

**Pharmacological Study on *Panax ginseng* C.A. MEYER V.<sup>1)</sup>  
Effects of Red Ginseng on the Experimental Disseminated Intravascular  
Coagulation (4). On Ginsenoside-Rg3, Rh1 and Rh2**

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20S, 20R ginsenoside-Rg3, 20S, 20R ginsenoside-Rh1 and ginsenoside-Rh2 isolated from Red Ginseng were investigated for their effect on blood platelet aggregation and thrombin-induced conversion of fibrinogen to fibrin *in vitro*.

20S, 20R ginsenoside-Rg3 inhibited collagen- and ADP-induced blood platelet aggregation. 20S ginsenoside-Rg3, 20S, 20R ginsenoside-Rh1 inhibited the thrombin-induced conversion of fibrinogen to fibrin.

**Keywords**—*Panax ginseng*; red ginseng; ginsenoside-Rg3; ginsenoside-Rh1; ginsenoside-Rh2; blood platelet aggregation; thrombin; fibrin

In the previous paper,<sup>2)</sup> we reported the effect of major components of *Panax ginseng*, ginsenoside-Ro, Rb1, Rb2, Rc, Re, Rg1 and Rg2 obtained from *n*-BuOH soluble fraction of *Panax ginseng*, on blood coagulative and fibrinolytic system *in vitro*.

Recently, Kitagawa *et al.*<sup>3)</sup> isolated 20S ginsenoside-Rg3, 20R ginsenoside-Rh1, ginsenoside-Rh2 from Red Ginseng. Odajima *et al.*<sup>4)</sup> reported that ginsenoside-Rh2 inhibited the multiplication of tumor cells.

We reported that ethylacetate-soluble fraction of *Panax ginseng* extract, containing these saponins inhibited blood platelet aggregation and thrombin-induced conversion of fibrinogen to fibrin.

The present paper deals with a study on the effect of 20S, 20R ginsenoside-Rg3, 20S, 20R ginsenoside-Rh1 and ginsenoside-Rh2 on blood platelet aggregation and conversion of fibrinogen to fibrin.

#### Materials and Methods

**Materials**—20S, 20R ginsenoside-Rg3, 20S, 20R ginsenoside-Rh1 and ginsenoside-Rh2 were obtained from Red Ginseng as reported previously.<sup>3)</sup> Collagen and ADP disodium salt: Sigma Chemical Co., USA., thrombin: Mochida Ltd., Japan.

**Animals**—Male rats of Wistar-King strain, weighing 150–200 g were used for the present experiment. They were fed on a standard diet (Nihon Clea, Japan) for at least 7 days and were deprived of food for 24 hr before the start of the experiments.

**Blood platelet aggregation**—Rats were anesthetized with pentobarbital and blood samples were collected by cardiac puncture with plastic syringes. Nine ml of blood and 1 ml of heparin solution (10 U/ml) were transferred into a plastic tube and centrifuged at 1,000 rpm for 10 min. The supernatant platelet-rich plasma (PRP) was removed with a siliconized pipet and stored in sealed plastic test tubes, which was gently stirred at 5–10°C for 30 min prior to use. The red cell precipitate was recentrifuged at 3,000 rpm for 30 min to obtain platelet-poor plasma

(PPP), which was used as a maximal transmittance standard.

Blood platelet aggregation test was performed according to the method of Born *et al.*<sup>5)</sup> The aggregating agents used were collagen (500  $\mu\text{g/ml}$ ) and ADP (0.5  $\mu\text{M}$ ). A 0.2 ml aliquot of PRP was placed in a tube and stirred at 1200 rpm, at 37°C, for 1 min. Then to the reaction mixture was added a 10  $\mu\text{l}$  aliquot of a test solution and 1 min later, an aggregating agent. Blood platelet aggregation was monitored by continuous recording of light transmittance in a Husm System Platelet Aggregometer (Rika Electric Co., Japan). The extent of aggregation was estimated from the transmission maxima obtained after the addition of aggregating agents and expressed as the % increase in transmission as compared with the control. An anti-blood platelet aggregating drug, aspirin was used as a standard drug.

**Conversion of fibrinogen to fibrin**—Fibrinogen (500 mg) was dissolved in 100 ml of 0.05 M tris acetate buffer (pH 7.4) containing 0.15 M NaCl. A test solution (0.1 ml) was added to 1.8 ml of the fibrinogen solution with stirring. After 1 min, 0.1 ml of thrombin solution (0.2 U/ml) was added and the whole was gently stirred until fibrin appeared. The time required for clotting was recorded. Anti-thrombin drug, heparin was used as a standard drug.

## Results

**Collagen-induced blood platelet aggregation**—As shown in TABLE I, aspirin (as a standard drug) inhibited the collagen-induced blood platelet aggregation at a concentration of 1.0 mM. The inhibitory effect on collagen-induced blood platelet aggregation of 20S ginsenoside-Rg3, 20R ginsenoside-Rg3 and 20R ginsenoside-Rh1 at a concentration of 1.0 mM were  $21.4 \pm 4.2\%$ ,  $27.4 \pm 3.4\%$  and  $10.3 \pm 2.1\%$  and ginsenoside-Rh2 did not inhibited the collagen-induced blood platelet aggregation.

**ADP-induced blood platelet aggregation**—As shown in TABLE II, only 20R ginsenoside-Rg3 inhibited the ADP-induced blood platelet aggregation.

**Conversion to fibrinogen to fibrin**—As shown in TABLE III, the clotting time of the control with no test solution was  $201 \pm 10$  sec. The clotting time of a mixture containing heparin at a concentration of 10 U/ml was  $247 \pm 13$  sec. Addition of 20S ginsenoside-Rg3, 20S or 20R ginsenoside-Rh1 produced dose-dependent extension of the clotting time. 20R ginsenoside-Rg3 and ginsenoside-Rh2 did not extend the clotting time.

TABLE I. Effect of Ginsenosides and Aspirin on Collagen-induced Blood Platelet Aggregation

Treatment	Inhibitory percentage	
	0.5	1.0 (mM)
20S Ginsenoside-Rg3	$8.7 \pm 2.0$	$21.4 \pm 4.2$
20R Ginsenoside-Rg3	$14.2 \pm 2.2$	$27.4 \pm 3.4$
20S Ginsenoside-Rh1		$4.3 \pm 3.0$
20R Ginsenoside-Rh1		$10.3 \pm 2.1$
Ginsenoside-Rh2		$3.8 \pm 1.6$
Aspirin	$8.0 \pm 2.7$	$21.6 \pm 3.2$

Each value represents the mean  $\pm$  S.E. of 5 experiments.

TABLE II. Effects of Ginsenosides and Aspirin on ADP-induced Blood Platelet Aggregation

Treatment	Inhibitory percentage	
	0.5	1.0 (mM)
20S Ginsenoside-Rg3	$4.0 \pm 1.2$	$10.3 \pm 2.5$
20R Ginsenoside-Rg3	$12.3 \pm 3.2$	$23.4 \pm 3.4$
20S Ginsenoside-Rh1		$3.2 \pm 1.2$
20S Ginsenoside-Rh1		$7.2 \pm 0.9$
Ginsenoside-Rh2		$2.1 \pm 0.7$
Aspirin		$2.2 \pm 0.9$

Each value represents the mean  $\pm$  S.E. of 5 experiments.

TABLE III. Effects of Ginsenosides and Heparin on Conversion of Fibrinogen to Fibrin Induced by Thrombin

Treatment	Clotting time of fibrinogen (sec)		
	0	0.5	1.0 (mm)
Control	201 ± 10		
20S Ginsenoside-Rg3		210 ± 7	248 ± 8**
20R Ginsenoside-Rg3		205 ± 10	217 ± 8
20S Ginsenoside-Rh1		243 ± 11**	294 ± 7**
20R Ginsenoside-Rh1		223 ± 8*	258 ± 4**
Ginsenoside-Rh2		198 ± 7	203 ± 6
Heparin (10 U/ml)	247 ± 13**		

Each value represents the mean ± S.E. of 5 experiments.

Significantly different from control, \* $p < 0.05$ , \*\* $p < 0.01$ .

### Discussion

It has already been reported that fat-soluble fraction of Red Ginseng shows platelet aggregation inhibition and anti-thrombin action. In this paper were studied platelet aggregation inhibition and anti-thrombin action of 20S ginsenoside-Rg3, 20R ginsenoside-Rh1, 20R ginsenoside-Rh1 and ginsenoside-Rh2 obtained from the fat-soluble fraction of Red Ginseng.

20R ginsenoside-Rg3 was demonstrated to inhibit collagen- and ADP-induced platelet aggregation. However the effect of 20S (natural type) was found to be weaker than that of 20R (not-natural type or artifact). The same trend was noted in ginsenoside-Rh1.

20S ginsenoside-Rg3, 20S ginsenoside-Rh1 and 20R ginsenoside-Rh1 were effective on thrombin-induced conversion of fibrinogen. In this system, 20S was more active than 20R.

A number of works are available on the physiological activity of *Panax ginseng*. However most works are on the saponins contained in the *n*-BuOH soluble fraction and scarcely any are on the saponins in the fat-soluble fraction. Fat-soluble fraction, is contained in larger quantity in Red Ginseng than in White Ginseng. The present work showed that 20S ginsenoside-Rg3 and 20R ginsenoside-Rh1 which are the particular components of Red Ginseng, possessed anti-thrombin action. It is interesting that different preparation procedures of crude drugs result in the production of crude drugs of different pharmacological activities.

### References and Notes

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