Ameliorated effect of green tea extract on cadmium toxicity in liver and kidney of rats

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Abstract:

In the present study, the effect of green tea extract (GTE) on cadmium induced toxicity was studied in albino rats. Four groups of rats were used in this study: group I (control group) fed daily with diets for all time of experiment, group II (Cd – group ) received daily 6 ppm of cadmium chloride, group III(GTE + Cd) rats were given daily the cadmium as in group II in adding the GTE at concentration 0.02 gm/kg, group IV(GTE group) received daily 0.02 gm/kg of GTE. Cadmium and GTE were given orally to the rats with diets daily for ten days.

The animals of different groups were weighted after the end of treatment, then all animals were scarified, liver and kidney were excised immediately, weighted by sensitive digital balance and histological preparation would be done to examine the pathological changes by hematoxylin and Eosin staining. Liver index and kidney index would be calculated for comparison them among all groups of this study.

The result of this study demonstrates that Cd has a cytotoxic effects on liver and kidney cells of rats and GTE consumption can effectively reduce the injury of the cells in these tissues.

Key words: Cadmium, Green tea extract, Liver, Kidney

Introduction:

Cadmium (Cd) belongs to the group of highly toxic heavy metals, it represents a serious health hazards because it can be absorbed via alimentary tract, penetrates through placenta during pregnancy, and damages membranes and DNA (Kan & Meijer, 2007). It causes desquamation of the intestinal mucosa resulting in bloody diarrhea, vomiting (Nordbore, 2009) and wide range of biochemical and physiological dysfunction (Bernard et al., 1990).

The target organs of Cd toxicity in human after long-term exposure are the kidney and liver (WHO, 1992). Cd absorption into the circulation is rapidly, taken up by the liver where it is bound to metallothionein (MT) which is then slowly released back into circulation. The Cd - MT complex is freely filtered at the glomerulus and reabsorbed by the proximal tubule (Johri et al., 2010). The mechanism which has been proposed to explain the heavy metal-induced toxicity is the disturbance in antioxidant level by generation of reactive oxygen species (ROS) (Gurer and Ercal, 2000).
Herbal medicine derived from plant extracts are being increasingly utilized to treat many clinical diseases due to the protective effects of natural antioxidants against chemically induced toxicities (Feri and Higdon, 2003). Tea leaves produce organic compounds that may be involved in the defense of plants against invading pathogens, these metabolites known as polyphenols (Friedman, 2007) which include: catechin, epicatechin, epigallocatechin, theaflavin, and caffeine (Wang and Goodman, 1999). Green tea extract (GTE) was used to promote relaxation (Chu et al., 1997), decrease blood pressure (Kim et al., 2009a) and protect from lung cancer (Lee et al., 2010). Crespy and Williamson (2004) reported that GTE displays antioxidants and free radicals scavenger properties. So we used GTE to investigate the effect of GTE on Cd toxicity in the rats.

**Materials and methods**

- **preparation of green tea extract (GTE) and cadmium chloride (CdCl₂) solution.**

  Green tea (kindly supplied by Lipton tea com, Inc Englewood cliffs, NJ) was reconstituted in deionized water at concentration 0.02 gm / kg by dissolving the dried leaves of green tea in the warm water at temperature 60° for 3 minutes (David, 1999) and the salt of CdCl₂ was prepared at (6 ppm) concentration (Buchet et al., 1980).

- **Animal treatment**

  Sixteen healthy albino rats with weight (235-250g) were isolated in relatively controlled environment at a temperature of about 25° in animal house. The duration of experiment was 10 days. The rats were randomly divided into 4 groups (4 rats each) as the following: Group 1 (control group) fed daily with diets for all time of experiment. Group II (Cd – group) received daily 6 ppm of cadmium chloride orally by syringe with normal feeding. Group III (GTE + Cd), rats were given daily the cadmium as in group II in adding the GTE at concentration 0.02 gm / kg orally by syringe. (David, 1999). Group IV (GTE group) received daily 0.02 gm / kg of GTE orally by syringe with normal feeding.

  The animals of different groups were weighted after the end of treatment and all animals were scarified, immediately livers and kidneys were excised, weighted by using sensitive digital balance, and collected each one alone and fixed in 10% neutral buffered formalin, dehydrated in ascending grades of ethanol alcohols, cleared in xylol, blocking, cutting at 5µm thickness and stained by haematoxyline – Eosin (H&E) stain (Presenell & Schreibman. 1997) then the specimens were examined by light microscope.

  Liver index: liver weight/final body weight x100 and kidney index: kidney weight/final body weight x100 were calculated for comparison them among all groups of this study.

  **Statistical analysis:** Completer Randomised Design (CRD) was applied and followed by LSD test to detect differences between groups. A level of p<0.05 was considered statistically significant. (Glantz, 2005)

  **Results:**

  Liver sections from the control group rats showed normal hepatic lobules. They formed of hepatocytes radiating from central vein to the periphery of the lobules. Blood sinusoids were situated between cords of liver cells (Fig.1a). While, liver lobules of cadmium treated rats showed severe and advanced fatty changes, hepatocellular necrosis and inflammatory cellular infiltration was also seen between degenerated hepatocyte (Fig.1b). The liver of (GTE + Cd) group showed marked improvement in its histological...
structure in comparison to the group treated with cadmium alone and represented by the followed: mild hydropic changes and steatosis, but no necrosis, no lymphatic cells infiltration, proliferation of Kupffer cells and binucleated cells that indicate to proliferation and regeneration of hepatic cells (Fig.1e). No detectable pathological changes showed in the liver of group treated with GTE alone (Fig. 1f).

Fig.(1): (a) shows a photomicrograph of a section in the liver of control rat showing normal hepatic lobule formed of central vein (v) and hepatic cells cord (c) around it, separated by hepatic sinusoids(S) X100. (b) Shows photomicrograph of a section in the liver of cadmium treated rat showing severe fatty changes (A). The remaining liver tissue shows necrosis with mild lymphocytic infiltration (B) X40. (e) shows a photomicrograph of a section in liver of (green tea extract + cadmium) treated rat showing mild change compared to the animals given cadmium only. There is no necrosis but mild hydropic changes and steatosis (A), with proliferation of Kupffer cells(B) and regeneration of hepatic cells reflected as binucleated cells(C). There no lymphocytic infiltration x100. (f) shows a photomicrograph of a section in liver of green tea extract treated rat showing no histopathological changes, central vein(C), hepatic triad (HT)X40. (H&E stain)

Kidney sections from the control group rats reveal normal histological features, showing glomeruli with lobulated tuft, eosinophilic proximal convoluted tubules and basophilic distal convoluted tubules, (Fig.2A). The kidney of albino rats intoxicated with cadmium showed a wide spread of coagulative necrosis which involved both tubules and glomeruli and no nuclei could be identified (Fig.2B). In the kidney of (GTE + Cd) group, there is hydropic change in glomeruli and renal tubules, but the nuclei of the cells in both can be identified, (Fig.2C). There is no changes in the glomeruli, collecting tubules of medulla but there is very mild change in the renal tubules of the cortex in the kidney of albino rats which treated with GTE only, (Fig. 2E)
**Discussion**:  
In the present study sever fatty changes, necrosis of hepatocytes and inflammatory cells infiltration were seen between degenerated hepatocyte in the liver section of cadmium treated group. In kidney section for the same group the histological examination revealed a wide spread of coagulative necrosis which involved both glomeruli and tubules and the nuclei of them could not be identified. This result is consistent with previous observation showing that cadmium exposure cause albuminuria.
and decline in glomerular filtration rate and eventually causing renal failure (Bernard et al., 1990). This toxic effect of cadmium is mediated by cadmium –metallothionein (Cd- MT) synthesis which induce autoantibodies to (MT) and may interfere with Cd detoxification (Chen et al., 2006), other antibodies have also been implicated in the damage of tissue after Cd exposure (Bernard and Lauwerys, 1990) and the mechanism of Cd- MT toxicity was disturbance in antioxidant levels by generation of ROS (Gurer & Ercal, 2000) which have diverse cytotoxic effects, including DNA damage, protein oxidation and lipid peroxidation which may lead to disorganization of cell structure and finally induction of cell apoptosis (Rodrigo & Bosco, 2006).

While, group treated with cadmium + green tea extract showed notable recovery effect of green tea extract against Cd – induced toxicity in the section of liver in comparison to the liver section of cadmium alone, there is a mild hydropic changes and steatosis, without necrosis, with proliferation of Kupffer cells, no in inflammatory cells infiltration and binucleated cells, that represent good sign of regeneration (Baldiei et al., 2006) and this result is consistent with previous observations showing that the treatment of mice with green tea caused diminishing in ethanol – induced fat droplets in the liver of these animals (Li et al., 2012) and the treatment of rats with (CCl₄- induced fibrosis for liver + green tea) exhibited the hepatoprotective effect of green tea against CCl₄ – induced necrosis (Mahmoud et al., 2012). In the present study the section of kidney for the same group (Cd+ GTE) showed a hydropic changes in both renal tubules and glomeruli but the nuclei of them could be identified, this can be consider as improvement in the histological structure of kidney in the rats which treated with(Cd+GTE) in comparison with kidney section of animals treated with Cd only. This improvement may be due to the effective role of GTE in increasing renal antioxidant enzymes activities (Tabrizi and Mohajeri, 2012) and decreasing the apoptosis in rat kidney tissue (Itoh et al., 2005). In this study, from the photomicrograph of liver and kidney sections (Fig.1e) and (Fig.2C) respectively, it is clearly the ameliorated effect of green tea was better in liver (mild hydropic changes) than in kidney (hydropic changes) this may be due to two reasons: the first was the accumulation rate of cadmium in kidney is two or three times higher than in liver, so should have two or three times of higher MT concentration in kidney than found in liver (Pederson & Hylland, 2007), and the second reason was the differential accumulation of green tea in tissues (Khan et al., 2009), so may be green tea accumulated in liver more than in kidney and green tea able to form complexes with cadmium ions that decrease its lipophilicity and thus its gastrointestinal absorption and these insoluble complexes would be removed by tissues by chelating agents (Patrick, 2006). In this study, generally the ameliorative effect of green tea extract against Cd – toxicity in both liver and kidney may be due to the consumption of green tea extract was involved in specific adaptive alteration in the improvement of cellular / energy metabolism and antioxidant defense mechanism that was associated with lower lipid peroxidation in the liver and kidney of normal rats (Khan et al., 2007; Tabrizi & Mohajeri, 2012) and finally decrease apoptosis in the tissue (Itoh et al., 2005), as well as green tea is responsible for increasing serum phospholipids which are essential membrane components and this increase may facilitate repair and regulations of various membranes after exposure to oxidative stress (Szechowicz-Petelska et al., 2005).

In the present study the treatment of albino rats with green tea extract only didn’t cause any pathological change in liver but in the kidney no change in glomeruli and
collecting tubules but a mild hydropic change could be seen in cortex renal tubules only. Another study showed that the supplementation of 500 mg of green tea polyphenols dialy to postmenopausal osteopenic women for 24 weeks appeared to be safe particularly in terms of liver and kidney function (Shen et al., 2010).

The results of this study showed a significant increase in liver index in animals which treated with Cd. This may be due to the role of Cd in decreasing the level of antioxidant by generation of ROS (Gurer and Ercal, 2000) and by thus oxidative stress would be increased which is suggested to be associated with the proliferation and activation of stellate cells and increase collagen production in injured liver (Baroni et al., 1998). Furthermore, oxidative stress has been shown to increase collagen gene expression (Parola et al., 1993) and then the body weight would be increased, and when the animals were treated with (Cd + GTE) the relative liver weight would be diminished significantly in comparison with liver weight of animals treated with Cd only. This result may be due to the role of GT in inhibition of the proliferation of activated hepatic stellate cells, down regulate the collagen content and expression of collagen (Kim et al., 2009b) and thus the relative liver weight would be decrease in this group.

It is clearly known that green tea used with a program of reduced intake of dietary calories to help in weight loss (Westerterp–Plantenga et al., 2006) by reduction in serum glucose and cholesterol (Khan et al., 2009) or by stimulation brown fat thermogenesis (Nagao et al., 2005), but the result of this study revealed that the treatment of albino rats with GTE only didn’t reveal any significant difference in liver index in comparison with control group, this may be due to insufficient duration period of this experiment (10 days) for weight lossing.

In conclusion, this study demonstrates that Cd has a cytotoxic effects on liver and kidney cells of rats and GTE consumption can effectively reduce the injury of the cells in these tissues.

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