

Antioxidants

Zahide Eris Eken*

Department of Dermatology, Sisli Florence Nightingale Hospital, Istanbul Bilim University, Turkey

Abstract

Antioxidants are chemicals that can prevent oxidative stress or slow cell damage. Natural antioxidants are mainly found in fruits and vegetables, marine plants, and some seafood that eat marine plants. Most commonly used antioxidants in vitiligo are; vitamin C, vitamin E, ginkgo biloba, vitamin A, polypodium leucotomas extract, polyunsaturated fatty acids, quercetin flavonoids, tea polyphenols, soy isoflavones, resveratrol, curcumin, capsaicin, glutathione, alpha lipoic acid, phenylalanine, cucumis melo, minerals.

Keywords: Antioxidants; Vitiligo; Oxidative stress

Introduction

According to autocytotoxic hypothesis; oxidative stress has been suggested to be the initial pathogenic event in melanocyte degeneration and loss with H₂O₂ accumulation in the epidermis of patients with active disease [1]. Significantly higher levels of Superoxide Dismutase (SOD) has been observed in the skin [2], erythrocytes [3,4], peripheral blood mononuclear cells [3,5] and serum [6,7] of vitiligo patients. Reduction in catalase (CAT) activity has been demonstrated in the epidermis [8,9], peripheral blood mononuclear cells [3] and in melanocytes [1].

In vitiligo patients lower levels of total antioxidant activity, superoxide dismutase, glutathione peroxidase, catalase, vitamin E, vitamin C and higher levels of oxidative stress indicators cause oxidative stress. There is imbalance of Reactive Oxygen Species (ROS) system in vitiligo melanocytes. Reactive oxygen species cause lipid peroxidation of cellular membrane of melanocytes. Consequently increased levels of ROS are capable of bleaching constitutional melanin and causing membrane lysis through lipid peroxidation reactions [10-13].

Increased oxidative stress and depletion of antioxidants reserves cause skin oxidative damage.

Antioxidants are chemicals that can prevent or slow cell damage. Antioxidant is not a substance; it's a behavior. Antioxidant properties can donate electrons and counteract free radicals. Natural antioxidants are mainly found in fruits and vegetables, marine plants, and some seafood that eat marine plants. There are thousands of antioxidant compounds, the most common dietary ones are vitamins A, C, and E and beta-carotene. Antioxidants can also be produced artificially and consumed in supplement form [14] (Table 1).

Vitamin C

Vitamin C is essential co-factor for collagen synthesis. Topical L-ascorbate improves epidermal barrier function. It has anti-aging effects and photoprotection from UV A and B. It causes neocollagenesis, inhibition of melanogenesis and improvement of a variety of inflammatory skin disorders [15,16] (Table 2).

Studies demonstrate; Oral combination of vitamins C and E in high doses provide protection against UV induced erythema [17].

Oral vitamins C, E, A, B12, folic acid and broadband UVB, has been followed by definite repigmentation in vitiligo patients [18].

Vitamin E

Vitamin E exists in 8 forms: 4 tocopherols and 4 tocotrienols. α -tocopherol is the most represented in humans.

Topical α -tocopherol reduces photo-aging and photo-carcinogenesis. It prevents UV-induced erythema, lipid peroxidation and immunosuppression.

Lin et al. demonstrate an increase in protection against UV-induced damage after oral administration of vitamin E combined with vitamin C [19] (Table 3).

Studies demonstrate; oral vit E has shown to increase narrow band-UVB effectiveness in vitiligo patients [20].

Ginkgo biloba

Ginkgo Biloba is one of the oldest tree species and the leaves of this herb has antioxidant effects. *Ginkgo biloba* contains bioactive constituents mainly flavonoids and some diterpene trilactones. A recent study has reported an association between daily ingestion of *Ginkgo biloba* with a significant improvement in total VASI (Vitiligo Area Scoring Index) and VETF (Vitiligo European Task Force) staging in vitiligo patients [21].

While the mechanism of *Ginkgo biloba* in the treatment of vitiligo

Vitamin C	Quercetin flavonoids	Glutathione
Vitamin E	Tea polyphenols	Alpha lipoic acid
Ginkgo Biloba	Soy isoflavones	Phenylalanine
Vitamin A	Resveratrol	Cucumis melo
Polypodium Leucotomas Extract	Curcumin	Minerals
Polyunsaturated Fatty Acids	Capsaicin

Table 1: Most commonly used antioxidants in vitiligo.

Orange	Lime	Strawberry	Mandarin
Lemon	Cranberry	Cauliflower	Mango
Melon	Tomato	Garlic	Blackberry
Kale	Blueberry	Grapefruit	Potato
Passion fruit	Pineapple	Raspberry	Broccoli
Spinach	Papaya	Kiwi	

Table 2: Natural sources of vitamin C.

*Corresponding author: Zahide Eris Eken, Department of Dermatology, Sisli Florence Nightingale Hospital, Istanbul Bilim University, Turkey, Tel: 212572 8293; E-mail: zahideeris@gmail.com

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Wheat germ oil	Tomato products	Nuts	Mangoes
Sunflower oil	Pumpkin	Nut oils	Broccoli
Safflower oil	Asparagus	Sweet potato	Avocados
Green leafy vegetables	Papayas	Rockfish	

Table 3: Natural sources of Vitamin E.

is unknown, ginkgo’s immunomodulatory, antioxidant, and anxiolytic properties may be of benefit to vitiligo sufferers [22,23].

Vitamin A

Includes retinol and carotenoids ($\alpha/\beta/\gamma$ -carotene, lycopene and the xanthophylls lutein and zeaxanthin). Vitamin A is fat-soluble and can be stored in keratinocytes as retinyl esters. Carotenoids are useful to protect against UV-induced damage [24] (Table 4).

Studies demonstrate; daily oral β -carotene (30 mg) can prevent and repair photoaging and increases synthesis of procollagen type I [25]. Topical β -carotene (2 mg/cm²) provides protection against reactive oxygen species in the human skin exposed to infra-red radiation [26].

Oral supplementation with vit A plus vit C and vit E, and minerals promoted vitiligo lesion repigmentation in the mice settings [27].

Polypodium Leucotomos (PL)

Polypodium leucotomos extract comes from a tropical fern plant grown in Central and South America. Recently, clinical research has shown that it has antioxidant and photoprotective properties PL acts as a scavenger to mop up free radicals and Reactive Oxygen Species (ROS), PL inhibits the depletion of Langerhans cells. PL reduces the number of sunburn cells. PL protects DNA by inhibiting the formation of cyclobutane pyrimidine dimers induced by UVB radiation. PL preserves skin tissue structure by inhibiting the infiltration of mast cells into skin [28,29].

Omega-3(three) Polyunsaturated Fatty Acids

Omega-3(three) polyunsaturated fatty acids are antioxidants and inhibitors of pro-inflammatory cytokines and free radicals. They protect auto-immunity by enhancing antioxidant enzymes. The enrichment of cell membranes with Omega-3 has been reported to increase the glutathione (GSH) peroxidase activity [30]. High doses of Omega-3 have been shown to decrease UVB-induced erythema [31]. Omega-3 seem to influence depressive disorders, that affect many patients with vitiligo [32] (Table 5).

Flavonoids and Green Tea Extracts

Flavonoids are the antioxidants most commonly found in the diet. Common sources of flavonoids in the diet are: wine, beer, tea, vegetables, fruit, and soy products. Both quercetin and green tea extract were found to have strong cytoprotective effects on H₂O₂ induced cell death [33].

Quercetin

Quercetin is a member of the flavonoids. In vitro studies demonstrate that quercetin can efficiently prevent keratinocyte oxidative damage induced by H₂O₂ exposure [34]. Topical application of the quercetin has been shown to prevent UVC-induced liposome peroxidation, UVB-induced myeloperoxidase activity and glutathione depletion [35] (Table 6).

Soybeans

Soybeans and associated food products are a rich source of

flavonoids. Genistein is an oestrogen that occurs naturally in soya beans. Oral genistein is shown to decrease UVB-induced skin photoaging, carcinogenesis, inflammation and immunosuppression in a rodent model [36]. Topical genistein reduces erythema and histologic inflammation induced by PUVA in mice [36].

Genistein has collagen-stimulating effects, by increasing collagen (COL1A2) gene expression [37].

Green Tea Polyphenols

The term green tea polyphenols is used to refer to several potent antioxidants that appear in green tea leaves. The most (60-80%) polyphenols contained in green tea leaves are catechins: epicatechin, epicatechin-3-gallate, epigallocatechin [38].

Epigallocatechin-3-gallate (EGCG) is the most important molecule. As antioxidants, catechins are more potent than vitamins C and E. Catechins are able to regenerate oxidized vitamin E. Epigallocatechin-3-gallate (EGCG) has photo-protective, anti-inflammatory, anti-carcinogenic effects and it can inhibit collagenase activity. Several studies demonstrate that, oral administration of EGCG significantly increases the minimal erythema dose to UV and improves microcirculation [39]. Topical application of EGCG inhibits carcinogenesis and selectively increases apoptosis in UVB-induced skin tumors [40].

Resveratrol

Resveratrol is a type of natural phenol. Its beneficial effects: anti-oxidant, anti-inflammatory, anti cancer, blood sugar-lowering. Studies demonstrate that oral resveratrol can prevent UV-induced tumorigenesis and cutaneous inflammatory disorders and increases cell survival [41]. Topical use of resveratrol on hairless mice before UVB; decreased erythema, reactive oxygen species production and inflammation [42] (Table 7).

Curcumin

Curcumin; a polyphenol derived from *Curcuma longa*, is an active

Liver (beef, pork, chicken, turkey, fish)	Papaya	Broccoli leaf	Collard greens
Sweet potato	Mango	Butter	Cheddar
Cheese	Pea	Kale	Melon
Cantaloupe	Broccoli	Spinach	Egg
Apricot	Carrot	Pumpkin	Milk

Table 4: Natural sources of Vitamin A.

Cold water	Flaxseeds	Brussel sprouts
Oily fish (salmon, herring, mackerel, anchovies, sardines)	Nuts	Blackberry
Fish oil	Eggs	Raspberry

Table 5: Natural sources of Omega-3(three) polyunsaturated fatty acids.

Apples	Leafy green	Whortleberry	Rowanberry
Onions (++red onion)	Vegetables	Lingonberry	Raspberry
Red grapes	Lovage	Cranberry	Broccoli
Citrus fruit Tomato	Legumes	Chokeberry	Caparis spinosa plant

Table 6: Natural sources of Quercetin.

Grapes	Peanuts	Apples	Chocolate
Wines	Mulberries	Cocoa	
Pinot noir	Blueberries	Powder baking	

Table 7: Natural sources of Resveratrol.

ingredient in the spice turmeric. In the recent studies; Curcumin has anti-oxidant, anti-proliferative, anti-inflammatory, antiviral, antibacterial and antifungal properties. It reduces wound-healing time, improves collagen deposition and increases fibroblast and vascular density in wounds. Curcumin could be effective in treatment of different skin diseases (Phototoxic dermatitis, vitiligo, psoriasis, chronic inflammatory diseases...) [43,44].

Capsaicin

Capsaicin is an active component of chili peppers, which are plants belonging to the genus *Capsicum*. Capsaicin is a potent anti-inflammatory agent which has been used for: pain and itch relief, because of its desensitization property. It's benefits; cancer prevention, cardiovascular diseases, weight reduction. High antioxidant and anti-apoptotic potential of capsaicin have been recently described.

Becatti et al. demonstrate; Pre-treatment with capsaicin inhibits keratinocytes apoptosis in peri lesional vitiligo skin, increases cellular total antioxidant capacity and improves mitochondrial activity and cell metabolism [45].

Glutathione

Glutathione (GSH) is a tripeptide and contributes to the functional vitality and morphological integrity of cells. GSH provides efficient protection against UVB-rays damages [46]. A severe GSH depletion has been documented inside keratinocytes after UV irradiation [47]. A few studies demonstrate; GSH supplementation is providing intrinsic wide-spectrum photo protection, cancer prevention and anti-aging effect [48].

Alpha Lipoic Acid

Alpha-lipoic acid or ALA is a naturally occurring compound that's made in the body. It serves vital functions at the cellular level, such as energy production. ALA is an antioxidant! There are food sources of ALA such as yeast, organ meats like liver and heart, spinach, broccoli, and potatoes. The study of Dell'Anna et al. demonstrate; Oral supplementation of alpha-lipoic acid before and during NB-UVB significantly improves the clinical effectiveness of NB-UVB and reducing vitiligo associated oxidative stress [49].

Phenylalanine

Phenylalanine is an α -amino acid and a precursor for tyrosine. Phenylalanine is found naturally in the breast milk of mammals. Some studies demonstrate phenylalanine antioxidant effects on vitiligo with or without UVA [50,51].

Cucumis melo

Cucumis is a plants genus in the Cucurbitaceae family, which includes the cucumber, muskmelons, the horned melon, and the West Indian gherkin. *Cucumis melo* extract is a rich antioxidant that naturally contain a high superoxide dismutase activity [52].

Minerals

The best minerals with antioxidant effects are Manganese, Selenium, and Iodine. These minerals either act as antioxidants on their own or act in conjunction with other cells in the body to stimulate the production of antioxidants. A few studies demonstrated minerals antioxidants efficacy in vitiligo [53-55].

Consequently antioxidants may play an adjuvant role in the management of vitiligo in addition to specific therapies. Up to date

there are no definite dosing regiments for antioxidants. More studies are needed to determine their side effect profile.

References

- Maresca V, Roccella M, Roccella F, Camera E, Del Porto G, et al. (1997) Increased sensitivity to peroxidative agents as a possible pathogenic factor of melanocyte damage in vitiligo. *J Invest Dermatol* 109: 310-313.
- Yildirim M, Baysal V, Inaloz HS, Can M (2004) The role of oxidants and antioxidants in generalized vitiligo at tissue level. *J Eur Acad Dermatol Venereol* 18: 683-686.
- Dell'Anna ML, Maresca V, Briganti S, Camera E, Falchi M, et al. (2009) Mitochondrial impairment in peripheral Indian. *J Dermatol Venereol Leprol* 75: 3271.
- Sravani, Babu KN, Gopal KVT, Rao GRR, Rao AR, et al. (2001) Oxidative stress in vitiligo mononuclear cells during the active phase of vitiligo. *J Invest Dermatol* 117: 908-913.
- Agarwal D, Shajil EM, Marfatia YS, Begum R (2004) Study on the antioxidant status of vitiligo patients of different age-groups in Baroda. *Pigment Cell Res* 17: 289-294.
- Hazneci E, Karabulut AB, Ozturk C, Batcioglu K, Dogan G, et al. (2005) A comparative study of superoxide dismutase, catalase and glutathione peroxidase activities and nitrate levels of vitiligo patients. *Int J Dermatol* 44: 636-640.
- Dell'Anna ML, Urbanelli S, Mastrofrancesco A, Camera E, Iacovelli P, et al. (2003) Alterations of mitochondria in peripheral blood mononuclear cells of vitiligo patients. *Pigment Cell Res* 16: 553-559.
- Chakraborty DP, Roy S, Chakraborty AK (1990) Vitiligo, psoralen and melanogenesis: Some observations and understanding. *J Invest Dermatol* 95: 441-445.
- Yildirim M, Baysal V, Inaloz HS, Kesici D, Delibas N (2003) The role of oxidants and antioxidants in generalized vitiligo. *J Dermatol* 30: 104-108.
- Schallreuter KU, Wood JM, Berger J (1991) Low catalase levels in epidermis of patients with vitiligo. *J Invest Dermatol* 97: 1081-1085.
- Koca R (2004) Oxidant-antioxidant enzymes and lipid peroxidation in generalized vitiligo. *Clin Exp Dermatol* 29: 406-409.
- Namazi MR (2007) Neurogenic dysregulation, oxidative stress, autoimmunity, and melanocytorrhagy in vitiligo: Can they be interconnected? *Pigment Cell Res* 20: 360-363.
- Gonzalez S (2011) A New Generation of Oral Photoprotectors. *The Open Dermatology Journal* 5: 6-14.
- Masaki H (2010) Role of antioxidants in the skin: anti-aging effects. *J Dermatol Sci* 58: 85-90.
- Helmut S (1997) Oxidative stress: Oxidants and antioxidants". *Experimental physiology* 82: 291-295.
- Stamford NP (2012) Stability, transdermal penetration, and cutaneous effects of ascorbic acid and its derivatives. *J Cosmet Dermatol*. 11: 310-317.
- Darr D (1996) Effectiveness of antioxidants (vitamin C and E) with and without sunscreens as topical photoprotectants. *Acta Derm Venereol* 76: 264-268.
- Eberlein-Konig B (1998) Protective effect against sunburn of combined systemic ascorbic acid (vitamin C) and d-alpha tocopherol (vitamin E). *J Am Acad Dermatol* 38: 45-48.
- Don P (2006) Treatment of vitiligo with broadband ultraviolet B and vitamins. *Int J Dermatol* 45: 63-65.
- Lin JY, Selim MA, Shea CR, Grichnik JM, Omar MM, et al. (2003) UV photoprotection by combination topical antioxidants vitamin C and vitamin E. *J Am Acad Dermatol* 48: 866-874.
- Elgoweini M (2009) Response of vitiligo to narrowband ultraviolet B and oral antioxidants. *J Clin Pharmacol* 49: 852-855.
- Szczurko O, Shear N, Taddio A, Boon H (2011) Ginkgo biloba for the treatment of vitiligo vulgaris: an open label pilot clinical trial. *BMC Complement Altern Med* 15: 11-21.
- Szczurko O, Boon HS (2008) A systematic review of natural health product treatment for vitiligo. *BMC Dermatol* 8: 2.

24. Parsad D, Pandhi R, Juneja A (2003) Effectiveness of oral Ginkgo biloba in treating limited, slowly spreading vitiligo. *Clin Exp Dermatol* 28: 285-287.
25. Camera E (2009) Astaxanthin, canthaxanthin and beta-carotene differently affect UVA-induced oxidative damage and expression of oxidative stress-responsive enzymes. *Exp Dermatol* 18: 222.
26. Cho S (2010) Differential effects of low-dose and high-dose beta-carotene supplementation on the signs photoaging and type I procollagen gene expression in human skin in vivo. *Dermatology*. 221: 160-171.
27. Darwin ME (2011) Topical beta-carotene protects against infra-red-light-induced free radicals. *Exp Dermatol* 20: 125-129.
28. Jalel A (2009) Vitiligo treatment with vitamins, minerals and polyphenol supplementation. *Indian J Dermatol* 54: 357-360.
29. Edlich RF, Winters KL, Lim HW (2004) Photoprotection by sunscreens with topical antioxidants and systemic antioxidants to reduce sun exposure. *Journal of Long-Term effects of Medical Implants* 14: 317-340.
30. Middeldkamp-Hup MA, Pathak MA, Parrado C (2004) Oral Polydium leucotomos extract decreases ultraviolet-induced damage of human skin. *J AM Acad Dermatol* 51: 910-918.
31. Joulain C (1994) Increased glutathione peroxidase activity in human blood mononuclear cells upon in vitro incubation with omega-3 fatty acids. *Biochem Pharmacol* 47: 1315-1323.
32. Rhodes LE (1994) Dietary fishoil supplementation in humans reduces UVB-erythema sensitivity but increases epidermal lipid peroxidation. *J Invest Dermatol* 103: 151-154.
33. Namazi MR (2009) Vitiligo and diet: A theoretical molecular approach with practical implications. *Indian J Dermatol Venereol Leprol* 75: 116-118.
34. Jeong YM, Choi YG, Kim DS, Park SH, Yoon JA, et al. (2005) Cytoprotective effect of green tea extract and quercetin against hydrogen peroxide-induced oxidative stress. *Arch Pharm Res* 28: 1251-1256.
35. Vicentini FT (2008) Quercetin in w/o microemulsion: in vitro and in vivo skin penetration and efficacy against UVB-induced skin capers damages evaluated in vivo. *Eur J Pharm Biopharm* 69: 948-957.
36. Fahlman BM (2009) UVA and UVB radiation-induced oxidation products of quercetin. *J Photochem Photobiol B*. 97: 123-131.
37. Wei H (2003) Isoflavone genistein: photoprotection and clinical implications in dermatology. *J Nutr* 133: 3811S-3819S.
38. Greenwel P (1995) Tyrosine dephosphorylation of nuclear proteins mimics transforming growthfactor beta-1 stimulation of alpha-2(I) collagen gene expression. *Mol Cell Biol* 15: 6813-6819.
39. Harbowy ME (1997) Tea chemistry. *Crit Rev Plant Sci* 16: 415-480.
40. Jeon HY (2009) Effects of oral epigallocatechin gallate supplementation on the minimal erythemadose and UV-induced skin damage. *Skin Pharmacol Physiol* 22: 137-141.
41. Lu YP (2002) Topical applications of caffeine or (-)-epigallocatechin gallate (EGCG) inhibit carcinogenesis and selectively increase apoptosis in UVB-induced skin tumors in mice. *Proc Natl Acad Sci USA* 99: 12455-12460.
42. Ndiaye M (2011) The grape antioxidant resveratrol for skin disorders: promise, prospects, and challenges. *Arch Biochem Biophys* 508: 164-170.
43. Aziz MH, Longley BJ, Ahmad N (2005) Chemoprevention of skin cancer by grape constituent resveratrol: relevance to human disease? *Faseb J* 19: 1193-1195.
44. Rowe DL (2009) Modulation of the BRCA1 protein and induction of apoptosis in triple negative breast cancer cell lines by the polyphenolic compound curcumin. *Breast Cancer: Basic and Clinical Research* 3: 61-75.
45. Cho JW (2007) Curcumin attenuates the expression of IL-1beta, IL-6, and TNF-alpha as well as cyclin E in TNF alpha-treated HaCaT cells; NF-kappaB and MAPKs as potential upstream targets. *Int J Mol Med* 19: 469-474.
46. Becatti M, Prignano F, Fiorillo C, Pescitelli L, Nassi P, et al. (2010) The involvement of Smac/DIABLO, p53, NF-kB, and MAPK pathways in apoptosis of keratinocytes from perilesional vitiligo skin: Protective effects of curcumin and capsaicin. *Antioxid Redox Signal* 13: 1309-1321.
47. Schäfer M, Dütsch S, auf dem Keller U, Navid F, Schwarz A, et al. (2010) Nrf2 establishes a glutathione-mediated gradient of UVB cytoprotection in the epidermis. *Genes Dev* 24: 1045-1058.
48. Zhu M, Bowden TG (2004) Molecular mechanisms for UV-B irradiation-induced glutathione depletion in cultured human keratinocytes. *Photochem Photobiol* 80: 191-196.
49. Sekhar RV, McKay SV, Patel SG, Guthikonda AP, Reddy VT, et al. (2011) Deficient synthesis of glutathione underlies oxidative stress in aging and can be corrected by dietary cysteine and glycine supplementation. *Am J Clin Nutr* 1: 162-167.
50. Dell'Anna ML, Mastrofrancesco A, Sala R, Venturini M, Ottaviani M, et al. (2007) Antioxidants and narrow band-UVB in the treatment of vitiligo: a double-blind placebo controlled trial. *Clin Exp Dermatol* 32: 631-636.
51. Siddiqui AH, Stolk LM, Bhaggoo R, Hu R, Schutgens RB, et al. (1994) L-phenylalanine and UVA irradiation in the treatment of vitiligo. *Dermatology* 188: 215-218.
52. Schallreuter KU, Zschiesche M, Moore J, Panske A, Hibberts NA, et al. (1998) In vivo evidence for compromised phenylalanine metabolism in vitiligo. *Biochem Biophys Res Commun* 24: 395-399.
53. Vouldokis I, Lacan D, Kamate C, Coste P, Calenda A, et al. (2004) Antioxidant and anti-inflammatory properties of a Cucumis melo extract rich in superoxide dismutase activity. *Journal of Ethnopharmacology* 94: 67-75.
54. Jalel A, Soumaya GS, Hamdaoui MH (2009) Vitiligo treatment with vitamins, minerals and polyphenol supplementation. *Indian J Dermatol* 54: 357-360.
55. Ines D, Sonia B, Riadh BM, Amel el G, Slaheddine M, et al. (2006) A comparative study of oxidant antioxidant status in stable and active vitiligo patients. *Arch Dermatol Res* 298: 147-152.

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