Atorvastatin attenuates D-galactose-induced hepatorenal toxicity in mice: an experimental study with histopathological evaluations

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Abstract

Introduction: Atorvastatin (Ator) is a lipid lowering drug with potent antioxidant and anti-inflammatory properties. The present investigation was designed to study the effect of Ator on D-galactose (GAL)-induced hepatorenal toxicity in mice.

Methods: In this study, 40 mice were divided into 4 groups: normal, GAL (500 mg/kg), Ator 0.1 (0.1mg/kg)+GAL and Ator 1 (1mg/kg)+GAL. Ator and GAL were administered orally for 6 weeks simultaneously. Then on day 43, blood samples were collected to determine blood urea nitrogen (BUN), serum creatinine (sCr), aspartate aminotransferase (AST) and alanine aminotransferase (ALT) levels. The kidneys and livers samples were used for histological examination.

Results: Our results indicated that administration of GAL significantly increases sCr, BUN, ALT and AST. Co-administration of Ator 0.1 and 1mg/kg with GAL for 6 weeks (especially 1mg/kg) attenuated these changes. Histological changes in kidney such as infiltration of leukocyte, necrosis and oedema were observed in GAL group. Moreover, pyknosis, infiltration of inflammatory cell and fat deposit were observed in the livers of GAL-treated mice. Co-administration of Ator 0.1 and 1mg/kg with GAL for 6 weeks (especially 1mg/kg) could mitigate the histological lesions in kidneys and livers of GAL-administered animals.

Conclusion: The results of this study suggested that Ator may have beneficial effects on hepatorenal toxicity induced by GAL.

Keywords: Hepatorenal toxicity; D-galactose; Atorvastatin

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Introduction

Atorvastatin (Ator) is one of the most commonly consumed drugs which administered for patients with atherosclerotic and hyperlipidemic (Schachter, 2005). Ator is a 3-hydroxy-methyl-glutaryl coenzyme A reductase inhibitor which decrease the production of cholesterol (Athyros et al., 2004). Ator has other well-established properties such as anti-oxidant, anti-
aging, anti-inflammatory and analgesic effects (Bedi et al., 2016). It has been shown that Ator improves pathological changes in naturally aged kidney via increasing the expression of peroxisome proliferator-activated receptor as well as decreasing the expression of matrix metalloproteinase-9 and transforming growth factor-β1 in the kidney (Zhao et al., 2016). Furthermore, the nephroprotective properties of Ator has been shown in different pathological conditions such as ischemic acute renal failure and contrast-induced nephropathy (Pisani et al., 2002; He et al., 2017). On the other hand, it has also been reported that Ator has hepatoprotective effects against the lipemic-oxidative disorder and ischemia-reperfusion injury (Amin and El-Twab, 2009; Ajamieh et al., 2015).

D-galactose (GAL) is a natural sugar which is found in the body in normal conditions. At the normal level, GAL is completely converted into glucose (Xu et al., 2009). But at the high level, GAL could produce reactive oxygen species (ROS) in different organs such as liver and kidney (Wei et al., 2005). Recently, it was demonstrated that GAL-induced oxidative damage is associated with inflammatory reactions (Wei et al., 2005). Therefore, mice treated with GAL could serve as a good model for oxidative damage research (Fatemi et al., 2018a).

The object of current investigation was to explore the possible protective effect of Ator on GAL-induced hepatorenal toxicity in mice by histopathological evaluations.

**Materials and methods**

**Animals**

Forty male mice (18 to 22g) were purchased from Animal House of Rafsanjan University of Medical Sciences, Iran. The animals were maintained in standard conditions (temperature: 22±2°C and 12h light/dark cycle). Food and water were given ad libitum. All the animal procedures were carried out in accordance with the standard ethical guidelines (NIH, publication no. 85-23, revised 1985) and approved by the Institutional Animal Care and use Committee of Rafsanjan University of Medical Sciences (Ethical code: IR.RUMS.REC.1397.155).

**Drugs**

Ator (Lipitor™) was obtained from Pfizer Pharmaceuticals company (USA). GAL was obtained from Sigma-Aldrich company (Germany). Drugs were dissolved in standard drinking water (in a volume of 10ml/kg body weight of drinking water) and administered orally to treated mice once a day for 6 weeks (Kaviani et al., 2017; Fatemi et al., 2018b).

**Experimental design**

After 2 weeks of acclimatization, mice were divided into 4 groups (n=10). Group I (normal): healthy normal animals without any intervention; group II (GAL): mice treated with GAL 500mg/kg; group III (GAL+Ator 0.1): mice treated with GAL plus Ator 0.1 mg/kg/day and group IV (GAL+Ator 1): mice treated with GAL plus Ator 1 mg/kg/day

**Sample collection**

On the 43th day, the experimental animals were given deep diethyl ether anesthesia. Then, blood samples were taken via the cardiac puncture method. Serum was separated by centrifugation for 10min at 3000rpm and stored at -20°C. Then, animals were sacrificed by decapitation and the kidney and liver tissues were carefully removed and washed with ice-cold saline. The kidneys and liver samples were fixed in 10% formalin.

**Biochemical analysis**

Blood urine nitrogen (BUN), serum creatinine (sCr), alanine aminotransferase (ALT) and aspartate aminotransferase (AST) levels were assessed by the MINDRAY autoanalyzer (China) with specific test kits (Technicon, Bayer S.A. Diagnostic).

**Histopathological evaluations**

The fixed liver and kidney samples were processed in an Auto-Technicon machine. Then, the paraffin blocks were prepared and cut into 5µm sections. The sections were stained with hematoxylin and eosin (H&E). The following indices were assessed in the kidney: leukocyte infiltration as well as oedema and necrosis. Also, the following indices were assessed in the liver: congestion of RBC, infiltration of inflammatory cell, pyknosis and fat deposit. We scored these histopathological indices according to previous studies: 0= normal, 1= mild, 2= moderate and 3= severe (Ehsani et al., 2017; Ghaznavi et al., 2017; Mehrzadi et al., 2018).
Statistical analysis
The results were presented as mean±SEM. The differences between groups were analyzed with one-way analysis of variance (ANOVA) followed by Tukey's post hoc test. Non-parametric variable (pathological indices) were analyzed by Kruskal-Wallis followed by Dunn's post hoc test. Differences in data were considered as significant if \( P<0.05 \).

Results

The effect of Ator on the kidney function tests
sCr and BUN are two valid markers for evaluating the kidney function. As shown in Figure 1A, the levels of sCr were increased in the GAL-administered mice in comparison with the normal animals (\( P<0.001 \)). Moreover, administration of Ator at the doses 0.1 and 1mg/kg attenuated GAL-induced enhancement of sCr level (\( P<0.05 \) and \( P<0.001 \), respectively). As shown in Figure 1B, BUN levels were elevated in the GAL-treated animals in comparison with the normal group (\( P<0.001 \)). Furthermore, Ator treatment at the doses 0.1 and 1mg/kg reduced the BUN level in GAL-treated mice (\( P<0.05 \) and \( P<0.01 \), respectively)

The effect of Ator on the liver function tests
AST and ALT are biochemical parameters of liver function. As shown in Figure 2, levels of AST and
ALT were increased in the GAL group in comparison with the normal group (all $P<0.01$). Administration of Ator (0.1mg/kg) decreased the AST level in GAL-treated animals ($P<0.05$). Moreover, administration of Ator at the dose 1mg/kg attenuated the ALT and AST elevations induced by GAL ($P<0.05$).

**The effect of Ator on the histopathological changes**

We used H&E staining to assess the effect of Ator on the histopathological changes in kidney. Figure 3 shows the effects of Ator on GAL-induced nephrotoxicity changes in kidney. The images (A) normal group; (B) GAL group; (C) Ator 0.1+GAL group and (D) Ator 1+GAL group. The images display the effects of Ator on GAL-induced nephrotoxicity changes in kidney. The urine space of the Bowman capsule is indicated by a line arrow; the lumen of the collecting tubes by a white arrow; infiltration of inflammatory cells by a bent arrow; and tubular necrosis by a lightning bolt.

**Table 1:** The histopathological changes of mice kidneys in Hematoxylin & Eosin stained sections

<table>
<thead>
<tr>
<th>Histological criteria</th>
<th>Normal</th>
<th>GAL</th>
<th>GAL+Ator 0.1</th>
<th>GAL+Ator 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leukocyte infiltration</td>
<td>0.0</td>
<td>3.16±0.3***</td>
<td>2.5±0.22</td>
<td>0.5±0.22***</td>
</tr>
<tr>
<td>Oedema</td>
<td>0.0</td>
<td>3.28±0.28***</td>
<td>1±0.3***</td>
<td>0.4±0.2***</td>
</tr>
<tr>
<td>Necrosis</td>
<td>0.0</td>
<td>2.14±0.14***</td>
<td>1.85±0.26</td>
<td>0.0***</td>
</tr>
</tbody>
</table>

Values are means±SEM (n=10). *significant with normal group (***$P<0.001$). #significant with GAL group (###$P<0.001$).
hepatorenal injuries induced by GAL. Histology survey of the kidney sections in normal group displayed the normal glomeruli and the urine space of the Bowman capsule, the lumens of the collecting tubes were obvious and there is no evidence of necrosis and inflammation (Fig 3A and Table 1). Massive damages were found in kidney tissues of GAL-administered mice (infiltration of leukocyte, necrosis and oedema) (all P<0.001, Fig. 3B and Table 1). Administration of Ator at the doses

**Table 2:** The histopathological changes of mice livers in Hematoxylin & Eosin stained sections

<table>
<thead>
<tr>
<th>Histological criteria</th>
<th>Normal</th>
<th>GAL</th>
<th>GAL+Ator 0.1</th>
<th>GAL+Ator 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infiltration of inflammatory cells</td>
<td>0.0</td>
<td>2.4±0.24***</td>
<td>2.2±0.2</td>
<td>0.2±0.2***</td>
</tr>
<tr>
<td>Fat deposit</td>
<td>0.0</td>
<td>3.4±0.24***</td>
<td>2.4±0.24#</td>
<td>0.8±0.2###</td>
</tr>
<tr>
<td>Pyknosis</td>
<td>0.0</td>
<td>3.3±0.21***</td>
<td>2±0.25###</td>
<td>0.5±0.22###</td>
</tr>
</tbody>
</table>

Values are means±SEM (n=10). *significant with normal group (***P<0.001). #significant with GAL group (**P<0.05 and ###P<0.001).
0.1mg/kg reduced the oedema compared to the GAL-administered animals (P<0.001). In this group, the collecting tubes are more obvious than GAL group. Also, there was no evidence of necrosis but inflammation was seen (Fig. 3C and Table 1). Moreover, administration of Ator (1mg/kg) effectively improved the kidney morphology and ameliorated pathological score of kidneys compared to the GAL-administered animals (all P<0.001). In Ator 1 group, the glomeruli, the urine space of the Bowman capsule and the lumen of collecting tubes were obvious. Also, there was no evidence of edema, necrosis and inflammation (Fig. 3D and Table 1).

The normal animals displayed a normal liver morphology (Fig. 4A and Table 2). In the GAL-administered animals, extensive damages were observed in liver tissues such as leukocyte infiltration, pyknosis and fat deposit. Also, sinusoids were not clear in these animals (all P<0.001, Fig. 4B and Table 2). Administration of Ator (0.1mg/kg) to GAL-treated mice reduced the severity of histopathological indices such as pyknosis and fat deposit of liver (P<0.001 and P<0.05, respectively; Fig. 4C and Table 2). The improving effect of Ator (1mg/kg) on GAL-treated mice was clearly obvious. We also found that the histopathological indices of these animals did not show a significant difference compared with the normal mice (all P>0.001). In Ator 1 group, central vein and sinusoids were obvious (Fig. 4D and Table 2).

Discussion

In the current study, we investigated the protective effect of Ator on hepatorenal toxicity induced by GAL in mice. The results indicated that administration of GAL (500mg/kg for 6 weeks) results in significant renal and hepatic toxicity as evidenced by the increase in biochemical markers such as sCr, BUN, ALT and AST levels. Also, it was found that these biochemical alterations are in parallel with the kidney and liver histopathological results. GAL administration increased the histopathological indices in the liver and kidney. Furthermore, Ator treatment at the dose of 0.1 and 1mg/kg for 6 weeks (especially 1mg/kg) could improve GAL-induced renal and hepatic toxicity by regulating the levels of sCr, BUN, ALT and AST. Also, Ator treatment significantly ameliorated the histopathological alternations of the liver and kidney tissues induced by GAL.

It has been demonstrated that chronic administration of GAL promotes oxidative stress in different organs such as liver and kidney. Oxidative stress induces the histopathological changes in liver and kidney which are characterized by increasing the levels of sCr, BUN, ALT and AST. Our results demonstrated that oral administration of GAL elevates the above-mentioned parameters. We also found that Ator treatment (especially 1mg/kg) decreases the above-mentioned parameters compared to the GAL-administered animals. Previous reports have demonstrated that antioxidant agents such as luteolin, troxerutin, carnosine and taurine attenuated these alternations in GAL-induced hepatorenal injuries (Fan et al., 2009; Kalaz et al., 2014; Xu et al., 2015). On the other hand, the antioxidant effects of statins such as Ator has been demonstrated in several studies. It was demonstrated that statins decrease the ROS production in endothelial cells through increasing the thioredoxin activity (Haendeler et al., 2004). Simvastatin reduced the over-production of free radicals in stimulated macrophages (Girona et al., 1999). It was shown that Ator reduces the levels of malondialdehyde as well as increases the activity of superoxide dismutase (SOD) in a rat model of Parkinson’s disease (Prajapati et al., 2017). In another study, Mehrzadi et al. (2016) demonstrated that Ator increased the activity of SOD and suppresses renal oxidative stresses in gentamicin-induced nephrotoxicity in rat. Therefore, it is possible that Ator exerts these protective effects via antioxidant effects and increasing the antioxidative capacity.

Available data have suggested that over-production of ROS could cause tissue inflammation which is associate with tissue damage and cell death (Majsterek et al., 2005). In accordance with biochemical evaluations, histopathological results demonstrating structural changes in liver and kidney tissue of GAL-administered mice. In kidney, lesions like infiltration of leukocyte, necrosis and oedema were found. Lesions like fat deposit, leukocyte infiltration and pyknosis were found in liver. Histopathological results of current study are in line with the previous reports (Fan et al., 2009; Kalaz et al., 2014; Xu et al., 2015). We also demonstrated that administration of Ator at the dose of 0.1 and 1mg/kg for 6 weeks (especially 1mg/kg) causes considerable
improvement in pathological changes of liver and kidney. On the other hand, the hepatorenal protective effects of Ator has been confirmed in different oxidative conditions by histopathological evaluations. It was reported that Ator has a renoprotective effects against contrast and diabetes-induced kidney injuries and significantly attenuated kidney histopathological changes (Zhou et al., 2014; Yue et al., 2017). Moreover, Ator effectively improves liver histopathological alterations in hepatotoxicity induced by ischemia-reperfusion and doxorubicin (Ajamieh et al., 2012; El-Moselhy and El-Sheikh, 2014).

The limitation of current study was some financial restriction that limited us from evaluating the oxidative stress and inflammation parameters in order to unveil the underlying mechanism of the Ator in GAL-induced renal and hepatic toxicity.

Conclusion

This study investigated the effects of Ator on hepatorenal pathology in GAL-treated mice. For the first time we showed that administration of Ator to GAL-administered mice decreased the hepatorenal damages as well as attenuated the histopathological lesions of liver and kidney. However, more evidence is needed to explain the precise mechanism underlying the benefits of Ator. Hence, Ator might be a new therapeutic approach in mitigating hepatorenal oxidative damages in humans.

Acknowledgments

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Conflict of interest

Authors declare no conflict of interest related to this work.

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