

Dendrobium in Diabetes: A comprehensive review of its phytochemistry, pharmacology, and safety

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Abstract

Dendrobium, which is one of the frequently used medicinal herbs in Traditional Chinese Medicine (TCM) for treating diabetes, has aroused lots of attention on its potential alternative in the treatment of diabetes. This review aims to provide a comprehensive study on its phytochemical constituents, safety and pharmacological effects on treating diabetes and its complications with the underlying mechanisms uncovered. A comprehensive search of published medical literature from 2000 to 2020 was conducted by searching PubMed, Science Direct, Scopus, Web of Science and Google Scholar databases with keywords dendrobium, diabetes, phytochemistry, pharmacology and safety were used. Results showed that dendrobium exhibited anti-diabetic effects such as reducing gluconeogenesis, regulating lipid, protecting islet cells, anti-obesity, antioxidant and anti-inflammation on treating diabetes and its complications through the regulation of AMPK-GLUT4-PPAR α ; cAMP-PKA and Akt/Fox01; cRaf-MEK1/2-ERK1/2; IRS1-PI3K-Akt-Fox01/GSK 3 β ; MAPK; NF- κ B; PI3k/Akt signaling pathway. The main chemical constituents of dendrobium species, which exert anti-diabetic, were polysaccharides. Most of the compounds of dendrobium species improved diabetes by antioxidant activity. No side effect of dendrobium species was reported in experimental studies. Therefore, our study suggested that dendrobium may offer a new potential alternative for prevention and treatment of diabetes and its complication. Well-designed clinical trials are needed for future studies.

Abbreviations: AC: Adenylate Cyclase; Akt: Protein Kinase B; Ala: Alanine; ALT: Alanine Transaminase; AR: Aldose Reductase; AST: Aspartate Aminotransferase; AUC: The Area Under the Curve; bFGF: Basic Fibroblast Growth Factor; BG: Blood Glucose; BUN: Blood Urea Nitrogen; BW: Body Weight; CA/CDCA: Cholic Acid/Chenodeoxycholic Acid; CAT: Catalase; CK: Creatine Kinase; Citr: Citrate; Create: Creatine; CREA: Creatinine; CTGF: Connective Tissue Growth Factor; DPPH, 2,2-Diphenyl-1-Picrylhydrazyl; ERG: Electroretinogram; FBG: Fasting Blood Sugar; FFAs: Free Fatty Acids; FN: Fibronectin; FINS: Fasting Insulins; Fox01: Forkhead Box Protein 01; GDH: Glucose Dehydrogenase; Gln: Glutamine; GLU: Glucagon; GLUT1: Glucose Transporter 1; GLUT2: Glucose Transporter 2; GLUT4: Glucose Transporter 4; G6Pase: Glucose-6-Phosphatase; GSK 3 β : Glycogen Synthase Kinase 3 Beta; GSH: Glutathione; GSH-PX: Glutathione Peroxidase; GSP: Glucose Regulated Protein; HG: High Glucose; HIF-1 α : Hypoxia-Inducible Factor 1-Alpha; HOMA-IR: Homeostasis Model of Assessment Insulin Resistance; Hs-CRP: High-sensitivity CRP; HW/BW: Heart to Body Weight Ratio; ICAM-1: Intercellular Adhesion Molecule 1; IFN- γ : Interferon- γ ; IGF-1: Insulin-like Growth Factor 1; IL-1 β : Interleukin-1 β ; IL-6: Interleukin-6; Ile: Isoleucine; INS: Insulin InsR: Insulin Receptor; iNOS: Inducible Nitric Oxide Synthase; KB: Ketone Body; LDL: Low-Density Lipoprotein; LDL-C: Low Density Lipoprotein Cholesterol; LDH: Lactate Dehydrogenase; Leu: Leucine; MDA: Malondialdehyde; MMP 2/9: Matrix Metalloproteinase-9; MT-1: Metallothionein-1; MyD88, Myeloid Differentiation Primary Response 88; 2-NBDG: 2-[N-(7-nitrobenz-2-oxa-1,3-diazol-4-yl)amino]-2-deoxyglucose; NF- κ B: Nuclear-Factor Kappa β ; Nqo1: NADPH Quinone Oxidoreductase-1; OGTT: Oral Glucose Tolerance Test; P-AMPK: Adenosine Monophosphate (AMP)-Activated Protein Kinase Phosphorylation; PEPCK: Phosphoenolpyruvate Carboxykinase; PDGF A/B: Platelet-Derived Growth Factor A/B; PGC1 α : Alpha Subunit of Peroxisome

Proliferators-Activated Receptor-Gamma Coactivator-1; PKA: protein Kinase A; PI3K: Phosphoinositide-3-Kinase; PPAR α : Peroxisome Proliferator-Activated Receptor α ; ROS: Reactive Oxygen Species; SCr: Serum Creatine; SOD: Superoxide Dismutase; Tau: Taurine; TC: Total Cholesterol; Tch: Blood Lipids; TG: Triglycerides; TLR-4: Toll-Like Receptors; TNF- α : Tumor Necrosis Factor- α ; T-SOD: Total Superoxide Dismutase; UA: Uric Acid; Val: Valine; VEGF: Vascular Endothelial Growth Factor.

Introduction

Diabetes mellitus is characterized by high blood glucose level as a result of insufficient insulin for the body's needs [1]. It is generally accepted that type 1 diabetes is due to the pancreas not producing enough insulin while type 2 diabetes is due to the cells of body not responding properly to the insulin produced [2]. Diabetes has become a worldwide major health-care problem as hyperglycemia increase the risk of complications such as diabetic retinopathy, diabetic cataract, diabetic nephropathy, diabetic cardiomyopathy etc [3]. However, diabetes is a chronic disease which cannot be cured and repaired because if the progressive reduction in beta-cell mass and irreversible beta cell failure [4]. Due to the advance effect of drugs, current treatment for diabetes is not satisfactory [5]. As traditional Chinese medicinal herbs are relative cost-effective, multi-target and

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has low risk of advance effect, they become a potential candidate for diabetic drug development [6].

Dendrobium, which is one of the major genera of Orchidaceae, has both ornamental and medicinal value. There are more than 1400 species worldwide and are widely distributed in tropical and subtropical regions such as Asia, Europe and Oceania [7]. In China, there are about 80 kinds of dendrobium which are mainly distributed in the southwest, east and south of China [8].

Dendrobium is an important flower plants with high economic value. Its stems and flowers have been valued as precious food and herb medicine with healthy benefit and therapeutic effects. In traditional Chinese medicine, fresh or dry stems of some species of Dendrobium's plants are harvested for medicinal purposes, collectively known as SHIHU. Its medicinal value has been first recorded in ancient Chinese medical book "Shen Nong's Materia Medica" thousands of years ago [9].

Dendrobium is a valuable medicinal herb commonly used for nourishing yin and clearing heat in traditional Chinese medicine theory. It has the functions of moistening lung and benefiting stomach, clearing heat and brightening eyes, tonifying deficiency and strengthening body [10]. Thus, it can be used to benefit stomach, nourish body fluid, moisten lung and relieve cough. Recently, many researchers studied the chemical constituents and pharmacological effects of Dendrobium plants. It was found that the chemical constituents of Dendrobium plants include polysaccharides, alkaloids, bibenzyls, phenols, Phenanthrenes etc [11]. Several studies showed that Dendrobium has anti-aging, anti-cancer, digestion promotion, blood pressure reduction, cataract treatment and vasodilation effect [12]. At present, there are more than 50 kinds of medicinal Dendrobium such as dendrobium officinale, dendrobium huoshenense, dendrobium loddigesii, dendrobium aphyllum, dendrobium candidum, dendrobium crepidatum, dendrobium draconis etc [13]. In this review paper, the search was done in PubMed, Science Direct, Scopus, Web of Science and Google Scholar databases a 20-year period between 2000 to 2020 with keywords search of dendrobium, diabetes, phytochemistry, pharmacology and safety. Recently, many researchers are interested in studying dendrobium species. However, there is no review paper focusing on the mechanism of therapeutic effects of dendrobium species on diabetes and its complications. Although some studies suggested that dendrobium can treat diabetes, there is lack of studies about the comprehensive

mechanism of dendrobium's anti-diabetic effects. Therefore, our review is the first study to fully understand the role of dendrobium in diabetes by studying its phytochemistry and pharmacological mechanisms on treating diabetes and its various complications. **It also provides an interesting and illuminating insights to the readers who intend to perform clinical trials on dendrobium species in the future.**

Phytochemistry of dendrobium: Nowadays, more than 50 compounds had been identified and isolated from dendrobium [14]. It was found that the chemical constituents of dendrobium are mainly polysaccharides, alkaloids, phenols, phenanthrenes and alkaloids [15]. The compounds which show anti-diabetic effects are listed in Table 1.

Table 1 summarizes compounds which exert anti-diabetic effect in different species of dendrobium. Several chemical structures of these compounds involved in anti-diabetic activity are illustrated in Figure 1-4. These compounds include polysaccharide, phenanthrenes, stilbenes, bibenzyl, polyphenol, indolizidine alkaloids. Most of these compounds showing anti-diabetic effects are polysaccharides. Besides, most of these compounds alleviate diabetes by antioxidant activity, implying a potential candidate for studying diabetes in the future.

Pharmacological activities of dendrobium in the management of diabetes

Reducing gluconeogenesis: In normal physiological conditions, liver glycogen synthesis and gluconeogenesis maintain a dynamic equilibrium [16]. However, when liver appears insulin resistance, which is defined as a pathological state that human body cannot respond to insulin normally, liver gluconeogenesis increases and hepatic glycogen synthesis decreases. Then, the balance between gluconeogenesis and glycogen synthesis is disrupted. After that, liver glycogen output increases and high blood glucose levels id resulted eventually. Thus, reducing gluconeogenesis is one of the targets to control blood glucose [17]. Dendrobium mixture, which includes **15 g dendrobium, 20 g astragalus, 8 g schisandra, 15 g pueraria, 15 g salvia, 15 g rehmannia and 8 g earthworms**, improved insulin resistance and liver functions via regulating the PI3K/Akt signaling pathways. It is evidenced by Fox01, PEPCK, G6Pase decreased expression and InsR, PI3K, Akt increased expression. Thus, Dendrobium may improve liver glycogen and decrease blood glucose [18]. A water extract of dendrobium officinale was showed to up-regulate energy and amino

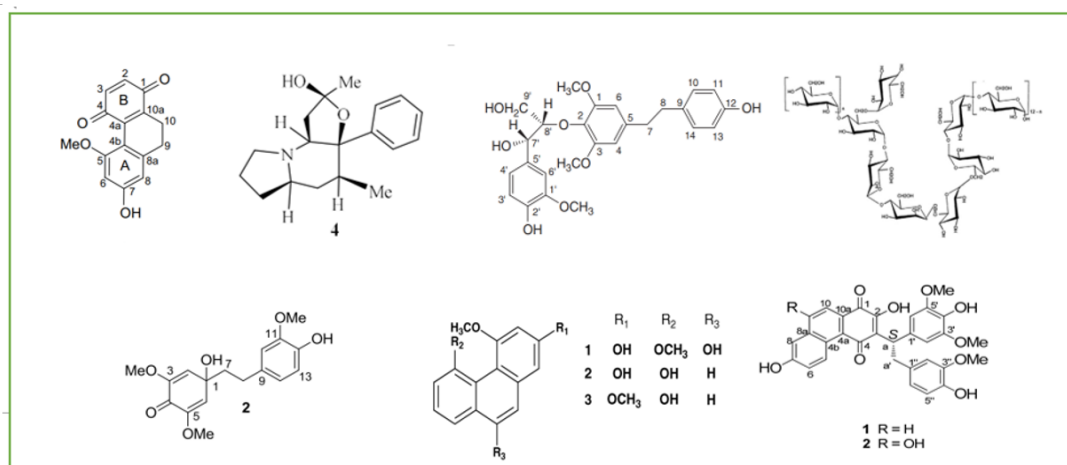


Table 1. The contents of compounds in different species of Dendrobium that exhibited anti-diabetic activities

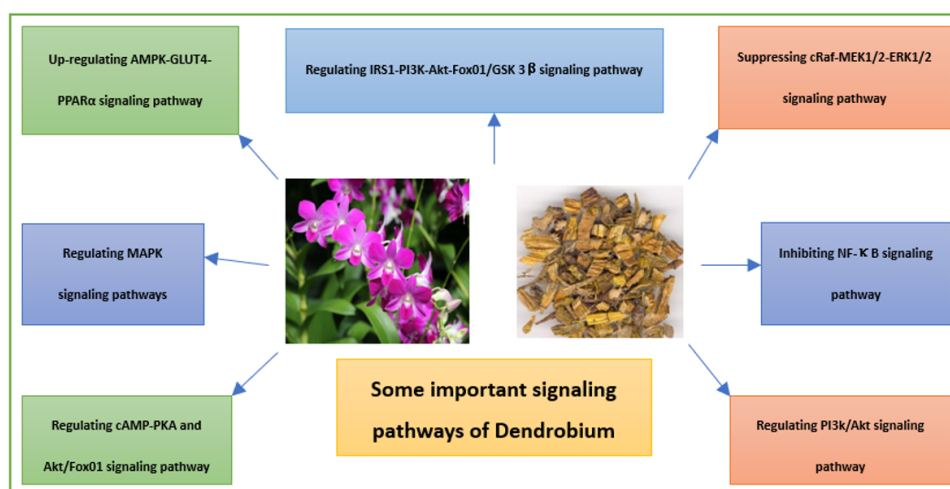

Figure 2. Animal studies about the antidiabetic effects of *Dendrobium* and its ingredients

Table 1. The contents of compounds in different species of *Dendrobium* that exhibited anti-diabetic activities

Species	Compound name	Types	Molecular formula	Molecular weight	IC ₅₀	Function	Reference
<i>Dendrobium officinale</i>	DOP-1-1	Polysaccharide	an O-acetylated glucomannan of β-D configuration in pyranose sugar forms	1.78X105 Da	Nil	Anti-inflammation and anti-oxidant	[57]
<i>Dendrobium officinale</i>	DOPA-1	Polysaccharide	D-mannose,D-glucose,a backbone consisting 1,4-linkedβD-Manp and 1,4-linkedβ-D-Glcp with O-acetyl group	394 kDa	Nil	Anti-oxidant	[34]
	DOPA-2	Polysaccharide	D-mannose,D-glucose,a backbone consisting 1,4-linkedβD-Manp and 1,4-linkedβ-D-Glcp with O-acetyl group	362 KDa	Nil	Anti-oxidant	
<i>Dendrobium huoshenense</i>	DHPD1	Polysaccharide	glucose,arabinose,galactose,mannose,xylose with C-2,C-6 of glycosyl residues	3.2X103 Da	Nil	Antiglycation	[58]
<i>Dendrobium huoshenense</i>	DHPIA	Polysaccharide	Mannose,glucose,a trace of galactose,backbone contain (1 → 4)-linked α-D-Glcp, (1 → 6)-linked α-D-Glcp and (1 → 4)-linked β-D-Manp, with a branch of terminal β-D-Galp	6700 Da	Nil	Anti-oxidant	[59]
<i>Dendrobium loddigesii</i>	loddigesiinols A(1)	Phenanthrenes	C ₆ H ₁₄ O ₃	Nil	2.6μM	Anti-oxidant	[60]
	loddigesiinols B(7)	Phenanthrenes	C ₂₅ H ₂₂ O ₆	Nil	10.9μM	Anti-oxidant	
	loddigesiinols D(9)	Stibenes	C ₁₇ H ₁₆ O ₇	Nil	69.7μM	Anti-oxidant	
<i>Dendrobium loddigesii</i>	loddigesiinols G	Polyphenols	C ₃₁ H ₂₆ O ₉	Nil	16.7μM	α-glucosidase inhibitory activity	[61]
	loddigesiinols H	Polyphenols	C ₃₁ H ₂₆ O ₁₀	Nil	10.9μM	α-glucosidase inhibitory activity	
	loddigesiinols I	Polyphenols	C ₃₁ H ₂₆ O ₈	Nil	2.7μM	α-glucosidase inhibitory activity	
	loddigesiinols J	Polyphenols	C ₃₁ H ₂₈ O ₈	Nil	3.2 uM	α-glucosidase inhibitory activity	
<i>Dendrobium aphyllum</i>	aphyllals B	Bibenzyl	C ₁₇ H ₂₀ O ₆	Nil	nil	Anti-oxidant	[62]
	Aphyllals A	Phenanthrene	C ₁₅ H ₁₄ O ₄	Nil	nil	Anti-oxidant	
<i>Dendrobium candidum</i>	dendrocandins J	Bibenzyl	C ₃₁ H ₃₀ O ₈	Nil	36.8 uM	Anti-oxidant	[63]
	dendrocandins K	Bibenzyl	C ₃₀ H ₂₇ O ₈	Nil	70.2 uM	Anti-oxidant	
	dendrocandins L	Bibenzyl	C ₃₀ H ₂₇ O ₈	Nil	45 uM	Anti-oxidant	
	Dendrocandins M	Bibenzyl	C ₃₀ H ₂₉ O ₈	Nil	60.5 uM	Anti-oxidant	
	dendrocandins N	Bibenzyl	C ₂₅ H ₂₅ O ₇	Nil	87.6 uM	Anti-oxidant	
	dendrocandins O	Bibenzyl	C ₂₅ H ₂₆ O ₈	Nil	50.4 uM	Anti-oxidant	
	dendrocandin P	Bibenzyl	C ₃₀ H ₂₈ O ₈	Nil	22.3 uM	Anti-oxidant	
	dendrocandin Q	Bibenzyl	C ₃₀ H ₂₈ O ₈	Nil	30.3 uM	Anti-oxidant	
<i>Dendrobium crepidatum</i>	isocrepidanine	Indolizidine alkaloids	C ₂₀ H ₂₇ NO ₄	Nil	345.4 uM	Hypoglycemic effect	[64]
<i>Dendrobium draconis</i>	5-methoxy-7-hydroxy-9,10-dihydro-1,4-phenanthrenequinone	Phenanthrenequinone	C ₁₅ H ₁₂ O ₄	Nil	283.3uM	Anti-oxidant	[65]

Reducing gluconeogenesis			
↑ Energy and amino acid metabolism	↓ gluconeogenesis	↓ Glycogen degradation rate	↑ Glycogen synthesis

Figure 3. The chemical structures and names of compounds isolated from different species of *Dendrobium* that exhibited anti-diabetic activities

↑ Citr, GIN, Creat, Ala, Leu, Ile, Val, Gln, GSH, Tau	↑ IRS-1, PI3K, Akt ↓ 6Pase, PEPCCK, Fox01	↓ GP, GP bonding site	↑ GS ↓ GSk 3β
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Figure 4. Medicinal plants *Dendrobium* used in treatment of diabetes and its complications with their mechanism of actions

acid metabolism as well as increase liver glycogen. It can reduce gluconeogenesis [19]. A study conducted by Hong-Yan Wang et al. showed that a polysaccharide from *dendrobium huoshanense* (GXG) could enhance glycogen synthesis and reduce gluconeogenesis via insulin-mediated IRS1-PI3K-Akt-Fox01/GSK 3β signaling pathway. This study suggested that *Dendrobium* may reduce glycogen degradation rate by improving stability of liver glycogen structure [20]. In another study, a polysaccharide of *dendrobium officinale* (DOP) (100,200,400 mg/kg for 4 weeks) strengthened the fragile diabetic liver glycogen by inhibiting cAMP-PKA signaling pathway. Besides, it inhibited hepatic glycogen degradation and hepatic gluconeogenesis [21]. In brief, *dendrobium* has been evidenced to alleviate diabetes through reducing gluconeogenesis. The underlying mechanisms may be attributed to the regulation of PI3K/Akt, PI3K-Akt-Fox01/GSK 3β, cAMP-PKA signaling pathway (Figure 5). *Dendrobium* alleviates diabetes through reducing gluconeogenesis, glycogen degradation rate and increasing energy and amino acid metabolism as well as glycogen synthesis. **Lipid regulation:** Obesity is one of the causes of type 2 diabetes as lipid deposition in liver may lead to insulin resistance [22]. Besides, lipotoxicity may increase islet cell apoptosis and restrict the muscle's usage of glucose capacity. Thus, it is important for diabetic patient to prevent dyslipidemia [23]. An extract of *dendrobium nobile lindl.* (DNLA) (15mg/kg for 18 weeks) was demonstrated to reduce the absorption of cholesterol by decreasing CA/CDCA ratio and increase the excretion of cholesterol by enhancing the taurine-conjugated bile acids [24]. A study conducted by Qiong Zhang et al. suggested that the extract of *dendrobium finbriatum* (100mg/kg,200 mg/kg for 4 weeks) could reduce lipid accumulation and lipotoxicity-induced hepatocyte apoptosis in rat. It also prevented islet cell apoptosis [25]. In a cell study of Xue-Wen Li et al., a shihurine-rich extract of *D. loddigesii* decreased the intracellular accumulation of oil droplets and triglycerides. It also increased 2-NBDG uptake of 3Ts-L1 cells [26]. Another study about *dendrobium nobile lindl.* revealed that an alkaloid of DNLA could increase lipid metabolism gene expression and decrease lipid synthesis regulator Srebp 1 [27]. Collectively, *dendrobium* alleviates diabetes by regulating the absorption and excretion of cholesterol. It can also reduce the toxicity of bile acids and lipid accumulation (Figure 6). *Dendrobium* alleviate diabetes by reducing the lipid accumulation, the toxicity of bile acids, absorption of cholesterol as well as increasing excretion of cholesterol.

Protecting islet cells: The pancreas, which is a mixed gland formed by exocrine tissue, can synthesize and secrete inactive digestive enzymes. The endocrine tissue of pancreas is represented by the islets of Langerhaous consisted of alpha, gama, epsilon and beta cells [28]. Apoptosis is a form of beta cells death that happen in diabetes. A vitro

study of a shihumine-rich extract of *D. loddigesii* showed that after 9 weeks of administration, the quantity of islet cells and the adipose cell size increased by up-regulating AMPK-GLUT4-PPARα signaling pathway. The expression of cleaved caspase-3 was also inhibited. Thus, it could prevent islet cell apoptosis [29]. In summary, *dendrobium* alleviates diabetes by protecting islet cells through the regulation of AMPK-GLUT4-PPARα signaling pathway. *Dendrobium* can protect islet cells and prevent islet cell apoptosis (Figure 7).

Anti-oxidant: Oxidative stress is defined as an imbalance between oxidants and antioxidants in favor of the oxidants, leading to a disruption of redox signaling and control and/or molecular damage [30]. If excess reactive oxygen species is produced,β-cell maturation and apoptosis increases. Then insulin synthesis and secretion will be decreased. Both diabetes and obesity can increase the production of reactive oxygen species, resulting in oxidative stress [31]. A rich polyphenol extract of *D. loddigesii* (DJP) (25 mg/kg,50 mg/kg,100mg/kg for 8 weeks) was demonstrated to reduce the oxidative stress in db/db mice [32]. Another study using 1g/kg of the extract from *dendrobium officinale* to fed STZ rat for 5 weeks. Although there was no effect on blood glucose level and bodyweight, the glutathione peroxidase (GSH-PX) increased, implying the protective effects of this extract of *dendrobium* was related to antioxidant activity [33]. A cell study separated two polysaccharide fractions (DOPA-1 and DOPA-2) from stems of *dendrobium officinale* and tested the ability against H2O2-induced oxidative injury, DOPA-1 and DOPA-2 were found to suppress apoptosis and ameliorate oxidative lesions [34]. Another study about Alkaloids of *dendrobium nobile lindl.* (DNLA) showed that it could increase the expression of antioxidant gene MT-1 and Nqo1 in livers of mice through Nrf2-antioxidant pathway [27].

In short, *dendrobium* exerts anti-oxidant effects through Nrf2-antioxidant pathway. It also increases glucose metabolism genes and anti-oxidant genes. *Dendrobium* exerts anti-oxidant effects through increasing glucose metabolism genes and anti-oxidant genes (Figure 8).

Anti-inflammation: Low-grade inflammation can lead to insulin resistance and is a main cause of Type 2 diabetes as pro-inflammatory macrophages may reduce the insulin sensitivity of liver, skeletal muscle and pancreatic β cells [35].

A rich polyphenol extract of *D. loddigesii* (DJP) was demonstrated to have anti-inflammation effect by reducing IL-6 and TNF-α [32]. Another study suggested that the extract of *dendrobium fimbriatum* (DFE) could downregulate 588 differentially expressed genes (DEGs) and 74% of them were related to inflammatory, implying it may have anti-inflammation effect [25].

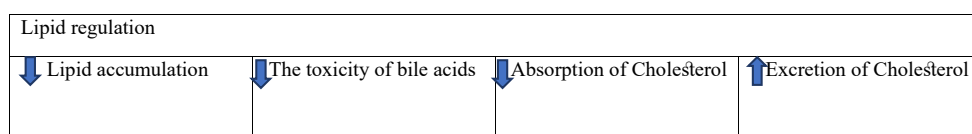


Figure 5. The diagram illustrates reducing gluconeogenesis of *Dendrobium*

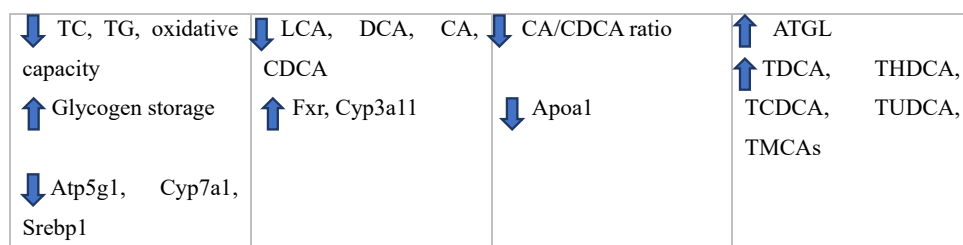


Figure 6. The diagram illustrates lipid regulation of *Dendrobium*

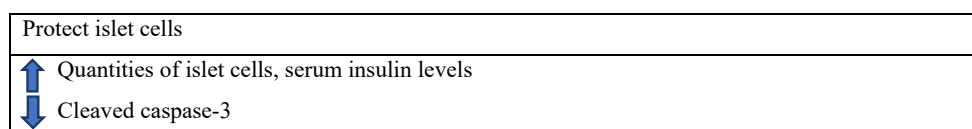


Figure 7. The diagram illustrates lipid regulation of *Dendrobium*.

In brief, *Dendrobium* showed anti-inflammation effect by regulating NF-κβ signaling pathway. *Dendrobium* showed anti-inflammation effect by regulating NF-κβ signaling pathway (Figure 9).

Diabetic cardiovascular complications: Cardiovascular complications are notable causes of death in diabetic patients [26]. Diabetic cardiomyopathy is a serious diabetic complication as it is notable causes of death in diabetic patients. It is mainly manifested as myocardial dysfunction without other heart disease and may eventually lead to heart failure [36]. Chronic sustained hyperglycemia and insulin resistance may induce myocardial infarction and chronic pressure overload in diabetic patients with diabetic cardiomyopathy [37]. A *dendrobium officinale* extract (DOE), after 8 weeks of (75mg/kg, 150mg/kg, 300mg/kg) administration, was demonstrated that it could inhibit oxidative stress, cardiac lipid accumulation and pro-inflammatory cytokines in order to reduce cardiac fibrosis [38]. In a cell study conducted by Jing-yi Zhang et al., *dendrobium officinale* polysaccharides (DOY-GY) could exert cardioprotective effects on H₂O₂ induction-H9C2 cardiomyocytes through PI3K/Akt and MAPK pathways [39]. Collectively, *dendrobium* alleviates diabetic cardiovascular complications by reducing inflammation, cardiac fibrosis, cardiac oxidative stress, myocardial injury and apoptosis. The underlying mechanism may be associated with PI3K/Akt and MAPK pathways. *Dendrobium* alleviates diabetic cardiovascular complications by reducing inflammation, cardiac fibrosis, cardiac oxidative stress, myocardial injury and apoptosis (Figure 10).

Diabetic nephropathy: Diabetic nephropathy is an important chronic micro-vascular complication of diabetes and may lead to end-stage renal disease [40]. Diabetic nephropathy is induced by diabetes and kidney dysfunction will be developed by disturbing renal tubular, glomeruli and its filtration barrier. Kidney functions continues to decline until end-stage renal failure was resulted [41]. Diabetes influences body's metabolism and blood circulation, generating excess reactive oxygen species. which injure glomeruli and cause albuminuria

[42]. The glomerular filtration barrier, which is composed of the fenestrated endothelium, the glomerular basement membrane and the epithelial podocytes, becomes more damaged in the progression of diabetic nephropathy. After administrating *dendrobium candidum* (0.2,0.4,0.8g/kg) for 8 weeks, it was found that it could improve pathological change in kidney and alleviate diabetic nephropathy by regulating VEGF, GLUT-1 and CTGF expression [43].

In vitro and vivo study of diabetic nephropathy, a methanolic extract of *dendrobium monilifone* (DM) was demonstrated to exert lipid lowering effect in HFD-induced obesity in mice as well as to inhibit the kidney cell damage induced by oxidative stress [44].

Another study using the extract of *dendrobium officinale* (5 ml/kg, 10 ml/kg) for 4 weeks, result showed that it could alleviate diabetic nephropathy by preventing insulin resistance and reducing TLRs and inflammatory response [45]. Glucomannans, which is an extract of *dendrobium officinale* stem, could balance the disturbed glucose, lipid, amino acid metabolism and normalize the architecture of kidney corpuscle and tubular system after 4 weeks of drug (160 mg/kg) administration [46].

In summary, *dendrobium* alleviates diabetic nephropathy by reducing inflammation, oxidative stress, insulin resistance, renal dysfunction and diabetic kidney lesion. *Dendrobium* improves diabetic nephropathy by reducing oxidative stress, renal dysfunction, insulin resistance, inflammatory response and diabetic kidney lesions (Figure 11).

Diabetic retinopathy: Diabetic retinopathy is a common diabetic complication. It is characterized by hard exudates, microaneurysms, macular edema and retinal hemorrhage [47]. The ethanol extract of *D. Chrysotoxum* (30 mg/kg, 300 mg/kg for 1 month) was demonstrated to breakdown the blood retinal barrier, inhibit retinal inflammation and prevent the decrease of tight junction protein such as occludin and claudin-1 [48]. In vivo and vitro study by Zengyang Yu et al., *erianin*,

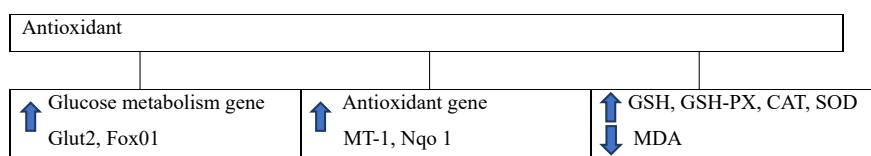


Figure 8. The diagram illustrates anti-oxidant of *Dendrobium*

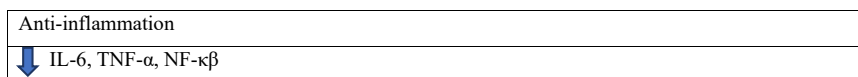


Figure 9. The diagram illustrates anti-inflammation of *Dendrobium*.

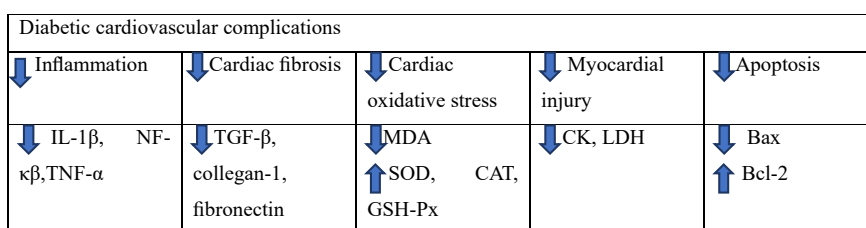


Figure 10. The diagram illustrates diabetic cardiovascular complications of *Dendrobium*

which was extracted from *dendrobium chrysotoxum* Lindl., could inhibit retinal neoangiogenesis by abrogating HG-induced VEGF expression. It could also block ERT1/2-mediated HIF- α activation in retinal endothelial and microglial cells [49]. Another study also found that the ethanol extract of *dendrobium chrysotoxum* Lindl could alleviate retinal angiogenesis and ameliorate retinal inflammation by inhibiting NF κ B signaling pathway [50]. To conclude, *dendrobium* alleviates diabetic retinopathy by reducing retinal neoangiogenesis and tight junction protein. It can also reduce pro-angiogenic factor and inflammation. *Dendrobium* alleviates diabetic retinopathy by reducing inflammation, retinal neoangiogenesis, tight junction proteins and pro-angiogenic factor (Figure 12).

Diabetic Cataract: Cataract is the leading cause for impaired vision and blindness in patients with diabetes [51]. Hyperglycemia-associated increase in osmotic pressure and oxidative damage are the main causes for the development and progression of diabetic cataract [52].

In a cell study conducted by Jie Wu et al., a gigantol from *dendrobium chrysotoxum* Lindl. was showed to inhibit AR gene expression and aldose reductase in Human lens epithelial cells (HLECs) [53]. Another study showed that gigantol from *dendrobium aurantiacum* var *dennam* could prevent galactose-induced damage to the rat lens by repressing the gene expression and activity of AR & iNOS. It could also delay lens turbidity and keep lens transparent [54]. To sum up, *dendrobium* alleviates diabetic cataract by reducing damage of osmotic pressure stress and oxidative damage. *Dendrobium* improves diabetic cataract by reducing oxidative damage and damage caused by osmotic pressure stress (Figure 13).

Safety of *Dendrobium*: In the “Shen Nong’s Materia Medica”, *dendrobium* is classified as “Top-tier” medicinal herb which is regarded as an effective medicinal herb without observable toxicity. The safety of medicinal herb is important because the intake of heavy metal elements into human body is harmful. One study conducted by Yingdan Yuan et al. showed that the dosage of 12g d⁻¹ *dendrobium*, which is prescribed

in the Chinese Pharmacopoeia 2010 edition, is in accordance with the recommended daily intake of trace elements recommend by the Food and Drug Administration of the United States [55]. Another study by Li-Chan Yang et al. assessed the 90 days oral toxicity and genetic safety of the aqueous extract of *Dendrobium Taissed Tosnobile* in 90 sprague-dawley (SD) rats, no abnormal changes were observed in clinical signs and body weight. Also, no significant difference between treatment and control group was found in biochemistry parameter, urinalysis and hematology throughout the study period [56-65]. Therefore, when taken according to the dosage prescribed by the pharmacopoeia does not cause any adverse effects and trace elements poisoning.

Conclusion and outlook

Dendrobium is one of the most frequent used medicinal herbs for treating diabetes in TCM clinical practices. Table 2 and Table 3 summarizes its hypoglycemia effects in animal studies and cell-based studies. In recent studies, there are more than 50 compounds isolated and identified from *dendrobium*. The types of compounds, which show anti-diabetic activities, include polysaccharide, phenanthenes, stilbenes, bibenzyl, polyphenol, indolizidine alkaloids. Most of the compounds showing anti-diabetic effects are polysaccharides. The signaling mechanisms of *dendrobium* treating diabetes may be involved in the regulation of AMPK-GLUT4-PPAR α ; cAMP-PKA and Akt/Fox01; cRaf-MEK1/2-ERK1/2; IRS1-PI3K-Akt-Fox01/GSK 3 β ; MAPK; NF- κ B; PI3k/Akt which are illustrated in Figure 2.

Moreover, *dendrobium* can reduce gluconeogenesis, regulate lipid, protect islet cells, anti-obesity, antioxidant and anti-inflammation. It can also treat various diabetic complications such as diabetic cardiovascular, diabetic nephropathy, diabetic retinopathy and diabetic cataract.

Dendrobium is considerably safe and well tolerate at the recommend dose as there are no side effects had been reported in clinical trial. However, as there are insufficient clinical trial studies the

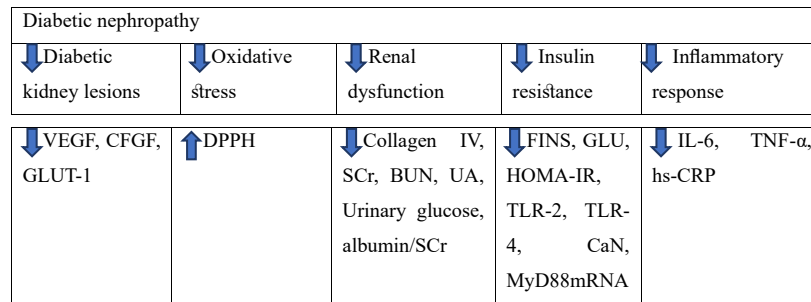


Figure 11. The diagram illustrates diabetic nephropathy of *Dendrobium*

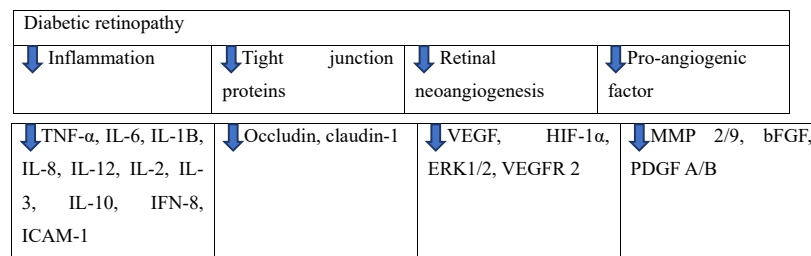


Figure 12. The diagram illustrates diabetic retinopathy of *Dendrobium*

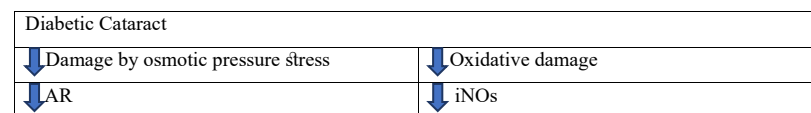


Figure 13. The diagram illustrates diabetic cataract of *Dendrobium*

Table 2. Animal studies about the antidiabetic effects of *Dendrobium* and its ingredients

Species	Extract	Topic	Duration	Model	Pathways	Results
<i>Dendrobium nobile</i> Lindl. (Si Huang, et al. 2019)	DNLA	Hepatic lipid homeostasis	18 weeks	C57BL/6 mice	Reducing cholesterol absorption and increasing cholesterol excretion	Reducing liver TC,TG; Increasing hydrophilicity; Reducing hepatic level of free bile acids(LCA,DCA,CA,CDCA); Increasing taurine-conjugated bile acids (TMCAs, TCDCA,TUDCA,THDCA); Reducing CA/CDCA ratio; Up-regulating Cyp27a1,Cyp3a11,Fxr,Shp.
<i>Dendrobium officinale kimura & Migo</i> (Hong Zheng, et al. 2017)	DOWE	Type 2 diabetes	4 weeks	STZ	Up-regulating energy and amino acid metabolism	Reducing BG; Increasing liver glycogen; Increasing Citr, GIN, Creat, Ala, Leu, Ile, Val, Gln, GSH, Tau in liver
<i>Dendrobium loggigesii</i> (Xue-Wen Li, et al. 2019)	DLS	Type 2 diabetes	8 weeks	db/db mice	Up-regulating AMPK-GLUT4-PPAR α	Reducing BW, FBG, serum lipid level; Improving oral glucose; Increasing serum INS level; Decreasing TG & TC; Increasing quantities of islet cells; Increasing adipose cell size; Inhibiting expression of cleaved caspase-3; Increasing P-AMPK, PPAR α , GLUT4.
<i>Dendrobium aurantiacum var. denneanum</i> (Hua Fang, et al.2015)	Gigantol	Diabetic cataract	60 days	Wistar rats	Reducing osmotic pressure and ameliorating oxidative damage	Repressing the gene expression and ability of AR & iNOS; keep lens transparent; delay lens turbidity; Reducing amount of AR and iNOS in lens epithelial cells.
<i>Dendrobium candidum</i> (Jingzhi Chang et al.2019)	Nil	Diabetic nephropathy	8 weeks	STZ	Regulating expression of VEGF, GLUT-1, CTGF	Reducing kidney index, SCr, BUN,24 hr urine protein; Decreasing VEGF; Decreasing GLUT-1 & CTGF renal cortex expression; Improving pathological changes in kidney
<i>Dendrobium chrysotoxum lindl.</i> (Zengyang Yu et al.2015)	DC	Diabetic retinopathy	1 month	STZ	Inhibiting retinal inflammation and preventing the decrease of tight junction protein	Decreasing breakdown of blood retinal barrier; Increasing expression of occludin & cludin-1 protein; Reducing the increased retinal mRNA expression of ICAM-1, TNF α ,IL-6,IL-1 β ; Alleviating the increased ICAM-1 and phosphorylated p65,I κ B,I κ B kinase; Reducing the increased serum level of TNF α ,IFN- γ ,IL-6,IL-1 β ,IL-8,IL-12,IL-2,IL-3,IL-10

Dendrobium huoshanense (Hong-Yan Wang <i>et al.</i> 2019)	GXG	Type 2 diabetes	5 weeks	STZ	Regulating insulin-mediated IRS1-P13K-Akt-FoxO1/GSK 3 β signaling	Reduce FBG, glycosylated serum protein & serum INS; Improving glucose tolerance & insulin sensitivity; Improving pancreatic β -cell quantity and function; Improving regulation of hepatic glucose metabolism; Up-regulating IRS1-P13K-Akt phosphorylation; Down-regulating FoxO1/GSK 3 β phosphorylation; Enhancing glycogen synthesis; Reducing gluconeogenesis.
Dendrobium mixture (XinJun Lin, <i>et al.</i> 2018)	Nil	Type 2 diabetes	12 weeks	Wistar rats.	Regulating PI3k/Akt signaling pathway	Reducing FBG, GSP, InsR, Tch, TG, ALT, AST; Reducing FoxO1, PEPCK, G6Pase; Increasing InsR, PI3K, Akt; Improving liver function & insulin resistance
Dendrobium moniliforme (Woojung Lee, <i>et al.</i> 2012)	DM	Diabetic nephropathy	9 weeks	Male C57BL/6 mice	Inhibiting kidney cell damage induced by oxidative stress	Reducing elevated serum glucose, TC, renal lipid accumulation; Reducing renal dysfunction biomarkers like SCr & renal collagen IV deposition
Dendrobium nobile Lindl. (Yun-Yan Xu, <i>et al.</i> 2017)	DNLA	Diabetic liver	8 days	male kunning mice	Increasing liver glucose and lipid metabolism gene metabolism	Increasing PGC1 α mRNA and protein levels; Increasing glucose metabolism gene Glut2, FoxO1; Increasing fatty acid β -oxidation genes Acox1 & Cpt1 α ; Reducing lipid synthesis regulator Srebp1; Increasing lipolysis gene ATGL; Increasing antioxidant gene MT-1 & Nqo1 in liver; Increasing PPAR α & GLUT4; Increasing Nrf2-antioxidant gene expressions
Dendrobium officinale kimura et Migo (Ming Zhao, <i>et al.</i> 2018)	DO	Diabetic nephropathy	4 weeks	STZ	Preventing insulin resistance and reducing TLRs & inflammatory response	Decreasing glomerular volume; Reducing urinary glucose, albuminuria, SCr, albuminuria/SCr, Bun; Reducing the expression levels of CaN, TLR-4, MyD88, hs-CRP, TNF- α , IL-6, the level of FINS, GLU, HOMA-IR.
Dendrobium officinale kimura et Migo (Zhihao Zhang, <i>et al.</i> 2016)	DOE	Diabetic cardiomyopathy	8 weeks	STZ	Inhibiting oxidative stress, pro-inflammatory cytokines and cardiac fibrosis	Reducing HW/BW; Reducing CK,LDH,TC,TG; Reducing MDA,T-SOD; Reducing cardiac injury; Reducing cardiac lipid accumulation and deposition of collagen; Downregulating TGF- β ,collagen-1,FN,NF- κ B,TNF- α ,IL-1 β
Dendrobium officinale kimura et Migo (Yage Liu, <i>et al.</i> 2020)	DOP	Type 2 diabetes	4 weeks	STZ	Regulating glycogen-mediated cAMP-PKA and Akt/FoxO1 signaling pathway	Inhibiting hepatic glycogen degradation & hepatic gluconeogenesis; Reversing the instability of liver glycogen structure; Suppressing serum glycogen; Reducing BW, FBG, OGTT; Restoring pancreatic islet morphology; Reducing insulin-positive cell ratio in pancreatic islet cells; Inactivating AC & reducing the expression of PKA.
Dendrobium officinale kimura et Migo (Shao-zhen Hou, <i>et al.</i> 2016)	DO	Type 1 diabetes	5 weeks	STZ	Inhibiting oxidative stress	Reducing TC, TG, BUN, CREA; Increasing the amplitudes of ERG-a and b- waves and Ops; Hypoalgesia and histopathological changes of vital organs induced by hyperglycemia; Increasing GSH-PX
Dendrobium loggigesii (Xue-Wen Li, <i>et al.</i> 2018)	DJP	Type 2 diabetes	8 weeks	db/db mice	Reducing inflammation & oxidative stress	Reducing BG, BW, LDL-C; Increasing insulin level; Improving fatty liver & DN; Reducing MDA; Increasing SOD, CAT, GSH; Reducing IL-6, TNF- α ; Reducing intestinal flora balance; Increasing Bacteroidetes to firmicute ratios
Dendrobium chrysotoxum lindl. (Zengyang Yu, <i>et al.</i> 2016)	Erianin	Diabetic retinopathy	2 months	STZ	Inhibiting retinal neoangiogenesis	Abrogating retinal neovascularization
Dendrobium chrysotoxum lindl. (Chen-Yuan Gong, <i>et al.</i> 2014)	DC	Diabetic retinopathy	2 months	STZ	Inhibiting NF- κ B signaling pathway	Ameliorating increased retinal vessels; Reducing increased retinal mRNA expression of VEGF & VEGFR2; Decreasing elevated serum VEGF level; Reducing retinal mRNA expression of MMP 2/9; Reducing serum levels of MMP2/9, IL-1 β , IL-6, IGF-1, bFGF, PDGF A/B; Decreasing increased phosphorylation of p65; Reducing increased expression of ICAM-1
Dendrobium officinale kimura et Migo (Haihong Chen, <i>et al.</i> 2019)	Glucomannans	Diabetic kidney disease	4 weeks	STZ	Normalizing the architecture of kidney corpuscle and tubular system	Reducing FBG, serum INS, glycated serum protein; Reducing concentrations of serum LDL, TC, TG, nonesterified fatty acid; Reducing UA, Creat, urea in serum, glycosuria, KB, protein in urine; Normalizing the architecture of glomerulus.
Dendrobium aphyllum (Huifan Liu, <i>et al.</i> 2019)	DAP	Type 2 diabetes	30 days	kunming mice	Up regulating the expression of glucose transporters	Decreasing BP; Increasing enzyme activities, G6Pase, GDH; Upregulating GLUT1, GLUT2 in colon. Incrementing 4 types short chain fatty acids and the health-promoting microbiota diversity
Dendrobium fimbriatum (Qiong Zhang, <i>et al.</i> 2020)	DFE	Type 2 diabetes	4 weeks	Sprague-Dawley rats	Prevent β cell apoptosis and decreasing hepatic lipid accumulation	Reducing FBG; Reducing AUC value of blood glucose level; Increasing serum & pancreatic INS; Reducing serum FFAs; Downregulating 588 differentially expressed gene,74% related to inflammatory; Preventing islet cell apoptosis; Improving energy metabolism, lipid transport, oxidoreductase activity in liver; Reducing lipid accumulation & lipotoxicity-induced hepatocyte apoptosis.

Table 3. Cell-based studies about the antidiabetic effects of *Dendrobium* and its ingredients

Species	Extract	Topic	Model	Pathways	Results
<i>Dendrobium loggigesii</i> (Xue-Wen Li, <i>et al.</i> 2019)	DLS	Type 2 diabetes	3T3-L1 cell	Up-regulating AMPK-GLUT4-PPAR α	Decreasing intracellular accumulation of oil droplets; Decreasing TG; Increasing 2-NBDG uptake.
<i>Dendrobium moniliforme</i> (Woojung Lee, <i>et al.</i> 2012)	DM	Diabetic nephropathy	LLC-PK1 renal epithelial cells	Inhibiting kidney cell damage induced by oxidative stress	Increasing DPPH radical scavenging activity; Reducing LLC-PK1 kidney cell damage induced by oxidative stress
<i>Dendrobium chrysotoxum lindl.</i> (Zengyang Yu, <i>et al.</i> 2016)	Erianin	Diabetic retinopathy	RF/6A cells & microglia BV-2 cells	Suppressing cRaf-MEK1/2-ERK1/2 and PI3K-Akt signaling cascades in retinal endothelial cells	Blocking high glucose-induced VEGF, HIF-1 α translocation into nucleus, ERK1/2 activation; Inhibiting HG-induced tube formation and migration; Inhibiting HG-induced VEGF expression; Inhibiting ERK1/2-mediated HIF-1 α activation; Abrogating VEGF-induced angiogenesis
<i>Dendrobium chrysotoxum lindl.</i> (Jie Wu, <i>et al.</i> 2017)	Gigantol	Diabetic cataract	Human lens epithelial cells	Inhibiting AR gene expression	Reducing AR gene expression; Bounding to insert AR gene base pairs of the double helix
<i>Dendrobium officinale kimura et Migo</i> (Jing-yi Zhang, <i>et al.</i> 2017)	DOP-GY	Diabetic cardiomyopathy	H9c2 cardiomyocytes	Exerting cardioprotective effects via PI3K/Akt and MAPK pathways	Increasing survival rate; cutting LDH leakage; Reducing lipid peroxidation damage; Improving activity of endogenous antioxidant enzymes; Inhibiting production of ROS; Declining mitochondrial membrane potential; Downregulating pro-apoptosis protein; Upregulating anti-apoptosis protein
<i>Dendrobium officinale kimura et Migo</i> (Kaiwei Huang, <i>et al.</i> 2016)	DOPA-1 & DOPA-2	Oxidative stress	RAW 264.7 macrophages	Ameliorating H2O2-induced oxidative injury	Activating splenocyte & macrophage; Promoting cell viability; Suppressing apoptosis; Ameliorating oxidative lesions.

effect of dendrobium on diabetes, further investigation, especially well-planned randomized clinical trial, are still needed to study the effect of dendrobium on treating diabetes.

This study combines the experimental evidence of dendrobium both in vivo and in vitro with TCM theory. Result shows that dendrobium may offer a new therapeutic promise to cure diabetes and its complications. Potential chemical structure with anti-diabetic effects is also demonstrated for further investigation. Well-designed clinical trials are anticipated in the future studies.

Conflict of interest

The authors declare no competing interests.

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