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PHARMACEUTICAL SCIENCES**<http://doi.org/10.5281/zenodo.3550966>Available online at: <http://www.iajps.com>**Research Article****ANALYSIS OF LEVEL OF ANTIOXIDANTS IN THE  
PROGNOSIS OF HYPERTENSION****Ghulam Mustafa<sup>1</sup>, Dr. Qindeel Fatima <sup>2</sup>, Hina Maqbool<sup>3</sup>**<sup>1</sup>Tehsil Headquarter Hospital Khairpur Tamewali Bahawalpur<sup>2</sup>BVH Bahawalpur<sup>3</sup>Tehsil Headquarter Hospital Khairpur Tamewali Bahawalpur**Abstract:**

**Objectives of the study:** The main objective of the study is to find the level of antioxidants in case of hypertension patients because hypertension directly effect on blood level and heart of the patient. **Methodology of the study:** This cross sectional study was conducted in Tehsil Headquarter Hospital Khairpur Tamewali Bahawalpur during January 2019 to August 2019. All the data was collected according to the rules and regulations of authority. The data was collected from both genders of age between 30 to 50years. The blood was drawn from all patients for further analysis of antioxidants. **Results:** Our results showed that the level of antioxidants increases in hypertension patients due to increase in blood flow. The level of MDA, SOD, GSH and CAT vary in a different manner. The level of SOD become decreases due to hypertension. Antioxidants are compounds that are able to trap ROS and thus may be capable of reducing oxidative damage and possibly blood pressure. **Conclusion:** In conclusion, we found that hypertension increased free radical levels in the blood. According to our study, levels of free radicals increase in the blood, which may stimulate antioxidant defense systems of body during hypertension.

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**INTRODUCTION:**

Hypertension is a significant public health problem, with a worldwide prevalence of 40.8% and a control rate of 32.3. Hypertension is a noteworthy hazard factor for various genuine health conditions, including cardiovascular ailment, cerebrovascular malady, and constant kidney illness<sup>1</sup>. Worldwide, 9.4 million passing are credited to difficulties from hypertension, including 45% of all passing because of coronary vein illness and 51% of all passing because of stroke<sup>2</sup>. These relations are steady in the two people, in youthful, moderately aged, and more seasoned subjects, among different racial and ethnic gatherings, and inside and between nations. In spite of the fact that there is a continuum of cardiovascular hazard crosswise over levels of circulatory strain, the characterization of grown-ups as indicated by pulse gives a system to differentiating levels of hazard related with different circulatory strain classes and for characterizing treatment edges and helpful objectives<sup>3</sup>. Mammalian cells are equipped with both enzymatic and non-enzymatic mechanisms of antioxidant defenses to reduce the cellular injury caused by contact with reactive oxygen species (ROS)<sup>4</sup>. ROS, such as hydrogen peroxide, super oxide and hydroxyl radicals, may target membranes causing peroxidation of lipids. This may lead to an increased impermeability of cell and loss of endothelial integrity. ROS are produced endogenously or exogenously. *In vivo*, free radicals are created during normal aerobic respiration, phagocytosis,  $\beta$ -oxidation of fatty acids in peroxisomes and by auto-oxidation of various molecules<sup>5</sup>.

In cell, mitochondria constitute the main physiologic source of reactive oxygen species, which are generated during mitochondrial respiration. Superoxide radicals that are formed by side reactions of the mitochondrial electron transport chain or by an NADH-independent enzyme, can be converted to  $H_2O_2$  and further to a powerful oxidant, the hydroxyl radical. Oxidative stress in organisms leads to the oxidation of all major biomolecules, such as DNA, proteins and lipids. Among these targets, the peroxidation of lipids is particularly devastating, because the formation of lipid peroxidation product leads to spread of free radicals<sup>6</sup>. The general process of lipid

peroxidation consists mainly of initiation, propagation and termination. Commonly applied method to analyze oxidative stress is to determine lipid peroxidation with the thiobarbituric acid reactive substances<sup>7</sup>.

**Objectives of the study**

The main objective of the study is to find the level of antioxidants in case of hypertension patients because hypertension directly effect on blood level and heart of the patient.

**METHODOLOGY OF THE STUDY:**

This cross sectional study was conducted in Tehsil Headquarter Hospital Khairpur Tamewali Bahawalpur during January 2019 to August 2019. All the data was collected according to the rules and regulations of authority. The data was collected from both genders of age between 30 to 50years. The blood was drawn from all patients for further analysis of antioxidants. Blood was centrifuged at 4000 rpm for 10 minutes and serum was separated. Blood samples were collected into EDTA tubes. Subsequently, indomethacin and butylate dhydroxy toluene were added into the plasma samples. Blood samples were stored at  $-80^{\circ}C$ .

**Statistical Analysis**

Statistical analyses (Anova Test and Post Hoc) were performed using the SPSS software program (17.0). All results were expressed as the mean  $\pm$  standard deviation (SD). P value below 0.05 was considered to be statistically significant.

**RESULTS:**

Our results showed that the level of antioxidants increases in hypertension patients due to increase in blood flow. The level of MDA, SOD, GSH and CAT vary in a different manner. The level of SOD become decreases due to hypertension. Antioxidants are compounds that are able to trap ROS and thus may be capable of reducing oxidative damage and possibly blood pressure. Antioxidants terminate the chain reactions of ROS by removing free radical intermediates, and inhibit other oxidation reactions. They do this by being oxidized themselves, so antioxidants are often reducing agents such as ascorbic acid, vitamin E or polyphenols that act by different mechanisms

**Table 01:** Analysis of Antioxidants in hypertension patients

No.of Observation	Analysis of blood	Normal $\mu\text{g/mL}$	Before treatment $\mu\text{g/mL}$	After treatment(5min) $\mu\text{g/mL}$
01	SOD	0.32 $\pm$ 0.00	0.33 $\pm$ 0.23	0.39 $\pm$ 0.00
02	CAT	4.16 $\pm$ 0.00	0.90 $\pm$ 0.00	0.43 $\pm$ 0.39
03	GSH	1.89 $\pm$ 0.00	2.48 $\pm$ 1.29	3.23 $\pm$ 0.03
04	MDA	2.35 $\pm$ 0.00	4.26 $\pm$ 0.00	4.95 $\pm$ 0.97

**DISCUSSION:**

Different sources of ROS might exist in blood vessels. One of the best characterized sources of ROS is NADPH oxidase. Several other enzymes including NO synthase, xanthine oxidase, and mitochondrial enzymes may also contribute to ROS generation. The vasculature and kidney are the rich sources of NADPH oxidase-derived ROS, having important role in vascular damage and renal dysfunction under<sup>8</sup>. This system functions as an electron donor and catalyses the reduction of oxygen by NADPH which increases the generation of superoxide upregulation of NADPH oxidase in hypertensive patients<sup>9</sup>.

The function of NADPH oxidase-derived superoxide is inactivation of NO in the reaction that forms peroxynitrite, leading to impaired endothelium dependent vasodilation. The activation of NADPH oxidase has been strongly associated with hypertension. Oxidation or deficiency of tetrahydrobiopterin (BH4) and L-arginine which are two cofactors for endothelium-derived NO synthase (eNOS) action are associated with the uncoupling of the L-arginine-NO pathway that results in increased eNOS-mediated generation of superoxide and decreased formation of NO<sup>10</sup>.

**CONCLUSION:**

In conclusion, we found that hypertension increased free radical levels in the blood. According to our study, levels of free radicals increase in the blood, which may stimulate antioxidant defense systems of body during hypertension.

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