






Erratum: Acute and sub-acute toxicity of the crude extracts of the aerial parts of *Daucus carota* L. in laboratory rats

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Dates:

Published: 15 Oct. 2021

How to cite this article:

Ayeni, A.E., Abubakar, A.,
Aliyu, N., Uhomoibhi, L.O. &
Garba, I., 2021, 'Erratum:
Acute and sub-acute toxicity
of the crude extracts of the
aerial parts of *Daucus carota*
L. in laboratory rats', *Journal of
Medicinal Plants for Economic
Development* 5(1), a136.
[https://doi.org/10.4102/
jomped.v5i1.136](https://doi.org/10.4102/jomped.v5i1.136)

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In the version of the article initially published, Ayeni, A.E., Abubakar, A., Aliyu, N., Uhomoibhi, L.O. & Garba, I., 2019, 'Acute and sub-acute toxicity of the crude extracts of the aerial parts of *Daucus carota* L. in laboratory rats', *Journal of Medicinal Plants for Economic Development* 3(1), a69. <https://doi.org/10.4102/jomped.v3i1.69>, some of the *p*-values in the 'Results' section was incorrectly displayed as *p* -. The values should have reflected as *p* ≤.

The 'Results' section is hereby updated to:

Results

Acute toxicity

The acute oral toxicity of graded doses of the n-hexane, ethyl acetate and methanol extracts of *D. carota* aerial part was administered, respectively. The animals were observed for 14 days, and no mortality or any toxic signs such as tiredness, weakness, convulsion, hyperactiveness, dullness, diarrhoea and diuresis were noticed in the extracts, respectively, even at a high dose of 5000 mg/kg.

Sub-chronic toxicity

Body weight

During the second week, there was significant ($p \leq 0.05$) weight loss in the HAEDC and MAEDC with 500, 1000 and 1500 mg/kg lost when compared with a control group and there was no significant difference ($p \geq 0.05$) in the EAEDCtreated group (Table 1).

Haematological parameters

The effects of the daily oral administration of the HAEDC, EAEDC and MAEDC showed a statistically significant decrease ($p \leq 0.05$) on the red RBC at different doses when compared with the control group. However, there was a significant ($p \leq 0.05$) increase in the MCV of HAEDC and EAEDC with doses of 1000 mg/kg and 1500 mg/kg when compared with the control group. Furthermore, EAEDC at a dose of 500 mg/kg showed a significant ($p \leq 0.05$) increase in the MCH when compared with the control group (Table 2).

Biochemical parameters

There was no significant difference between the serum liver biomarker, AST, alanine amino transferase (ALT), TP and ALB in the treated group and control group. However, there was a significant ($p \leq 0.05$) decrease in ALP of all the treated groups when compared with control group (Table 3).

There was no significant change in the serum kidney biomarkers (urea, sodium, potassium, creatinine and chloride) in the treated group when compared with the control group. However, there was a significant ($p \leq 0.05$) decrease in the serum bicarbonate level in HAEDC with 500 mg/kg, 1000 mg/kg and 1500 mg/kg and MAEDC with 1000 mg/kg and 1500 mg/kg body weight when compared with the control group (Table 4).

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Note: DOI of original article published: <https://doi.org/10.4102/jomped.v3i1.69>