UNIVERSITI TEKNOLOGI MARA

DIFFERENTIAL CYTOTOXICITY OF ETHYL ACETATE EXTRACTS OF MALAYSIAN MARINE ENDOPHYTIC FUNGI (MBS3.2 AND SM1.4 PLATE 1) AGAINST HUMAN BREAST CANCER CELL LINES

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Dissertation submitted in partial fulfillments of the requirements for the Bachelor of Pharmacy (Hons.)

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July 2016

Acknowledgement

I would like to express my sincere gratitude to my supervisor, Dr Lim Siong Meng and co-supervisor, A/Prof Dr Kalavathy Ramasamy, for their full support, guidance, understanding and encouragement throughout my research. My project would not have been successful if without their incredible patience, timely wisdom and counsel.

My sincere thanks also go to the postgraduate students of the Collaborative Drug Discovery Research (CDDR) Laboratory, Faculty of Pharmacy, in particular to Ms Nur Syakila Rohawi and Mr Muhamad Zaki Zakaria for their kind assistance and time spent with me during the course of my lab work. I would also like to thank Mr Mohd Shahrul Izan bin Ibrahim for assisting me with ESEM. Not forgetting, also, my fellow laboratory mates, Ms Elinaz Jasmine binti Jamaludin, Ms Nur Amirah binti Abdul Nuri, Ms Nur Hidayah binti Ahmad Bashir, Ms Nur Syafiqah binti Lotpi and Ms Wan Nadrah binti Wan Zakri for their kind understanding and wonderful teamwork.

Last but not least, I wish to thank my grandfather (Mr Ismail Awadan), father (Mr Hendarto Awang), mother and brother (Mohd Yamin Akmal Hendarto) for their love, support and understanding. I would not have been able to complete this research without their continuous encouragement.

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ABSTRACT

Endophytes-derived metabolites, which are known to exhibit anticancer and antimicrobial activities, are progressively becoming significant in discovery of novel drugs. Given the abundance of unexplored Malaysian endophytes within marine plants, this study was carried out to assess the cytotoxic profiles of ethyl acetate endophytic fungal extracts MBS3.2 (originated from *Sonnaratia* sp.) and SM1.4 PLATE 1(originated from sea mud) against human breast cancer cells. The fungal cultures were first examined using gross observation and ESEM. The cultures were then extracted using rotary evaporator. The resultant extracts (0.01 - 100 μg/mL) were tested against MCF7 (ER positive breast cancer cells) and MDA468 (ER negative breast cancer cells) for 72 h. SRB assay was performed and data generated was used to plot dose-response curve from which the IC₅₀ (concentration that inhibit 50% cells population) was obtained. The present found MBS3.2 and SM1.4 PLATE 1 to be more selective towards MCF7. They were, however, modest cytotoxic agents against human breast cancer cells, yielding IC₅₀ > 20μg/mL. This warrants future studies against other cancer types.

Chapter 1

Introduction

1.1 Background of study

Breast cancer refers to tumour that arises from the cells of the breast (Kenny, 2014). It commonly affects women. In the United States of America, over 200,000 new cases of breast cancer are diagnosed each year (Roberts, 2015). In Malaysia, the incidence rate of breast cancer is estimated at one in twenty women. Nevertheless, the actual incidence rate of breast cancer could be higher as there are some Malaysian women who rely on traditional medicine as their primary treatment (Kaur, 2013). To date, the actual cause of breast cancer remained unknown.

Advanced stage breast cancer is commonly treated with chemotherapy and hormonal therapy. Whilst cytotoxic drugs commonly used in chemotherapy include doxorubicin, anthracycline and cyclophosphamide, hormonal therapy involves the use of fluorouracil, anastrazole and tamoxifen. Chemotherapy and hormonal therapy, however, exhibit negative impact against rapidly dividing normal cells. This in turn gives rise to undesirable side effects like alopecia, nausea, vomiting and heart damage. Besides, the tumour exposed to