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RESEARCH ARTICLE

Alterations in key enzymes and micromorphology of vital organs during exposure of imidacloprid in albino rats

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Abstract

The effect of oral administration of two doses of imidacloprid 10mg/kg/day and 20 mg/kg/day (corresponding to 1/45th and 1/22th LD₅₀ of imidacloprid) on alterations in biochemical milieu and histopathology of female albino rats of two generations was assessed. This study was designed to evaluate the effects of imidacloprid on the female wistar rats that were treated through two generations (F0 and F1 generation). Average feed intake of F1 female rats was significantly reduced ($P < 0.01$) at 20mg/kg/day dose of imidacloprid. At the end of experiment F1 rats were sacrificed, significant increase in alanine aminotransferase (ALT), aspartate aminotransferase (AST), acid phosphatase (ACP) and alkaline phosphatase (AKP) enzyme activities were observed in higher dose treated groups of F1 females. There was significant decrease ($P < 0.05$) in acetyl cholinesterase (AChE) activity in plasma and brain of higher dose treated groups. Tissue samples of liver, kidney and brain were subjected to histopathological examination. Based on the present physiological, biochemical and histological studies it is evident that imidacloprid did not produce any significant effects at 10 mg/kg/day dose but induced toxicological effects at 20 mg/kg/day to female rats.

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INTRODUCTION

Indiscriminate usage of pesticides in agriculture is leading to contamination of environment and natural resources, and thereby producing an adverse impact on animal and human health. Imidacloprid is relatively a new pesticide which belongs to the class of the neonicotinoids compounds¹. It is one of the fastest sold insecticide across the world because of its high selective toxicity in insects and apparent safety in humans. Due to its acute toxicity, imidacloprid has become one of the most widely used insecticides in the world². It is one of the fastest sold insecticide across the world because of its high selective toxicity in insects and apparent safety in humans³. Its selective toxicity results from its high affinity to insect's nicotinic acetylcholine receptors compared to mammals⁴. It acts on nervous system by blocking post-synaptic acetylcholine receptors, which kills the insect³. It was demonstrated that acute exposure to imidacloprid leads to oxidative and inflammatory effects in rats.⁵ It was reported that treatment with oral 0.5, 2 or 8 mg/kg imidacloprid induced morphological changes, DNA fragmentation, antioxidant imbalance and apoptosis in the reproductive system of developing male rats⁶. Experimental studies suggest that chronic exposure to imidacloprid may induce neurobehavioral deficits in offspring rats following in utero exposure,⁷ genotoxic and mutagenic alterations⁸.

Biochemical alterations in response to pesticides are considered to be rapidly responding endpoints and thus most biochemical biomarkers in the laboratory studies are assessed after acute exposure to chemicals. Changes in the biochemical profile indicate alterations in metabolism of the organism resulting from the effect of the

pesticide and they make it possible to study the mechanisms of the effects of these pesticides⁹. Since liver is associated with metabolism and elimination of toxicants from the body and its histological and biochemical parameters are considered as key points to elucidate toxicity of the chemicals. Imidacloprid treated birds also showed significant increase in serum aspartate aminotransferase (AST) level at 14 and 28 days of experiment, while no significant change in serum alanine aminotransferase (ALT), serum total protein, serum total albumin, serum total globulin and serum creatinine was seen.¹⁰ However, it has been established that on repeat administration at 20 mg/kg per day, imidacloprid produces pathomorphological changes and hormonal imbalance in female rats¹¹. The availability of such information regarding the effect of imidacloprid on the female reproductive system, indicates the necessity to explore a two-generation study, to assess the outcome of imidacloprid exposure to gravid females and their subsequent progeny.

Materials and Methods

Chemical- Commercial product of imidacloprid (Confidor, 17.8% w/w, Bayer) used in this study was purchased from the local market in Ludhiana, India.

Animals- Eighteen female and eighteen male Wistar albino rats, obtained from Guru Angad Dev Veterinary and Animal Sciences University (GADVASU), Ludhiana. The animals were housed in groups of two rats per cage. The rats were acclimatized for one week before using them for experimentation. The rats were maintained under controlled conditions of temperature ($22 \pm 2^{\circ}\text{C}$) and humidity (30–70%) with 12 h light and dark cycle. The animals were given standard diet containing pelleted food and water ad libitum. The experimental protocol met the National guidelines on the proper care and use of animals in the laboratory research. The Institutional Animal Ethics Committee (IAEC) approved this experimental protocol.

Experimental design and treatment- Eighteen female rats were divided into three groups. Group 1 served as Control and given corn oil through oral intubation. Group 2 treated with $1/45^{\text{th}}$ LD₅₀ of imidacloprid. Group 3 treated with $1/22^{\text{th}}$ LD₅₀ of imidacloprid. Dams and their offsprings were treated with imidacloprid during the periods of mating, gestation and lactation. The offsprings of different dams in a group of each generation were mated among themselves throughout two generations. F1 generation was attained by the same procedure.

Processing of tissues for histopathology- All F1 rats were weighed and sacrificed by chloroform anaesthesia. The tissues of liver, kidney and brain were removed, weighed and immediately fixed in 10% formaldehyde. After the routine procedure, the fixed tissues were embedded in paraffin and 5 μm thick tissue sections were stained with routine haematoxylin and eosin (H&E) in order to examine under light microscopy.

Sample preparation for biochemical analysis- All F1 rats were weighed and sacrificed by chloroform anaesthesia. After sacrificing, blood samples were collected directly from heart of F1 rats, drawn into heparinized tubes and plasma was separated by centrifuging at 3000rpm for 10 minutes at room temperature. The effect of imidacloprid on aspartate aminotransferase, alanine aminotransferase was estimated by the method of Reitman and Frankel as described by Bergmeyer¹¹ (1974) and acid phosphatase, alkaline phosphatase was estimated by method of Bessey et al.¹² (1946), glucose 6-phosphate dehydrogenase (G6PD) by method of Deutsch¹³, acetylcholine esterase (AChE) activity by the method of Vass and Sachsse¹⁴ as modified by Morai et al. (1946) and total protein by method of Lowry¹⁵ et al. (1951).

Statistical Analysis- Biochemical analyses were presented as the mean $\pm$ standard error of means (SEM). Comparisons were made between control and treated groups using “Analysis of Variance (ANOVA)” as a statistical package.

Results

Clinical symptoms and cyclicity- No signs of toxicity were seen in clinical appearance of new borns in all the three generations. Number of offsprings in F1 and F2 generations are shown in Table 1.

Body weight and relative organ weight- There was no significant disruption in cyclicity of female rats of F1 generation. Body weight of female F1 rats are given in Table 2. The relative organ weights of vital organs of females are shown in Table 3. The relative organ weight of endocrine glands also did not differ significantly in control and both the treated group rats as shown in Table 4.

Biochemical analysis- The plasma biochemical parameters of female rats orally administered imidacloprid are shown in Table 5. There was significant increase in activity of AST, and ACP and non-significant increase in the activity of ALT, AKP and G6PD in the plasma of $1/22^{\text{th}}$ LD₅₀ of imidacloprid treated group as compared to control group. There was significant increase in the plasma proteins of $1/22^{\text{th}}$ LD₅₀ of imidacloprid treated group. Plasma and brain AChE activity was significantly decreased at $1/45^{\text{th}}$ and $1/22^{\text{th}}$ LD₅₀ of imidacloprid treated rats.

Histopathological examination- Histopathological examination of liver of control rat showed radially arranged hepatic cords (RHC) around the central vein (CV) and sinusoids (S). Liver section of T1 treated rat showed dilation of central vein and infiltration by large mass of leukocytic inflammatory cells (LIC). Liver section of T2 treated rat showed infiltration by large mass of leukocytes cells (LIC) in the sinusoids and hepatic cells with pyknotic nuclei.(Fig 1)

Histopathological examination of brain of control rat showed normal structure of neurons and granular layers. T.S of brain of $1/45^{\text{th}}$ LD₅₀ of imidacloprid showed degenerating neurons with pyknotic nuclei and swelling in neurons. (Fig 2)

Histopathological examination of kidney of control rat showed intact capsule with well demarcated glomerular tuft (G) and normal arrangement of tubules in the cortical portion. Kidney of T1 treated rat showing blood congestion in between tubules and small area of hemorrhage in the interstitium in rats. Kidney of T2 treated rat showing enlargement in parietal layer of Bowman's capsule and tubular degenerations. (Fig 3)

Table 1

Number of male and female offsprings in Groups I-III for three generations

Groups	F0	F1			F2		
	Female	Male	Female	Total	Male	Female	Total
Group I	6	20	16	36	25	17	42
Group II	6	18	7	25	19	17	36
Group III	6	20	13	33	27	10	37

Table 2

Effect of imidacloprid on body weight of female albino rats of F1 generation as compared to control

Traits	F1		
	Control	T 1	T 2
One week before mating	149.1 ± 5.54	140.83 ± 1.53	141.6 ± 6.54
Mating	158.33 ± 3.33	152.5 ± 6.02	152.5 ± 1.11
Gestation	169.16 ± 1.53	167.5 ± 2.5	166.6 ± 3.80
After Delivery	158.33 ± 3.33	159.16 ± 4.36	145.8 ± 7.12
During Lactation	185 ± 2.88	181.66 ± 3.07	176.6 ± 4.94

Values are Mean ± SE

Table 3

Relative organ weight (g %) data of organs of female rats orally administered imidacloprid

Organs	Control	T 1	T 2
Liver	3.36 ± 0.181	3.66 ± 0.146	3.91 ± 0.149*
Stomach	1.97 ± 0.225	2.46 ± 0.308	2.51 ± 0.44
Lungs	0.53 ± 0.017	0.59 ± 0.011*	0.68 ± 0.045*
Heart	0.29 ± 0.016	0.31 ± 0.013	0.31 ± 0.008
Spleen	0.22 ± 0.010	0.22 ± 0.014	0.26 ± 0.015
Kidney	0.56 ± 0.028	0.59 ± 0.023	0.60 ± 0.033

Values are Mean ± SE of six animals in each group

*Significantly different from control at $P < 0.05$

Table 4

Relative organ weight (g %) data of endocrine glands of female rats orally administered imidacloprid

	Control	T 1	T 2
Adrenal	0.02 ± 0.002	0.03 ± 0.002	0.03 ± 0.006
Thyroid	0.19 ± 0.004	0.21 ± 0.007	0.20 ± 0.008
Parathyroid	0.07 ± 0.002	0.07 ± 0.008	0.07 ± 0.007

Values are Mean $\pm$ SE of six animals in each group

Table 5

Plasma biochemical data of female rats orally administered imidacloprid

Parameters	Dosage/mg/kg/d		
	0 (Control)	10	20
ALT (U/L)	32.13 ± 4.65	37.87 ± 4.07	$55.49 \pm 6.23^*$
AST (U/L)	114.6 ± 19.92	$135.4 \pm 23.77^*$	$141.8 \pm 23.62^*$
AKP (U/L)	82.54 ± 15.21	$115.61 \pm 20.87^{**}$	$146.1 \pm 5.38^*$
ACP (U/L)	1.08 ± 0.19	1.16 ± 0.27	$2.46 \pm 0.36^{**}$
Total proteins(g/dl)	8.21 ± 0.32	8.43 ± 0.34	8.59 ± 0.57
G6PD (U/L)	1054 ± 66.9	1686 ± 209.46	1946 ± 198.3

Values represent the mean $\pm$ SE of 6 animals in each group

*Significantly different from control at $P < 0.05$

**Significantly different from control at $P < 0.01$

Table 6

Acetylcholinesterase inhibition of brain and plasma of female rats after oral administration of imidacloprid

Dosage (mg/kgbw/day)	AChE (U/L)	
	Plasma	Brain
0	988.1 ± 99.54	852.79 ± 76.47
10	824.1 ± 91.71	769.30 ± 111.97
20	$607.5 \pm 31.57^*$	$643.5 \pm 89.13^*$

Values represent the mean $\pm$ SE of 6 animals in each group

*Significantly different from control at $P < 0.05$

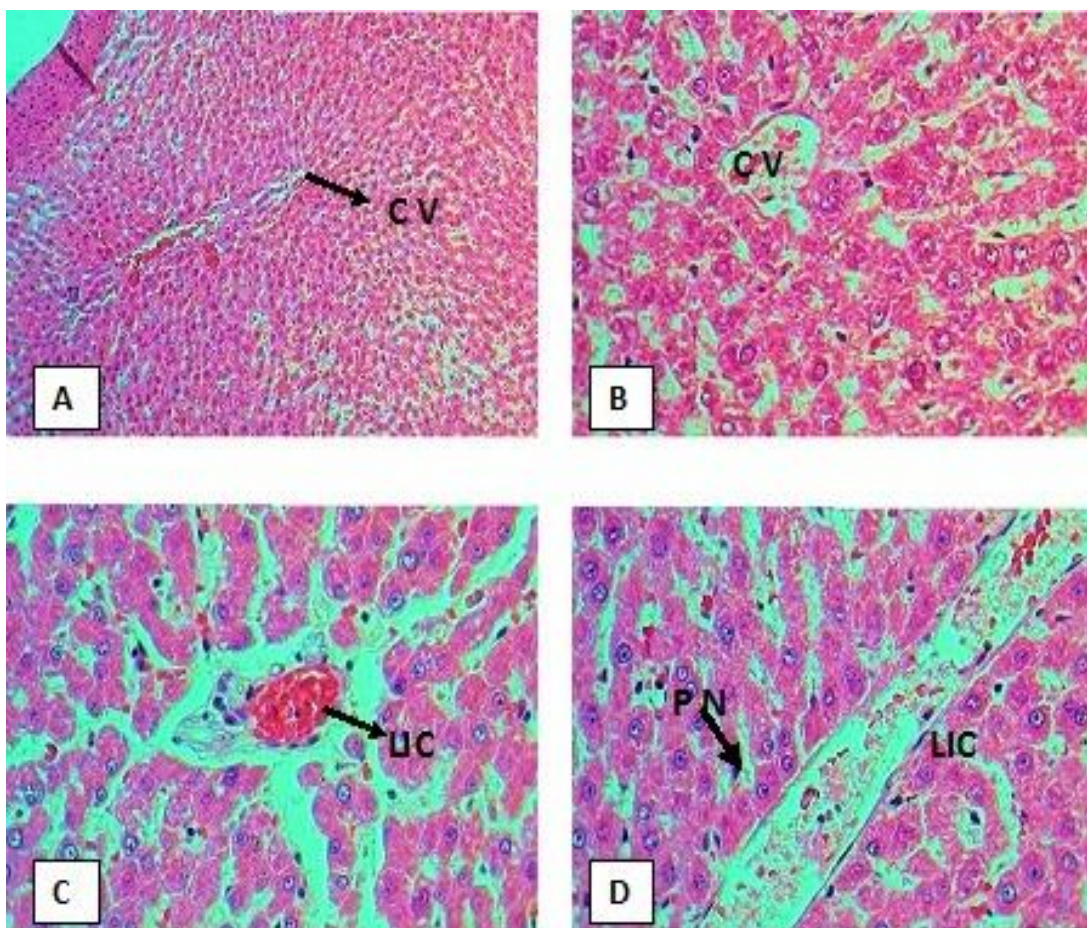


Fig 1 A. T.S of liver of control rat of F1 generation showing radially arranged hepatic cords (RHC) around the central vein (CV) and sinusoids (S)
B. Magnified view of section of liver of control rat
C. T.S of liver of T1 treated rat showing dilation of central vein and infiltration by large mass of leukocytic inflammatory cells (LIC)
D. T.S of liver of T2 treated rat showing infiltration by large mass of leukocytes cells, (LIC) in the sinusoids and hepatic cells with pyknotic nuclei

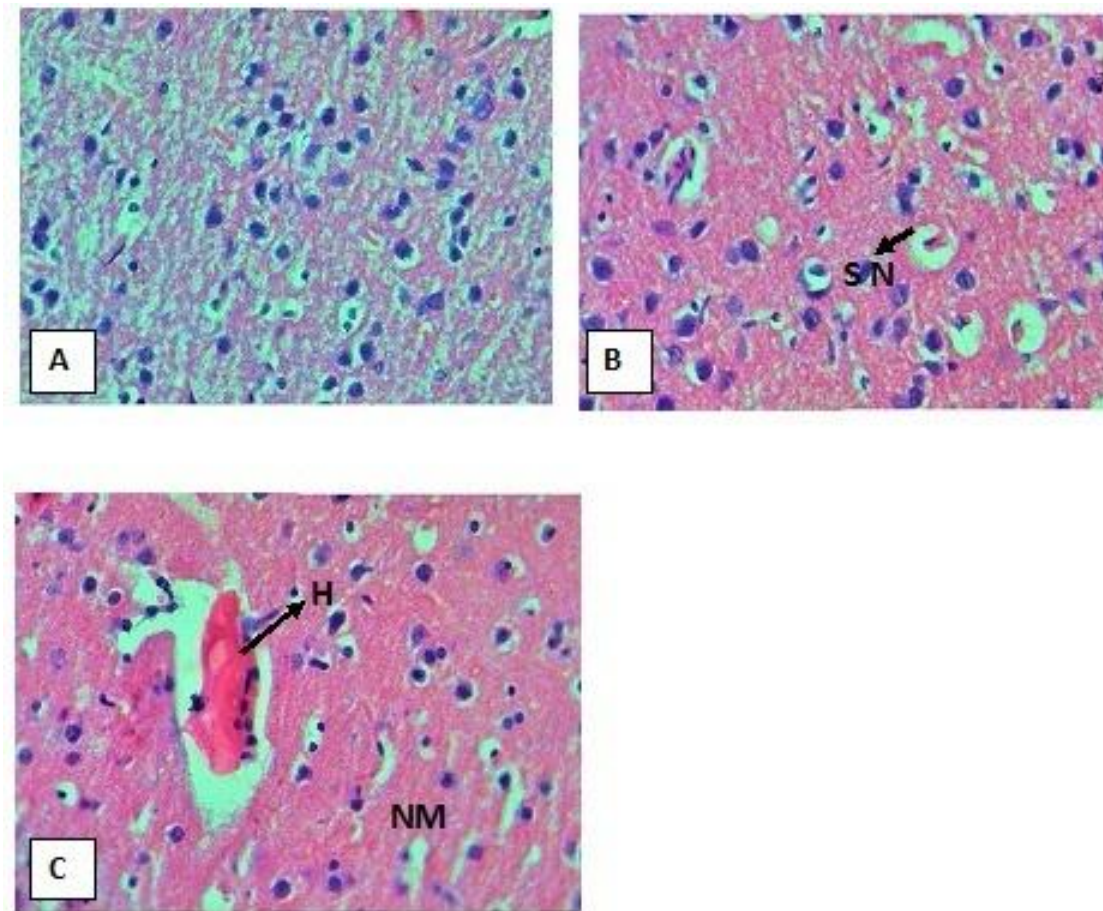


Fig 2. A. T.S of brain of control rat showing normal structure of neurons and granular layers
B. T.S of brain of T1 rats showing degenerating neurons with pyknotic nuclei and swelling in neurons
C. T.S of brain of T2 rats showing perivascular hemorrhage and nuclear migration of neurons

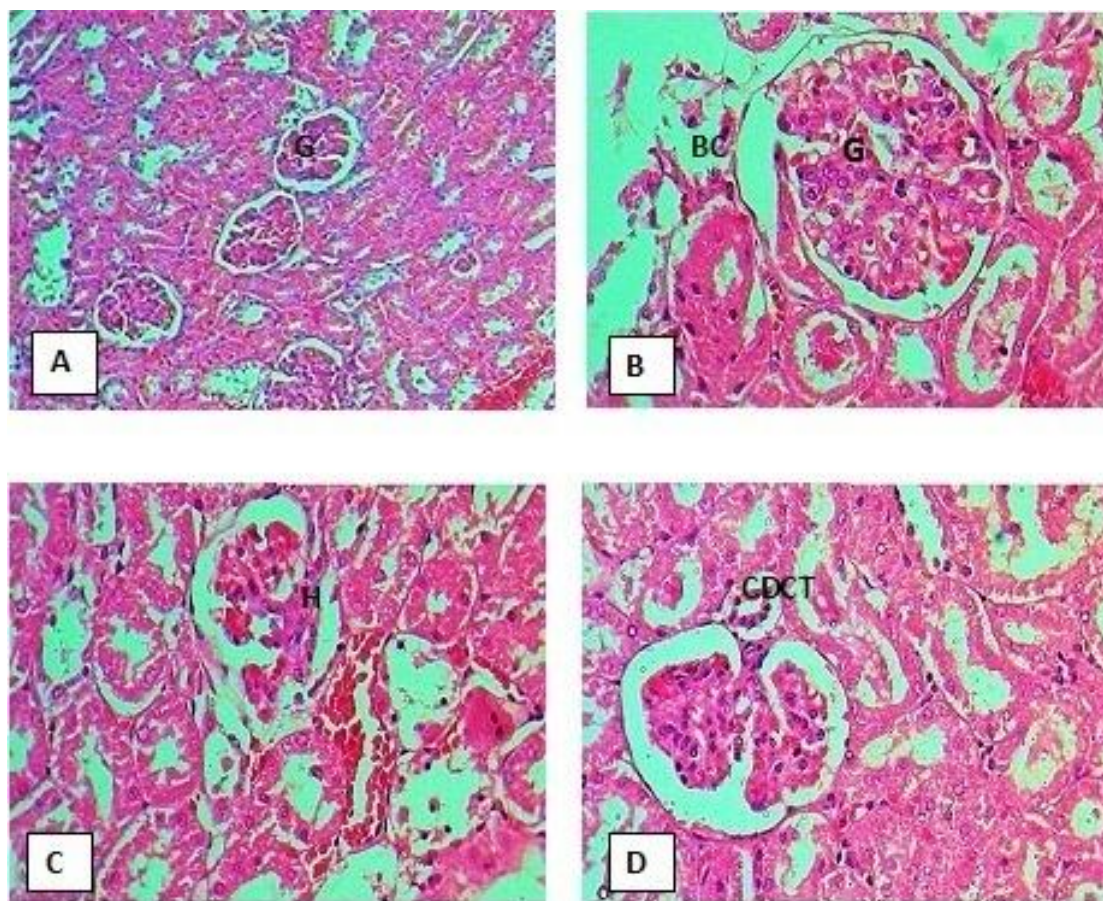


Fig.3. A. T.S of kidney of control rat showing intact capsule with well demarcated glomerular tuft (G) and normal arrangement of tubules in the cortical portion
 B. Magnified view of kidney of control rat
 C. T.S of kidney of T1 treated rat showing blood congestion in between tubules and small area of hemorrhage (H) in the interstitium in rats
 D. T.S of kidney of T2 treated rat showing enlargement in parietal layer of Bowman's capsule, congested distal convoluted tubules (DCT) and tubular degenerations

Discussion

No signs of toxicity and mortality were seen in clinical appearance of new borns in all the three generations. There was no significant disruption in cyclicity of female rats. There was non-significant increase in body weight of female rats during mating, gestation and lactation period in both lower and higher imidacloprid treated groups. In one study it was reported that animals' digestive tract represents the functional link between foraging and the energy available for survival, growth, and reproduction. During lactation, the alimentary canal progressively increased in weight and size. It partially regressed following weaning¹⁶.

The vital organs like brain, liver, kidney, stomach and lungs of rats did not illustrate any change in their relative weights at any doses as compared to controls. However, relative weight of heart and spleen was significantly decreased ($P < 0.05$) at higher dose. Weight of liver of female F1 rats increased significantly in $1/22^{\text{th}}$ LD₅₀ of imidacloprid treated group. The significant increase in weight of liver was, however, found to be associated with concomitant increase in the activity of serum GOT and GPT. It is important to note that the elevated activity of serum GOT and GPT recorded in the study maybe due to tissue of liver enzyme loss. This has been confirmed by hepatocellular damage in the higher dose treated animals. Our present knowledge on liver changes induced by imidacloprid is both limited and equivocal¹⁷.

Biochemical alterations in response to pesticides are considered to be rapidly responding endpoints and thus most biochemical biomarkers in the laboratory studies are assessed after acute exposure to chemicals. Changes in the biochemical profile indicates alteration in metabolism of the organism resulting from the effect of the pesticide and make it possible to study the mechanisms of the effects of these pesticides⁹. The liver is rich-source of aminotransferases (ALT & AST) and alkaline phosphatase (ALP). The hepatic injury is accompanied by hepatic inflammation or necrosis (death of cells). When the hepatic injury is produced, the hepatocytic enzymes released into the circulation¹⁸. Biochemical analysis was carried out with the idea to screen the state of the liver during different stages of subchronic toxicity. The increases of plasma AST activity and bile acid concentration were the most specific indicators of liver disease in the racing pigeons intoxicated by ethylene glycol¹⁹. Earlier studies of Bhardwaj et al.²⁰ 2010, Mohany et al.²¹ 2011 have also observed increased level of enzymes in serum of rats treated with different doses of imidacloprid. Results are also in accordance with those of Balani et al.²² for male white leghorn (WLH) treated with different concentrations of imidacloprid. These changes might be due to the accumulation of imidacloprid metabolites in the liver as it is the principal target organ for any detoxification mechanism. Similar increase in levels of ALT and AST was noticed by Soujanya et al.²³ 2013 in female albino rats fed imidacloprid at the rate of 80 mg/kg body weight.

The hexokinase and G6PD are the key enzymes of glycolysis and pentose phosphate pathway, opposite changes in their activity can be regarded as a compensatory reaction of the tissue aimed at the maintenance of homeostasis during exposure to the toxic agent. The observed increase in G6PD activity may also be associated with the specific function of the enzyme as a supplier of NADPH, required for the detoxification of the insecticide entering the body²⁴.

The brain and plasma AChE activity was significantly reduced at $1/22^{\text{th}}$ LD₅₀ of imidacloprid. According to one study the cause of AChE inhibition is unknown because imidacloprid is not choline esterase (ChE) inhibitor, since plasma AChE is synthesized in the liver, the decrease in plasma AChE activity may be related to observed changes in liver function. Earlier studies have shown that concentration of pesticides and metabolites in plasma and brain generally correlated with the severity of toxicity and symptoms of neurotoxicity which were found to increase with the pesticide concentration in brain.

There was significant increase in the plasma proteins of $1/22^{\text{th}}$ LD₅₀ of imidacloprid treated group. The elevation of proteins is reported to occur in conditions when the cells are subjected to wide variety of environmental assaults including toxins, poisons and pollutants and is mainly due to stimulation of the synthesis of acute phase protein and corresponding m-RNA²⁵, which buffer them from harm²⁶. Elevation of proteins might also be due to destruction of tissues, which causes release of proteins.

The present study revealed that treated rats by imidacloprid showed different pathological lesions in the liver tissue. The liver is the centre for detoxifying any foreign compounds entering the body. So, it uniquely exposed to a wide variety of exogenous and endogenous products. These include environmental toxins and chemicals present in food or drinking water. Microscopic changes in the liver with large areas of vacuolation, fatty degeneration, large areas of necrosis and congested sinusoidal spaces after the 14th and 28th days of the trial are similar to imidacloprid administration in Japanese quail^{27,28}. Mohany et al.²¹ (2011) reported that animals treated with 0.21 mg/kg imidacloprid for 4 weeks showed heavily congested central vein and blood sinusoids, widely distributed pyknotic nuclei, and leukocyte infiltration in rat liver. Imidacloprid at $1/10^{\text{th}}$ of LD₅₀ treatment resulted in dilatations of central vein and sinusoids between hepatocytes³⁰. Imidacloprid produced similar histopathological lesions in liver, kidneys, and brain of Japanese quail exposed to chemical for 6 weeks³⁰ and in layer chickens exposed to 139 mg/kg imidacloprid³¹. Hepatocellular hypertrophy and fatty changes in the liver were also observed in a three-week study conducted with thiacloprid in mice³². The study suggested that toxic responses occur relatively more frequently in the liver compared with other organs, mainly because the liver is a predominant organ for the metabolism, and is also the first major organ to be exposed to ingested toxins, due to its portal blood supply³³.

Brain sections of rats treated with $1/22^{\text{th}}$ LD₅₀ of imidacloprid showed perivascular hemorrhage and nuclear migration of neurons. It was reported by Soujanya et al.²³ 2012 that, brain sections of rats treated with 80 mg/kg body weight revealed marked congestion in cerebellum, degeneration of Purkinje cells with loss of dendrites, vacuolation around neurons and shrunken neurons on 14th day of experiment. On day 28, brain sections revealed vacuolation around neuronal cell body, chromatolysis and marked congestion. Bhardwaj et al.²⁰ 2010 also reported brain damage showing degenerative changes in Purkinje cells and loss of granules in granular layer. Necrotic Purkinje cells and loss of granules in the granular layer of cerebellum have also provided support to the neurobehavioral effects indicating accumulation of imidacloprid and its metabolites in the brain. The data of the present study has indicated that imidacloprid has induced toxicological effects to female rats at 20 mg/kg/day dose level.

Kidney sections of rats treated with $1/22^{\text{th}}$ LD₅₀ of imidacloprid showed enlargement in parietal layer of Bowman's capsule, congested distal convoluted tubules (DCT) and tubular degenerations. Higher dose of imidacloprid (20 mg/kg/day) resulted in mild focal necrosis with swollen cellular nuclei and cytoplasmic lesions in rat liver and slight degeneration of tubules and glomeruli of kidney of the female rats (Bhardwaj et al.²⁰ 2010). Soujanya and Lakshman³⁴ (2013) reported that kidney sections of male rats treated with 80 mg/kg/day imidacloprid revealed cystic dilatation of tubules, shrunken glomeruli, vacuolation, inter tubular haemorrhages and hyaline casts.

In conclusion, although the results obtained from this study showed minor histopathological, biochemical and toxicological effects in rats fed with imidacloprid at higher dose throughout two generations, it did not cause severe health concerns at lower dose.

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