* (2015).

2.5. Tumor variables

The tumor appearance endpoints such as tumor weight, tumor number, latency to first number and tumor incidence were measured with the help of Vernier caliper and screw gauge by following the method as described by Saleh *et al.* (2018). The above mentioned formula was used to calculate the tumor mass volume:

Tumor volume (mm³) = $4 \pi (A/2)^2 \times (B/2)$

Where: A = negligible tumor axis

B= substantial tumor axis

2.6. Histopathological examination

Breast tissues were excised out and fixed in formalin buffered solution (10%), thoroughly washed with alcohol and purified with xylene in order to help the histopathological examination of the breast tissues. Breast tissues were impregnated with paraffin wax and 5µm tissue sections were anchored on the slides and dewaxed by using the xylene and remoistened while using the alcohol by means of a rotating microtome (Leica GmbH RM22545 Microsystems, Wetzlar) by following the method of Ashraf *et al.* (2021).

Table 1 Treatment plan for various groups of rats with *Capsicum annuum* extract

Groups	Treatments
G0	Healthy rats fed on normal feed
G1	Diseased rats fed on normal feed
G2	Normal diet + 0.55mg/kg doxorubicin
G3	Normal diet + 500mg/kg Capsicum annuum extract
G4	Normal diet + 1000mg/kg Capsicum annuum extract

G0= Negative control; G1= Positive control; G2= Group 02; G3= Group 03; G4= Group 04

2.7. Statistical analysis

All the obtained data and parameters (n=10) were subjected to appropriate statistical analysis (Statistix 8.1 software) through one way ANOVA and one way factorial under CRD. Results were indicated as Mean \pm SD for every parameter including tumor variables, breast cancer biomarkers and serum biomarkers. The treatment means were compared by applying the HSD test (Tukey test) where the significance level was $P \le 0.05$ (Montgomery, 2017).

3. Results

3.1. Breast cancer biomarkers

3.1.1. Cancer antigen 15.3 (CA 15.3)

The potential effect of *Capsicum annuum* extract on CA 15-3 level is depicted in Table 2. The results clarify that CA 15-3 levels were considerably altered with respect to each group. The CA 15-3 levels in the breast tissues assorted from 28.45 ± 4.87 U/mL to 25.67 ± 4.39 U/mL in the treatment groups (G₃ and G₄). The maximum value (35.69 ±4.25 U/mL) for CA 15-3 levels was noticed in G₁ (positive control group) receiving DMBA and routine feed while the lowest value (11.21 ±1.92 U/mL) was found in G₀ (negative control group). It can be clearly seen from the Table 2 that there is a significant reduction in CA 15-3 levels (21.39 ±3.66 U/mL) in G₂ (standard drug group) whereas a substantial decrease in CA 15-3 levels (28.45 ±4.87 U/mL, 25.67 ±4.39 U/mL) was also observed in G₃ and G₄ groups which were being administered with 500mg/kg and 1000mg/kg of *Capsicum annuum* extract throughout the study.

3.1.2. Cancer antigen 27.29 (CA 27.29)

The therapeutic effect of *Capsicum annuum* extract on CA 27-29 level is presented in Table 2. It is clear from the results that levels of CA 27-29 were substantially altered with respect to each group. The CA 27-29 levels in the breast tissues assorted from 34.7 ± 4.80 U/mL to 31.8 ± 4.94 U/mL in the treatment groups (G_3 and G_4). The maximum value (44.6 ± 4.56 U/mL) for CA 27-29 levels was noticed in G_1 (positive control group) receiving routine feed and DMBA while the lowest value (22.4 ± 3.83 U/mL) was found in G_0 (negative control group). It can be clearly seen from the Table 2 that there is a substantial reduction in CA 27-29 levels (29.4 ± 3.95 U/mL) in G_2 (standard drug group) whereas a substantial decrease in CA 27-29 levels (34.7 ± 4.80 U/mL, 31.8 ± 4.94 U/mL) was also observed in G_3 and G_4 groups which were being administered with 500mg/kg and 1000mg/kg of *Capsicum annuum* extract throughout the study.

3.1.3. Carcinoembryonic antigen (CEA)

The therapeutic potential of *Capsicum annuum* extract on CEA level is shown in Table 2. It is clear from the results that levels of CEA were substantially altered with respect to each group. The CEA levels in the breast tissues assorted from 2.32 ± 0.39 ng/mL to 1.98 ± 0.33 ng/mL in the treatment groups (G_3 and G_4). The greatest value (8.36 ± 1.43 ng/mL) for CEA levels was noticed in G_1 (positive control group) receiving DMBA and routine feed while the lowest value (0.12 ± 0.02 ng/mL) was found in G_0 (negative control group). It can be clearly seen from the Table 2 that there is a significant reduction in CEA levels (1.42 ± 0.24 ng/mL) in G_2 (standard drug group) whereas a substantial decrease in CEA levels (1.42 ± 0.39 ng/mL, 1.98 ± 0.33 ng/mL) was also observed in G_3 and G_4 groups which were being administered with 1.98 ± 0.33 ng/mL) was also observed in 1.98 ± 0.33 ng/mL was a

3.2. Serum biomarkers

3.2.1. Total antioxidant capacity (TAC)

The therapeutic potential of *Capsicum annuum* extract on TAC levels is depicted in Table 3 and Figure 1. It is clear from the findings that serum levels of TAC were significantly altered with respect to each group. The TAC levels in the breast tissues varied from 1.81 ± 0.31 mmol/L to 1.92 ± 0.32 mmol/L in the treatment groups (G_3 and G_4). The lowest values for serum TAC (1.44 ± 0.26 mmol/L) were recorded in G_1 group (Positive control) as compared to other groups. The maximum value (1.99 ± 0.34 mmol/L) for TAC levels was noticed in G_0 group (negative control) receiving routine feed. It can be clearly seen from the Table 3 that there is a considerable increase in serum TAC levels (1.92 ± 0.32 mmol/L) in G_4 group whereas a substantial increase in serum TAC levels (1.68 ± 0.28 mmol/L, 1.81 ± 0.31 mmol/L) was also observed in G_2 and G_3 groups which were being administered with doxorubicin cyclophosphamide and 500mg/kg of *Capsicum annuum* extract throughout the study. The minimum increase in G_2 group may be linked with the oxidative stress induced by drug.

3.2.2. Total oxidative stress (TOS)

The therapeutic outcome of *Capsicum annuum* extract on serum TOS level is shown in Table 3 and Figure 1. The results elucidate that serum TOS levels were extensively improved with respect to each group. The serum TOS levels in the breast tissues varied from $9.23\pm1.58~\mu\text{mol/L}$ to $7.13\pm1.22~\mu\text{mol/L}$ in the treatment groups (G_3 and G_4). The maximum value ($16.08\pm2.75~\mu\text{mol/L}$) for serum TOS levels was noticed in G_1 group (positive control) receiving DMBA and routine feed while the lowest value ($7.13\pm1.22~\mu\text{mol/L}$) was found in G_0 group (negative control). It can be clearly seen from the Table 3 that there is a significant reduction in serum TOS levels ($7.13\pm1.22~\mu\text{mol/L}$) in G_4 group whereas a substantial reduction in serum TOS levels ($11.6\pm1.98~\mu\text{mol/L}$, $9.23\pm1.58~\mu\text{mol/L}$) was also noticed in G_2 and G_3 groups which were being administered with doxorubicin cyclophosphamide and 500mg/kg of Capsicum~annuum extract throughout the study.

3.3. Tumor variables

The effect of *Capsicum annuum* extract on tumor variables has been depicted in Table 4 in the form of mean values. The tumor weight $(121.7\pm5.27 \text{ mg})$, tumor burden $(7.81\pm1.41 \text{ n})$, tumor volume $(0.79\pm0.14 \text{ mm}^3)$ and tumor incidence $(5.98\pm1.14 \%)$ was higher in G_1 positive control group which was treated with DMBA as compared to other treatment groups. A significant reduction was noticed in tumor weight $(33.00\pm3.65 \text{ mg})$, burden $(3.82\pm0.68 \text{ n})$, volume $(0.25\pm0.04 \text{ mm}^3)$ and incidence $(2.65\pm0.47 \%)$ in G_2 group which was receiving doxorubicin as a standard drug. The G_4 group treated with 1000mg/kg of *Capsicum annuum* extract showed the rapid reduction in tumor weight $(53.67\pm2.64 \text{ mg})$ and tumor volume $(0.43\pm0.07 \text{ mm}^3)$ as compared to the G_3 group $(65.00\pm3.49 \text{ mg}, 0.45\pm0.08 \text{ mm}^3)$ which was treated with 500mg/kg of the extract. However, the tumor burden $(4.00\pm0.72 \text{ n})$ and tumor incidence $(4.00\pm0.72 \%)$ was significantly reduced in G_3 group as compared to the G_4 group $(4.56\pm0.82 \text{ n}, 4.80\pm0.86 \%)$.

3.4. Histopathological examination

In the histopathological analysis the tissue section obtained from breast of normal rats showed no sign or indication of malignant tumor Figure 2 (A). DMBA induced tumor rats who were only DMBA treated they showed a neoplastic infiltrating composition of cells aligned in glands as it can be seen it Figure 2 (B). Individual tissues or cells were oval to round shaped having average eosinophilic cytoplasm and oval round shaped vesicular nucleus with several depicting nucleoli. Areas of blackish lump with necrosis were also recognized Figure 2 (B). The breast tissue sections of DMBA induced Sprague Dawley rats treated with doxorubicin affirmed a circumscribed damage with areas of fibrosis and adenosis. No indication or evidence of malignant tumor was noticed Figure 2 (C). In next group of Sprague Dawley rats, DMBA induced breast tumor tissues were treated with 500mg/kg of ethanolic extract of Capsicum annuum, as a consequence, ductal hyperplasia (adenosis) isolated by collagenous fibro stroma was observed. No sign or evidence of malignant tumor was examined Figure 2 (D). A higher dose of ethanolic extract (1000 mg/kg) of Capsicum annuum showed even more significant results with tissues of abscessed lesion comprised of diffused neutrophils infiltration. Stroma manifested swarmed vessels and collagenous fibrous tissue. No sign or evidence of malignant tumor was observed Figure 2 (E). Overall breast tissues obtained from positive control group (G₁) exhibited tissue infiltration in lobules, proliferated ducts and fibrous stroma. Necrosis was also observed in large areas (Figure 2 B). However, the tissue sections obtained from the breast of rats administered with doxorubicin cyclophosphamide depicted fewer infiltration and necrosis (Figure 2 C); likewise the rats which were being provided with 500 mg/kg and 1000 mg/kg ethanolic extract of Capsicum annuum also revealed less infiltration and necrosis. The treatment groups G₃ and G₄ were capable to repair some of the damaged breast tissues towards normal (Figure 2 D; Figure 2 E).

Table 2 Effect of *Capsicum annuum* extract on biomarkers of breast cancer in blood of various groups of rats

groups of fats								
Treatments Cancer antigen 1		Carcinoembryonic	Cancer antigen 27-29					
	(U/mL)	antigen (ng/mL)	(U/mL)					
G0	11.21 ± 1.92^{d}	0.12 ± 0.02^{c}	22.4 ± 3.83^{c}					
G1	35.69 ± 4.25^{a}	8.36±1.43 ^a	44.6 ± 4.56^{a}					
G2	21.39±3.66°	1.42±0.24 ^b	29.4 ± 5.03^{bc}					
G3	28.45 ± 4.87^{b}	2.32±0.39 ^b	34.7 ± 4.80^{b}					
G4	25.67 ± 4.39^{bc}	1.98±0.33 ^b	31.8 ± 4.94^{b}					

Values indicated are means \pm SD of ten values

Mean values within a row, having distinct superscript are considerably different from each other

Table 3 Effect of *Capsicum annuum* extract on serum biomarkers in blood of various groups of rats

Treatments	TAC (mmol/L)	TOS (µmol/L)
G0	1.99±0.34 ^a	7.16±1.22°
G1	1.44±0.26 ^b	16.08±2.75 ^a
G2	1.68±0.28 ^{ab}	11.6±1.98 ^b
G3	1.81±0.31 ^{ab}	9.23±1.58 ^{bc}
G4	1.92±0.32 ^a	7.13±1.22°

Values indicated are means \pm SD of ten values

Mean values within a row, having distinct superscript are considerably different from each other

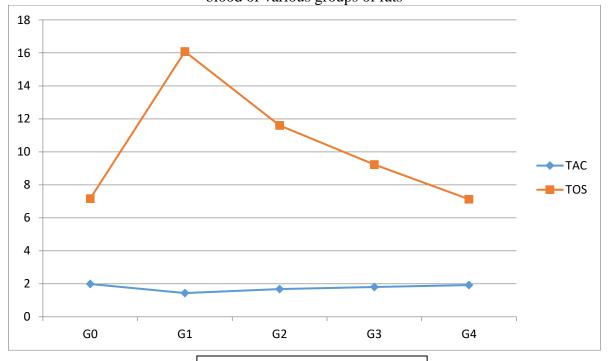
Table 4 Effect of *Capsicum annuum* extract on tumor variables in various groups of rats

Treatments	Tumor weight	Tumor burden	Tumor volume	Tumor incidence
	(mg)	(n)	(mm^3)	(%)
G0	0.00 ± 0.00^{d}	0.00 ± 0.00^{c}	0.00 ± 0.00^{d}	0.00 ± 0.00^{d}
G1	121.7±5.27 ^a	7.81±1.41 ^a	0.79±0.14 ^a	5.98±1.14 ^a
G2	33.00±3.65°	3.82 ± 0.68^{b}	0.25 ± 0.04^{c}	2.65±0.47°
G3	65.00±3.49 ^b	4.00 ± 0.72^{b}	0.45 ± 0.08^{b}	4.00±0.72 ^b
G4	53.67±2.64 ^b	4.56±0.82 ^b	0.43 ± 0.07^{b}	4.80 ± 0.86^{b}

^{*}n denotes the no. of tumors per rat; values are indicated as mean \pm SD

Mean values within a row, having distinct superscript are considerably different from each other

Figure 1 Graphical representation of effect of *Capsicum annuum* extract on serum biomarkers in blood of various groups of rats



TAC (mmol/L); TOS (µmol/L)

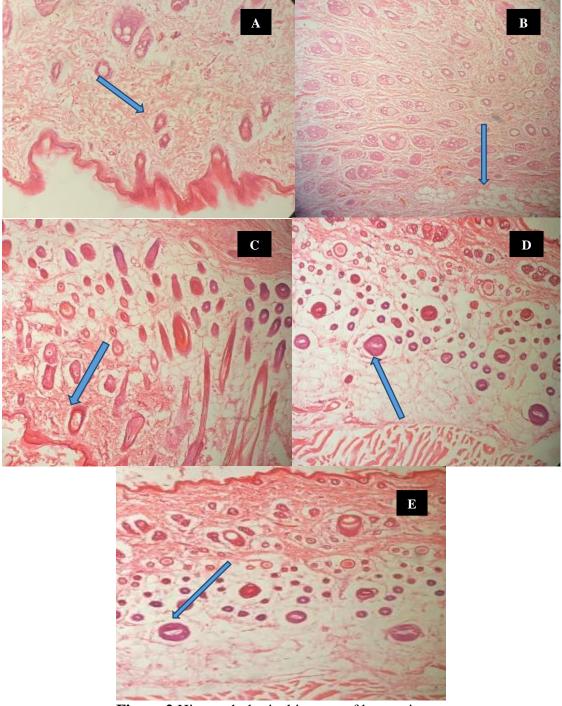


Figure 2 Histopathological images of breast tissues

Figure 2(A) shows the image of normal breast tissues having no indication or sign of malignant cancer. Figure 2(B) shows the areas of blackish lump with necrosis. Figure 2(C) shows the image of breast tissues with areas of adenosis and fibrosis. Figure 2(D) shows the image of breast tissues with adenosis isolated by collagenous fibro stroma. Figure 2(E) exhibits the image of breast tissues with stroma manifested swarmed vessels and collagenous fibrous tissue.

4. Discussion

Findings of the present research showed that ethanolic extract of *Capsicum annuum* had a substantial effect on breast cancer. Significant reduction in levels of breast cancer biomarkers including CA 15.3, CA 27.29 and CEA was noticed. The end points of tumorigenesis such as tumor weight, volume, burden and incidence were significantly decreased in groups treated with ethanolic extract of *Capsicum annuum* as compared to the DMBA treated group. There was also a significant

effect of extract on serum biomarkers (P≤0.05). The histopathological analysis of breast tissues which were being provided with capsicum extract showed no evidence or sign of hyperplasia and malignant tumor. The results of current study are in accordance to the findings of previous studies. Lin et al. (2017) conducted an efficacy study to associate serum levels of CA 15.3 and healing response in patients with advanced breast carcinoma. It was also reported that change in levels of CA 15.3 showed the healing response and it functions as an important marker principally in patients with unobtainable abrasions. Coppola et al. (2021) determined the levels of CA 27.29 in the women after 2.5 years of cancer diagnosis and it was examined that higher levels of CA 27.29 were associated with disease progression. Hall et al. (2019) conducted a trial to evaluate the anti-cancer potential of taxol against breast carcinoma. It was found that levels of CEA were increased in rats which were receiving no dose. Furthermore, drug and taxol treated rats exhibited lower CEA levels. The CEA value in rats administered with taxol was 4.9±0.84 ng/mL in comparison to the positive control rats (9.6±1.8 ng/mL). Elwan et al. (2020) determined the effect of Capsicum annuum dietary supplementation on blood biochemistry, hematology and antioxidant capacity in rats. The findings of this study showed greater total antioxidant capacity after consumption of 200g of Capsicum annuum in treatment groups. Higher levels of TAC are linked with the absorption of capsaicinoids and phytochemicals in bloodstream. It was also found that oxidative damage was reduced to a significant level owing to decrease in oxidation. . Capsaicin is a well-known substance found in capsicum and prevents the initiation of reactive oxygen species (ROS) which are generated by oxidative damage Luo et al. (2021). The results exhibited maximum improvement in serum levels of TAC and TOS. Markedly, 32% reduction in oxidative stress was observed after capsaicin treatment. Henry et al. (2020) examined the tumor variables in various groups of rats. The tumor weight, incidence, volume and burden were higher in rats treated with DMBA as 122.7 ± 3.01 mg, $6.00 \pm$ 0.89 %, $0.83 \pm 0.07 \text{ mm}^3$ and $7.83 \pm 0.75 \text{ n}$ correspondingly. The significant decrease in these tumor variables was noticed in rats which were being administered with T. Chebula ethanolic extract as $54.67 \pm 2.58 \text{ mg}$, $4.83 \pm 0.75 \%$, $0.44 \pm 0.01 \text{ mm}^3$ and $4.66 \pm 1.36 \text{ n}$. Deepalakshmi and Mirunalini (2013) also evaluated the potential of Ganoderma lucidum on mammary tumor incidence. Breast cancer in rats was induced by a single injection of DMBA (30mg) subcutaneously. In a positive control group, the breast cancer incidence was 100% whereas it was 70% in G. lucidum treated groups. The tumor volume was also less in a group treated with Ganoderma lucidum extract as compared to the DMBA group.

5. Conclusion

Herbal and traditional medicinal approaches have been used for many years throughout the world at household level but not adapted at industrial and research level which needs to be extensively studied in animals for the sake of their use in pharmacological based medicines appropriate for the treatment of human beings without any harmful effect. Extracts and herbal medicines have been used in several efficacy trials but there was biasness owing to other biologically active substances in extracts which can interrelate with the biological role of any specific substance of interest and depicts the biased consequences. The phytochemicals present in plants are majorly recognized for their defensive actions. Among them flavonoids and phenolics are the most important ones having anticancer, antimicrobial, antioxidant and anti-inflammatory properties. They employ their therapeutic effects by stimulating the immune system, slowing the growth of cancerous cells and preventing the DNA damage which leads to the cancer progression and various other ailments. In this perspective, green Capsicum annuum known as "Shimla mirch" contains a variety of biological substances in abundant amounts with anti-cancerous and immune enhancing activities. The present research was planned to explore the anti-cancerous and anti-tumor effects of green Capsicum annuum against breast cancer. Results of the present research showed that ethanolic extract of Capsicum annuum had a significant effect on breast cancer. Significant reduction in levels of breast cancer biomarkers including CA 15.3, CA 27.29 and CEA was noticed. The end points of tumorigenesis such as tumor weight, volume, burden and incidence were significantly decreased in groups treated with ethanolic extract of Capsicum annuum as compared to the DMBA treated group. There was also a significant effect of extract on serum biomarkers ($P \le 0.05$). The histopathological analysis of breast tissues which were being provided with capsicum extract showed no evidence or sign of hyperplasia and malignant tumor. Our study findings reported that *Capsicum annuum* ethanolic extract might be useful in the prevention of breast cancer. Furthermore, keeping in view the above mentioned results, *Capsicum annuum* should be utilized as a viable replacement for nutritive and synthetic sweeteners in various foodstuffs to avoid the occurrence of numerous physiological diseases.

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