Lathyrism: A Review

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NEUROLATHYRISM (HUMAN LATHYRISM)

TEUROLATHYRISM in its classic form is a IN neurologic syndrome of man and domestic animals manifested chiefly by a spastic paraplegia of the lower extremities.1 The harmful effects of the Lathyrus species were known to Hippocrates who wrote, "At Ainos, all men and women who ate peas continuously become impotent in the legs, and that state persisted."2 Endemics and epidemics of neurolathyrism occurred in Europe and Asia in the eighteenth and nineteenth centuries: these outbreaks were associated with famines and the consequential use of certain Lathyrus species in the preparation of flours and cereals.3,4,5 A clinically similar disease potentiated by vitamin deficiency occurred in concentration and prisonerof-war camps during World War II.4,5 At present, the disease is a public health problem only in India and in the Mediterranean area, where food is often scarce and famine commonplace.3

The etiologic factors responsible for the development of neurolathyrism have not been positively identified. Studies suggest that the potent neurotoxins L-alphagamma-diaminobutyric acid (isolated from Lathyrus latifolius) and beta-cyano-L-alanine (isolated from Vicia sativa, the common vetch, which often grows alongside the Lathyrus species) may be involved in the production of human lathyrism. 6,7 Beta-cyano-L-alanine is an intermediate in the conversion of asparagine to L-alphagamma-diaminobutyric acid, and by decarboxylation produces the naturally occurring osteolathyrogen, beta-aminopropionitrile.6,7 The lack of a suitable laboratory assay animal has hindered the isolation, identification, and investigation of the neurotoxins responsible for human lathyrism.

Neurolathyrism is characterized by the relatively acute onset of weakness in the lower extremities, at times preceded by pain and paresthesias.4,5 The end result is a permanent spastic paraplegia of the lower extremities characterized by paralysis, increased muscular tonus, increased deep tendon reflexes, positive pathologic reflexes, and the absence of muscle atrophy and nerve regeneration.4,5 Transient symptoms, usually subsiding with exclusion of lathyrus from the diet, include paresis of the upper extremities and neck, irregularities in bowel and urination habits, and impaired circulation of the lower extremities.⁵ Spondylosis and other skeletal lesions are thought to be secondary to the neurologic manifestations, and differ from the skeletal lesions of experimental lathyrism.4

Pathologically there is marginal sclerosis and degenerative changes in the lateral pyramidal tracts of the spinal cord, a reduced number and shrinkage of Betz's cells, and dilatation of the extracellular spaces in the gray matter of the brain.⁵

There is no effective treatment for the resultant spastic paraplegia. Prophylaxis or prevention of the disease is achieved only by the total exclusion of lathyrus from the diet.⁵

OSTEOLATHYRISM (EXPERIMENTAL LATHYRISM)

In 1933, Geiger⁸ and his associates reported on the occurrence of multiple skele-

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tal lesions produced in rats by the feeding of sweet peas (L. odoratus). The similarity between the manifestations of osteolathyrism in rats and certain skeletal disorders in man led Ponseti and Shepard⁹ to utilize experimental lathyrism as a model for Legg-Calvé-Perthes disease, Paget's disease, recurring dislocation of the shoulder, osteogenesis imperfecta, adolescent kyphosis, and idiopathic kyphoscoliosis. In addition to the skeletal abnormalities, Ponseti and Baird¹⁰ noted that a high percentage of the animals fed L. odoratus died of aortic dissection. It is now well known that osteolathyrism can be induced in a variety of common laboratory animals, primarily affecting skin, dental tissues, bones, blood vessels, and tendons. Experimental lathyrism represents an excellent model of true collagen disease, in contrast to the diverse clinical syndromes in which collagen has been implicated but never proven to be primarily involved.

Schilling and Strong¹¹ demonstrated that the substance in L. odoratus responsible for its toxicity in rats was beta-aminopropionitrile, a well-established toxin known to cause widespread connective tissue alterations. In addition to beta-aminopropionitrile and its homolog aminoacetonitrile, a large number of unrelated chemicals give rise to osteolathyrism. Levene¹² subdivided lathyrogens into nitriles, ureides, hydrazides, and hydrazines, forming a series of diminishing potency in their ability to produce skeletal deformities and collagen abnormalities.

There are many conflicting studies concerning the various physical and chemical factors which modify experimental lathyrism. Growth hormone,3 leuteotropic hormone,³ thyroparathyroidectomy,³ partial hepatectomy, phenylbutazone, systemic stress,3 amine oxidase and inhibitors13,14,15,16,17 have all been found to potentiate the development of osteolathyrism. Levene¹² presented evidence that lathyrogens do not act as monoamine oxidase inhibitors. Corticosteroids, 3,18 ACTH, 3 thyroxine, 3,19,20 denervation, 3 calcium, 21 vitamin E,22 and numerous dietary supplements, especially amino acids and proteins, 23,24,25 have been reported to decrease the potency of lathyrogenic agents. Considerable protection against fetal resorption was obtained by treating pregnant rats (exposed to lathyrogenic agents) with estrone and progesterone. 26,27 The skeletal deformities are reversible upon withdrawal of the lathyrogen, 28,29 but studies concerning the regression of vascular lesions have not been reported.

Pathologically, lesions are seen in the skin, dental tissues, bones, tendons, and blood vessels; the changes are more extensive in vounger animals. Pathologic descriptions are varied and in some instances contradictory; this diversity is due partially to the lack of specificity of the histochemical stains, which may react with a variety of connective tissue substances. Fibroblastic proliferation, 30,31,32,33 inhibitation of maturation of fibroblasts,34,35,36,37,38 and absence of impairment of fibrogenesis39,40 have been found. Degeneration and lysis of elastic fibers, disturbance of elastogenic and elastolytic processes, and disordered regeneration of elastic fibers have been $\overset{-}{\text{described}}$. $\overset{-}{^{10,30,31,32,33,41,42,43,44,45,46,46,47}}$ Callum⁴⁷ has stated that the vascular lesions in lathyrism always involve elastic vessels; he postulated that a defect in the elastic lamina was the main cause of aortic rupture. Several workers have demonstrated by light microscopy an increase in mucopolysaccharides in lathyritic sues30,31,33,42,43,49; others have proposed defective formation, excessive destruction. and depolymerization of the ground substances. 9,29,50,51,52,53 However. found no change in mucopolysaccharide staining reactions.

Electron microscopic studies also have been discordant. Collagen structure has been variously described as normal^{54,55} and as showing a failure of the tropocolla-

gen molecules to aggregate in a normal fashion. 39,56,57 Keech 8 and Ham 59 found that collagen was increased in amount in the lathyritic rat aorta, while Cliff, Levene, and Saunders 40 concluded that the formation of collagen was not inhibited by lathyrogenic agents. Electron microscopic studies of the lathyritic rat aorta have shown increased aortic wall thickness, increased cellularity, widely separated elastic laminae, and the presence of a periodic acid-Shiff (PAS)-positive material between the elastic laminae in the media. 58,59

autoradiographic Radioisotope and studies are likewise conflicting. Sulfur-35 incorporation into connective tissues has been used to demonstrate sulfated mucopolysaccharide synthesis. Lathyrogens have been assumed to impair sulfur-35 incorporation.60 However, it has been found that polysaccharides could be synthesized prior to sulfation, 61 and Peck 62 demonstrated that the minimal amount of beta-aminopropionitrile needed to produce lathyritic collagen was 1,000 times less than that amount necessary to inhibit sulfur-35 incorporation. Autoradiographic studies in lathyritic animals favor no essential change in sulfur-35 incorporation^{63,64,65}; however, increased incorporation^{66,67,68} and inhibition of sulfur-35 uptake^{69,70} have been described. Likewise, most isotope studies suggest that collagen synthesis occurs normally in lathyritic animals,71,72,73 but others have detected a retarded collagen synthesis74,75 and increased collagen synthesis.76 Recent studies suggest that lathyrogenic agents primarily affect newly synthesized collagen.77 However, Tanzer has stated that isotope studies suggest that lathyrogenic agents do not affect all new collagen, since some lathyritic collagen can form stable aggregates in vivo.78 Kundel,79 using wideangle x-ray diffraction, has demonstrated that normal and lathyritic collagen are identical in the dry state.

The physical property most extensively

studied has been the tensile strength of lathyritic skin and aorta. Tanzer⁷⁸ reported that there was a close correlation between the tensile strength and the collagenous framework. Levene and Gross⁸⁰ found that the tensile strength was inversely related to the dose of the lathyrogen. A reduction in the tensile strength of lathyritic skin and aortae^{39,80,81,82,83} and in the healing wounds of lathyritic animals84,85,86 has been well documented. Peacock and Madden87 recently demonstrated that lathyrogens arrested the strength gain of wounds and increased saline-extractable collagen 10-fold, but did not alter the amount of insoluble collagen in the wound.

Preceding the structural and functional alterations previously described are abnormalities in connective tissue chemistry. Collagen is synthesized by the fibroblasts and is polymerized extracellularly, yielding mature collagen.88 The basic subunit (tropocollagen or alpha-collagen) can be extracted from mature collagen by cold saline solution, has a molecular weight of 300,000, and has a triple helix configuration.88 The tropocollagen polymerizes first into the dimer (beta-collagen). Progressive end-to-end or side-to-side polymerization increases with age, and results in a mature collagen fiber of great tensile strength, low elasticity, and low turnover rate.88 An increase in the saline solubility of collagen implies a decreased degree of polymerization.88 The level of collagen extractable with saline from lathyritic tissues is increased. 12,71,80,82,89,90,91,92 and this increase is detectable 2 hours following beta aminopropionitrile administration.71 Young rapidly growing rats normally have much higher levels of extractable collagen than older animals. This implies a higher rate of collagen synthesis in young rats.92 A 3fold increase in extractable collagen was found in young lathyritic rats as compared to their normal litter mates; this suggests that a defect in the maturation of collagen

is a more important source of the abnormal collagen than is the disaggregation of already mature collagen.92 Tanzer Gross⁷¹ have shown that the increase in extractable collagen obtained from lathyritic animals originated from both defective maturation and disaggregation of preformed fibers. An increased urinary hydroxyproline excretion, corresponding to the increase in saline-extractable collagen, occurs in lathyritic animals, and presumably represents an acclerated breakdown of tropocollagen.93,94 Martin95,96 has found that lathyritic collagen is lacking in intramolecular cross-links, due either to their disruption or to interference with their formation; therefore, polymerization is inhibited, resulting in structurally weak collagen. Tanzer78 has concluded that the intrinsic properties of the lathyritic tropocollagen molecule are the inability to form stable intermolecular aggregates and the absence of intramolecular cross-links.

In contrast to the qualitative defects, quantitative chemical analyses of various lathyritic tissues have usually shown no effect of the lathyrogenic agents on colla $content.^{57,71,80,81,82,89,97,98,99}$ acid composition, amino groups, ester linkages, carbohydrate content, denaturation temperatures, intrinsic viscosity, flow birefringence, sedimentation constant, and optical rotary dispersion are normal in the obtained $_{
m from}$ lathyric collagen sues. 78,80,96,100,101 Lenzi and Pedrini-Mille¹⁰² have summarized the conflicting data on mucopolysaccharides by stating that the mucopolysaccharides are not essential for the development of the typical collagenous lesions due to lathyrogenic agents; a decreased amount of mucopolysaccharides has been found only in those tissues which contain large amounts of chondroitin-4-SO₄ or chondroitin-6-SO₄.¹⁰³ The determination of the total hexosamine content as an index of mucopolysaccharide concentration is a non-specific measure and has consequently produced conflicting results. 35.65,69,78,94,98,99,102,103

The mechanisms by which the lathyrogenic agents act to produce the previously described alterations have not been clearly delineated. Metabolic activity of the animal is required in the production of lathyritic collagen; *in vitro* studies have yielded negative results. 80,104,105 Many theories concerning the mechanism of action of the lathyrogenic agents have been advanced; those currently enjoying the most prominence are as follows:

Proteolytic enzyme release. It may be that connective tissue cells exposed to lathyrogenic agents release proteolytic enzymes (pepsin, trypsin, chymotrypsin) which are capable of removing intramolecular cross-links from the beta components of soluble collagen.⁷¹

Inhibition of cellular respiration. Clemmons^{100,107} has found that lathyrogenic agents liberate cyanide, a potent inhibitor of the respiratory enzyme cytochrome oxidase. He has postulated that lathyrogens, by inhibiting cellular respiration, could produce specific biochemical lesions by interfering with proline metabolism, the citric acid cycle, the synthesis of glutamic acid semialdehyde and other cross-linking compounds, or they could act via a non-specific tissue injury that is the consequence of impaired respiration.¹⁰⁸

Inhibition of biosynthesis of cross-linking compounds. Lathyrogenic agents have been shown to inhibit the biosynthesis of the newly isolated crosslinking compounds, desmosine and isodesmosine, 108,100 present in elastin. The synthesis of desmosine and isodesmosine from lysine proceeds through an aldehyde intermediate. 110 Levene 111 had previously suggested that aldehydes were involved in the cross-linking of collagen. Lathyrogenic agents very probably act by blocking carbonyl groups on the collagen molecule, 111,112 and by inhibiting the enzymatic reactions involved in the oxidation of lysine to aldehydes. 113 Collagen impairment is not the only major defect present in lathyritic tissues; similar biosynthetic pathways are utilized in the cross-linking of collagen and elastin, and both may be altered by lathyrogenic agents in a like manner.

Discussion

The occurrence of both skeletal abnormalities and aortic dissection in lathyritic

animals calls to mind the Marfan syndrome in man, where skeletal abnormalities and aortic dissection occur in addition to ocular and cardiac abnormalities. The association of the skeletal abnormalities and aortic dissection in experimental lathyrism led Bean and Ponseti114 to search for such an association in man. In a series of 20 patients with aortic dissection they found an unusual incidence (35 per cent) of kyphoscoliosis and severe pigeon-breast deformity. Penicillamine in rats produces alterations in collagen similar to those produced by the lathyrogenic agents. 115,116,117 Penicillamine therapy in Wilson's disease and cystinuria has been shown to produce an increase in saline-extractable collagen from the skin of treated individuals.118,119 Accordingly, penicillamine recently has been instituted as a therapeutic agent in scleroderma, a disease in which there is a decreased amount of saline-extractable collagen.^{118,119,120} Should lathyrogenic agents be used with increasing frequency in the treatment of human disease, we may begin to encounter vascular, skeletal, dental, and cutaneous abnormalities. Experimental lathyrism serves as an excellent model for creating connective tissue disturbances which mimic idiopathic human diseases of connective tissue origin, and offers an opportunity to search for the prevention and reversal of such changes.

SUMMARY

Lathyrism is a complex disease state resulting from the excessive ingestion of seeds of certain legumes, primarily of the genus Lathyrus. Human lathyrism is a neurologic syndrome manifested chiefly by a spastic paraplegia of the lower extremities. Experimental lathyrism of laboratory animals serves as a research model for creating connective tissue disturbances which mimic idiopathic human diseases of connective tissue origin.

Summario in Interlingua

Lathyrismo es un complexe stato de morbiditate que resulta ab le excessive ingestion del semines de certe legumines, primarimente in le genere Lathyrus. Lathyrismo in humanos es un syndrome neurologic que se manifesta principalmente in un paraplegia spastic del extremitates inferior. Lathyrismo experimental in animales de laboratorio servi como modello de recerca pro crear disturbationes de tissu conjunctive que pote simular idiopathic morbos human de origine in le tissus conjunctive.

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