

# Preventive effect of neutropenia on carbon tetrachloride-induced hepatotoxicity in rats

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**ABSTRACT:** The preventive effect of neutropenia on carbon tetrachloride (CCl<sub>4</sub>)-induced hepatotoxicity was examined in rats. In rats treated once with CCl<sub>4</sub> (1 ml kg<sup>-1</sup>, i.p.), the serum levels of alanine aminotransferase (ALT) and aspartate aminotransferase (AST), indices of liver cell damage, and the hepatic activity of myeloperoxidase (MPO), an index of tissue neutrophil infiltration, increased at 6 h after the intoxication and further increased at 24 h. The liver of CCl<sub>4</sub>-treated rats showed an increase in the concentration of thiobarbituric acid reactive substances (TBARS), an index of lipid peroxidation, and decreases in superoxide dismutase (SOD) activity and reduced glutathione (GSH) concentration at 6 h after the intoxication followed by a further increase in TBARS concentration and further decreases in SOD activity and GSH concentration at 24 h with increased xanthine oxidase (XO) activity at 24 h. Neutropenic treatment with anti-rat neutrophil antiserum (2 ml kg<sup>-1</sup>, i.p.) at 0.5 h after CCl<sub>4</sub> intoxication attenuated the increases in serum ALT and AST activities and hepatic MPO activity and TBARS concentration and the decreases in hepatic SOD activity and GSH concentration found at 6 and 24 h after CCl<sub>4</sub> intoxication and the increase in hepatic XO activity found at 24 h after the intoxication. This neutropenia reduced the necrotic and degenerative changes with inflammatory cell infiltration in the liver cell of CCl<sub>4</sub>-treated rats. These results indicate that neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats by attenuating the disruption of hepatic reactive oxygen species metabolism mediated by neutrophils accumulating in the liver tissue. Copyright © 2005 John Wiley & Sons, Ltd.

**KEY WORDS:** carbon tetrachloride; hepatotoxicity (rat); neutropenia; myeloperoxidase; reduced glutathione; superoxide dismutase; xanthine oxidase; reactive oxygen species metabolism

## Introduction

It is well known that carbon tetrachloride (CCl<sub>4</sub>) induces hepatotoxicity in humans and experimental animals. According to the present view of the initial developmental process of CCl<sub>4</sub>-induced hepatotoxicity, the processes are dominated by factors such as CCl<sub>4</sub> activation to trichloromethyl radical (CCl<sub>3</sub>·) and trichloromethyl peroxy radical, the covalent binding of CCl<sub>3</sub>· to membrane lipids and proteins, and the hydrogen abstraction from polyunsaturated fatty acids by trichloromethyl peroxy radical and CCl<sub>3</sub>· to initiate lipid peroxidation (Recknagel *et al.*, 1989; Weber *et al.*, 2003).

Lipid peroxidation in cell membranes occurs via reactive oxygen species (ROS), such as superoxide radical (O<sub>2</sub><sup>-</sup>) and hydroxyl radical (OH·), and lipid peroxidation and ROS cause destruction of cell components and cell death (Gutteridge and Halliwell, 1990). Several reports have shown that hepatic lipid peroxidation increases with the development of acute liver injury in rats treated once

with CCl<sub>4</sub> (Miyazawa *et al.*, 1990; Ohta *et al.*, 1995, 1997, 2000, 2003; Hartley *et al.*, 1999; Muriel *et al.*, 2001; Sun *et al.*, 2001; Campo *et al.*, 2004). There are many reports showing that a single treatment of rats with CCl<sub>4</sub> causes disruption of the hepatic antioxidant defense systems associated with antioxidants such as reduced glutathione (GSH) and ascorbic acid, which scavenge ROS, and antioxidant enzymes such as superoxide dismutase (SOD), an enzyme to dismutate O<sub>2</sub><sup>-</sup> to hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) and O<sub>2</sub>, catalase, an enzyme that decomposes H<sub>2</sub>O<sub>2</sub> to H<sub>2</sub>O and O<sub>2</sub>, and glutathione reductase, an enzyme that converts oxidized glutathione to GSH using NADPH as a coenzyme, during the development of liver injury (Ohta *et al.*, 1995, 1997, 2000, 2003, 2004; Muriel *et al.*, 2001; Sun *et al.*, 2001; Campo *et al.*, 2004). In addition, our recent report has shown that ROS derived from xanthine oxidase (XO) contributes to the progression of acute liver injury in rats treated with CCl<sub>4</sub> (Ohta *et al.*, 2003). Inflammatory processes in which Kupffer cells, i.e. the resident macrophages of the liver, cytokines such as tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ), interleukin-1 (IL-1), interleukin-6 (IL-6) and interleukin-10, and adhesion molecules such as intercellular adhesion molecule-1 are implicated in the development of CCl<sub>4</sub>-induced acute

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hepatic injury (Czaja *et al.*, 1989, 1995; Armendariz-Borunda *et al.*, 1991; Edwards *et al.*, 1993; Tower *et al.*, 1994; DeCicco *et al.*, 1998; Louis *et al.*, 1998; Neubauer *et al.*, 1998; Muriel *et al.*, 2001; Simeonova *et al.*, 2001; Hojo *et al.*, 2002; Nakamoto *et al.*, 2003). It is known that neutrophils, i.e. polymorphonuclear leukocytes, are accumulated in the damaged liver of rats and mice treated once with CCl<sub>4</sub> (Louis *et al.*, 1998; Campo *et al.*, 2004). Badger *et al.* (1996) have shown that neutropenia produced by treatment with anti-neutrophil antiserum reduces the severity of CCl<sub>4</sub>-induced liver injury in rats pretreated with all-*trans*-retinol to potentiate the liver injury via Kupffer cells. Edwards *et al.* (1993) supported the hypothesis that Kupffer cells participate in the mechanism of CCl<sub>4</sub>-induced liver injury possibly by the release of chemoattractants for neutrophils, and have shown that CCl<sub>4</sub>-induced liver injury is diminished when rats are made neutropenic. However, it is still not known how neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats. It has been shown that O<sub>2</sub><sup>-</sup> generated by NADPH oxidase in activated neutrophils is involved in liver injury development after hemorrhage/resuscitation in mice and in the development of endotoxin-induced liver injury in mice (Lehnert *et al.*, 2003; Gujral *et al.*, 2004). It has been reported that activated neutrophils injure the isolated, perfused rat liver by an ROS-dependent mechanism (Dahm *et al.*, 1991). Myeloperoxidase (MPO) is mainly present in neutrophils among the inflammatory cells and the enzyme produces hypochlorous acid (HOCl), a powerful oxidant, in the presence of H<sub>2</sub>O<sub>2</sub> and Cl<sup>-</sup> (Kettle and Winterbourn, 1997). Bilzer and Lauterburg (1991) reported that HOCl and chloramines, which are generated by the reaction of HOCl and amines such as ammonia and taurine, damage the isolated, perfused rat liver.

Therefore, the purpose of the present study was to clarify how neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats. The effect of neutropenia produced by treatment with anti-neutrophil antiserum on the development of hepatic injury in rats with a single CCl<sub>4</sub> intoxication was examined and also the changes in the hepatic activities of MPO, an index of hepatic neutrophil infiltration (Duval *et al.*, 1990; Schierwagen *et al.*, 1990; Komatsu *et al.*, 1992), XO, and SOD activities and the hepatic concentrations of thiobarbituric acid reactive substances (TBARS), an index of lipid peroxidation, and GSH. In addition, the effect of neutropenia on the development of CCl<sub>4</sub>-induced acute liver injury was checked by histological examination.

## Materials and Methods

### Chemicals

Leupeptin, 2,2',5,5'-tetramethylbenzidine (TMB), xanthine, bovine erythrocyte Cu,Zn-SOD and bovine serum albumin

were obtained from Sigma Chemical Co. (St Louis, MO, USA); dithiothreitol, phenylmethylsulfonylfluoride, and milk XO and from Roche-Diagnostic Co. (Tokyo, Japan); CCl<sub>4</sub>, ethylenediaminetetraacetic acid (EDTA), GSH, 2-thiobarbituric acid, and other reagents, of the highest grade, were purchased from Wako Pure Chemical Ind., Ltd (Osaka, Japan). All chemicals were used without further purification.

### Animals

Male Wistar rats aged 5 weeks were purchased from Nippon SLC Co. (Hamamatsu, Japan). The animals were maintained under a daily controlled 12 h light, 12 h dark lighting cycle at 23 °C and 50% humidity with free access to rat chow (Oriental MF, Oriental Yeast Co., Tokyo, Japan) and water. All animals received humane care in compliance with the Guidelines for the Management of Laboratory Animals in Fujita Health University.

### Induction of Hepatic Injury

The CCl<sub>4</sub> was diluted twice with olive oil. Fed rats (6 weeks old) received a single intraperitoneal (i.p.) injection of CCl<sub>4</sub> at a dose of 1 ml kg<sup>-1</sup> body weight (BW), that is, 2 ml kg<sup>-1</sup> BW of the 50% CCl<sub>4</sub> solution, to produce liver injury. Rats without CCl<sub>4</sub> injection received an equal volume of olive oil in the same manner. These animals were starved with free access to water after CCl<sub>4</sub> injection, as described in our previous reports (Ohta *et al.*, 2000, 2003, 2004).

### Treatment with Anti-neutrophil Antiserum

Rats with and without CCl<sub>4</sub> intoxication received a single i.p. injection of anti-rat neutrophil antiserum (Funakoshi Co, Tokyo, Japan) at a dose of 2 ml kg<sup>-1</sup> BW at 0.5 h after the intoxication. Rats without anti-rat neutrophil antiserum injection received the same volume of rabbit serum (Funakoshi Co, Tokyo, Japan) at the same time point.

### Sample Preparation

Rats were killed after collecting blood from the inferior vena cava under ether anesthesia at 0.5, 6 and 24 h after CCl<sub>4</sub> injection. Immediately after killing, the livers were perfused with ice-cold 0.9% NaCl through the portal vein to remove as much residual blood as possible from the tissue and then removed from the body. The isolated liver was washed well in ice-cold 0.9% NaCl, blotted on a filter, weighed and frozen on dry ice as soon as possible.

The collected blood was kept on ice for 30 min and then separated into serum by centrifugation at 4 °C. The isolated liver and serum were kept at -80 °C until use. For liver XO assays, a part of the right large lobe of each liver was homogenized in 9 volumes of an ice-cold buffered solution (pH 7.8) containing 0.05 M potassium phosphate, 0.1 M EDTA, 0.5 mM dithiothreitol, 0.5 mg mL<sup>-1</sup> leupeptin and 0.2 mM phenylmethylsulfonylfluoride using a glass homogenizer with a Telfon pestle as described previously (Ohta *et al.*, 2003, 2004). The homogenate was dialysed against 100 volumes of the same buffered solution at 4 °C for 60 min using a microdialysis device (MWCO = 3500 Da) (Bio-Tec International Inc., Bellevue, WA, USA). For determination of hepatic LPO and GSH and MPO and SOD activities, another part of the right large lobe of each liver was homogenized in 9 volumes of ice-cold 0.15 M KCl containing 1.0 mM EDTA using a glass homogenizer with a Telfon pestle. For MPO and SOD assays, the prepared homogenate was sonicated on ice twice for 30 s using a Handy Sonic model UR-20P (Tomy Seiko Co., Tokyo, Japan). The sonicated homogenate was centrifuged at 12 000 g for 20 min at 4 °C. The resultant supernatant was dialysed against 100 volumes of 0.05 M Tris-HCl buffer (pH 7.4) for 60 min using the above-described microdialysis device.

### Assays of Serum Transaminases and Hepatic Components and Enzymes

Serum alanine aminotransferase (ALT) and aspartate aminotransferase (AST) were assayed using a commercial kit, Iatorzyme TA-L<sub>Q</sub> (Dai-Iatron Co., Tokyo, Japan). Both activities were expressed as international units (IU l<sup>-1</sup>). Hepatic TBARS was determined by the method of Ohkawa *et al.* (1979) using the thiobarbituric acid reaction except that 1.0 mM EDTA was added to the reaction mixture. The concentration of TBARS is expressed as the amount of malondialdehyde (MDA) equivalents. Hepatic GSH was determined by the method of Sedlak and Lindsay (1968) using Ellman's reagent and GSH as a standard. Hepatic MPO was assayed as follows: the dialysed supernatant was incubated at 60 °C for 2 h to increase the recovery of MPO in the liver tissues according to the method of Schierwagen *et al.* (1990). This heat treatment caused a complete inactivation of catalase, which is known to influence the assay of MPO in liver tissues. MPO activity in the heat-treated supernatant was assessed by measuring H<sub>2</sub>O<sub>2</sub>-dependent oxidation of TMB at 37 °C according to the method of Suzuki *et al.* (1983). This TMB oxidation was measured spectrophotometrically at 655 nm. One unit of this enzyme activity was expressed as the amount of enzyme causing a change in absorbance of 1.0 per min at 650 nm. Hepatic SOD was assayed by the method of Oyangui (1984). SOD activity was determined at 37 °C by the XO-

NH<sub>2</sub>OH method using purified bovine erythrocyte SOD (5000 units mg<sup>-1</sup> solid) as a standard. This enzyme activity was expressed as the amount of the erythrocyte SOD showing activity equivalent to the determined activity. Hepatic XO was assayed at 30 °C by the method of Hashimoto (1974) using xanthine as a substrate. XO activity was assessed by measuring the increase in absorbance at 292 nm following the formation of uric acid. One unit (U) of XO activity is defined as the amount of enzyme forming 1 µmol uric acid min<sup>-1</sup>. Protein in liver tissue samples was measured by the method of Lowry *et al.* (1951) using bovine serum albumin as a standard.

### Histological Examination

Liver samples were taken from the central part of the right large lobe of CCl<sub>4</sub>-treated and untreated rats with and without anti-neutrophil antiserum treatment at 24 h after the intoxication. The samples were fixed with 10% formalin in phosphate buffered saline for 24 h and then washed with tap water, dehydrated in alcohols, and embedded in paraffin. Sections 6–7 µm thick were mounted in glass slides. Staining with hematoxylin and eosin (H-E) was performed on each slide and then histological examination was conducted under light microscopy.

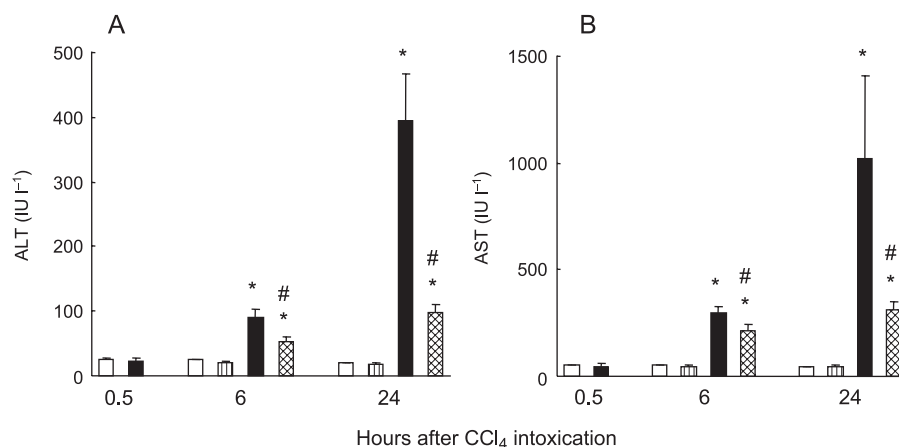
### Statistical Analysis

All values obtained are expressed as the mean ± standard deviation (SD). All data were statistically analysed by computerized statistical packages (StatView). Each mean value was compared by one-way analysis of variance and Fisher's protected significant difference for multi-comparison as the post hoc test. The level of significance was set at  $P < 0.05$ .

## Results

### Effect of Neutropenia on Serum ALT and AST Activities in CCl<sub>4</sub>-treated Rats

In rats treated with CCl<sub>4</sub> (1 ml kg<sup>-1</sup> BW), the serum ALT and AST activities were not changed at 0.5 h after the intoxication but both enzyme activities significantly increased at 6 h and further increased at 24 h (Fig. 1). When anti-neutrophil antiserum (2 ml kg<sup>-1</sup> BW) was administered to CCl<sub>4</sub>-intoxicated rats at 0.5 h after the intoxication, the increases in serum ALT and AST activities found at 6 and 24 h after the intoxication were significantly depressed; the ALT and AST activities in the CCl<sub>4</sub>-treated group with neutropenic treatment were 3.9- and 6.1-fold, respectively, higher than those in the



**Figure 1.** Effect of neutropenic treatment on serum ALT (A) and AST (B) activities in CCl<sub>4</sub>-treated and untreated rats. Rats received a single i.p. injection of either CCl<sub>4</sub> (1 ml kg<sup>-1</sup> BW) or olive oil used as a vehicle. At 0.5 h after CCl<sub>4</sub> intoxication, they received a single i.p. injection of either anti-neutrophil antiserum (2 ml kg<sup>-1</sup> BW) or rabbit serum (2 ml kg<sup>-1</sup> BW). The animals were killed 0.5, 6 and 24 h after CCl<sub>4</sub> intoxication. Open bar, untreated control rats; closed bar, rats treated with CCl<sub>4</sub> alone; striped bar, CCl<sub>4</sub>-untreated rats with neutropenia; crosshatched bar, CCl<sub>4</sub>-treated rats with neutropenia. Each value is the mean  $\pm$  SD ( $n = 5-10$ ). \*  $P < 0.05$  (vs control rat); #  $P < 0.05$  (vs corresponding rats treated with CCl<sub>4</sub> alone)

control group at 24 h after the intoxication (Fig. 1). The same neutropenic treatment had no effect on serum ALT and AST activities in CCl<sub>4</sub>-untreated rats at the time points corresponding to 6 and 24 h after CCl<sub>4</sub> intoxication (Fig. 1).

### Effect of Neutropenia on Hepatic Histological Changes in CCl<sub>4</sub>-treated Rats

The liver sections stained by H-E in CCl<sub>4</sub>-treated rats with and without neutropenic treatment and untreated control rats were examined for necrosis and extent of inflammation at 24 h after the intoxication. Hepatocytes in the untreated control group showed few histological changes (Fig. 2A). Hepatocytes in the centrilobular area of the CCl<sub>4</sub>-treated group presented necrotic and degenerative changes with severe inflammatory cell infiltration (Fig. 2B). In contrast, hepatocytes in the centrilobular area of the CCl<sub>4</sub>-treated group with neutropenic treatment presented many fewer necrotic and degenerative changes and little inflammatory cell infiltration (Fig. 2C).

### Effect of Neutropenia on Hepatic MPO Activity in CCl<sub>4</sub>-treated Rats

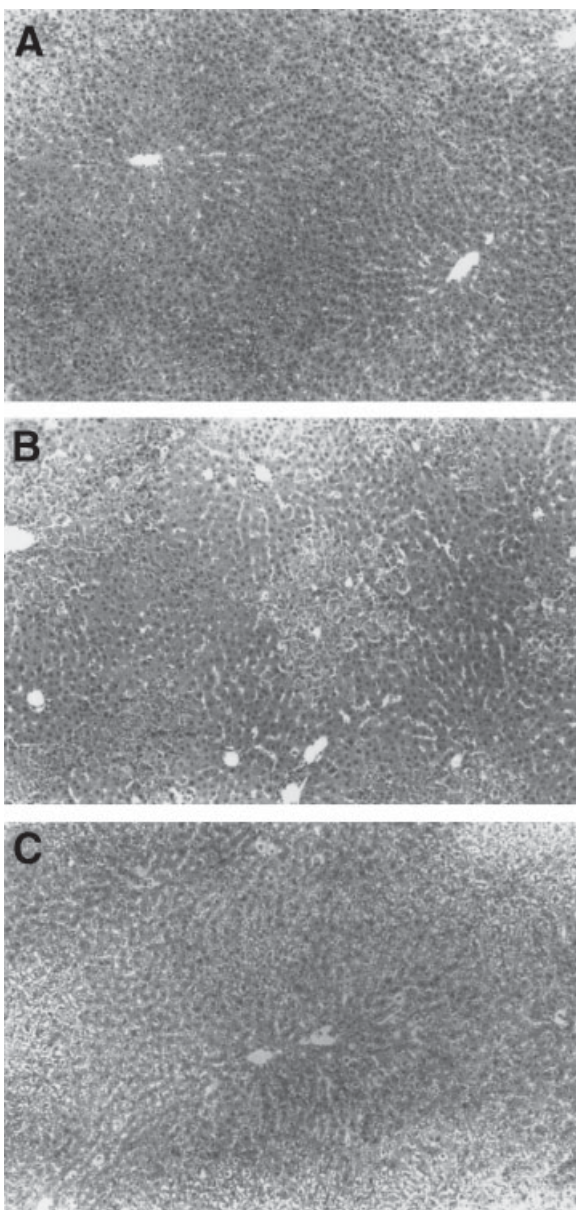
The hepatic MPO activity in CCl<sub>4</sub>-treated rats was not changed at 0.5 h after the intoxication but the enzyme activity increased at 6 h and further increased at 24 h; the intoxicated group had 2.4- and 5.6-fold higher hepatic MPO activity than the control group at 6 and 24 h after the intoxication, respectively (Fig. 3). There was no sig-

nificant difference in the hepatic MPO activity between the CCl<sub>4</sub>-treated group with neutropenic treatment and the control group at 6 h after the intoxication and the CCl<sub>4</sub>-treated group with neutropenic treatment had a 3.2-fold higher hepatic MPO activity than the control group at 24 h after the intoxication (Fig. 3). In CCl<sub>4</sub>-untreated rats with the same neutropenic treatment, the hepatic MPO activity significantly decreased at the time points corresponding to 6 and 24 h after CCl<sub>4</sub> intoxication (Fig. 3).

### Effect of Neutropenia on Hepatic TBARS and GSH Concentrations and XO and SOD Activities in CCl<sub>4</sub>-treated Rats

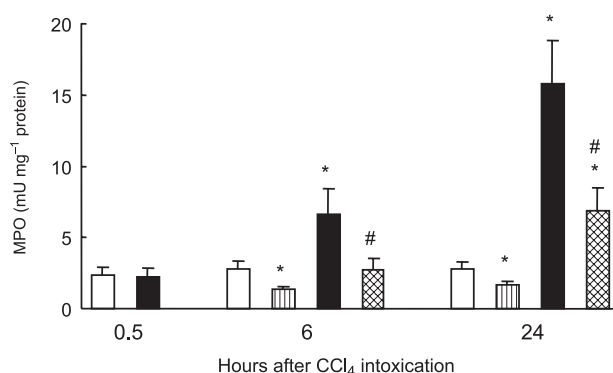
In CCl<sub>4</sub>-treated rats, a significant increase in hepatic TBARS concentration and a significant decrease in hepatic GSH concentration occurred at 6 and 24 h, but not at 0.5 h, after the intoxication (Fig. 4A, B). The hepatic TBARS concentrations in the CCl<sub>4</sub>-treated group were 1.8- and 4.7-fold higher than that in the control group at 6 and 24 h after the intoxication, respectively (Fig. 4A). The hepatic GSH concentrations in the intoxicated group were 57.3% and 44.7% of that in the control group at 6 and 24 h after the intoxication, respectively (Fig. 4B). Neutropenic treatment significantly attenuated the increase in hepatic TBARS concentration and the decrease in hepatic GSH concentration found at 6 and 24 h after CCl<sub>4</sub> intoxication (Fig. 4A, B). The CCl<sub>4</sub>-treated group with the same neutropenic treatment had 1.4- and 2.1-fold higher hepatic TBARS concentration than the control group at the time points corresponding to 6 and 24 h after the intoxication, respectively (Fig. 4A).





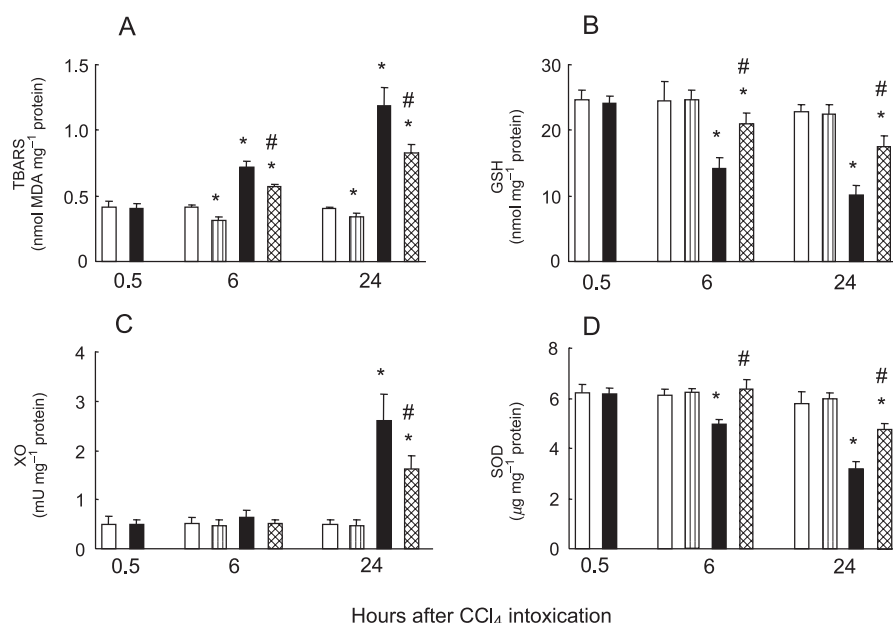
**Figure 2.** Histology of the rat liver cell at 24 h after  $\text{CCl}_4$  intoxication. (A) untreated control group: little histological change was observed; (B)  $\text{CCl}_4$ -treated group: necrotic and degenerative changes with severe inflammatory cell infiltration were observed; (C)  $\text{CCl}_4$ -treated group with neutropenic treatment which was conducted 0.5 h after the intoxication: dramatic decreases in necrotic and degenerative changes and inflammatory cell infiltration were seen. (H-E, magnification  $\times 50$ )

The  $\text{CCl}_4$ -treated group with neutropenic treatment had 85.4% and 77.6% of hepatic GSH concentration in the control group at 6 and 24 h after the intoxication, respectively (Fig. 4B). In  $\text{CCl}_4$ -untreated rats with the same neutropenic treatment, the hepatic TBARS concentration significantly decreased at the time points corresponding



**Figure 3.** Effect of neutropenic treatment on hepatic MPO activity in  $\text{CCl}_4$ -treated and untreated rats. Rats received a single i.p. injection of either  $\text{CCl}_4$  ( $1 \text{ ml kg}^{-1}$  BW) or olive oil used as a vehicle. At 0.5 h after  $\text{CCl}_4$  intoxication, they received a single i.p. injection of either anti-neutrophil antiserum ( $2 \text{ ml kg}^{-1}$  BW) or rabbit serum ( $2 \text{ ml kg}^{-1}$  BW). The animals were killed 0.5, 6 and 24 h after  $\text{CCl}_4$  intoxication. Open bar, untreated control rats; closed bar, rats treated with  $\text{CCl}_4$  alone; striped bar,  $\text{CCl}_4$ -untreated rats with neutropenia; crosshatched bar,  $\text{CCl}_4$ -treated rats with neutropenia. Each value is the mean  $\pm$  SD ( $n = 5-10$ ). \*  $P < 0.05$  (vs control rat); #  $P < 0.05$  (vs corresponding rats treated with  $\text{CCl}_4$  alone)

to 6 and 24 h after  $\text{CCl}_4$  intoxication, but the hepatic GSH concentration did not change at both time points (Fig. 4A, B). Hepatic XO activity in the  $\text{CCl}_4$ -treated rats significantly increased at 24 h, but not at 0.5 and 6 h, after the intoxication, while hepatic SOD activity in the  $\text{CCl}_4$ -treated rats significantly decreased at 6 and 24 h, but not at 0.5 h, after the intoxication (Fig. 4C, D). The hepatic XO activity in the  $\text{CCl}_4$ -treated group was 5.2-fold higher than that in the control group at 24 h after the intoxication (Fig. 4C). The  $\text{CCl}_4$ -treated group had 80.5% and 54.8% of hepatic SOD activity in the control group at 6 and 24 h after the intoxication, respectively (Fig. 4D). Neutropenic treatment significantly attenuated the increase in hepatic XO activity found at 24 h after  $\text{CCl}_4$  intoxication and the decrease in hepatic SOD activity found at 6 and 24 h after the intoxication (Fig. 4C, D). The  $\text{CCl}_4$ -intoxicated group with neutropenic treatment had a 3.2-fold higher hepatic XO activity than the control group at 24 h after the intoxication (Fig. 4C). The hepatic SOD activity in the  $\text{CCl}_4$ -treated group with neutropenic treatment did not differ from that in the control group at 6 h after the intoxication and the  $\text{CCl}_4$ -treated group with neutropenic treatment had a 82.2% of hepatic SOD activity in the control group at 24 h after the intoxication (Fig. 4D). The same neutropenic treatment did not affect hepatic XO and SOD activities in the  $\text{CCl}_4$ -untreated rats at the time points corresponding to 6 and 24 h after  $\text{CCl}_4$  intoxication (Fig. 4C, D).



**Figure 4.** Effect of neutropenic treatment on hepatic TBARS (A) and GSH (B) concentrations and XO (C) and SOD (D) activities in CCl<sub>4</sub>-treated and untreated rats. Rats receive a single i.p. injection of either CCl<sub>4</sub> (1 ml kg<sup>-1</sup> BW) or olive oil used as a vehicle. At 0.5 h after CCl<sub>4</sub> intoxication, they received a single i.p. injection of either anti-neutrophil antiserum (2 ml kg<sup>-1</sup> BW) or rabbit serum (2 ml kg<sup>-1</sup> BW). The animals were killed 0.5, 6 and 24 h after CCl<sub>4</sub> intoxication. Open bar, untreated control rats; closed bar, rats treated with CCl<sub>4</sub> alone; striped bar, CCl<sub>4</sub>-untreated rats with neutropenia; crosshatched bar, CCl<sub>4</sub>-treated rats with neutropenia. Each value is a mean  $\pm$  SD ( $n = 5-10$ ). \*  $P < 0.05$  (vs control rat); #  $P < 0.05$  (vs corresponding rats treated with CCl<sub>4</sub> alone)

## Discussion

In the present study, acute hepatic injury in rats treated with CCl<sub>4</sub> (1 ml kg<sup>-1</sup> BW), judged by the serum levels of ALT and AST, indices of liver cell damage, developed with an increase in the hepatic activity of MPO, an index of hepatic neutrophil infiltration (Duval *et al.*, 1990; Schierwagen *et al.*, 1990; Komatsu *et al.*, 1992). When CCl<sub>4</sub>-treated rats received anti-neutrophil antiserum treatment before the occurrence of hepatic injury, hepatic injury development was prevented with attenuation of the increased hepatic MPO activity. This preventive effect of neutropenia on the development of CCl<sub>4</sub>-induced hepatic injury was confirmed by histological observation. Thus, the present study has clearly shown that neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats.

It has been shown that both enhanced lipid peroxidation and GSH depletion occur with the development of injury in the liver of rats treated once with CCl<sub>4</sub> (Ohta *et al.*, 1995, 1997, 2000, 2003). Activated neutrophils produce ROS via NADPH oxidase (Takahashi *et al.*, 1991). It is known that O<sub>2</sub><sup>-</sup> generated by activated neutrophils enables these cells to enhance their production of HOCl (Kettle and Winterbourn, 1990). HOCl is produced by MPO released from activated neutrophils in the presence of H<sub>2</sub>O<sub>2</sub> and Cl<sup>-</sup> (Kettle and Winterbourn, 1997). It has been shown that neutrophils mediate lipid

peroxidation through the production of O<sub>2</sub><sup>-</sup> via NADPH oxidase in the cells (Casani *et al.*, 1997; Zimmerman *et al.*, 1997). It has also been shown that MPO mediates lipid peroxidation in the presence of H<sub>2</sub>O<sub>2</sub> and halide ions (Stelmazynska *et al.*, 1992; Zhang *et al.*, 2002). GSH is known to react with O<sub>2</sub><sup>-</sup> and HOCl *in vitro* (Ross *et al.*, 1985; Prütz, 1996; Puller *et al.*, 2001). GSH is also known to be consumed in the MPO-H<sub>2</sub>O<sub>2</sub>-Cl<sup>-</sup> system (Winterbourn, 1985). In the present study, the hepatic concentration of TBARS, an index of lipid peroxidation, in rats treated with CCl<sub>4</sub> increased at an early stage of hepatic injury and further increased at a progressed stage of the injury, as reported previously (Ohta *et al.*, 2000, 2003). The increase in hepatic TBARS concentration with the development of CCl<sub>4</sub>-induced hepatic injury was attenuated by neutropenic treatment. In addition, CCl<sub>4</sub>-untreated rats with neutropenic treatment showed a decrease in the hepatic TBARS concentration. In CCl<sub>4</sub>-treated and untreated rats with neutropenic treatment, the decrease in hepatic TBARS concentration was consistent with the decrease in hepatic MPO activity. Hepatic GSH concentration in rats with CCl<sub>4</sub> intoxication decreased at an early stage of hepatic injury and further decreased at a progressed stage of the injury, as reported previously (Ohta *et al.*, 2000, 2003). The decrease in hepatic GSH concentration with the development of CCl<sub>4</sub>-induced hepatic injury was attenuated by neutropenic treatment.

However, neutropenic treatment had no effect on the hepatic GSH concentration in CCl<sub>4</sub>-untreated rats. These findings suggest that neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats by attenuating lipid peroxidation and GSH depletion mediated by neutrophils accumulating in the liver tissue.

It has been shown that XO-derived ROS contributes to the progression of CCl<sub>4</sub>-induced acute liver injury in rats (Ohta *et al.*, 2003). In the present study, rats intoxicated with CCl<sub>4</sub> had increased hepatic XO activity at a progressed stage of hepatic injury, as shown in our previous reports (Ohta *et al.*, 2003, 2004). Neutropenic treatment attenuated the increase in hepatic XO activity found in CCl<sub>4</sub>-treated rats but it did not affect the hepatic XO activity in CCl<sub>4</sub>-untreated rats. These results suggest that neutropenia prevents the development of CCl<sub>4</sub>-induced acute hepatic injury in rats by reducing the neutrophil-mediated increase in hepatic XO activity. It has been suggested that the CCl<sub>4</sub>-induced increase in hepatic XO activity is due to the conversion of xanthine dehydrogenase (XD) to XO in the ischemic or hypoxic liver (Ohta *et al.*, 2003). The conversion of XD to XO in liver tissues is known to be caused by a proteolytic mechanism and/or the oxidation of sulfhydryl groups present in the protein (Corte and Stirpe, 1972; Nishino and Tamura, 1991). As described above, neutropenic treatment attenuated the decrease in hepatic GSH concentration found in the CCl<sub>4</sub>-treated rats. Activated neutrophils not only produce ROS but also release proteases from the cells (Travis, 1988; Takahashi *et al.*, 1991). Therefore, it is suggested that neutrophils accumulating in the liver tissue of rats treated with CCl<sub>4</sub> convert XD to XO not only via the oxidation of sulfhydryl groups present in the protein of XD by ROS generated by the cells, but also via proteases released from the cells in the liver tissue, resulting in an increase in XO activity in the liver of CCl<sub>4</sub>-treated rats.

In the present study, hepatic SOD activity in rats with CCl<sub>4</sub> intoxication decreased at an early stage of acute hepatic injury and further decreased at a progressed stage of the injury, as reported previously (Ohta *et al.*, 1995, 1997, 2003, 2004). Neutropenic treatment attenuated the decrease in hepatic SOD activity with the development of CCl<sub>4</sub>-induced hepatic injury. However, neutropenic treatment had no effect on hepatic SOD activity in CCl<sub>4</sub>-untreated rats. Previous reports have shown that in the liver of rats treated once with CCl<sub>4</sub> the activity of Cu,Zn-SOD present in the cytosol, but not the activity of Mn-SOD present in the mitochondria, decreases with hepatic injury development (Ohta *et al.*, 2003, 2004). Cu,Zn-SOD is known to be inactivated by HOCl and by the MPO-H<sub>2</sub>O<sub>2</sub>-Cl<sup>-</sup> system (Aruoma and Halliwell, 1987; Sharonov and Churilova, 1992; Auchère and Capeillère-Blandin, 2002). Escobar *et al.* (1996) have shown that alkyl-peroxyl radicals generated by 2,2'-azobis(2-amidinopropane), which is used as a source of

radicals for lipid peroxidation, inactivate Cu,Zn-SOD *in vitro*. As described above, activated neutrophils and MPO mediate lipid peroxidation *in vitro* (Stelmazynska *et al.*, 1992; Casani *et al.*, 1997; Zimmerman *et al.*, 1997; Zhang *et al.*, 2002). These findings suggest that neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats by attenuating the neutrophil-mediated reduction of hepatic SOD activity.

There are some reports showing that proteases released from activated neutrophils contribute to ischemia/reperfusion-induced liver injury in rats (Kushimoto *et al.*, 1996; Yamaguchi *et al.*, 1997; Chen *et al.*, 1999). It has been shown that ischemia/reperfusion-like blood flow occurs during the development of injury in the liver of rats treated once with CCl<sub>4</sub> (Makino, 1990). Therefore, the possibility cannot be ruled out that neutropenia prevents hepatotoxicity in rats treated with CCl<sub>4</sub> by attenuating the release of proteases from neutrophils accumulating in the liver tissue.

When Kupffer cells respond to hepatocellular stress, the cells not only produce ROS but also release pro-inflammatory cytokines such as TNF- $\alpha$ , IL-1 and IL-6, which recruit neutrophils into liver cells through expression of adhesion molecules (Vrba and Modrianský, 2002). It has been implicated that cytokines such as TNF- $\alpha$ , IL-1, IL-6 and interleukin-10 contribute to liver damage in rats with a single CCl<sub>4</sub> treatment (Czaja *et al.*, 1989, 1995; DeCicco *et al.*, 1998; Louis *et al.*, 1998; Neubauer *et al.*, 1998; Simeonova *et al.*, 2001; Hojo *et al.*, 2002; Nakamoto *et al.*, 2003; Campo *et al.*, 2004). Edwards *et al.* (1993) have indicated that Kupffer cells cause liver damage in rats with a single CCl<sub>4</sub> treatment possibly by the release of chemoattractants for neutrophils. It is known that inhibition of Kupffer cells attenuates liver damage with prevention of increased hepatic lipid peroxidation in rats treated once with CCl<sub>4</sub> (Muriel *et al.*, 2001). Taken together with these findings and the results of the present study, it seems likely that neutropenia prevents CCl<sub>4</sub>-induced hepatotoxicity in rats by reducing hepatic lipid peroxidation and damage mediated by Kupffer cells in an indirect manner.

In conclusion, the results of the present study indicate that neutropenia produced by treatment with anti-neutrophil antiserum prevents CCl<sub>4</sub>-induced hepatotoxicity in rats with attenuation of the neutrophil-mediated disruption of hepatic ROS metabolism associated with increased hepatic lipid peroxidation and MPO and XO activities and decreased hepatic GSH concentration and SOD activity.

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