The Effects of Hesperidin on Neuronal Apoptosis and Cognitive Impairment in the Sevoflurane Anesthetized Rat are Mediated Through the PI3/Akt/PTEN and Nuclear Factor-κB (NF-κB) Signaling Pathways

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Background: Hesperidin (HPD) is a bioflavonoid found in citrus fruits. This study aimed to investigate the effects of HPD on cerebral morphology and cognitive behavior in sevoflurane anesthetized neonatal rats and the molecular mechanisms involved.

Material/Methods: Sixty neonatal Sprague–Dawley rats were divided into five groups, including the untreated control group, and the sevoflurane anesthesia groups untreated and treated with 25 mg/kg/day of HPD (HPD25), 50 mg/kg/day of HPD (HPD50), and 100 mg/kg/day of HPD (HPD100). The rat model was created by the administration of sevoflurane on the sixth postnatal day (P6) and for a further three days. Neonatal rats pre-treated with HPD for 19 days were given sevoflurane 30 minutes beforehand (P3 to P21). Rat hippocampal tissue specimens were investigated using the TUNEL assay for apoptosis. Hippocampal tissue homogenates underwent Western blot for the quantification of markers of neuroinflammation and oxidative stress. The neonatal rats were also investigated for behavior, learning, and memory.

Results: HPD significantly reduced sevoflurane-induced neuronal apoptosis and protein expression of cleaved caspase-3, BAD, BAX, NF-κB, TNF-α, IL-6, and IL-1β (p<0.05). HPD significantly increased the expression of Bcl-xL and Bcl-2 (p<0.05), and activated the PI3/Akt pathway. Learning and memory were significantly improved following HPD treatment (p<0.05). HPD treatment modulated the PI3/Akt/PTEN and NF-κB signaling pathways, and reduced oxidative stress (p<0.05).

Conclusions: In the sevoflurane anesthetized neonatal rat model, treatment with HPD reduced neuronal degeneration, hippocampal inflammation, and improvised memory, learning, and cognitive responses by modulating the PI3/Akt/PTEN and NF-κB signaling pathways.

MeSH Keywords: Anesthesia • Apoptosis • Cognition Disorders • Hesperidin • Neurogenic Inflammation • NF-kappa B

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Background

General anesthetics are used to prevent and reduce surgical pain and include sevoflurane, which is a volatile compound that induces anesthesia in children and adults [1]. Volatile anesthetics are preferred in infants and younger adults due to its rapid initiation effects and postoperative recovery, and reduced airway irritation [2]. Liang et al. showed that prolonged exposure to clinical concentration of general anesthetics results in apoptosis and neuronal degeneration [3]. Neuronal impairment may develop later during adulthood [4,5]. Hence, clinical administration of general anesthetics for the long term may attenuate the neuronal capacity affecting memory and learning capacity. Yufune et al. showed that clinically equivalent doses of sevoflurane resulted in a great extent of apoptosis of neuronal cells [6]. Children who are less than four years of age have reduced learning capacity when exposed to sevoflurane [7]. Multiple exposures to sevoflurane and depreciation in neurological capabilities are strongly associated compared with a single exposure [8]. The effect of sevoflurane critically involves acute neuronal apoptosis, with inflammation [9].

Sevoflurane is known to elevate the activated caspase-3 expression, which is a critical enzyme in the process of apoptosis [10]. Ding et al. reported that maternal exposure to sevoflurane can reduce brain-derived neurotrophic factor (BDNF) and elevate the levels NF-κB (nuclear factor-κB) RNA in the hippocampus, coupled with enhanced pyramidal cell apoptosis [11]. Multiple sevoflurane doses are known to induce cognitive impairment resulted from biochemical alterations in the hippocampus. This biochemical imbalance results in the degeneration of neurons and cognitive dysfunction [12]. Istaphanous et al. reported that sevoflurane exposure results in elevated levels of cytokine in the hippocampus [9]. The impairment of cognitive responses due to sevoflurane administration results from the activation of microglia and increased brain expression of cytokines such as tumor necrosis factor (TNF-α) and interleukin-6 (IL-6) [13,14]. Transcription of signaling genes that include nuclear factor kappa B (NF-κB) also has an active role [15]. The transcription determinants from the NF-κB group are critically involved in the process of inflammation and innate immune responses. Also, the NF-κB transcribed genes are associated with inflammation during stress and injury [16].

Similar to other inhalational anesthetics, sevoflurane upregulates inhibitory ion channels and downregulates excitatory ion channels. Neurons undergoing apoptotic degeneration occurs due to the overloading of intracellular calcium ions by gamma-aminobutyric acid (GABA) receptors that are involved in voltage-dependent calcium channel signaling at the synaptic junction [17]. Stimulation of inositol-1,4,5-triphosphate receptors results in an overload of calcium ion released at the endoplasmic reticulum that further triggers the NF-κB signaling pathway and subsequently results in flooding of cytokines involved in inflammation [18]. NF-κB activation is primarily dependent on IκB kinase phosphorylation and breakdown of IκB, which is an inhibitor of NF-κB [19].

The phosphoinositide 3-kinase (PI3K)/protein kinase (Akt) pathway sustains the integrity of neurons. This signaling pathway is actively expressed in the central nervous system and affects the associated growth regulators, cytokines, and neurotransmitters. The survival of neurons through activation of growth factors is regulated by serine/threonine kinase (Akt) [20]. Apoptosis is inhibited following Akt activation and by phosphorylation and inactivation of glycogen synthase kinase-3β (GSK-3β) [21]. Cytoprotection from Akt is associated with the phosphorylation of proteins that include the BCL2 associated agonist of cell death (BAD), forkhead box (FOX) proteins, cAMP response element-binding protein (CREB), and NF-κB, which are associated with cell apoptosis. In the absence of these cytotoxic factors, Akt has cytoprotective effects [11]. Cell under stress conditions may show PTEN activation resulting in the downregulation of Akt [21]. Therefore, changes in the PI3/Akt signaling pathway can be used to evaluate the survival of neuronal cells and cerebral inflammation.

Flavonoids comprise a diverse group of naturally occurring polyphenolic moieties found naturally in plants in the form of secondary metabolites [22]. Flavonoids occur in a free state and the form of glycosides and have a wide spectrum of therapeutic effects [23]. Hesperidin (HPD) is a bioflavonoid glycoside found in citrus fruits [24]. HPD has previously been reported to show a range of pharmacological effects that include anti-inflammatory, antioxidant, anti-cancer, and anti-allergic effects. HPD has previously been reported to reduced capillary permeability [25], and scavenges free radicals to suppress intracellular oxidation [26]. The anti-inflammatory effect of HPD is attributed to NF-κB inhibition [27]. In vitro studies on lipopolysaccharide (LPS)-stimulated RAW 264.7 cells showed an anti-inflammatory effect by downregulation of prostaglandin E2 [28].

Therefore, this study aimed to investigate the effects of hesperidin on cerebral morphology and cognitive behavior in sevoflurane anesthetized neonatal rats and the molecular mechanisms involved.

Material and Methods

Animals

The Institutional Ethical Animal Experimentation Committee approved this study of The First Affiliated Hospital of Nanchang University. The animal experiments were performed according
to the National Institutes of Health (NIH) Guidelines for the Use of Laboratory Animals. Pregnant Sprague-Dawley rats were obtained from the Central Animal House, China, and were housed in specific pathogen-free (SPF) cages at 22±1°C, with a 12-hourly light and dark cycle, and at 46±2% relative humidity. The rats were allowed free access to standard diet and water. The date of birth of the rats was recorded as postnatal day 0 (P0). Free access to water was provided to the newborns together with littermates. Hesperidin (HPD) was administered orally by gavage in the form of a solution in normal saline.

**Neonatal rat study groups**

Sixty neonatal rats, weighing between 16–21 gm, were randomized into five groups. Group I (n=12) was the control group of non-anesthetized rats without treatment with hesperidin (HPD). Group II (n=12) included the sevoflurane anesthetized rats not treated with HPD. Group III (n=12) included the sevoflurane anesthetized rats treated with an oral dose of 25 mg/kg/day (HPD25). Group IV (n=12) included the sevoflurane anesthetized rats treated with an oral dose of 50 mg/kg/day (HPD50). Group V (n=12) included the sevoflurane anesthetized rats treated with an oral dose of 100 mg/kg/day (HPD100).

Neonatal rats in Group I, the control group, were exposed to 30% oxygen gas and did not receive sevoflurane or HPD. On postnatal day 6 (P6), the neonatal rats were exposed for three days to an anesthetic composition containing sevoflurane-oxygen gas mixture (2% sevoflurane in 30% oxygen) with a flow rate of 2 liters/minute for 2 hours daily, in an anesthetizing chamber maintained at 22±1°C. After waking up from the anesthesia, the neonatal rats were transferred back into the maternal cage. The neonatal rats were only anesthetized for three days with sevoflurane and did not receive HPD. Apart from regular free access to water and diet, the neonatal rats from the remaining three groups were treated with 25, 50, and 100 mg/kg of oral HPD for 19 days, 30 minutes before sevoflurane exposure (postnatal P3 to P21).

The neonatal rats on postnatal P6 were anesthetized with sevoflurane and euthanized, followed by the collection of their brain tissues for carrying out TUNEL analysis and estimation of protein expression. Also, the neonatal rats were subjected to transcardial perfusion using cold physiological buffer saline solution, and subsequently, with 4% paraformaldehyde solution prepared in 0.1M phosphate-buffered saline (PBS). The brain tissues were carefully separated, formalin-fixed, and paraffin-embedded. The neonatal rats from the control group were treated with pentobarbital (40 mg/kg) with transcardial perfusion with 0.01 M neutral buffered saline. The brains were carefully removed to isolate the hippocampus. The brain tissues collected from all experimental groups were preserved at −80°C for further study.

**TUNEL assay for neuronal apoptosis**

Brain tissues collected underwent TUNEL analysis for neuronal cell apoptosis, according to the method previously reported by Li et al. [29,30]. Brain hippocampal tissue was sectioned at 5 µm in thickness for TUNEL analysis. The TUNEL kit used was the DeadEnd™ Fluorometric TUNEL System (Promega, Madison, WI, USA). Cell nuclei were counterstained using Hoechst stain. The results were analyzed using NIS-Elements image processing and analysis software (Nikon Inc., Tokyo, Japan).

**Immunohistochemistry**

Immunohistochemistry was used to identify the expression of cleaved caspase-3 in the hippocampus of sevoflurane-treated neonatal rats. The brain tissues collected after transcardial perfusion with cold physiological buffer saline solution, and subsequently, with 4% paraformaldehyde solution prepared in 0.1M phosphate buffer were analyzed to quantify the activity of cleaved caspase-3. The tissues were allowed to rest overnight with anti-cleaved-caspase-3 primary antibodies at 4°C, followed by 40 minutes incubation with corresponding secondary antibodies. The resulting specimens were treated with the avidin-biotin-peroxidase complex for 40 minutes. The sections were finally treated with 3,3’-diaminobenzidine (DAB) and underwent image analysis using the NIS-elements BR imaging and processing software package. Cell counts quantified the cleaved caspase-3 positive cells in the cornu ammonis-1 (CA1) and cornu ammonis-3 (CA3) regions, and the dentate gyrus of the hippocampus in the tissue sections.

**Western blot**

Quantification of the hippocampal protein activity in the neonatal rats was performed to elucidate the influence of sevoflurane alone and in HPD pre-treated animals. Western blot was performed according to the manufacturer’s instructions. Briefly, the proteins were isolated after tissue homogenization. The cell lysates (3 µg) were loaded on sodium dodecyl sulfate-polyacrylamide gel electrophoresis (SDS-PAGE) gels and then blotted onto polyvinylidene fluoride (PVDF) membranes. The blots were incubated with primary antibodies for 12 hours at 40°C. The primary antibodies used included antibodies to cleaved caspase-3 (Asp175) (#9661), Bcl-2 (mouse monoclonal #15071), BAD (rabbit monoclonal #11E3) (#9268), Bcl-xL (54H6) (rabbit monoclonal #2764), Bax (D2E11) (rabbit monoclonal #5023), Akt (pan) (C67E7) (rabbit monoclonal #4691), phospho-Akt (Ser473) (D9E) (XP® rabbit monoclonal #4060), GSK-3β (27C10) (rabbit monoclonal #9315), Phospho-GSK-3-β (Ser9) (D3A4) (rabbit monoclonal #9322), P7E3 (D4.3) (rabbit monoclonal #9188), XIAP (3B8) (rabbit monoclonal #2045), c-IAP2 (58C7) (rabbit monoclonal #3130), survivin (71G4B7) (rabbit monoclonal #2808), TNF-α (D2D4) (rabbit
monoclonal #11948), β-Actin (8H10D10) (mouse monoclonal #3700), NF-κB p65 (L8F6) (mouse monoclonal #6956), phospho-IkBα (Ser32, 14D4) (rabbit monoclonal #2859), IL-6 (DSW4V) (rabbit monoclonal #12912), IL-1β (D472D) (rabbit monoclonal #12426) (Cell Signaling Technology, Danvers, MA, USA).

Measurement of markers of oxidative stress

In the neonatal rat hippocampus tissue homogenates, commercially available detection kits were used to measure levels of oxidative stress markers, including reactive oxygen species (ROS), catalase, superoxide dismutase (SOD), and malondialdehyde (MDA). ROS levels were quantified using an M200PRO Tecan multi-plate reader (Tecan, Männedorf, Switzerland) at an excitation wavelength of 500 nm and an emission wavelength of 525 nm. MDA and SOD were measured using a Shimadzu, UV2600 UV/visible light spectrophotometer (Shimadzu, Kyoto, Japan) at 532 nm and 550 nm, respectively. Catalase levels were measured using an assay kit (Nanjing liancheng, Nanjing, China), according to the manufacturer’s instructions. The hydrogen peroxide decomposition by catalase was tested using ammonium molybdate, and the remaining hydrogen peroxide formed a pale yellow complex with ammonium molybdate at an absorbance at 405 nm using a Shimadzu, UV2600 UV/visible light spectrophotometer (Shimadzu, Kyoto, Japan).

The elevated plus maze test

Learning, memory, and anxiety testing were performed using several methods that included the elevated plus maze test, the Y-maze test, the open field test, the fear conditioning test, and the Morris water maze (MWM) test. The elevated plus maze test was performed according to the method previously described by Satoh et al. [31]. The test equipment included two closed and two open arms with a dimension of 25x2 cm, placed 50 cm above the ground level. The neonatal rats at P22 were included in the study, and their movement was observed for 10 minutes. The anxiety index was regarded as the extent of time spent within the open arm. The test results were recorded using the SMART computerized video tracking system (Harvard Apparatus, Holliston, MA, USA).

Morris water maze (MWM) test

Learning and memory testing were performed for cognitive performance, spatial learning, and memory changes using the Morris water maze test after 22 days of HPD treatment, according to the method previously described by Li et al. [30]. A circular swimming pool (180 cm in diameter and 60 cm in depth) was designed for the study that was filled with water (23±1°C) and titanium dioxide added as an opacifier. Neonatal rats treated at P6 with sevoflurane alone and with HPD underwent the MWM test four times a day, for seven days between P22 and P28, to trace the immersed platform within 60 seconds. The platform (5 cm radius) was dipped 2 cm below the water surface. The training sessions commenced after the release of the rats from a designated point in the pool. The training session was concluded once the rat reached the platform in 60 seconds and stayed there for 15 seconds. If the rat was not capable in locating the platform within 60 seconds, it was transferred onto the platform and remained there for 15 seconds. The rats were dried using a lamp before they were returned
to their cages. The time required by the rats from each group to trace the platform was recorded. At day P29, the rats were placed on the opposite quadrant of the pool and were permitted to swim for 60 seconds. The percentage of time passed in a quadrant and the number of times that the rats swam past the platform was recorded. A comparison of the time spent in the target quadrant with other quadrants showed the extent of memory retention. Memory capacity was determined by comparing the duration that elapsed in each quadrant compared with the remaining quadrants. The test results were recorded using the SMART computerized video tracking system (Harvard Apparatus, Holliston, MA, USA).

**Statistical analysis**

The results were expressed as the mean±standard deviation (SD), from repeated experiments. Data were processed using SPSS version 22.0 software (IBM, Chicago, IL, USA) and GraphPad Prism version 8.0 (GraphPad Software, La Jolla, CA, USA).

## Results

**Hesperidin (HPD) reduced neuronal apoptosis induced by sevoflurane anesthesia in the neonatal rats**

Sevoflurane anesthesia has been found to significantly increase the neuronal apoptosis in neonatal Sprague–Dawley rats. There was a significant increase in the number of neuronal apoptotic cells resulted after 6 hours of sevoflurane treatment in the CA1 and CA3 region, and the dentate gyrus in the hippocampus (p<0.05). Neonatal rats that were treated with HPD showed a significant reduction in TUNEL-positive cell count (p<0.05), which showed a protective effect on neurons treated with sevoflurane anesthesia. The neuroprotection was considered to be statistically significant.
Figure 3. Hesperidin (HPD) treatment reduced the expression levels of apoptotic proteins in the hippocampus of neonatal rats exposed to sevoflurane anesthesia. (A) Graphs of the relative protein expression values. HPD treatment significantly increased the expression of Bcl-2 and Bcl-xL protein levels (p<0.05), and significantly reduced the expression of BAX, BAD, and cleaved caspase-3. (B) Representative Western blot images of the proteins. Values are represented as the mean±standard deviation (SD) (n=6). The symbol ‘&’ indicates p<0.05 compared with the control group. The symbols ‘*, #, @, $’ indicate intragroup mean values that differ from each other at p<0.05, as calculated by one-way analysis of variance (ANOVA), and then analyzed by Duncan’s multiple range test.

Offered by HPD was highest in animals from the HPD100 group (100 mg/kg) compared with those treated with a low HPD dose of 25 mg/kg and 50 mg/kg (Figure 1).

Cleaved caspase-3 expression in the hippocampus was used as a marker for apoptosis and measured by immunohistochemistry and Western blot. The results showed a significantly increased expression of cleaved caspase-3 in rats following six-hours of sevoflurane exposure (p<0.05). Enhanced cleaved caspase-3 protein expression is an important determinant for higher apoptosis, as shown by the TUNEL analysis. Subsequently, reduction in the cleaved caspase-3 activity in the hippocampus of
sevoflurane-treated neonatal rats given HPD at doses 25, 50, and 100 mg/kg was shown by Western blot, which supported the findings obtained from the TUNEL assay. Also, cleaved caspase-3 activity was dependent on the dose of HPD, with the 100 mg dose of HPD, resulting in a significantly increased reduction in cleaved caspase-3 expression (Figure 2).

**HPD reduced the expression of apoptotic proteins in the hippocampus in the neonatal rats**

Sevoflurane induces anesthesia is responsible for inducing widespread degeneration of neurons coupled with apoptosis. It has been established that a critical balance between the

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**Figure 4.** Hesperidin (HPD) treatment modulated the components of the PI3K/Akt signaling pathway in the hippocampus of neonatal rats exposed to sevoflurane anesthesia. (A) Graphs of the relative protein expression values show that HPD significantly activated the PI3K/Akt pathway. (B) Representative Western blot images of the proteins. Values are represented as the mean±standard deviation (SD) (n=6). The symbol ‘&’ indicates p<0.05 compared with the control group. The symbols ‘*, #, @, $’ indicate intragroup mean values that differ from each other at p<0.05, as calculated by one-way analysis of variance (ANOVA), and then analyzed by Duncan’s multiple range test.
pro-apoptotic proteins, including BAX and the BCL2 associated agonist of cell death (BAD), and anti-apoptotic proteins, including Bcl-2 and Bcl-xL, control the structural integrity of the mitochondrial membrane, together with the release of apoptotic factors which influence life and death of the cell. Six hours of sevoflurane exposure in neonatal rats significantly increased the expression of BAX and the BCL2 associated agonist of cell death (BAD), and reduced Bcl-2 and Bcl-xL expression. A significant downregulation in BAX and BAD expression was shown in the groups treated with 50 and 100 mg/kg of HPD. Also, there was a significant increase in the expression of the anti-apoptotic markers, Bcl-2 and Bcl-xL (p<0.05). Higher doses of HPD had significant effects compared with the low dose of 25 mg/kg (Figure 3A, 3B). HPD modulated the expression of proteins involved in the apoptosis pathway in a dose-dependent manner.

The effects of HPD were associated with the activation of the PI3K/Akt/PTEN signaling pathway

The apoptotic process is characterized by downregulation of a survival promotor PI3K/Akt signaling pathway. The PI3K/Akt pathway is normally upregulated during the growth of a normal brain. Suppression of these pathways was supported by the finding of significantly reduced expression levels of GSK-3β, p-GSK-3β, Akt, and p-Akt levels in the neonatal rats anesthetized using sevoflurane and untreated with HPD (p<0.05). In rats anesthetized with sevoflurane and treated with HPD, there was a significant increase in the levels of Akt, p-Akt, and p-GSK-3β was observed. However, the level of GSK-3 was not significantly enhanced with HPD treatment. In the downregulation of the apoptotic process, PTEN was overexpressed after sevoflurane in rats (Figure 4A, 4B). Administration of HPD in rats on sevoflurane exposure showed a significant reduction in PTEN expression, with the maximum effect observed at the highest concentration of 100 mg/kg of HPD.
Figure 5. Hesperidin (HPD) treatment modulated the components of the NF-κB pathway in the hippocampus of neonatal rats exposed to sevoflurane anesthesia. (A, B) Relative protein expression values shown graphically. Hesperidin treatment resulted in significant inhibition of NF-κB signaling resulting in reduced transcription of cytokines and inflammatory markers and upregulation of anti-apoptotic proteins. (C) Representative Western blot images of the proteins. Values are represented as the mean±standard deviation (SD) (n=6). The symbol '&' indicates p<0.05 compared with the control group. The symbols '*', '#', '@', '$' indicate intragroup mean values that differ from each other at p<0.05, as calculated by one-way analysis of variance (ANOVA), and then analyzed by Duncan’s multiple range test.

The effects of HPD were associated with the activation of the NF-κB signaling pathway

Sevoflurane anesthesia has been previously reported to induce inflammation, shown by the increased levels of IL-6 and TNF-α in the microglial cells, through activation of the NF-κB signaling pathway. Sevoflurane triggers NF-κB by its trans nuclear movement and by activating the IL-6 gene and the TNF-α gene, to initiate neuronal inflammation. The results showed a significant increase in the levels of NF-κB, p65, IL-1β, IL-6, p-IκBα, and TNF-α, and a significant reduction in the XIAP and cIAP levels, following sevoflurane exposure (p<0.05). The changes in the expression levels of these mediators directly contribute to apoptosis following sevoflurane exposure. On the administration of HPD, the experimental rats treated with sevoflurane showed significantly increased expression levels of XIAP and cIAP. Also, HPD administration in sevoflurane-treated neonatal rats resulted in significant inhibition of NF-κB activity, and reduced TNF-α, IL-6, and IL-1β activity (Figure 5A–5C).

HPD treatment improved the behavior and memory of sevoflurane anesthetized neonatal rats

Behavioral patterns and memory of the rats after sevoflurane exposure were studied. The neonatal rats given sevoflurane anesthesia on P6 underwent the open field test to visualize the
reaction of the neonatal rats to new surroundings. The distance traveled by the rats that were anesthetized with sevoflurane was less than that of the control group animals. Neonatal rats that were treated with HPD (the HPD50 and HPD100 group) showed behaviors similar to the rats that did not receive anesthesia or HPD. The elevated plus maze test was used to test the behavior associated with anxiety. The overall time the rats spent in the maze open arms was recorded in percentage. Rats subjected to sevoflurane showed an increased length of passes, compared with the animals that did not receive anesthesia. HPD-treated rats showed a similar proportion of time spent when compared with the control group (Figure 6A, 6B).

Cognitive tasks that are performed utilize the hippocampal region for transiently holding the information and passing them further. The Y-maze test was performed to assess the effect of sevoflurane on spatial memory. The Y-maze test involved recording the memorizing capacity of the rats as they selected the previously selected arm. Sevoflurane-treated rats showed significant behavioral changes when compared with the control rats (Figure 6C). HPD at all the test doses resulted in improvement in the spatial memory performance in neonatal rats, compared with those exposed to sevoflurane alone.

Animal responses indicating immobility were significantly decreased (p<0.05) during conditional and unconditional stimuli in rats exposed to sevoflurane (Figure 6D). No movement responses shown by the neonatal rats treated with HPD were significantly longer than those exposed to sevoflurane alone. The neonatal rats exposed to sevoflurane showed impaired memory and cognition identified by conducting the MWM test. Compared with the control group, the sevoflurane anesthetized rats had an increased duration for locating the platform and an increased swimming distance (Figure 7A, 7B). These results indicated that sevoflurane exposure impaired the memory in the neonatal rats. However, treatment with HPD not only showed a reduction in the duration to find the platform, but also the distance traveled by the rats was reduced. These findings supported that HPD reduced memory impairment in rats due to sevoflurane exposure.
HPD treatment reduced the levels of oxidative stress markers in the neonatal rat hippocampus

Quantification of oxidative markers in the neonatal rat hippocampus after sevoflurane exposure signifies the extent of oxidative damage. Neonatal rats showed a significant increase in the level of MDA in the hippocampal tissue extracts after exposure to sevoflurane, compared with the non-anesthetized group of neonatal rats (p<0.05). Rats treated with HPD showed significantly reduced levels of malondialdehyde (MDA) (Figure 8A), compared with the untreated rats (p<0.05). ROS levels were significantly increased in rats exposed to sevoflurane when compared with the control group (p<0.05) (Figure 8B). Treatment with HPD significantly reduced the levels of reactive oxygen species (ROS) following exposure to sevoflurane (p<0.05). Catalase and superoxide dismutase (SOD) levels were significantly reduced following sevoflurane exposure in neonatal rats (p<0.05) (Figure 8C, 8D). Treatment with HPD normalized the levels of catalase and SOD in rats, supporting its antioxidant effects.

Discussion

The aim of this study was to investigate the effects of hesperidin (HPD) on cerebral morphology and cognitive behavior in sevoflurane anesthetized neonatal rats and the molecular mechanisms involved. In this model, HPD reduced neuronal degeneration, hippocampal inflammation, and improvised memory, learning, and cognitive responses in the neonatal rats by modulating the PI3/Akt/PTEN and NF-κB signaling pathways.
Zheng et al. previously reported that sevoflurane, a widely used anesthetic, induced postoperative cognitive dysfunction and associated neuroinflammation [33]. Sevoflurane induces neuroinflammation by increasing the levels of IL-6, TNF-α, and NF-κB, which results in memory and learning impairment [34]. Exposure of neonatal mice to sevoflurane has previously been shown to result in neuronal apoptosis in the hippocampal region [35]. The findings from the present study showed hippocampal neuronal apoptosis in neonatal rats after sevoflurane exposure. Previous studies have shown that neonatal developing brains are highly susceptible to neurotoxicity induced by anesthetics, as new neurons and synapses are developed during this phase of growth [36]. In the present study, immunohistochemistry and Western blot of the neonatal rat hippocampus of the sevoflurane anesthetized rats showed increased activity of cleaved caspase-3, a marker of cell apoptosis. Thornberry et al. previously showed that the conversion of caspase-3 into cleaved caspase-3 is a final step in apoptosis [37]. Analysis of protein expression by Western blot and immunohistochemistry of HPD-treated neonatal rat hippocampus in the present study showed a significant reduction in the expression of cleaved caspase-3.

Also, this study showed that HPD modulated Bcl-2 proteins, which control the membrane integrity of mitochondria and regulate mitochondrial mediators. Sevoflurane exposure in neonatal rats was associated with increased expression of the pro-apoptotic proteins, BCL2 associated agonist of cell death (BAD) and BAX, and reduced expression of the anti-apoptotic proteins, Bcl-2 and Bcl-xL. Hsu et al. previously reported that increased cell proliferation in the brain was associated with Bcl-xL expression [38]. Bcl-xL inhibits apoptosis by modulating mitochondrial membrane integrity by inhibiting cytochrome-c and BAX [39,40].

Figure 8. Hesperidin (HPD) treatment reduced the levels of oxidative stress markers in the hippocampal tissue extracts of neonatal rats exposed to sevoflurane anesthesia. (A) Malondialdehyde (MDA) activity and (B) levels of reactive oxygen species (ROS) in hippocampal tissue homogenates were significantly increased in sevoflurane anesthetized neonatal rats, compared with the control group. Hesperidin effectively normalized the MDA and ROS levels in the neonatal rats following sevoflurane exposure. (C) Catalase activity and (D) superoxide dismutase (SOD) activity in hippocampal tissue homogenates were significantly lower in sevoflurane anesthetized neonatal rats, compared with the control group. Hesperidin effectively elevated catalase and SOD activity in the neonatal rats following sevoflurane exposure. Values are represented as the mean±standard deviation (SD) (n=6). The symbol ‘&’ indicates p<0.05 compared with the control group. The symbols ‘*’, ‘#’, ‘@’, ‘$’ indicate intragroup mean values that differ from each other at p<0.05, as calculated by one-way analysis of variance (ANOVA), and then analyzed by Duncan’s multiple range test.
In the present study, in neonatal rats treated with HPD, there was a significant increase in Bcl-xL and Bcl-2 expression and a significant reduction in BAD and BAX expression. These results support the neuroprotective effect of HPD in sevoflurane-induced anesthesia. Sanchez et al. reported the critical involvement of the PI3K/Akt signaling pathway in the development and integration of neuron extension [41]. This pathway is also responsible for the regulation of several processes involved in the branching of dendrites. In the present study, sevoflurane reduced the conversion of Akt to p-Akt and p-GSK-3β. PI3K/Akt regulates the process of cell apoptosis. Liu et al. showed that, on stimulation, the PI3K/Akt pathway inhibits mediators that upregulate apoptosis and reduce the levels of mediators that downregulate apoptosis [42]. Reduction in Akt, p-Akt, and GSK-3β expression levels support the upregulation of proteins involved in apoptosis.

Koh et al. previously reported that the phosphorylation of Akt to p-Akt induced the inactivation of BAD and resulted in the upregulation of Bcl-xL, an anti-apoptotic protein, that further binds to BAX [43]. The results of the present study showed that HPD significantly promoted the conversion of Akt to p-Akt, and of GSK-3β to p-GSK-3β. Also, sevoflurane treatment resulted in an increase in PTEN, which was further reduced by HPD treatment, resulting in the activation of the Akt/PTEN signaling pathway. PTEN has a similar effect to lipid phosphatase, which downregulates the PI3K/Akt signaling pathway [44].

Shu et al. demonstrated that cognitive decline and neuronal apoptosis resulted from anesthetic exposure and was correlated with the degree of neuroinflammation [45]. Sevoflurane exposure translocates NF-κB from the cell cytoplasm to the nucleus and enhances the expression of IL-6 and TNF-α. NF-κB expression is associated with the expression of several genes, including the IL-6 and TNF-α genes. Sevoflurane-induced anesthesis increases the expression levels of TNF-α, IL-6, and IL-1β in the microglia, to trigger cognitive dysfunction [46]. In the present study, sevoflurane activated the NF-κB pathway as shown by the increase in the expression of NF-κB p65, p-IκBα, TNF-α, IL-1β, and IL-6. Sevoflurane inhalation was found to reduce the expression of cIAP-1, and XIAP resulting in enhanced apoptosis. Administration of HPD regulated the NF-κB pathway by downregulating TNF-α, IL-6, and IL-1β. These results support the role of HPD in the inhibition of the NF-κB pathway to induce a neuroprotective effect.

Impaired cognitive responses have previously been reported after sevoflurane exposure in rats [33]. Jevtovic-Todorovic et al. showed that the most devastating effects observed with anesthetic administration were during the early phases of the brain and neuronal synapse development [36]. The aim of the present study was to explore the effects of HPD on short-term and long-term memory and cognitive responses in neonatal rats. Negligible changes were observed in the general behavioral patterns, as shown by the open field test and elevated maze test. The Y-maze test results showed reduced spatial memory of the neonatal rats. Morris et al. previously showed that the working memory transiently stores information related to cognitive responses and assists in processing the information and using it for the execution of complex actions [47]. Working memory also participates in intricate cognitive responses, including planning and completing a set of sequential behavioral actions. The behavioral changes that impair the working memory are known to involve the hippocampus [48]. Therefore, sevoflurane-induced hippocampal neuronal degeneration is responsible for reduced memory and learning. In the present study, HPD treatment reduced neuronal apoptosis in the neonatal rat hippocampus, which may be partly responsible for the improvement in the working memory and cognitive responses.

The Morris water maze (MWM) test is used to evaluate the spatial working and memory associated with the hippocampus [49]. Previously published studies have shown that the process of neuronal generation is the most susceptible stage affected by anesthesia [36]. Rola et al. reported that during the generation of neurons, dynamic learning and memory processes occurring in the hippocampal region are crucial, and any disturbance in these processes may affect development [50]. Also, neuronal inflammation was associated with the loss of cognitive function [50]. In the MWN test, the neonatal rats exposed to sevoflurane anesthesia showed a significantly extended escape period during swimming. The memory of the neonatal rats that were treated with HPD resulted in a significant improvement in working and learning memory, compared with the anesthetized rats. All the test doses of HPD resulted in an improvement in memory and behavior.

The brains of neonatal animals are more prone to damage due to oxidative challenge, as there is increased oxygen consumption, increase levels of polyunsaturated fatty acids, and reduced oxidative resistance [51,52]. General anesthetic exposure adversely contributes to the deterioration of the neurons progressing to higher oxidative stress levels [53,54]. Luo et al. showed that free oxygen radicals could trigger cellular damage after reacting with molecules such as DNA, lipids, and proteins [55]. The results of the present study showed that HPD reduced the expression levels of MDA, which is an indicator of peroxidation of lipids. The deposition of ROS in the hippocampal neurons is a major reason for neuronal apoptosis after sevoflurane exposure [56]. Also, an increase in ROS levels after sevoflurane treatment was significantly reduced by HPD in a dose-dependent manner. HPD administration reduced the levels of SOD and catalase almost to the levels of the control group, supporting the anti-oxidative role of HPD following sevoflurane anesthesia.
Conclusions

This study aimed to investigate the effects of hesperidin on cerebral morphology and cognitive behavior in sevoflurane anesthetized neonatal rats and the molecular mechanisms involved. In the sevoflurane anesthetized neonatal rat model, treatment with HPD reduced neuronal degeneration, hippocampal inflammation, and improved memory, learning, and cognitive responses by modulating the PI3/Akt/Pten and NF-κB signaling pathways.

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