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ORIGINAL ARTICLE

The study of Protective effects of Chlorogenic acid on Kidney toxicity caused by Arsenic trioxide in mice

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ABSTRACT

The protective effects of chlorogenic acid were studied on the kidney toxicity induced by arsenic trioxide. Inorganic arsenic compounds like arsenic trioxide are carcinogen for human. Studies have shown that chronic exposure to inorganic arsenics may lead to many cancer types, like lung, skin, liver, kidney, and urinary bladder. Chlorogenic acid is a plant chemical compound that is as ester between caffeic acid and quinic acid molecules. Chlorogenic acid is a powerful antioxidant that is in foods. Kidney damage was studied by assessing the changes of blood biochemical parameters, including Blood urea nitrogen (BUN), and creatinine. The serum levels of BUN and creatinine have significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the groups of control and negative control. The serum levels of BUN, and creatinine have significantly decreased (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg) when compared to the positive control group. These results conclude that chlorogenic acid has protected the kidney from arsenic trioxide induced toxicity. Keywords: Chlorogenic acid, Arsenic trioxide, Blood urea nitrogen, Creatinine

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INTRODUCTION

Arsenic is in both organic and inorganic forms in nature and is as a potent threat to the environment, human health, and animals [1,2]. Arsenic can lead to acute and chronic poisoning. The features of severe poisoning with arsenic include digestive disorders, convulsion, diarrhea, shock, bloody urine, vomiting, coma and death. The chronic effects of arsenic have impact on various body systems like respiratory, blood, liver, kidney, nervous, cardiovascular, and endocrine [3]. Exposure to inorganic arsenic occurs through various factors such as drinking water, air, food, fuel and pesticides [4, 5]. The trivalent arsenic compounds like arsenic trioxide, sodium arsenite, and arsenic trichloride are more toxic than the pentavalent arsenic compounds like arsenic pentoxide, arsenic acid, and calcium arsenates [6]. The kidney and liver are as the most sensitive organs for metals because those are contain a lot of the metallothionein binding toxic metals [7]. The kidney is the major source for regulation of water and electrolytes, waste and chemical compounds. Many studies have shown that the risk of kidney cancer in patients with severe renal failure is 5 to 20 higher than healthy people [8]. The effect of arsenic on kidney function have done by assessing serum levels of blood urea nitrogen, creatinine, uric acid [9, 10]. It has been proven that oxidative stress and inflammation play an important role in liver and kidney damages [11]. Free radicals can lead to a wide range of toxic oxidative reactions like peroxidation of membrane

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lipids, inhibition of mitochondrial respiratory chain enzymes, DNA damage, enzymes damage, and proteins damage [12]. Antioxidants prevent damages caused by free radicals. Antioxidants can greatly reduce damages caused by free radicals with naturalize those [13]. Chlorogenic acid is a polyphenolic compound that is in various foods like coffee, potato, and apple. Chlorogenic acid is as ester between caffeic acid and quinic acid molecules. Studies have shown that chlorogenic acid has many medicinal properties like anti-bacterial, anti-inflammatory, and anti-cancer [14, 15]. Phenolic compounds have antioxidant properties that play an important role in protection of body cells and organs against oxidative stress [16]. The present study evaluates the protective effects of chlorogenic acid on the kidney toxicity caused by arsenic trioxide in vitro.

MATERIALS AND METHODS

Animals

42 male mice (27 \pm 2 g) procured from the animal house of the Mazandaran University of Medical Sciences, Sari, Iran. They were maintained in a controlled environment (12 h light/dark cycles) and temperature (28 \pm 2°C). The mice were fed with drinking water and standard diet.

Chemicals

Chlorogenic acid was obtained from Sigma-Aldrich Company (USA). Arsenic trioxide was purchased from Merck Company (Germany).

Treatment groups

Mice were divided in 7 groups and 6 mice in each group. In these experiments, the effects of intraperitoneal administration of different doses of chlorogenic acid on the biochemical parameters of the kidney were investigated. The first group was administered with normal saline (0.9%) (10 mg/kg) as control, the second group was administered with arsenic trioxide (10 mg/kg) as positive control, the third group was administered with chlorogenic acid (100mg/kg) as a negative control, and the fourth to the seventh groups were administered with different doses of chlorogenic acid (5, 10, 50, 100 mg/kg), then after 2 hours the fourth to the seventh groups were administered with arsenic trioxide (10 mg/kg) [17].

Biochemical assay

Blood samples were collected by cardiac puncture with the aid of syringe, transferred into centrifuge tubes, and centrifuged at 2000 rpm for 10 minutes until the serum was partitioned from blood cells. According to usual methods of measuring urea, Diacetyl derived from the hydrolysis of diacetyl monoxime was combined with urea and yellow color was created. Measure absorbance of solutions done at 475 nm with spectrophotometry. The orange color derived from the combined of creatinine and picric acid was measured at 500 nm with spectrophotometry [18].

Statistical analysis

The data were analyzed with SPSS 16 software. Statistical analysis of data was carried out with one way analysis of variance and Tukey test. The differences were considered significant at p < 0.05.

RESULTS

In this study, the serum level of BUN has significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the control group (normal saline, 10 mg/kg) (Figure 1).

The serum level of BUN has significantly decreased (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg) when compared to the positive control group (arsenic trioxide, 10 mg/kg) but didn't show significant difference in dose of 5 mg/kg (Figure 2). The serum level of BUN has significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the negative control group (chlorogenic acid, 100 mg/kg) (Figure 3). The serum level of creatinine has significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the control group (normal saline, 10 mg/kg) (Figure 4). The serum level of creatinine has significantly decreased (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg) when compared to the positive control group (arsenic trioxide, 10 mg/kg) but didn't show significant difference in dose of 5 mg/kg (Figure 5). The serum level of creatinine has significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the negative control group (chlorogenic acid, 100 mg/kg) (Figure 6).

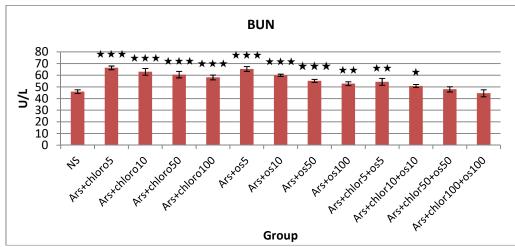


Figure 1: Serum level of BUN has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg).

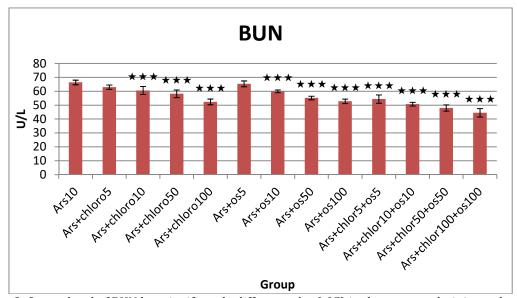


Figure 2: Serum level of BUN has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg).

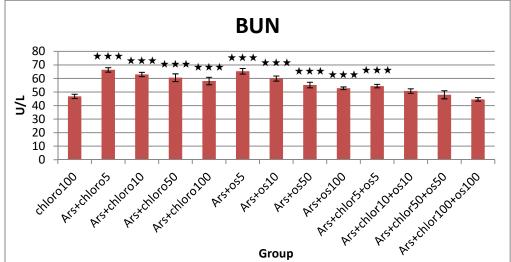


Figure 3: Serum level of BUN has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg).

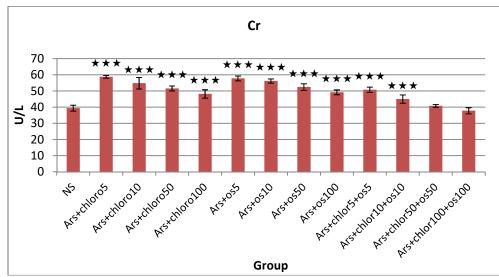


Figure 4: Serum level of creatinine has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg).

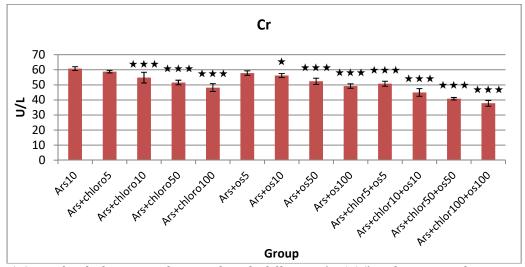


Figure 5: Serum level of creatinine has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg).

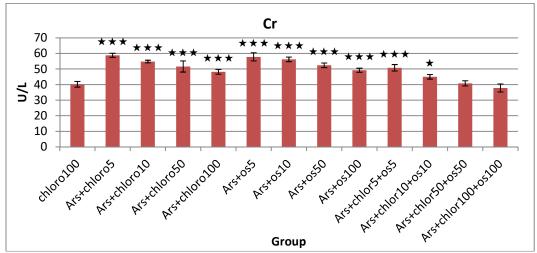


Figure 6: Serum level of creatinine has significantly difference (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg).

DISCUSSION

Arsenic trioxide is used as ingredient compounds like insecticides, herbicides, fungicides, glass, and ceramic [19]. Arsenic trioxide is a carcinogen. Strong epidemiological evidence of cancer is in people exposed to arsenic trioxide, like cancers of lung, bladder, kidney, prostate, liver, breast, skin, and colon [20]. Trivalent arsenic in the liver converted to non-toxic compounds. Arsenic trioxide after ingestion during the methylation reaction as dimethylarsenic acid (50%), methylarsonic acid (14%), pentavalent arsenic (8%) and trivalent arsenic (8%) excreted in urine. The majority of these compounds excreted through the kidneys and a little excreted in feces [21, 22]. Inorganic arsenic with the production of reactive oxygen species can damage to kidneys. Arsenic with accumulation in the kidney tissue cause increase oxidative stress, reduce of kidney function, increase of blood urea nitrogen, lipid peroxidation and reduce glutathione [23]. Blood urea nitrogen and creatinine are waste productions in the blood that removed by the kidney. The serum level of creatinine and blood urea nitrogen are used for assessing kidney function [24,25]. Kidney function was evaluated by determining the serum level of BUN and creatinine. Based on the results of this study, the serum levels of BUN and creatinine have significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the control group (normal saline, 10 mg/kg). Creatinine is a breakdown, production of creatine phosphate in the muscle. Conversion of creatine to creatinine is a non-enzymatic irreversible process. Arsenic causes the release of creatine phosphokinase from muscle cells. This enzyme is responsible the conversion of phosphocreatine to creatine [7]. The kidney is the major site for excretion of arsenic that is as significant place for conversion arsenic pentavalent to arsenic trivalent. Arsenic damages to capillaries, tubules, and glomeruli in the kidney [26]. Arsenic damages to proximal tubular cells that lead to proteinuria and oliguria in the kidney, but sever poisoning with arsenic is caused shock and dehydration that is a real risk for kidney failure [26,27]. The toxic effects of acute exposure to arsenic trioxide are because of its ability for binding to sulfhydryl groups in proteins. It inhibits the production of energy needed to function of tissues and reduce of glutathione, which reduce the detoxification of arsenic [28,29]. In this study, the serum levels of BUN and creatinine have significantly decreased (p<0.05) in the groups administered with of chlorogenic acid (10, 50 and 100 mg/kg) when compared to the positive control group (arsenic trioxide, 10 mg/kg). Chlorogenic acid is an antioxidant polyphenolic compounds that have been shown effects in cultured human endothelial cells and ischemia - perfusion injury to the liver in vitro [30,31]. Chlorogenic acid has an important role in the prevention of many diseases related to oxidative stress like cancer, cardiovascular, neurological, and aging [16,31]. Phenolic compounds are in many foods that have beneficial effects on health and are attractive for nutrition specialists. Phenolic compounds after consumption exposed reactions methylation, sulfation, and glucuronidation in small intestine, large intestine, and liver cells [32, 33]. In this study, the serum levels of BUN and creatinine have significantly increased (p<0.05) in the groups administered with of chlorogenic acid (5, 10, 50 and 100 mg/kg) when compared to the negative control group (chlorogenic acid, 100 mg/kg). Phenolic compounds combined with free radicals that converted those to non-radical forms. These non-radical forms regulated glomerular filtration rate in kidney and to be maintained the normal serum levels of nitrogenous waste products [7,34]. According to what was said, the antioxidant property of chlorogenic acid could be important in decrease the serum levels of BUN and creatinine where arsenic trioxide plays a great role.

COMPETING INTEREST

The authors have declared that no competing interest exists.

REFERENCES

- 1. Flora SJ, Bhadauria S, Kanan GM, Singh N. (2007). Arsenic induced oxidative stress and the role of antioxidant supplementation during chelation: A review. J Environ Biol; 28(2): 333-347.
- 2. Singh TS, Pant KK. (2004). Equilibrium, kinetics and thermodynamic studies for adsorption of As(III) on activated alumina. Separation and Purification Technol; 36(2): 139-147.
- 3. Hughes M F. (2002). Arsenic toxicity and potential mechanisms of action. Toxicol Letters; 133(1):1-16.
- 4. Farombi EO, Adelow OA, Ajimoko YR. (2007). Biomarkers of oxidative stress and heavy metal levels as indicators of environmental pollution in African cat fish (Clarias gariepinus) from Nigeria Ogun river. Int J Environ Res Pub Hlth; 4(2): 158-165.
- 5. Miller WH, Schipper HM, Lee JS, Waxman S. (2002). Mechanisms of action of arsenic trioxide. Cancer Res; 62(14): 3893-3903.
- 6. Stevens JJ, Graham B, Walker AM, Tchounwou PB, Rogers C. (2010). The effects of arsenic trioxide on DNA synthesis and genotoxicity in human colon cancer cells. Int J Environ Res Public Health; 7(5): 2018-2032.

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- 7. Saxena PN, Anand S, Saxena N, Bajaj P. (2009). Effect of arsenic trioxide on renal functions and its modulation by Curcuma aromatica leaf extract in albino rat. Journal of Environmental Biology; 30(4): 527-531.
- 8. Huang CY, Chu JS, Pu YS, Yang HY, Wu CC, Chung CJ, Hsueh YM. (2011). Effect of urinary total arsenic level and estimated glomerular filtration rate on the risk of renal cell carcinoma in a low arsenic exposure area. Journal of Urology; 185(6): 2040-2044.
- 9. Saxena PN, Mahour K, Kumar A. (2006). Protective effect of Panax ginseng extract on renal functions altered by mercuric chloride in albino rats. J Ginseng Res; 30(3): 100-105.
- 10. Shlipak MG, Heidenreich PA, Noguchi H, Chertow GM, Browner WS, McClellan MB. (2002). Association in renal insufficiency with treatment and outcomes after myocardial infarction in elderly patients. Ann Intern Med; 137(7): 555-562.
- 11. Palipoch S. (2013). A review of oxidative stress in acute kidney injury: protective role of medicinal plants-derived antioxidants. Afr | Tradit Complement Altern Med; 10(4): 88-93.
- 12. Umamaheswari M, Chatterjee TK. (2008). In vitro antioxidant activities of the fractions of *Coccinia Grandis* L. leaf extract. Afr J Trad CAM; 5(1): 61-73.
- 13. Fang Y, Yang S, Wu G. (2002). Free radicals, antioxidants and nutrition. Nutrition; 18(10): 872-879.
- 14. De Azevedo ABA, Mazzafera P, Mohamed RS, Vieira de Melo SAB, Kieckbusch TG. (2008). Extraction of caffeine, chlorogenic acids and lipids from green coffee beans using supercritical carbon dioxide and co-solvents. Brazilian Journal of Chemical Engineering; 25(3): 543-552.
- 15. Shin JY, Yu HG. (2014). Chlorogenic acid supplementation improves multifocal electroretinography in patients with retinitis pigmentosa. J Korean Med Sci; 29(1): 117-121.
- 16. Belay A, Gholap AV. (2009). Characterization and determination of chlorogenic acids (CGA) in coffee beans by UV-Vis spectroscopy. African Journal of Pure and Applied Chemistry; 3(11): 234-240.
- 17. Shokrzadeh, M., Chabra, A., Ahmadi, A., Naghshvar, F., Habibi, E., Salehi, F., & Assadpour, S. (2015). Hepatoprotective effects of Zataria multiflora ethanolic extract on liver toxicity induced by cyclophosphamide in mice.Drug research, 65(04), 169-175.
- 18. Saeedi Saravi, S. S., & Shokrzadeh, M. (2008). Histopathological and biochemical disorders following administration of Sambucus ebulus extract on mice and rats and preventive effects of vitamins C and E on renal and hepatic disorders. Phoog Mag, 5, 131-5.
- 19. Peshut, P. J., Morrison, R. J., & Brooks, B. A. (2008). Arsenic speciation in marine fish and shellfish from American Samoa. Chemosphere, 71(3), 484-492.
- 20. Singh, A. P., Goel, R. K., & Kaur, T. (2011). Mechanisms pertaining to arsenic toxicity. Toxicology international, 18(2), 87.
- 21. Vahter, M. (2002). Mechanisms of arsenic biotransformation. Toxicology, 181, 211-217.
- 22. Valter, M. (2000). Genetic polymorphism in the biotransformation of inorganic arsenic and its role in toxicity. Toxicology letters, 112, 209-217.
- 23. Sasaki, A., Oshima, Y., & Fujimura, A. (2007). An approach to elucidate potential mechanism of renal toxicity of arsenic trioxide. Experimental hematology, 35(2), 252-262.
- 24. Otimenyin, S. O., Olorunfemi, P. O., Sabo, Y. S., & Edache, J. N. (2014). Acute and sub-acute toxicities of hamegonorrhea, a herbal gonorrhea mixture.
- 25. Patel, S. S., Molnar, M. Z., Tayek, J. A., Ix, J. H., Noori, N., Benner, D., ... & Kalantar-Zadeh, K. (2013). Serum creatinine as a marker of muscle mass in chronic kidney disease: results of a cross-sectional study and review of literature. Journal of cachexia, sarcopenia and muscle, 4(1), 19-29.
- 26. Hsueh, Y. M., Chung, C. J., Shiue, H. S., Chen, J. B., Chiang, S. S., Yang, M. H., ... & Su, C. T. (2009). Urinary arsenic species and CKD in a Taiwanese population: a case-control study. American Journal of Kidney Diseases, 54(5), 859-870.
- 27. Sinha, M., Manna, P., & Sil, P. C. (2008). Arjunolic acid attenuates arsenic-induced nephrotoxicity. Pathophysiology, 15(3), 147-156.
- 28. De Chaudhuri, S., Ghosh, P., Sarma, N., Majumdar, P., Sau, T. J., Basu, S., ... & Giri, A. K. (2008). Genetic variants associated with arsenic susceptibility: study of purine nucleoside phosphorylase, arsenic (+ 3) methyltransferase, and glutathione S-transferase omega genes. Environmental health perspectives, 116(4), 501.
- 29. Levy, J. L., Stauber, J. L., Adams, M. S., Maher, W. A., Kirby, J. K., & Jolley, D. F. (2005). Toxicity, biotransformation, and mode of action of arsenic in two freshwater microalgae (Chlorella sp. and Monoraphidium arcuatum). Environmental Toxicology and Chemistry, 24(10), 2630-2639.
- 30. Hoelzl, C., Knasmüller, S., Wagner, K. H., Elbling, L., Huber, W., Kager, N., ... & Desmarchelier, A. (2010). Instant coffee with high chlorogenic acid levels protects humans against oxidative damage of macromolecules. Molecular nutrition & food research, 54(12), 1722-1733.
- 31. Marques, V., & Farah, A. (2009). Chlorogenic acids and related compounds in medicinal plants and infusions. Food Chemistry, 113(4), 1370-1376.
- 32. 30- Ayelign, A., & Sabally, K. (2013). Determination of chlorogenic acids (CGA) in coffee beans using HPLC. American Journal of Research Communication, 1(2), 78-91.
- 33. Crozier, A., Jaganath, I. B., & Clifford, M. N. (2009). Dietary phenolics: chemistry, bioavailability and effects on health. Natural product reports, 26(8), 1001-1043.
- 34. Del Rio, D., Stalmach, A., Calani, L., & Crozier, A. (2010). Bioavailability of coffee chlorogenic acids and green tea flavan-3-ols. Nutrients, 2(8), 820-833.

