A comparison of the effects of honey, fish oil and their combination on wound healing in rat

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ABSTRACT

Objective: To evaluate and compare the effects of honey and fish oil on wound healing in rat.

Methods: A total of 80 adult female Sprague-Dawley rats were randomly divided into four groups as negative control group, Groups II, III and IV. The rats in the four groups were treated with honey, fish oil and honey + fish oil, respectively. Rats were anesthetized, hair was removed from the back, then a wound was made on the back. Visual observation, histopathological examination and biomechanical study were performed on days 3, 7, 14 and 21 after operation. The data were analyzed using One-way ANOVA.

Results: Wound area in group IV was lower than that in other groups. Promotion of wound contraction and epithelialization in group IV was better than that in other groups. Biomechanical parameters in group IV was significantly more than other rats.

Conclusions: A combination of honey and fish oil on wounds can enhance healing better than honey and fish oil separately.

1. Introduction

Wound healing is an important health problem by re-establishing the physical integrity of tissues in the outside and inside of the body’s structures with several stages like inflammation, angiogenesis, proliferation, and remodeling, which involves complex relationships between cells and different factors. A variety of agents have been used topically to treat wounds for many years such as Aloe vera[1], glycerol[2], zinc[3], tocopherol[4], ascorbic acid[5], Lantana (Lantana camara)[6], honey[7,8] and fish oil[9].

Honey with a long tradition of use in wound healing for ulcers, burns and acute or chronic wounds has many records of use for treating wounds in ancient scripts from Greece, Egypt and India. Also the Koran praises the virtues of honey[10]. Different studies have mentioned the effect of honey and its higher efficacy compared with new wound healing materials[11,12]. Several studies in animal models demonstrated that honey reduced healing time, decreased scarring and improved healing process[13].

Fish oil is the main source of omega-3 which composes of long-chain eicosapentaenoic (EPA) and docosahexaenoic (DHA) fatty acids that have biomedical importance. Fish oil, due to the presence of an antioxidant agent - vitamin E, confers important protection against lipid peroxidation. Fish oil is rich in arachidonic acid that acts as inflammatory mediator, stimulates vessel dilation, induces platelet aggregation, and accelerates wound healing[14].

Omega-3 is an important component promoting cell integrity, development, maintenance and function; reducing arterial stiffness and cardiovascular mortality[9], and also has significant healing effects[15]. Omega-3 fatty acids inhibited arachidonic acid synthesis and incorporation into phospholipids, decreased platelet production of thromboxane A, a potent vasoconstrictor and inducer of platelet
aggregation, significantly reduced the severity of dermatitis and increased production by platelets of thromboxane A. The health benefits of EPA and DHA have been related primarily to their anti-inflammatory properties[16,17]. EPA is used for synthesis of prostaglandin I, a potent vasodilator and inhibitor of platelet aggregation[18].

The main objective of this study was the clinical assessment of the effect of honey and fish oil on wound healing process in rats.

2. Materials and methods

2.1. Animals

A total of 80 adult female Sprague-Dawley rats, weighing (200 ± 20) g were randomly divided into four groups of twenty animals in each. Rats in Group I received no treatment and served as negative control group. Group II, positive control group, was treated with honey. Group III was treated with fish oil, while Group IV with honey and fish oil. Animals were maintained under controlled conditions of temperature (23 ± 1 °C) and light cycle of 12 h light and 12 h darkness. They were fed standard rat diet and were given water ad libitum. Animals were used in accordance with the Ethics Committee of Shiraz University of Medical Sciences, Shiraz, Iran (registration number: 1274).

2.2. Experimental procedure

Firstly, all rats were checked to make sure they were clinically healthy. Animals in each group were gently held, and anesthetized through intramuscular injection of a combination of ketamine (100 mg/kg, Alfasan Co., Netherlands) and xylazine (8 mg/kg, Alfasan Co., Netherlands) before wound creation. Then hair was removed from the back with clippers. A circular wound in 2 cm diameter was made on the back of their necks with a sterile surgical blade. Then wounds simply were washed with saline before dressing. Operation was performed under clean conditions. The progressive changes in wound are monitored by a camera on days 3, 7, 14 and 21 after operation. Histopathological study was performed on days 3, 7, 14 and 21 after operation. The wound dressing in Groups II and III was completely performed with honey (0.5–1.0 mL) and fish oil (0.5–1.0 mL) every day, respectively. In Group IV, wound was dressed daily at morning and afternoon with honey (0.5–1.0 mL) and fish oil (0.5–1.0 mL), respectively. And after recovery, the rats were kept in their individual cages (25 × 25 × 40 cm³) under suitable ventilation until the end of the study (21 days).

2.3. Histopathological examination

Histopathological study was performed on days 3, 7, 14 and 21 after operation using healing markers like re-epithelization, collagenation, predominant inflammatory cells and neovascularization. After operation, five rats on each day were euthanized with thiopental sodium (100 mg/kg, i.p.). The skin of the back, including the wounds, was shaved, excised (2 cm in length and 1 cm in width) and immediately transferred to a Petri dish of normal saline to prevent drying. Samples (5 wounds from each group) were wrapped in normal saline, aluminum foils and plastic bags and kept in -70 °C freezer until tensile testing. On the day of the biomechanical test, the samples were defrosted at room temperature, then specimens were kept moistened by immersing in 20 °C normal saline. Samples were then attached to tensiometer holders (Tensiometry®, Co. Zovic, Germany). The following parameters were measured: yield strength (yield point) (kg), ultimate strength (kg) and stiffness (kg·cm²).

2.4. Biomechanical study

The method used has been described previously by Oryan and Moshiri[19]. After operation, five rats on days 14 and 21 were euthanized with thiopental sodium (100 mg/kg, i.p.). The skin of the back, including the wounds, was shaved, excised (2 cm in length and 1 cm in width) and immediately transferred to a Petri dish of normal saline to prevent drying. Samples (5 wounds from each group) were wrapped in normal saline, aluminum foils and plastic bags and kept in -70 °C freezer until tensile testing. On the day of the biomechanical test, the samples were defrosted at room temperature, then specimens were kept moistened by immersing in 20 °C normal saline. Samples were then attached to tensiometer holders (Tensiometry®, Co. Zovic, Germany). The following parameters were measured: yield strength (yield point) (kg), ultimate strength (kg) and stiffness (kg·cm²).

2.5. Statistical analysis

The data were analyzed using computerized statistical program (SPSS version 16.0). Analysis of pathological findings was done by the Kruskal-Wallis H-test. The differences between the groups were determined using the Mann-Whitney U-test. Whereas, data of wound area were analyzed using One-way ANOVA. A value of P < 0.05 was considered to be statistically significant.

3. Results

3.1. Visual observation of wound areas

The wound photos and visual observations on different days showed that wound area decreased in a time-dependent manner in the four groups. Wound area in the negative control group was larger than those in other groups on all days of experiment. In those which were given fish oil, wound area was larger than that in positive control group on days 14 and 21. Also wound area in rats which were taken fish oil and honey was smaller than that in positive control group on days 14 and 21 and it showed significant decrease in wound area (P < 0.05) (Figure 1). Improvement of wound in treatment groups on different days was illustrated in Figure 2.

![Figure 1. Wound area for all groups on different days.](image-url)
3.2. Histopathological evaluations

On day 3, the number of lymphocytes and macrophages in the negative control group was less than that in other groups. Epithelialization in the negative control group was not observed but granulation tissue, epithelialization, angiogenesis and collagen formation were detected in other groups especially in the group treated with fish oil and honey.

On days 7 and 14, the number of lymphocytes and macrophages in the negative control group was more than that in other groups. Granulation tissue, epithelialization, numerous blood vessels, fibroblasts and collagenous fibers were observed in the treated groups, especially in the group treated with fish oil and honey. On day 14 compared with day 7, the number of inflammatory cells was less. Furthermore, promotion of wound contraction and epithelialization as well as acceleration of granulation tissue formation was observed on day 14 better than day 7.

On day 21, in the treatment groups epithelialization had completed, especially in those received honey and fish oil. The number of inflammatory cells was the least and hair follicles were seen in the closer of surgical line. Furthermore, collagenous fibers were observed regular and tight. These observations in negative control group were not as well as those in the treatment groups. Tissue repair in treatment groups was significantly maturer than that in negative control group ($P < 0.05$). The wound healing status of the treated animals 21 days after operation are shown in Figures 3–5.

3.3. Biomechanical study

The stiffness, yield point and ultimate strength on day 21 in animals treated with fish oil and honey were significantly higher than those in the negative control group ($P < 0.05$), which showed better biomechanical properties of the treated tissues. Also were more effective than positive control group ($P < 0.05$).
4. Discussion

Honey and fish oil are studied by many researchers and were used in ancient medicine for wound healing. But today they are transformed from an ancient remedy to a modern therapy.

In this study, macroscopic evaluation and visual observation in treated groups showed that there were differences between wound areas on days of experiment in terms of contraction, color and inflammation. Significant reduction in ulcer surface area in rats which taken a mix of honey and fish oil was observed. This finding was in agreement with Gogus and Smith who stated that fish oil dressings can reduce wound area and accelerate the healing process[15]. Alizadeh et al.[26] reported that tissues treated by honey revealed relative epithelial proliferation and improved angiogenesis, which confirms our findings. Collagen is the major protein component of connective tissue and is composed primarily of glycine, proline, and hydroxyproline. Fish oil is rich in glycine and proline, so fish oil stimulates the repair and regeneration of collagen[27]. Gercek et al.[28] reported that fish oil accelerates collagen formation. Arnold and Barbul[29] stated that fish oil improves the systemic immune function and thus reducing infectious complications due to its rich omega-3 fatty acids contents. Fish oil enhances epithelization and neovascularization in wound healing[30].

Visual observations showed that wound area in rats taken a combination of honey and fish oil was significantly decreased especially on 21 days after operation. The evidences for the effectiveness of honey and fish oil in wound healing are in numerous published reports on case studies, animal studies and randomized controlled trials. The healing effect of honey could be due to various physical and chemical properties such as low water content, the ability to produced hydrogen peroxide which plays a key role in the antimicrobial activity of honey, acidity and high sugar content[31,32], which provide a unsuitable place to prevent the growth of micro-organisms so that it helps to wound healing.

Histological evaluation, especially on group four revealed the inflammatory phase during the first three days after incision. Blood cells and a fibrin network filled the incisional space, creating a scaffold for migrating fibroblasts and the number was increased near the incisional space. Proliferation of fibroblasts and new endothelial cells was found. On the superficial part of the dermis,
necrosis was observed as a consequence of mechanical damage.

On the last experimental days, especially near day 21, epithelialization became completed, wound closed and hair follicle was observed. These changes were more apparent in group four than those in other groups. Honey dressing as compared to fish oil dressing is very effective in wound healing with faster coagulation, increasing angiogenesis, high anti-inflammatory activity, antimicrobial activity (due to its low water activity of 0.6)[33], antioxidant activity[34], increment in collagen production, quicker fibroblasts growth, high osmotic gradient[10], better epithelization, contraction and remodeling. Our results are in agreement with Allen et al.[35] who reported that honey is suitable for wound dressing and useful in treating infection of wounds. Also current study is similar with the study of Oryan and Zaker[36] which mentioned that honey accelerates the healing processes and appears to have an important property that makes it ideal as a dressing for skin wounds. Based on our finding, the presence of inflammatory cells on days 3 and 7 and their absence on days 14 and 21 in treated lesions in comparison to untreated ones that contained numerous inflammatory cells even up to the end of the experiment proves the antibacterial activity of honey. The present findings are in concordance with previous investigations of Vandamme et al.[37], Hampton et al.[38] and Tan et al.[11]. Additionally, this investigation revealed that honey accelerates wound healing due to its components like the vitamins, nicotinic acid, folic acid, pantothenic acid, pyridoxine, and thiamine, which is in agreement with previous reports of Nisbet et al.[39], Alizadeh et al.[26], Jull et al.[40] and Vandamme et al.[37].

Fish oil plays an important role to improve wound healing due to its properties such as increasing monocyte survival[20], collagen production[41], inflammatory effect[42], effects on leucocyte functions like chemotactic response, phagocytosis, and cytokine production[14], prostaglandin E2 reduction[43], inhibiting platelet aggregation and increasing blood flow[44], increasing cell proliferation (re-epithelialization)[45], improving the secretion of growth hormone, accelerating epithelization and angiogenesis, containing vitamin A that improves wound healing, encourages skin growth and skin strength, and possessing vitamin E that act as an antioxidant.

In this study, tensile strength of wound treated with honey and fish oil was highest especially on day 21 due to the potency of honey and fish oil to stimulate collagen formation which is the most important factor in tensile strength of wound. This finding is similar with that of Alizadeh et al.[26] who mentioned that honey promoted wound contraction, closure time and tensile strength. Also our results are in accordance with the findings of Szegar et al.[24].

In conclusion, the present study demonstrated that local use of a combination of honey and fish oil on wounds can enhance healing with regards to their tensile strength property. Their anti-inflammatory property decreases exudates and reduces scar. They also stimulate the growth of granulation tissue, neoangiogenesis and epithelialization so that healing is accelerated. Also they are easy to use, non immunogenic, provides good pain relief and can protect wound from infection.

Conflict of interest statement

We declare that we have no conflict of interest.

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