

Short-Communication

Curcumin's effect on serum zinc, copper and magnesium levels in obese individuals

Maryam Saberi-Karimian^{1,2}, Arezoo Orooji³, Niloofar Taghizadeh¹, Mansoureh Sadat Ekhteraee Toosi¹, Gordon A. Ferns⁵, Malihe Aghasizadeh^{1,4,*}, Majid Ghayour-Mobarhan^{1,*}

¹International UNESCO center for Health-Related Basic Sciences and Human Nutrition, Mashhad University of Medical Sciences, Mashhad, Iran

²Endoscopic and Minimally Invasive Surgery Research Center, Mashhad University of Medical Sciences, Mashhad, Iran

³Student Research Committee, Department of Epidemiology and Biostatistics, Faculty of Health, Mashhad University of Medical Sciences, Mashhad, Iran

⁴Student Research Committee, Faculty of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran

⁵Brighton & Sussex Medical School, Division of Medical Education, Falmer, Brighton, Sussex BN1 9PH, UK

Article history:

Received: Aug 30, 2021

Received in revised form:

Dec 04, 2021

Accepted: Dec 05, 2021

AJP, Vol. 13, No. 3, May-Jun

2023, 223-230.

[https://dx.doi.org/10.22038/](https://dx.doi.org/10.22038/AJP.2022.21517)

[AJP.2022.21517](https://dx.doi.org/10.22038/AJP.2022.21517)

* Corresponding Author:

Tel: +98-5138412081

Fax: +98-5138413006

maliagh20@gmail.com

ghayourm@mums.ac.ir

Keywords:

Obesity

Curcumin

Zinc

Copper

Magnesium

Abstract

Objective: The obesity prevalence is growing worldwide. There is strong evidence indicating that a disturbance of zinc, copper and magnesium concentrations is associated with the development of obesity and its related diseases. Our aim was to determine the effect of curcumin supplementation on serum zinc, magnesium and copper in obese individuals.

Materials and Methods: In this randomized crossover trial study, thirty obese patients with an age range of 18 to 65 years were randomized to treatment with curcumin 1 g/day or placebo for 30 days. There was then a two-week wash-out period, after which, subjects crossed to the alternate regimen. Serum levels of zinc, copper and magnesium were determined at baseline and at the end of the study.

Results: The study groups were similar to each other in base line characteristics. We did not observe significant impacts ($p>0.05$) of curcumin on Cu, Zn, Mg serum concentrations.

Conclusion: Curcumin administration at a dose of 1 g/day for 30 days did not affect serum Cu, Zn, Mg levels in obese subjects.

Please cite this paper as:

Saberi-Karimian M, Orooji A, Taghizadeh N, Ekhteraee Toosi M, Ferns G, Aghasizadeh M, Ghayour-Mobarhan M. Curcumin's effect on serum zinc, copper and magnesium levels in obese individuals. Avicenna J Phytomed, 2023; 13(3): 223-230.

Introduction

During recent decades, obesity has been considered an important threat to public health (Organization, 2000). Obesity is defined as a body mass index (BMI) >30

kg/m² and is associated with excessive accumulation of fat which may damage health (Pozza and Isidori, 2018). In addition, obesity is known as an independent risk factor for type 2 diabetes,

dyslipidemia and cardiovascular diseases (CVDs) (Deedwania and Gupta, 2006). Due to poor nutrition in countries with obesity and overweight, lack of some micronutrients (zinc, copper, magnesium) and vitamins were reported (Norouzi *et al.*, 2017). Studies show the important role of trace elements in human health. Copper and zinc are two essential elements in the diet that are involved in many biological reactions (Al-Fartusie and Mohssan, 2017). They act as cofactors in enzymatic reactions and show an essential role in various biochemical and metabolic processes in humans (Yatoo *et al.*, 2013). Also, magnesium is the 4th most abundant cation in the body and acts as a cofactor (Guerrero-Romero and Rodriguez-Moran, 2002; Zocchi *et al.*, 2021). Concerning the investigation of obese individuals with suboptimal levels of serum zinc, copper, and magnesium was essential for disease diagnosis. Delays in diagnosis for copper deficiency result in disability of residual neurological in patient (Kumar *et al.*, 2016, Rios-Lugo *et al.*, 2020, Zocchi *et al.*, 2021). According to these studies, copper as well as zinc and magnesium has an essential role in lipid metabolism (Herman *et al.*, 2016). Serum copper level is lower in obese subjects than healthy subjects based on previous studies (Sánchez Córdoba *et al.*, 2016, Yang *et al.*, 2019, Mohammad, 2020).

Some studies have reported that zinc, copper and magnesium have antioxidant properties. Also, both zinc and copper are cofactor for metalloenzymes and antioxidant enzymes (Tam *et al.*, 2003, Mohajer *et al.*, 2014, Mohammad, 2020).

Curcumin is a polyphenolic compound and a natural yellow pigment, also called turmeric (Safarian *et al.*, 2019). Turmeric has the most active natural biological properties include anti-inflammatory, antioxidant, antimicrobial, anti-cancer, anti-diabetic, anti-microbial, fat modifier, anti-arthritis, analgesic, anti-ischemic and anti-depressant activities (Aggarwal and Harikumar, 2009; Gupta, *et al.*, 2013,

Trujillo *et al.*, 2013, Mohajer *et al.*, 2014). Curcumin also exerts antioxidant activities through various mechanisms such as inhibition and elimination of reactive oxygen species (ROS) and modulation of enzymatic antioxidants and non-enzymatic ones (Ak and Gülçin, 2008; Sahebkar *et al.*, 2013; Panahi *et al.*, 2014). The US Food and Drug Administration (FDA) stated the limits of safe consumption levels to a maximum of 20 mg (Cardoso *et al.*, 2020). Despite its medicinal properties, curcumin is chemically unstable, so researchers are now looking for a suitable formulation to improve its bioavailability (Sharma, *et al.*, 2007, Cardoso *et al.*, 2020).

Regarding the association of curcumin with oxidative stress, the study aims to assess the effect of curcumin on zinc, magnesium and copper serum levels in obese individuals.

Materials and Methods

Study Design

This study was a randomized clinical trial approved by the Mashhad University of Medical Sciences (ID: 960443) (IRCT2013082914521N1) (Mohammadi, Sahebkar *et al.* 2013). Thirty obese individuals aged 18 to 65 years who referred to Nutrition Department of Ghaem Hospital, Mashhad, Iran, were recruited from August 2010 to August 2012. All individuals signed written informed consent. The Exclusion criteria were breast feeding, pregnancy, suffering from systemic diseases. Obesity was defined as a BMI > 30 kg/m². Anthropometric indices were measured using standard protocols for all participants and they completed a questionnaire including demographic information.

Clinical trial

Computer randomization was used to make random distribution to groups. To implement the random allocation sequence, we used sequentially numbered

Curcumin's effect on serum Zn, Cu and Mg levels

sealed envelopes that was opened by someone not involved in the project. After assignment to intervention, the participants, clinical research staff and statistician were blinded. A non-researcher coded the capsules containers as A and B and this stayed confidential until data analysis.

Curcumin capsules included 5 mg piperine plus 500 mg curcuminoids, were used (Sami Labs LTD, Bangalore, India) (Hewlings and Kalman 2017). The placebo capsules containing 5 mg of piperine were similar in shape and color to the curcumin ones. All participants received curcumin or placebo 1 g/day for a period of 30 days (n=15 in each study group). Then, the subjects were crossed over to the alternative regimen after a two-week wash-out period. In other words, there are two general phases in this project (before and after the wash-out period), in which the two groups participate including "Group 1: The patients received curcuminoids and then crossed over to the

placebo; and Group 2: The patients received placebo and then crossed over to the curcuminoids."

Serum biochemical variables

Blood samples were taken four times from every individual after 12-hr fasting at baseline and after a period of 30 days consumption at two general phases; before and after the wash-out period. Serum magnesium, zinc and copper levels were assayed using commercial kits by auto analyzer (model BT3000, Biotech-nica Instruments, Rome, Italy).

Statistical analysis

The power value of the study was 0.72 as measured using R software version 4.0.3. The Mann-Whitney U test and t-test were used for non-normally and normally dispersed factors, respectively. The period, treatment and carry over effects were evaluated for 2X2 cross-over study. A two-sided p-value of <0.05 was considered significant.

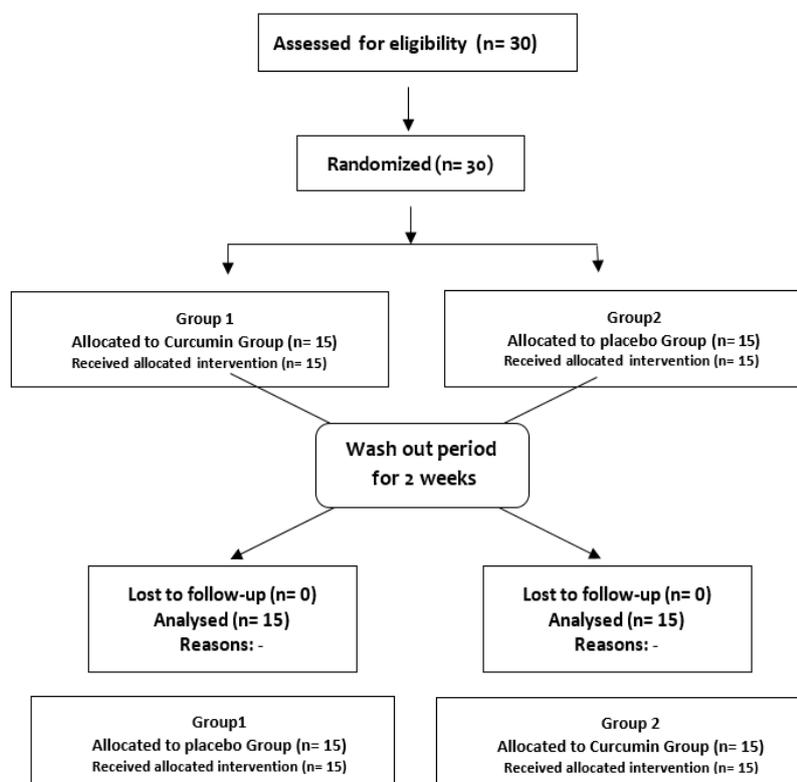


Figure 1. Flowchart of the study, "Phase I" and "Phase II". Group 1: The patients received curcuminoids and then crossed over to the placebo; and Group 2: The patients received placebo and then crossed over to the curcuminoids.

Results

As Table 1 shows, the mean age of the study population was 38.37±11.51 years old and among these, 58.6 and 55.2% of women were included in the curcumin and placebo groups, respectively. The baseline clinical characteristics of the subjects are shown in Table1. Also, The normal range for lipid profile (LDL (low-density lipoproteins), HDL (high-density lipoprotein), TG (triglycerides), and TC

(total cholesterol)) (Ghazizadeh *et al.*, 2021) and Zn, Mg and Cu (Ghazizadeh *et al.*, 2021) was defined according to previous studies. There were no significant differences in baseline features between the two groups ($p>0.05$). In addition, there were no significant effects ($p>0.05$) of curcumin supplementation at a dose of 1g/day for a period of 30 days on serum Cu, Zn, and Mg concentrations (Table 2). Figure 1 shows the study flowchart.

Table 1. Baseline biochemical factors in the study population

	Normal Range	Phase I			Phase II		
		Group 1	Group 2	p-value	Group 1	Group 2	p-value
Women %	-	58.6	55.2	0.791	58.6	55.2	0.791
Men %	-	41.4	44.8		41.4	44.8	
Age, years	-	38.84±11.12	37.81±12.31	0.09	-	-	-
BMI, kg/m ²	20.2-26.2	33.67±3.71	31.82±3.42	0.37	33.35±4.80	31.17±3.29	0.16
TG, mg/dl	26.7-225.6	102.55±29.01	126.2±57.15	0.18	100.39±47.20	120.73±64.25	0.3
LDL-C, mg/dl	55.6-171	119.78±23.15	118.75±27.72	0.9	119.83±33.58	124.6±27.89	0.66
TC, mg/dl	121.8-242.7	192.78±29.97	190.67±27.68	0.67	191.28±41.96	202.8±27.15	0.37
HDL-C, mg/dl	30.1-67	46.89±9.55	46.12±7.77	0.8	48.33±8.06	53.06±9.27	0.13
Serum Zn, µg/dl	68.6-135	106.25±29.29	94.71±30.26	0.49	102.11±26.72	91.67±18.39	0.32
Serum Cu, µg/dl	30-181.65	117.17±26.51	112.12±28.62	0.74	120.71±37.4	110.23±34.95	0.48
Serum Zn/Cu	-	0.93±0.31	0.89±0.36	0.8	0.92±0.34	0.92±0.29	0.98
Serum Mg, mg/dl	0.82-1.23	2.93±1.68	2.15±0.81	0.33	2.05±0.67	2.25±0.85	0.53

Data are presented as Mean±SD or interquartile range. Phase I: before wash-out period, Phase II: after wash-out period. Group 1: the patients received curcuminoids and then crossed over to the placebo; Group 2: the patients received placebo and then crossed over to the curcuminoids. BMI: Body Mass Index, TG: Triglyceride, TC: Cholesterol, LDL-C: Low-density lipoprotein, HDL-C: High-density lipoprotein, Zn: Zinc, Cu: Copper, Zn/Cu: Zinc ratio copper

Table 2. Curcumin’s effects on serum levels of Cu, Zn and Mg in the study population

Variable	Study group	N	Phase I		Phase II		p-value	
			Pre treatment	Post treatment	Pre treatment	Post treatment	Treatment effect	Period effect
Serum Zn, µg/dl	Group 1	15	106.25(29.29)	86.17(20.35)	102.11(26.72)	90.69(27.85)	0.75	0.99
	Group 2	15	94.71(30.26)	95.16(30.74)	91.67(18.39)	112.07(24.18)		
Serum Cu, µg/dl	Group 1	15	117.17(26.51)	130.27(38.21)	120.71(37.39)	123.95(27.16)	0.97	0.93
	Group 2	15	112.12(28.62)	116.10(58.53)	110.23(34.95)	122.5(39.75)		
Serum Zn/Cu	Group 1	15	0.93(0.31)	0.71(0.24)	0.92(0.34)	0.74(0.19)	0.97	0.9
	Group 2	15	0.89(0.36)	1.01(0.51)	0.92(0.29)	1.04(0.42)		
Serum Mg, mg/dl	Group 1	15	2.93(1.68)	2.09(0.81)	2.05(0.67)	1.93(0.62)	0.7	0.85
	Group 2	15	2.15(0.81)	2.12(1.10)	2.25(0.85)	2.33(0.86)		

Phase I: Before wash-out period, Phase II: After wash-out period. Group 1: The patients received curcuminoids and then crossed over to the placebo; Group 2: The patients received placebo and then crossed over to the curcuminoids. Zn: Zinc, Cu: Copper, Zn/Cu: Zinc ratio copper

Discussion

This randomized double-blind crossover trial study has been the first trial one that investigated the effect of curcumin on serum Zn, Cu and Mg levels in obese people. Today, obesity is considered a serious threat to health. Studies have shown a negative relationship between serum Mg and Zn levels and obesity (Shamnani, et al., 2018; Gu et al., 2019, Rios-Lugo et al., 2020). A meta-analysis study suggested that a higher serum copper concentration may be associated with obesity in children and adults (Gu et al., 2020). Copper and zinc as two essential trace elements play an important role in biological processes so that they may have a significant impact on the pathogenesis of metabolic diseases. In a study, zinc and copper deficiency were associated with a higher risk of CVDs and diabetes, and an imbalance between Zn and Cu levels led to oxidative stress and insulin resistance (Hamasaki et al., 2016). Darroudi et al., demonstrated that serum zinc and copper were altered in Iranian adults who were metabolically obese but in normal weight. They suggested that copper and zinc were the strong risk factor for metabolic syndrome (MetS) in normal weight individuals (Darroudi et al., 2019).

Curcumin is able to exert antioxidant effects by reducing oxygen and nitrogen free radicals or modulating the cellular defense system (Li et al., 2015). Also, curcumin anti-inflammatory and antioxidant properties can prevent the progression of inflammatory reactions (Panahi et al., 2018). Obesity is considered a low-grade chronic metabolic inflammation, and empirical evidence has shown that curcumin is effective in reducing the incidence of obesity-related diseases (Bradford, 2013).

There is little evidence about the effect of curcumin on trace element levels in obese individuals. According to the results of the present study, consumption of 500 mg of curcumin twice a day, with the

elimination of confounders, had no significant effect on magnesium, zinc, copper, and zinc to copper ratio in obese people. Consistent to our results, a study on 30 obese patients showed that a daily intake of 1 g/day of curcumin together with black pepper at a dose of 10 g/day for four weeks did not have a significant effect on copper and zinc, however, it was associated with a significant increase in zinc/copper and decrease in copper to zinc ratio (Mohajer et al., 2014). In a double-blind clinical trial on 120 individuals with metabolic syndrome, it was shown that after daily consumption of 1 g of curcumin and phospholipidated curcumin for 6 weeks, Zn concentration and Zn/Cu levels were significant and Zn was increased so that in the phospholipidated curcumin group, it was higher, but there was no significant effect on Cu (Safarian et al., 2019). We have previously reported that phospholipidated curcuminoids (1 g per day), for a period of 6 weeks, does not have effects on serum cholesteryl ester transfer protein level (Javandoost et al., 2018), or sleep-duration (Saber-Karimian et al., 2021) in subjects with MetS.

The difference between our study and other studies can be due to the dose and duration of curcumin intake in obese people. According to studies, doses above 12 g per day are safe and tolerable for humans and only mild side effects have been reported (Manjunatha and Srinivasan, 2006; Hsu and Cheng, 2007). However, in this study, a dose of 1 g per day was investigated.

In this study, we investigated the effect of curcumin on serum Cu, Zn and Mg levels in obese people. Our results demonstrated that curcumin did not affect serum Cu, Zn, Mg concentrations in obese subjects. Since, the evidence about the effect of curcumin on trace elements concentrations in obese individuals is little, it is suggested to investigate the association of these factors in future studies.

Acknowledgment

The authors express their appreciation to the all subjects who participated in this study. This research was financially supported by the Mashhad University of Medical Sciences.

Conflicts of interest

The authors have declared that there is no conflict of interest.

References

- Aggarwal BB, Harikumar KB. 2009. Potential therapeutic effects of curcumin, the anti-inflammatory agent, against neurodegenerative, cardiovascular, pulmonary, metabolic, autoimmune and neoplastic diseases. *Int J Biochem Cell Biol*, 41: 40-59.
- Ak T, Gülçin İ. 2008. Antioxidant and radical scavenging properties of curcumin. *Chem Biol Interact*, 174: 27-37.
- Bradford PG. 2013. Curcumin and obesity. *Biofactors*, 39: 78-87.
- Cardoso BD, Rodrigues ARO, Almeida BG, Amorim CO, Amaral VS, Castanheira E, Coutinho PJ. 2020. Stealth Magnetoliposomes based on calcium-substituted magnesium ferrite nanoparticles for curcumin transport and release. *Int J Mol Sci*, 21: 3641.
- Darroudi S, Fereydouni N, Tayefi M, Esmaily H, Sadabadi F, Khashyarmansh Z, Tayefi B, Moalemzadeh Haghighi H, Timar A, Mohammadpour AH, Gonoodi K, Ferns GA, Hoseini SJ, Ghayour-Mobarhan M. 2019. Altered serum zinc and copper in Iranian Adults who were of normal weight but metabolically obese. *Sci Rep*, 9: 14874.
- Deedwania P, Gupta R. 2006. Management issues in the metabolic syndrome. *J Assoc Physicians India*, 54: 797-810.
- Ghazizadeh H, Kathryn Bohn M, Yaghooti-Khorasani M, Kamel Khodabandeh A, Zare-Feyzabadi R, Timar A, Mohammadi-Bajgiran M, Oladi MR, Rohban M, Esmaily H, Ferns GA. 2021. Age-and sex-specific reference intervals for superoxide dismutase enzyme and several minerals in a healthy adult cohort. *J Clin Lab Anal*, 35: e23897.
- Ghazizadeh H, Yaghooti-Khorasani M, Khodabandeh AK, Hasanzadeh E, Sahranavard T, Banihashem-Rad SH, Timar A. 2021. Reference intervals for routine biochemical markers and body mass index: A study based on healthcare center database in northeastern Iran. *IUBMB life*, 73: 390-397.
- Gu K, Li X, Xiang W, Jiang X. 2020. The relationship between serum copper and overweight/obesity: A meta-analysis. *Biol Trace Elem Res*, 194: 336-347.
- Gu K, Xiang W, Zhang Y, Sun K, Jiang X. 2019. The association between serum zinc level and overweight/obesity: a meta-analysis. *Eur J Nutr*, 58: 2971-2982.
- Guerrero-Romero F, Rodriguez-Moran M. 2002. Low serum magnesium levels and metabolic syndrome. *Acta diabetol*, 39: 209-213.
- Gupta SC, Patchva S, Aggarwal BB. 2013. Therapeutic roles of curcumin: lessons learned from clinical trials. *AAPS J*, 15: 195-218.
- Hamasaki H, Kawashima Y, Yanai H. 2016. Serum Zn/Cu ratio is associated with renal function, glycemic control, and metabolic parameters in Japanese patients with and without type 2 diabetes: a cross-sectional study. *Front Endocrinol (Lausanne)*, 7: 147.
- Herman M, Golasik M, Piekoszewski W, Walas S, Napierala M, Wyganowska-Swiatkowska M, Florek E. 2016. Essential and toxic metals in oral fluid—a potential role in the diagnosis of periodontal diseases. *Biol Trace Elem Res*, 173: 275-282.
- Hewlings SJ, Kalman DS. 2017. Curcumin: a review of its effects on human health. *Foods*, 6: 92.
- Hsu CH, Cheng AL. 2007. Clinical studies with curcumin. *Adv Exp Med Biol*, 595: 471-480.
- Javandoost A, Afshari A, Saberi-Karimian M, Sahebkar A, Safarian, H, Moammeri M, Pasdar A. 2018. The effects of curcumin and a modified curcumin formulation on serum cholesteryl ester transfer protein concentrations in patients with metabolic syndrome: A randomized, placebo-controlled clinical trial. *Avicenna J Phytomed*, 8: 330-337.
- Kumar P, Hamza N, Madhok B, De Alwis N, Sharma M, Miras AD, Mahawar KK. 2016. Copper deficiency after gastric bypass for morbid obesity: a systematic review. *Obes*

Curcumin's effect on serum Zn, Cu and Mg levels

- Surg, 26: 1335-1342.
- Li S, Tan HY, Wang N, Zhang ZJ, Lao L, Wong CW, Feng Y. 2015. The role of oxidative stress and antioxidants in liver diseases. *Int J Mol Sci*, 16: 26087-26124.
- Manjunatha H, Srinivasan K. 2006. Protective effect of dietary curcumin and capsaicin on induced oxidation of low-density lipoprotein, iron-induced hepatotoxicity and carrageenan-induced inflammation in experimental rats. *FEBS J*, 273: 4528-4537.
- Mohajer A, Ghayour-Mobarhan M, Parizadeh SMR, Tavallaie S, Rajabian M, Sahebka A. 2014. Effects of supplementation with curcuminoids on serum copper and zinc concentrations and superoxide dismutase enzyme activity in obese subjects. *Tace Elem Electroly*, 32: 16-21.
- Mohammad CA. 2020. Efficacy of curcumin gel on zinc, magnesium, copper, IL-1 β , and TNF- α in chronic periodontitis patients. *Biomed Res Int*, 2020: 8850926.
- Mohammadi A, Sahebkar A, Iranshahi M, Amini M, Khojasteh R, Ghayour-Mobarhan M, Ferns GA. 2013. Effects of supplementation with curcuminoids on dyslipidemia in obese patients: a randomized crossover trial. *Phytother Res*, 27: 374-379.
- Norouzi S, Adulcikas J, Sohal SS, Myers S. 2017. Zinc transporters and insulin resistance: therapeutic implications for type 2 diabetes and metabolic disease. *J Biomed Sci*, 24: 87.
- World Health Organization. 2000. Obesity: preventing and managing the global epidemic.
- Panahi Y, Ahmadi Y, Teymouri M, Johnston TP, Sahebkar A. 2018. Curcumin as a potential candidate for treating hyperlipidemia: a review of cellular and metabolic mechanisms. *J Cell Physiol*, 233: 141-152.
- Panahi Y, Saadat A, Beiraghdar F, Nouzari SMH, Jalalian HR, Sahebkar A. 2014. Antioxidant effects of bioavailability-enhanced curcuminoids in patients with solid tumors: A randomized double-blind placebo-controlled trial. *J Funct Foods*, 6: 615-622.
- Piuri G, Zocchi M, Della Porta M, Ficara V, Manoni M, Zuccotti GV, Pinotti L, Maier JA, Cazzola R. 2021. Magnesium in obesity, metabolic syndrome, and Type 2 diabetes. *Nutrients*, 13: 320.
- Pozza C, Isidori AM. 2018. What's behind the obesity epidemic. In *Imaging in bariatric surgery*. Springer, pp. 1-8.
- Rios-Lugo MJ, Madrigal-Arellano C, Gaytán-Hernández D, Hernández-Mendoza H, Romero-Guzmán ET. 2020a. Association of serum zinc levels in overweight and obesity. *Biol Trace Elem Res*, 198: 51-57.
- Rios-Lugo MJ, Madrigal-Arellano C, Gaytán-Hernández D, Hernández-Mendoza H, Romero-Guzmán ET. 2020b. Association of serum zinc levels in overweight and obesity. *Biol Trace Elem Res*, 198: 51-57.
- Saberi-Karimian M, Ghazizadeh H, Mohammadzadeh E, Ferns GA, Ghayour-Mobarhan M, Sahebkar A. 2021. Does curcumin have an effect on sleep duration in metabolic syndrome patients? *Avicenna J Phytomed*, 11: 190-198.
- Safarian H, Parizadeh SMR, Saberi-Karimian M, Darroudi S, Javandoost A, Mohammadi F, Moammeri M, Ferns GA, Ghayour-Mobarhan M, Mohebbati M. 2019. The effect of curcumin on serum copper and zinc and Zn/Cu ratio in individuals with metabolic syndrome: a double-blind clinical trial. *J Diet Suppl*, 16: 625-634.
- Sahebkar A, Mohammadi A, Atabati A, Rahiman S, Tavallaie S, Iranshahi M, Akhlaghi S, Ferns GA, Ghayour-Mobarhan M. 2013. Curcuminoids modulate pro-oxidant-antioxidant balance but not the immune response to heat shock protein 27 and oxidized LDL in obese individuals. *Phytother Res*, 27: 1883-1888.
- Sánchez Córdoba A, Rojas Moncada P, Obregón BF, Carrasco Naranjo F, Inostroza Escobar J, Codoceo J, Valencia A, Papapietro K, Csendes A, Ruz M. 2016. Micronutrient deficiencies in morbidly obese women prior to bariatric surgery. *Obes Surg*, 26: 361-368.
- Shamrani G, Rukadikar CA, Gupta V, Singh S, Tiwari S, Bharti SS, Sharma P. 2018. Serum magnesium in relation with obesity. *Natl J Physiol Pharm Pharmacol*, 8: 1074-1077.
- Sharma RA, Steward WP, Gescher AJ. 2007. Pharmacokinetics and pharmacodynamics of curcumin. The molecular targets and therapeutic uses of curcumin in health and disease. *Adv Exp Med Biol*, 595: 453-470.
- Tam M, Gomez S, Gonzalez-Gross M, Marcos A. 2003. Possible roles of magnesium on the immune system. *Eur J Clin Nutr*, 57:

- 1193-1197.
- Trujillo J, Chirino YI, Molina-Jijón E, Andérica-Romero AC, Tapia E, Pedraza-Chaverrí J. 2013. Renoprotective effect of the antioxidant curcumin: Recent findings. *Redox Biol*, 1: 448-456.
- Yang H, Liu CN, Wolf RM, Ralle M, Dev S, Pierson H, Askin F, Steele KE, Magnuson TH, Schweitzer MA, Wong GW, Lutsenko S. 2019. Obesity is associated with copper elevation in serum and tissues. *Metallomics*, 11: 1363-1371.