



TO DETERMINE THE CONCENTRATION OF BROWN TOP MILLET FOR CONSUMPTION ACCORDING TO BODY WEIGHT/DAY

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ABSTRACT

Millets are a group of small-grained cereal crops known for their high nutritional value and health benefits. Brown top millet (*Urochloa ramosa*) is an introduced, warm-season grass often used in forage and pasture management systems. Millet grains come in various colours such as white, grey, yellow, or red and are gluten-free, making them suitable for individuals with celiac disease or digestive issues. Brown top millet is rich in protein, fibre, and low in carbohydrates. It has been found to lower bad cholesterol (LDL), prevent clot formation in the airways, and improve heart function. Acute oral toxicity studies have shown that brown top millet is safe to consume up to a dose of 5000 mg/kg. Specific concentrations of brown top millet can be provided to individuals based on their body weight per day. The LD50 (lethal dose 50%) helps identify the target organ affected by toxicity to predict potential harmful effects in humans. It has been concluded that oral administration of brown top millet does not induce histopathological alterations in the liver of mice, indicating its safety for consumption.

Keywords -Brown top millet, acute oral toxicity.

INTRODUCTION

Millets are a group of small-grained cereal crops known for their high nutritional value and resilience in marginal or low-fertile soils, requiring minimal inputs such as fertilizers and pesticides. Referred to as "smart food" or "smart crops," millets are staple foods for people living in arid and semi-arid regions, particularly in Asian and African countries. They are also known as "coarse grains" or "poor man's crop," with brown top millet gaining recognition for its importance in addressing poor ecological conditions and ensuring economic and nutritional security for small-scale farmers. Brown top millet has been identified as particularly beneficial for preventing and managing several non-communicable diseases.

To promote its popularity among farmers and consumers, systematic studies in agriculture, nutrition, toxicology, naturopathy, and biomedical science are essential. Brown top millet is gluten-free, non-acid forming, and easy to digest, making it an excellent alternative to rice and wheat in daily diets. It is rich in iron, zinc, and fiber, and contains phytochemicals such as flavonoids, tannins, quinones, and resins. The grains of brown top millet contain carbohydrates, crude fiber, and fat, contributing to its nutritional profile [1].

Millets have a rich history spanning thousands of years and hold significant importance in human civilization. Believed to have originated in Africa and Asia, millets have been cultivated since ancient times. They were among the first grains to be domesticated by early

agricultural societies and have served as a staple food in many regions worldwide for centuries. In ancient India, millets played a crucial role in the diet and agricultural practices. They were cultivated alongside other grains such as rice and wheat, contributing to the dietary diversity of the population. Millets were highly valued for their nutritional density, resilience to adverse growing conditions, and ability to thrive in poor soil. In addition to their nutritional benefits, millets were versatile in culinary applications. They were used to make various traditional foods, including flatbreads, porridge, and fermented beverages. The versatility

and adaptability of millets made them an essential component of ancient diets and agricultural systems, shaping food cultures and livelihoods for generations [2].

Millets have indeed left a lasting mark on African and Asian cuisines, where they continue to hold

a prominent place. Varieties like pearl millet and sorghum are staples in many African regions, providing vital nutrients and sustenance to numerous communities. In recent times, there has been a renewed interest in millets, driven by their impressive nutritional profile, environmental sustainability, and resilience to changing climatic conditions. Millets are prized for being gluten-free and packed with fiber, protein, and essential micronutrients, making them an excellent dietary choice.

Moreover, their ability to thrive with minimal water and fertilizer makes them a more environmentally friendly option compared to crops like rice and wheat, contributing to agricultural sustainability. The resurgence of interest in millets reflects a growing recognition of their potential to address contemporary challenges in food security, nutrition, and sustainable agriculture. As we delve deeper into the history of millets, we uncover their enduring legacy as valuable crops that have nourished and sustained communities for millennia. [3, 4].



Fig. 1.BTM

Nomenclature of brown-top millet [5]

Common name – Dixie signal grass

Scientific name – *Brachiaria ramosa* (L.) Stapf, *Panicum ramosum* L., *Urochloa ramosa* (L.) Nguyen

Taxonomic rank [6]

Kingdom – Plantae Phylum – Magnoliophyta Class – Liliopsida

Subclass – Commelinidae Order – Cyperales

Family – Poaceae Genus – *Urochloa*

Classification of millets [7]



Fig2.Classification of millets

Geographical distribution of brown top millet:

Browntopmillet(*Urochloaramosa*)thrivespredominantlyintropicalandsubtropicalregions,spanning

SouthAsia,Africa,andpartsofSoutheastAsia.Belowarekeyareaswherebrowntopmilletcultivation is common [8].Brown top millet, a staple crop across several Indian states such as Maharashtra, Karnataka, Tamil Nadu, Andhra Pradesh, Telangana, and Odisha, is predominantly grown in dry and semi-arid regions, relying mainly on rainfall. This resilient crop is also cultivated in Africa, notably in Nigeria, Sudan, Ethiopia, Uganda, and Kenya, where its nutritional value and ability to withstand droughts make it a vital food and fodder source. In Southeast Asia, countries like Vietnam, Thailand, and Myanmar cultivate brown top millet for both human consumption and animal feed, benefiting from warm, moderatelyhumid climates. Moreover, brown top millet is cultivated in parts of Australia, the Middle East, and the Americas, although its distribution is more limited compared to South Asia and Africa. Its adaptability to hot, dry climates and its versatility as a food crop and forage grass have led to its widespread cultivation globally [9].

NutritionalAttributes: Brown top millet possesses a unique nutritional profile that benefits both the body and mind. It is nutrient-denseandhighinenergy.Infact,100gramsofBrownTopMilletcontainsmorecalories(338 Kcal) and carbohydrates (71.32 grams) than a combination of wheat, sorghum, proso millet, finger millet, barnyardmillets, and foxtailmillets.Additionally, millets are abundantin phytochemicals, also referred to as secondary metabolites, which encompass flavonoids, quinones,phenols,tannins,and alkaloids, along side carbohydrates and proteins. Here's the nutritional compositionofBrownTop Millets per 100 grams: [10, 11].

Table1.Nutritional composition of BrownTopMillets

Sr.no.	Nutrients	Composition
1	Protein(g)	11.5
2	Fiber(g)	12.5
3	Minerals(g)	4.2
4	Iron(mg)	0.65
5	Calcium(mg)	00.1
6	Thiamine (mg)	420
7	Riboflavin(mg)	290
8	Zinc (mg)	2.7
9	Potassium(mg)	408
10	Phosphorus(mg)	276

11	Sodium(mg)	7
12	Copper(mg)	1.23
13	Magnesium (mg)	95

Health benefit of Brown Top Millet: Brown top millet boasts a spectrum of health advantages, rendering it an excellent choice for various dietary requirements. Primarily, it stands out as an optimal grain for individuals managing diabetes, owing to its low glycaemic index and elevated carbohydrate content. These properties contribute to stabilizing blood sugar levels, enhancing insulin sensitivity, and regulating HbA1C levels. Furthermore, its gluten-free nature makes it a suitable alternative for individuals with celiac disease or gluten sensitivity. Moreover, brown top millet facilitates weight loss due to its rich fibre content, containing 12.5 grams of fibre per 100 grams of grains. This high fibre content extends the duration food remains in the digestive system, making it a preferred option for those pursuing weight reduction goals [12].

Furthermore, brown top millet plays a significant role in promoting digestion and gut health, making it an excellent alternative for individuals coping with conditions like celiac disease and irritable bowel syndrome. Its regular consumption can enhance the body's capacity to break down and absorb carbohydrates, thereby reducing

bloating, cramps, and regulating bowel movements, consequently alleviating constipation. Additionally, brown top millet contributes to heart health by mitigating blood pressure and lowering the risk of cardiovascular diseases. A recent meta-analysis study highlighted that the consumption of millets led to an 8% reduction in total cholesterol and a 5% decrease in diastolic blood pressure, underscoring its potential to enhance heart health. Lastly, brown top millet is replete with essential nutrients including iron, magnesium, phosphorus, zinc, B vitamin such as niacin, thiamine, and folate, as well as protein and fibre, rendering it a highly nutritious addition to any diet [13].

Toxicity:

Toxicity is the degree to which a substance can harm living organisms or ecosystems. It is a fundamental concept in toxicology, the study of the adverse effects of chemicals on biological systems. Toxicity can vary depending on factors such as the type of substance, its concentration, duration of exposure, route of exposure, and individual susceptibility [14].

- **Acute oral**

toxicity:

Acute oral toxicity refers to the harmful effects that manifest when a substance is consumed in a single, concentrated dose within a brief timeframe. Typically, this toxicity is evaluated through laboratory

experiments where test animals are orally administered the substance, and any ensuing impacts on their health and well-being are monitored and documented. The outcomes of acute oral toxicity assessments serve to gauge the potential hazards associated with ingesting a specific substance, whether it be a chemical, pesticide, pharmaceutical drug, or another product.

The toxicity level of a substance is often quantified as an LD50 value, representing the dose at which 50% of the test animals succumb to the exposure [18]. Regulatory agencies around the world use data from acute oral toxicity studies to establish safety guidelines and regulations for the use and handling of substances to protect human health and the environment. Understanding the acute oral toxicity of a substance is crucial for assessing its potential hazards and ensuring appropriate safety measures are in place to prevent harmful exposures [22].

- **Types of toxicity:**

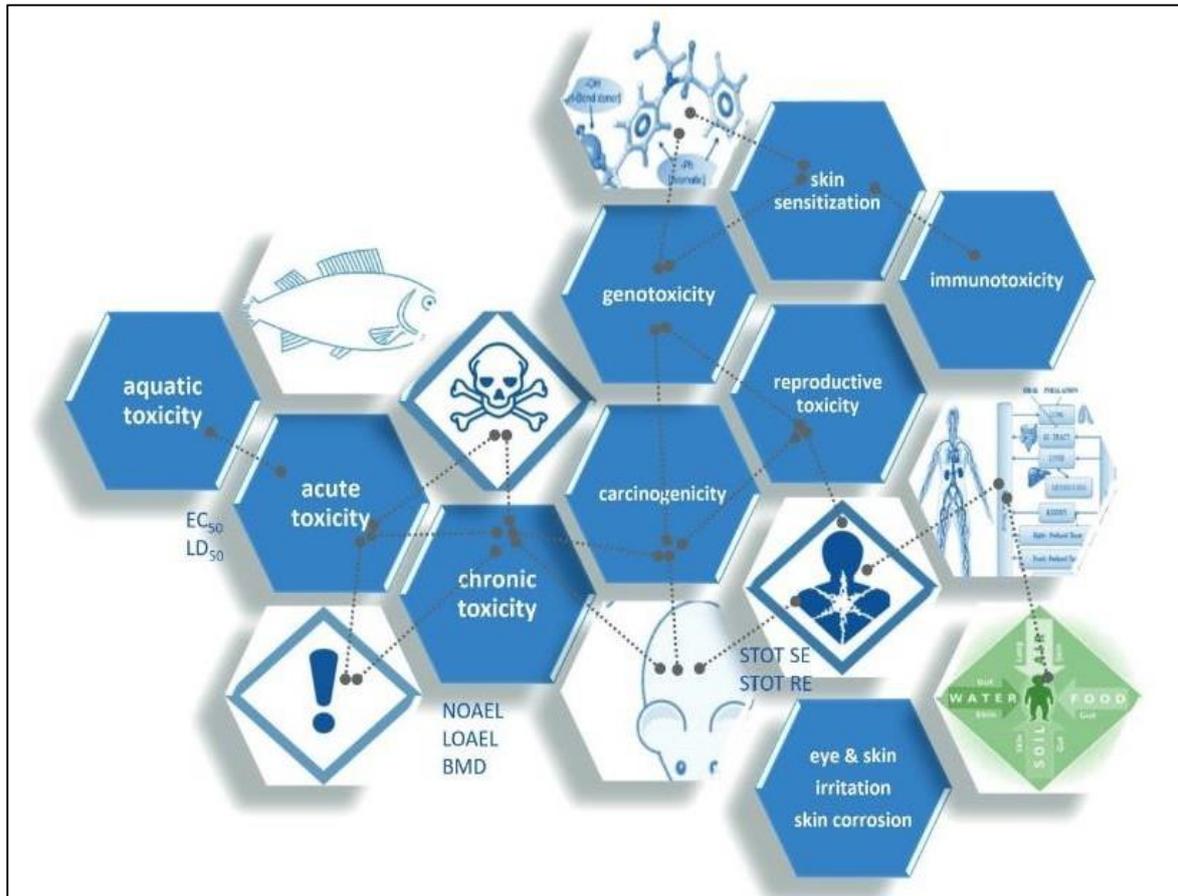


Fig3.Typesof Toxicity [15]

Mechanism of acute oral toxicity [17-19]:

Acute oral toxicity refers to the adverse effects that occur shortly after the ingestion of a substance. The mechanism of acute oral toxicity can vary depending on the specific substance involved, but there are some general mechanisms that can contribute to the toxic effects of ingested substances:

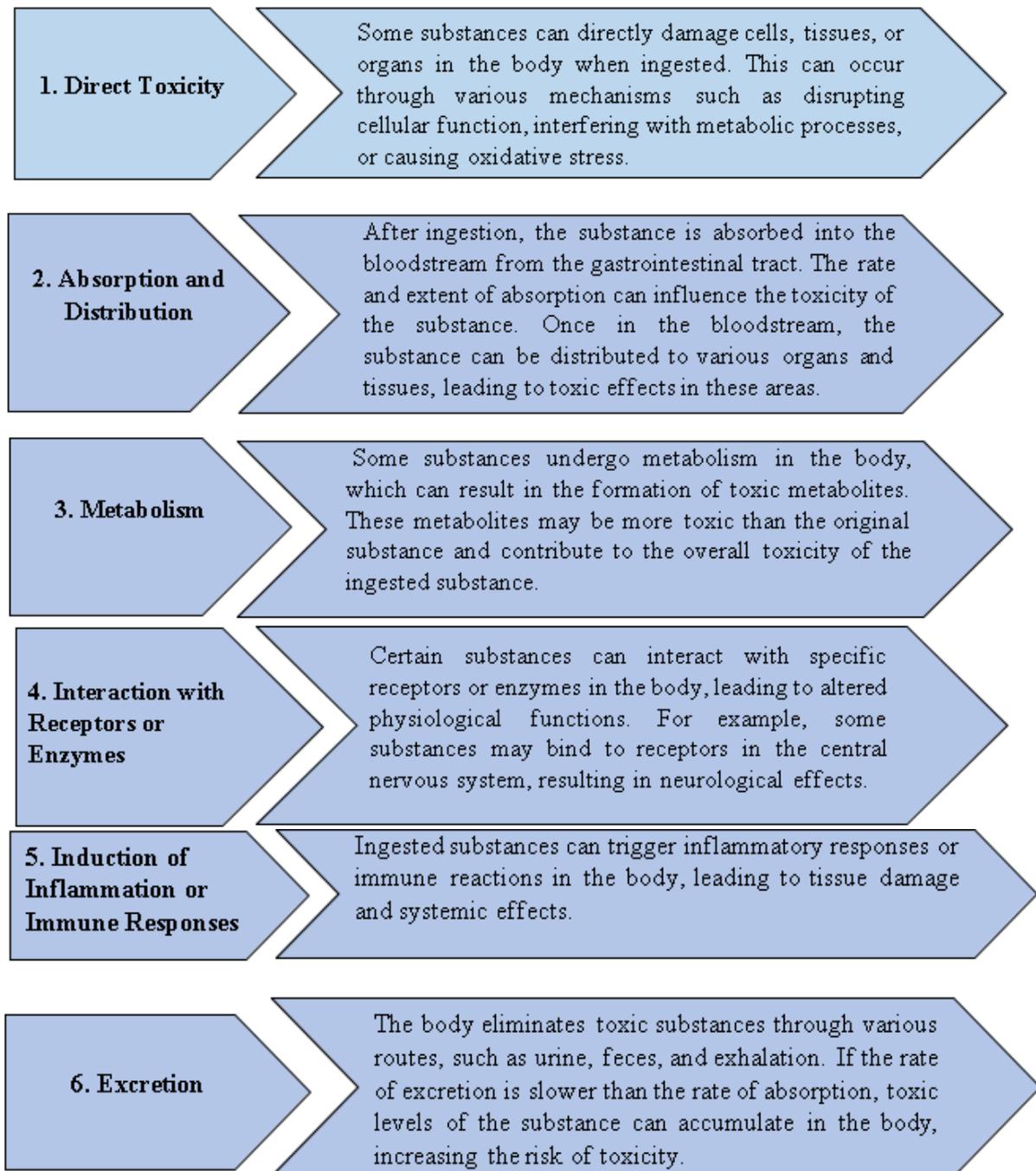


Fig. 4. Mechanism of acute oral toxicity

Test **Parameter** [16]:
 Atypical blood test that gives vital information about the many cell types in your blood, such as red blood cells, white blood cells, and platelets, is the complete blood count (CBC). The following are essential elements of CBC.

1. Haemoglobin (RBCs)
2. White Blood Cells (WBCs)
3. Platelets:
4. Serum glutamic pyruvic transaminase (SGPT)
5. Interleukin 6
6. IL8 (Interleukin-8)
7. Total Bilirubin

MATERIALS AND EQUIPMENTS [17-20]**Material for Animal Trial****Table 2. Requirement of Animals**

Sr. No.	Species	Rat
1	Strain	Wisterrat
2	Age and sex	Non-pregnant and nulliparous females
3	Bodyweight range	80-120gm

Initial parameter to check-

1. CBC (complete blood count).
2. SGPT (Serum glutamic pyruvic transaminase)
3. IL-6 and IL-8 (ELISA AND PCR test)
4. Total bilirubin

Final parameter to check-

1. CBC (complete blood count)
2. SGPT (Serum glutamic pyruvic transaminase)
3. IL-6 and IL-8 (ELISA AND PCR test)
4. Total bilirubin

Procedure of animal trial

Step 1: Three overnight fasting female rats were administered the test drug diluted in carboxy methylcellulose at the dose of 300 mg/kg body weight. The rats were deprived of food overnight before dosing and 2 hours after the dosing. Water was allowed ad libitum throughout the study period. All the animals were observed for 14 days after dosing.

Step 2: Three overnight fasting female rats were administered test drug diluted in carboxy methylcellulose at the dose of 300 mg/kg body weight, after animals were found to be safe in step 1. The rats were deprived of food overnight before dosing and 2 hours after the dosing. Water was allowed ad libitum throughout the study period. All the animals were observed for 14 days after dosing.

Step 3: After confirmation of safety at 300 mg/kg at previous step, 3 overnight fasting female rats were again administered with test drug the diluted in carboxy methyl cellulose at the dose of 2000 mg/kg body weight. The rats were deprived of food overnight before and 2 hours after the dosing. Water. All the animals were observed for 14 days after dosing.

Step 4: Step 3 was again repeated after confirmation of the safety at 2000 mg/kg of Dose.

OBSERVATION AND RESULTS

Animals were observed individually for first 30, 60, 120, 180 and 240 minutes after dosing, with special attention and once daily thereafter, for a total of 14 days. However, the duration of observation was not fixed rigidly and was determined by the toxic reactions and time of onset and length of recovery period. All observations of toxic signs were systematically recorded for each animal in the daily observation record format.

Clinical Signs and Symptoms: All animals were observed for the following signs: Changes in skin, fur, eyes, mucous membranes, respiratory, circulatory, and autonomic and central nervous systems, somato motor activity, behaviour pattern. Attention should be directed to the observations of tremors, convulsions, salivation, diarrhoea, lethargy, sleep and coma.

Body Weight: The body weights were recorded on test day 0 (pre-administration - fasting weight) and on days 7 and 14 post treatment or at death.

Necropsy and Pathology: All animals were subjected to gross necropsy. In gross necropsy the animals were observed at all the body openings, opened up and observed it with naked eye for any alterations in normal body organs. At this point major organs like liver, lungs, ovaries, kidneys, adrenal gland, spleen, pancreas, heart, brain etc. were

observed.

Haematology: Blood samples were collected into vacationer sterile tubes coated with EDTA as an anticoagulant. Full blood count was conducted using the Automated cell Analyzer.

Biochemistry: All biochemical estimations were carried out using standard test kits provided by Delta Lab. These kits were used according to directions given along with kits; Smart 5 Semi auto Biochemistry analyser was used for the estimation.

Procedure-

Collected blood samples were centrifuged for separation of serum/Plasma. Samples were incubated with Standard reagents samples were aspirated for desired parameter as per work instructions. Concentrations appeared on the screen were noted and mentioned in results. SGPT & Bilirubin were examined. IL-6 & IL-8 were examined using Elisa Reader.

Elisa Test

1) IL-6

Table3.IL-6

Standard Concentration	Standard No	Dilution Particulars
230ng/ml(Lyophilized)	Standard Lyophilized	Original Standard provided in the kit +40µL assay diluent
8000pg./ml	Standard No.8	34.78µL original standard +965.22µL of assay diluent
4000pg./ml	Standard No.7	500µL Standard No.8+500µL assay Diluent(1X)
2000pg./ml	Standard No.6	500µL Standard No.7+500µL assay Diluent (1X)
1000pg./ml	Standard No.5	500µL Standard No.6+500µL assay Diluent(1X)
500 pg./ml	Standard No.4	500µL Standard No.5+500µL assay Diluent(1X)
250 pg./ml	Standard No.3	500µL Standard No.4+500µL assay Diluent(1X)
125 pg./ml	Standard No.2	500µL Standard No.3+500µL assay Diluent(1X)

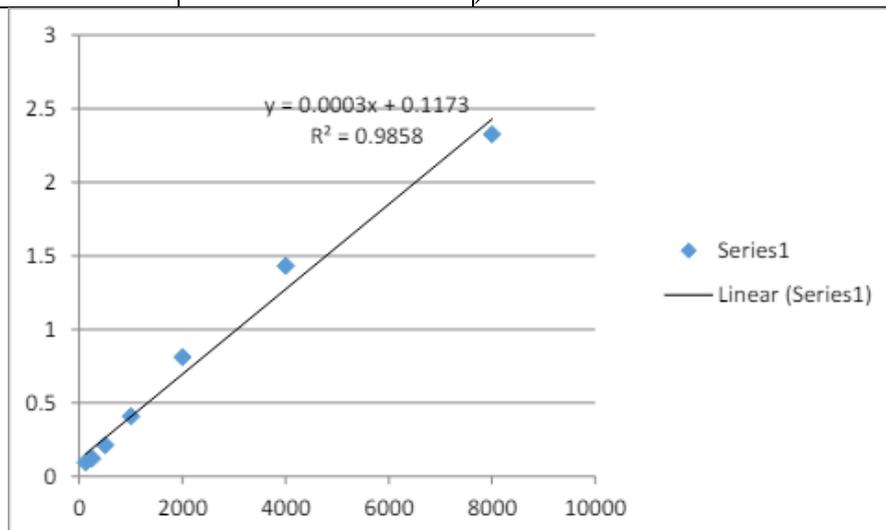


Fig5.IL-6

2) IL-8

Table4. IL-8

Standard Conc.	Standard No	Dilution Particulars
640 pg./mL	Original Standard	Original Standard provided in the kit + 40µL assay diluent
320 pg./mL	Standard no.5	34.78µL original standard + 965.22µL of assay diluent
160 pg./mL	Standard No.4	500µL Standard No.8 + 500µL Assay Diluent (1X)
80 pg./mL	Standard No.3	500µL Standard No.7 + 500µL Assay Diluent (1X)
40 pg./mL	Standard No.2	500µL Standard No.6 + 500µL Assay Diluent (1X)
20 pg./mL	Standard No.1	500µL Standard No.5 + 500µL Assay Diluent (1X)
0 pg./mL	Standard No.0	500µL Standard No.4 + 500µL Assay Diluent (1X)

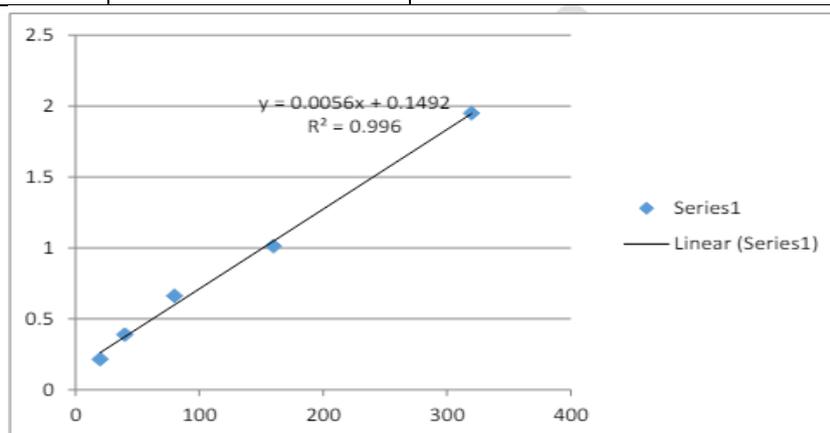


Fig6.IL-8

This study required a total of twelve female Wistar Rats to be tested at two dose levels. “Brown Top Millet” did not cause mortality in the female Wistar Rats treated at the dose of 300 mg/kg and 2000 mg/kg.

Table 5. Summary of Mortality Results

Step	Dose (mg/kg)	No. of Treated Wistar Rats	Terminally Sacrificed	Found Dead (X)
1	300	3	3	0
2	300	3	3	0
3	2000	3	3	0
4	2000	3	3	0
TOTAL	-	12	12	0

- 1) **Body Weight:** Normal Body weight gain was observed during 14 days observation period and there were no any signs of toxicity considering weight gain.

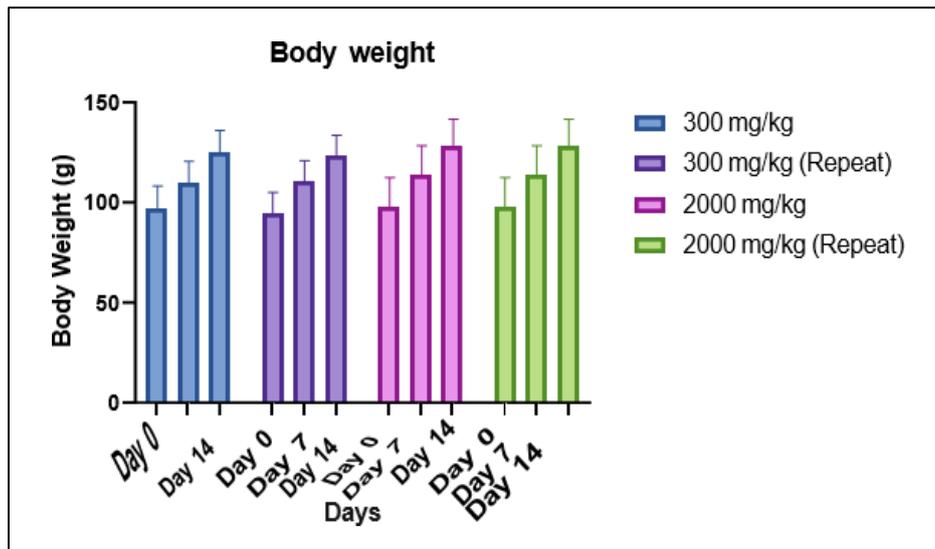


Fig7.Body Weight

Values are expressed as mean ± SD, n=3, *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001. Values were compared with lowest conc. by t-test. Values of test groups were compared with lowest conc. by One-way ANOVA by Dennett's test.

- Gross Necropsy and Pathology:** No gross pathological alterations were encountered in any of the female Wistar Rats in any group.

Table 6. Gross Necropsy

Animal Mark	Dose mg/kg	Fate (TS/FD)	Gross Observations	
1	300	H	TS	NAD
		B	TS	NAD
		T	TS	NAD
2	300	HB	TS	NAD
		BT	TS	NAD
		HT	TS	NAD
3	200	FL	TS	NAD
		FR	TS	NAD
		HL	TS	NAD
4	200	RLS	TS	NAD
		LLS	TS	NAD
		W	TS	NAD

TS: Terminally Sacrificed; FD: Found Dead;

NAD: No Abnormalities Detected Other Pathological changes observed during gross necropsy.

3) Hematology

Table 7. Hematology

Day 0																					
Animal Marking	WBC	LYM	MID	NEUT	LYM	MID	NEUT	RBC	HGB	HCT	MCV	MCH	MCHC	RDW CV	RDW SD	PLT	MPV	PDW	PCT	P_LCR	P_LCC
Units	10 ⁹ /L	(%)	(%)	(%)	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ¹² /L	g/dL	(%)	fL	pg	g/dL	(%)	fL	10 ⁹ /L	fL	fL	(%)		10 ⁹ /L
300 mg/kg																					
H	8.02	71.45	7.85	20.70	6.12	0.50	1.40	9.25	18.80	59.00	67.40	18.80	35.2	12.80	32.10	795.00	8.80	8.10	0.61	17.20	69.00
B	7.79	69.89	8.75	21.36	5.89	0.60	1.30	9.11	17.10	67.00	69.40	20.10	34.9	13.10	31.40	810.00	7.50	7.80	0.59	17.10	71.00
T	8.05	70.85	8.74	20.41	5.95	0.70	1.40	8.85	17.50	65.00	70.20	18.40	33.8	12.60	33.40	801.00	6.90	8.20	0.61	16.90	70.00
Mean	7.95	70.73	8.45	20.82	5.99	0.60	1.37	9.07	17.80	63.67	69.00	19.10	34.63	12.83	32.30	802.00	7.73	8.03	0.60	17.07	70.00
SD	0.14	0.79	0.52	0.49	0.12	0.10	0.06	0.20	0.89	4.16	1.44	0.89	0.74	0.25	1.01	7.55	0.97	0.21	0.01	0.15	1.00
300 mg/kg (Repeat)																					
H	8.11	71.85	7.95	20.20	6.11	0.60	1.40	7.95	17.90	61.20	64.40	19.40	34.2	12.20	32.20	799.00	7.90	7.80	0.63	19.50	76.00
B	8.19	69.88	8.52	21.60	5.89	0.70	1.60	8.65	18.10	59.80	63.20	20.10	31.8	12.80	32.30	795.00	8.40	8.10	0.61	18.10	74.00
T	8.20	71.12	7.89	20.99	6.10	0.60	1.50	8.45	17.50	62.10	65.40	20.50	30.8	13.70	31.20	810.00	8.10	8.30	0.59	20.10	69.00
Mean	8.17	70.95	8.12	20.93	6.03	0.63	1.50	8.35	17.83	61.03	64.33	20.00	32.27	12.90	31.90	801.33	8.13	8.07	0.61	19.23	73.00
SD	0.05	1.00	0.35	0.70	0.12	0.06	0.10	0.36	0.31	1.16	1.10	0.56	1.75	0.75	0.61	7.77	0.25	0.25	0.02	1.03	3.61
2000 mg/kg																					
H	7.75	71.10	7.70	21.20	5.95	0.60	1.20	6.92	16.80	59.40	62.10	18.50	31.8	14.20	30.40	815.00	7.90	8.20	0.63	19.80	78.00
B	8.25	72.69	7.19	20.12	6.25	0.50	1.50	7.21	17.40	63.10	64.50	19.40	32.5	13.80	33.10	798.00	8.10	7.90	0.58	18.10	72.00
T	8.14	71.57	8.12	20.31	6.14	0.60	1.40	6.49	18.10	61.50	59.80	20.10	34.5	13.70	32.10	804.00	8.20	7.80	0.62	18.50	73.00
Mean	8.05	71.79	7.67	20.54	6.11	0.57	1.37	6.87	17.43	61.33	62.13	19.33	32.93	13.90	31.87	805.67	8.07	7.97	0.61	18.80	74.33
SD	0.26	0.82	0.47	0.58	0.15	0.06	0.15	0.36	0.65	1.86	2.35	0.80	1.40	0.26	1.37	8.62	0.15	0.21	0.03	0.89	3.21
2000 mg/kg (Repeat)																					
H	8.12	72.80	7.35	19.85	6.12	0.70	1.30	6.35	18.30	62.40	59.40	20.10	33.1	12.80	30.10	810.00	8.20	8.10	0.61	19.50	71.00
B	8.21	70.45	8.25	21.30	6.21	0.50	1.50	7.61	17.90	63.10	61.20	19.80	32.2	13.10	32.50	811.00	7.80	7.50	0.59	20.50	70.00
T	8.18	72.45	7.55	20.00	5.98	0.60	1.60	7.22	18.40	63.40	62.40	20.40	31.4	13.40	31.20	798.00	8.10	8.10	0.63	18.90	74.00
Mean	8.17	71.90	7.72	20.38	6.10	0.60	1.47	7.06	18.20	62.97	61.00	20.10	32.23	13.10	31.27	806.33	8.03	7.90	0.61	19.63	71.67
SD	0.05	1.27	0.47	0.80	0.12	0.10	0.15	0.65	0.26	0.51	1.51	0.30	0.85	0.30	1.20	7.23	0.21	0.35	0.02	0.81	2.08
Day 14																					
Animal Marking	WBC	LYM	MID	NEUT	LYM	MID	NEUT	RBC	HGB	HCT	MCV	MCH	MCHC	RDW CV	RDW SD	PLT	MPV	PDW	PCT	P_LCR	P_LCC
Units	10 ⁹ /L	(%)	(%)	(%)	10 ⁹ /L	10 ⁹ /L	10 ⁹ /L	10 ¹² /L	g/dL	(%)	fL	pg	g/dL	(%)	fL	10 ⁹ /L	fL	fL	(%)		10 ⁹ /L
300 mg/kg																					
H	5.80	85.00	10.00	5.00	4.90	0.60	0.30	7.66	14.30	40.00	42.30	18.60	35.70	15.20	24.20	445.00	4.70	6.60	0.32	0.60	43.00
B	9.90	88.80	7.00	4.20	8.80	0.70	0.40	8.86	15.70	43.90	41.50	17.70	35.70	13.10	28.60	471.00	4.50	6.40	0.21	0.40	46.00
T	8.70	87.10	8.30	4.60	7.30	0.80	0.60	8.45	11.80	45.50	38.50	14.80	34.80	12.40	25.60	485.00	4.40	6.20	0.20	0.50	52.00
Mean	8.13	86.97	8.43	4.60	7.00	0.70	0.43	8.32	13.93	43.13	40.77	17.03	35.40	13.57	26.13	467.00	4.53	6.40	0.24	0.50	47.00
SD	2.11	1.90	1.50	0.40	1.97	0.10	0.15	0.61	1.98	2.83	2.00	1.99	0.52	1.46	2.25	20.30	0.15	0.20	0.07	0.10	4.58
300 mg/kg (Repeat)																					
H	7.60	86.00	9.00	5.00	6.48	0.73	0.38	7.88	13.70	42.65	41.25	16.88	34.57	13.15	26.95	499.50	4.50	6.42	0.27	0.60	49.17
B	1.89	92.86	6.13	1.00	1.62	0.12	0.15	7.67	12.40	41.90	44.34	17.29	31.54	12.15	21.96	390.91	4.26	6.16	0.08	0.14	44.07
T	5.50	84.20	5.10	10.70	2.40	1.90	1.20	7.85	12.40	47.60	46.40	18.40	32.40	13.80	28.50	489.00	6.80	8.50	0.28	0.90	56.00
Mean	5.00	87.69	6.74	5.57	3.50	0.92	0.58	7.80	12.83	44.05	44.00	17.53	32.84	13.03	25.80	459.80	5.19	7.03	0.21	0.55	49.75
SD	2.89	4.57	2.02	4.87	2.61	0.90	0.55	0.11	0.75	3.10	2.59	0.78	1.56	0.83	3.42	59.89	1.40	1.28	0.11	0.38	5.99
2000 mg/kg																					
H	6.30	75.60	14.70	9.70	3.70	1.50	1.10	8.12	12.50	41.40	45.20	17.80	34.20	14.60	24.90	458.00	7.20	8.20	0.29	1.30	54.00
B	7.60	79.30	11.20	9.50	2.90	2.60	2.10	8.21	11.90	44.80	44.90	19.20	34.80	15.20	25.60	465.00	7.80	9.60	0.31	1.50	58.00
T	5.98	83.00	11.00	6.00	2.38	2.13	1.47	8.03	12.12	43.78	47.55	18.30	33.27	14.03	26.23	426.83	6.87	8.60	0.28	1.17	57.00
Mean	6.63	79.30	12.30	8.40	2.99	2.08	1.56	8.12	12.17	43.33	45.88	18.43	34.09	14.61	25.58	449.94	7.29	8.80	0.29	1.32	56.33
SD	0.86	3.70	2.08	2.08	0.66	0.55	0.51	0.09	0.30	1.75	1.45	0.71	0.77	0.58	0.67	20.32	0.47	0.72	0.02	0.17	2.08
2000 mg/kg (Repeat)																					
H	11.20	87.00	8.00	5.00	8.40	1.20	1.60	7.25	13.50	42.40	44.20	16.58	31.80	14.80	29.40	324.00	5.20	9.40	0.41	1.20	52.00
B	10.80	79.90	10.30	9.80	5.40	2.00	3.40	7.37	12.40	48.40	51.40	17.70	32.60	13.50	28.60	356.00	4.50	8.60	0.30	0.90	65.00
T	9.90	78.30	10.50	11.20	8.60	0.80	0.50	8.65	14.40	46.50	52.70	15.90	33.20	12.80	30.50	489.00	5.70	8.30	0.25	1.00	59.00
Mean	10.63	81.73	9.60	8.67	7.47	1.33	1.83	7.76	13.43	45.77	49.43	16.73	32.53	13.70	29.50	389.67	5.13	8.77	0.32	1.03	58.67
SD	0.67	4.63	1.39	3.25	1.79	0.61	1.46	0.78	1.00	3.07	4.58	0.91	0.70	1.01	0.95	87.50	0.60	0.57	0.08	0.15	6.51

4) Biochemistry

Table8.Biochemistry (Day0)

Day0			
Groups	AnimalMarking	SGPT (U/L)	TotalBilirubin (mg/dl)
300 mg/kg	H	35.63	0.21
	B	36.18	0.31

	T	37.97	0.22
	Mean	36.59	0.25
	SD	1.22	0.06
300mg/kg(Repeat)	H	33.56	0.24
	B	35.62	0.26
	T	34.59	0.30
	Mean	34.59	0.27
	SD	1.03	0.03
	H	39.63	0.24
2000mg/kg	B	35.01	0.26
	T	35.36	0.25
	Mean	36.67	0.25
	SD	2.57	0.01
2000mg/kg(Repeat)	H	39.58	0.22
	B	39.54	0.21
	T	39.58	0.20
	Mean	39.57	0.21
	SD	0.02	0.01

Table9.Biochemistry(Day14)

Day14			
Groups	AnimalMarking	SGPT (U/L)	TotalBilirubin (mg/dl)
300 mg/kg	H	35.92	0.24
	B	32.21	0.21
	T	36.56	0.21
	Mean	34.89	0.22
	SD	2.35	0.02
300mg/kg(Repeat)	H	36.94	0.22
	B	32.68	0.23
	T	32.59	0.21
	Mean	34.07	0.22
	SD	2.49	0.01
2000mg/kg	H	34.62	0.24
	B	32.97	0.21
	T	31.59	0.23
	Mean	33.06	0.23
	SD	1.52	0.02
	H	30.59	0.22
2000mg/kg(Repeat)	B	30.69	0.21
	T	30.96	0.24
	Mean	30.75	0.22
	SD	0.19	0.02

Table10.SGPT prism data

SGTPRISM DATA		
Groups	DAY0	DAY 14
300 mg/kg	36.59 ±1.22	34.89 ±2.35
300 mg/kg	34.59 ±1.03	34.07 ±2.49
2000mg/kg	36.67 ±2.57	33.06 ±1.52

2000mg/kg	39.57±0.02	30.75 ±0.19
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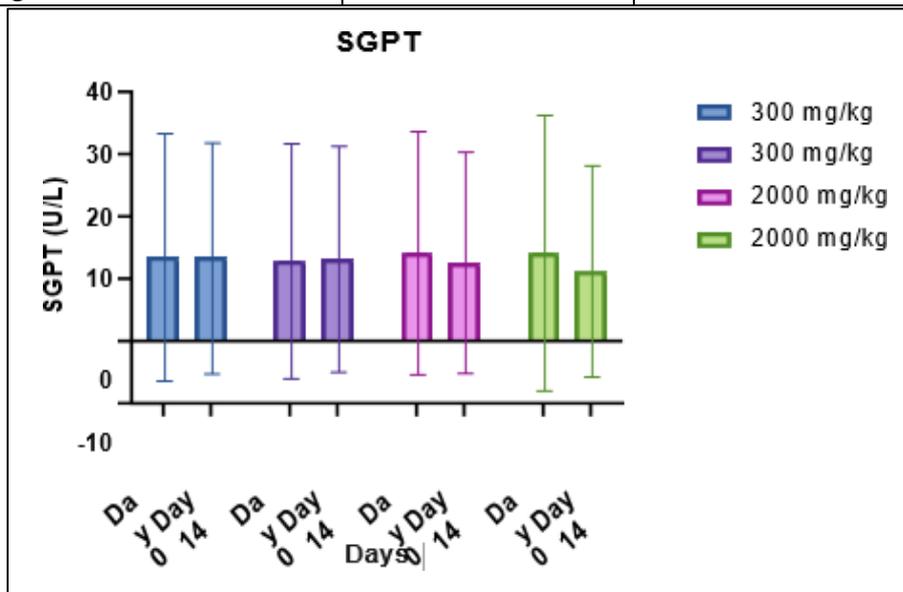


Fig8.SGPT

Values are expressed as mean±SD, n=3, *p<0.05, **p<0.01, *** p<0.001, **** p<0.0001. Values of werecompared with lowest conc. by t-test. Values of test groups were compared with lowest conc. by One-wayANOVAbyDennett’s test.

Table11.TotalBilirubin Prismdata

TotalBilirubinPrismdata		
Groups	DAY0	DAY 14
300 mg/kg	0.25 ±0.06	0.22 ±0.02
300 mg/kg	0.27 ±0.03	0.22 ±0.01
2000 mg/kg	0.25 ±0.01	0.23 ±0.02
2000 mg/kg	0.21 ±0.01	0.22 ±0.02

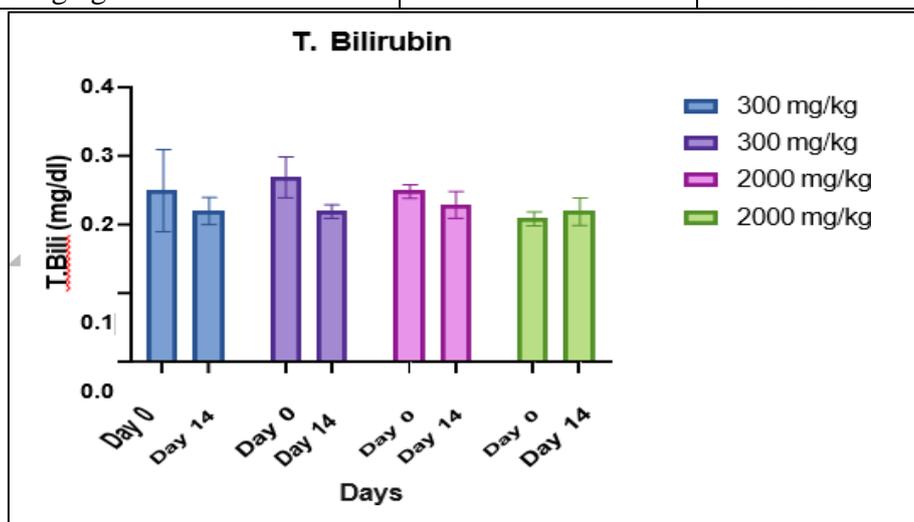


Fig9.TotalBilirubin

Values are expressed as mean±SD, n=3, *p<0.05, **p<0.01, *** p<0.001, **** p<0.0001. Values of were compared with lowest conc. by t-test. Values of test groups were compared with lowest conc. by One-way ANOVA by Dennett’s test.

Elisa

IL-6:

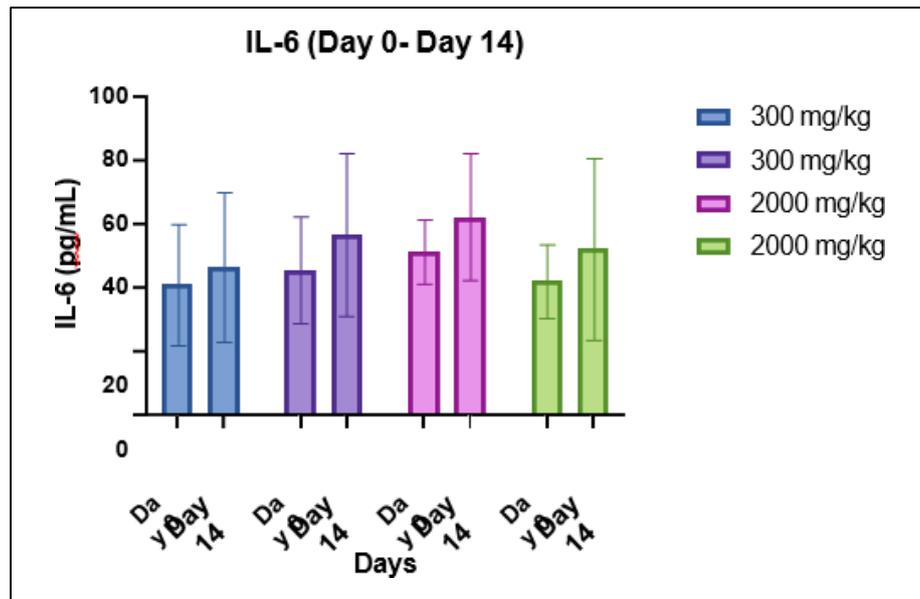


Fig10. IL-6 (Day0-Day 14)

Values are expressed as mean \pm SD, n=3, *p<0.05, **p<0.01, *** p<0.001, **** p<0.0001. Values of were compared with lowest conc. by t-test. Values of test groups were compared with lowest conc. by One-way ANOVA by Dennett's test.

IL-8:

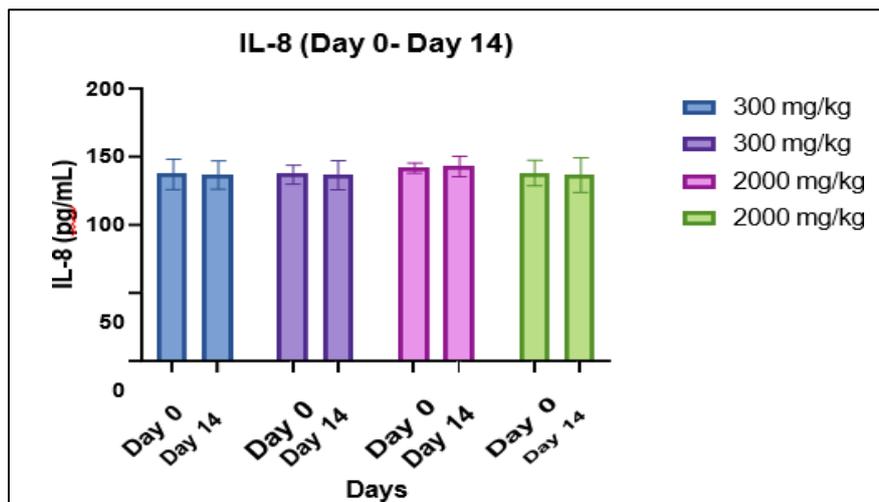


Fig11. IL-8 (Day0-Day 14)

Values are expressed as mean \pm SD, n=3, *p<0.05, **p<0.01, *** p<0.001, **** p<0.0001. Values of were compared with lowest conc. by t-test. Values of test groups were compared with lowest conc. by One-way ANOVA by Dennett's test.

DISCUSSION:

Brown top millet (*Urochloa ramosa*) emerges as an exceptionally nutritious cereal crop, offering significant advantages, especially in regions with limited soil fertility. Its gluten-free characteristic positions it as an outstanding option for individuals managing celiac disease or gastrointestinal concerns. Abundant in protein, fibre, and low in carbohydrates, brown top millet plays a role in reducing LDL cholesterol, enhancing cardiovascular health, and promoting bone strength. The objective of the study was to assess the safety and potential health advantages associated with brown top millet consumption. Initial results indicate that brown top millet is a rich source of essential nutrients and phytochemicals, which may offer various health benefits [21-23].

During this study the plant material was collected, dried. The Soxhlet extraction method was

employed to obtain plant extracts from brown top millet for further analysis. The plant material was extracted using ethanol solvent [24,25]. The obtained extracts were concentrated, and the percentage yield was calculated to determine the extraction efficiency. After that phytochemical test are performed and this indicated that presence of alkaloids, tannins, saponins, anthraquinones, and flavonoids [26, 27].

The acute oral toxicity study aimed to ascertain the safety of consuming brown top millet. Various tests, including CBC, SGPT, IL-6 & IL-8, and total bilirubin, were conducted to assess potential adverse impacts on liver function, inflammation, and overall health. The LD50 value was calculated to gauge the lethal dose that could lead to mortality or severe toxicity effects. Wistar rats were employed for the animal trial to evaluate the safety of brown top millet consumption. These rats were administered varying doses of the millet extract and closely monitored for any adverse effects. Initial parameters such as CBC, SGPT, IL-6 & IL-8, and total bilirubin were measured before the trial, with subsequent assessments after the trial period to compare any changes or effects induced by millet consumption. The results of the acute oral toxicity study and animal trial indicated no harmful effects at the tested doses, thereby supporting the safety of brown top millet for consumption. However, further research is warranted to delve into its complete nutritional profile and potential therapeutic applications, advocating for its adoption as a sustainable and nutritious food source [28-30].

CONCLUSION:

In summary, brown top millet (*Urochloa amabilis*) stands out as a highly nutritious cereal crop, particularly suited for regions with low soil fertility. Its gluten-free nature renders it an excellent option for individuals with celiac disease or digestive concerns. With its abundance of protein, fibre, and low carbohydrate content, brown top millet offers a plethora of health benefits, including LDL cholesterol reduction, enhanced heart function, and bolstered bone health. The initial findings from this study suggest that brown top millet is rich in nutrients and phytochemicals beneficial for health. Through various assessments, such as acute oral toxicity studies and animal trials, it was determined that brown top millet consumption at tested doses does not pose any harmful effects. However, further research is imperative to delve into its complete nutritional profile and explore potential therapeutic applications, thereby advocating for its adoption as a sustainable and nutritious food source.

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