Effect of lycopene on oxidative ovarian damage induced by cisplatin in rats

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Abstract. The anti-cancer drugs, particularly those used in reproductive period, may cause several complications such as ovarian insufficiency and infertility. The mechanism of action of cisplatin toxicity on the ovaries is not fully described. However, further production of free oxygen radicals and reduced production of antioxidants are thought to have an effect on the occurrence of cisplatin toxicity. The aim of this study was to investigate the effects of lycopene on cisplatin-induced ovary-damage, oxidative stress and histological changes in rats. Albino Wistar female rats were randomly divided into three groups. The control group (Group 1) received sunflower oil; animals in Group 2 received only cisplatin; one hour of lycopene pre-treatment was applied to the animals in Group 3 before administration of cisplatin. Cisplatin (5 mg/kg/day) was intraperitoneally injected as a single dose and lycopene (0.5 mg/kg/day) was administered by gavage. Biochemical and histopathological methods were utilised for evaluation of the oxidative ovary-damage. There was an increase in the levels of malondialdehyde, while total glutathione, glutathione reductase, and superoxide dismutase were decreased in Group 3, but it is observed that these ratios are reversed in the Group 1 and in the Group 2. Lycopene had protective effect against cisplatin-induced ovary-damaged.

Key words: Antioxidants — Cisplatin — Lipid peroxidation — Lycopene — Oxidative ovarian damage

Introduction

The anti-cancer drugs, particularly those used in reproductive period, may cause several complications such as ovarian insufficiency and infertility (Sonnezer and Oktay 2004). Cisplatin (cis-diamminedichloroplatinum-II) is a widely prescribed anticancer drug. The activity against various neoplasms has been shown especially in the head and neck, testis and ovarian, bladder and small cell lung cancers. The mechanism of action of cisplatin toxicity on the ovaries is not fully described. However, further production of free oxygen radicals and reduced production of antioxidants are thought to have an effect on the occurrence of cisplatin toxicity (Weijl et al. 1998; Olas et al. 2004). Moreover, it has been demonstrated that cisplatin-associated infertility is caused by the toxic effect on the primordial follicles. Since the primordial follicles are not able to regenerate, the damage caused by the exposure to toxic agents may lead to ovarian insufficiency and infertility (Yucebilgin et al. 2004). It has been claimed that free radical-related organ damage is the result of deteriorating antioxidant defense mechanisms. Moreover, it was reported that the toxicity caused by cisplatin in the tissues was closely related to the increased lipid peroxidation (Wozniak et al. 2004). This literature knowledge suggests that antioxidant treatment might be helpful to prevent cisplatin-related ovarian toxicity and therefore infertility due to this toxicity.

Lycopene, a naturally occurring carotenoid, has attracted considerable attention as a potential chemopreventive agent. Recently, lycopene has received particular attention as a result of studies that have reported that it is a highly efficient

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antioxidant and has a singlet-oxygen and free radical scavenging capacity (Tapiero et al. 2004; Petyaev 2015). A study by Ucar et al. reported that furan-induced oxidative ovarian injury regressed with lycopene in diabetic and non-diabetic rats. (Ucar and Pandir 2017). In another study (El-Saad et al. 2016), it was found that lycopene inhibited dichlorvos-induced hepatic damage. Many studies demonstrated that lycopene has helped to eliminate the adverse effects of risk factors in the case of heart and cancer diseases (Bas and Pandir 2016; Unal et al. 2016). In literature research, we found no information about preventing oxidative ovarian damage due to cisplatin administration with lycopene in rats. Thus, the purpose of this study was to demonstrate whether lycopene would be efficacious for preventing oxidative ovarian damage due to cisplatin administration and to define the association of oxidative stress in ovarian tissues.

**Material and Methods**

**Animals**

The recommendations of the Declaration of Helsinki (1964) for animal care were taken into account. The experiments were carried out in accordance with "Principles of laboratory animal care" (NIH publication no. 86–23, revised 1985). For the experiment, a total of 18 albino Wistar female rats weighing between 250–265 g were used. Rats were provided by Atatürk University Medical Experimental Application and Research Center. The animals were kept in groups at room temperature (22°C) and fed ad libitum. Animal experiments were performed in accordance with the National Guideline on the Use and Care of Laboratory Animals and approved by the local animal ethics committee of Atatürk University Erzurum, Turkey (Ethics Committee Number: 1800109520 Dated: 04.04.2018).

**Chemical substances**

The thiopental sodium used in the experiment was provided by Ibrahim Etem Ulagay (Istanbul, Turkey), cisplatin was provided by Ebewe Liba-(Turkey) and lycopene was provided by Solgar (USA). Distilled water was used for dissolving cisplatin and lycopene.

**Experimental groups**

The rats used in this study were divided into three groups: 1) C group, control rats, 2) CisPt group, rats received cisplatin (5 mg/kg/day in 14 days) and 3) LC group, rats received 0.5 mg/kg/day lycopene plus 5 mg/kg/day cisplatin in 14 days. Lycopene was administered by oral gavage. Sunflower oil as the solvent was applied by the same method and same volume (0.5 ml). One hour after administration of lycopene, the rats were injected with cisplatin intraperitoneally (i.p.). In the literature, the protective drugs against cisplatin toxicity are usually given to experimental animals one hour before cisplatin (Coskun et al. 2014). At the end of the period, six rats from each group were sacrificed using high-dose anesthetic (50 mg/kg of thiopental i.p.). Their ovaries were removed and oxidant and antioxidant parameters were measured to evaluate oxidative stress in the ovary-exposed tissues. The tissues were also examined histopathologically.

**Biochemical analysis of ovarian tissue**

Whole ovarian tissue was weighed and homogenized on ice with 2-ml relevant buffer. Buffers were 0.5% hexadecyltrimethyl ammonium bromide (pH = 6), potassium phosphate buffer formylphloroxidase assay, 1.15% potassium chloride solution for malondialdehyde analysis and pH 7.5 phosphate buffer for other analyzes. It was then centrifuged at 4°C, 10,000 rpm for 15 min. The supernatant was used for analysis.

**Malondialdehyde (MDA) analysis**

The concentrations of ovarian mucosal lipid peroxidation were determined by estimating MDA using the thiobarbituric acid test (Ohkawa et al. 1979). 0.5 ml homogenate was added to a solution containing 0.2 ml of 80 g/l sodium lauryl sulfate, 1.5 ml of 200 g/l acetic acid, 1.5 ml of 8 g/l of 2-thiobarbiturate, and 0.3 ml of distilled water. The mixture was incubated at 98°C for 1 h. After cooling, 5 ml of n-butanol : pyridine (15 : 1) was added. The mixture was vortexed for 1 min and centrifuged at 4000 rpm for 30 min. The absorbance of supernatant was measured at 532 nm. The standard curve was obtained by using 1,1,3,3-tetramethoxypropane.

**Total glutathione (GSH) analysis**

The amount of GSH in the total homogenate was measured according to the method of Sedlak and Lindsay with some modifications (Sedlak and Lindsay 1968). The sample was weighed and homogenized in 2 ml of 50 mmol/l Tris-HCl buffer containing 20 mmol/l EDTA and 0.2 mmol/l sucrose at pH 7.5. The homogenate was immediately precipitated with 0.1 ml of 25% trichloroacetic acid and the precipitate was removed after centrifugation at 4200 rpm for 40 minutes at 4°C and the supernatant was used to determine GSH level. A total of 1500 μl of measurement buffer (200 mmol/l Tris-HCl buffer containing 0.2 mmol/l EDTA at pH 7.5), 500 μl of supernatant, 100 μl of DTNB (10 mmol/l) and 7900 μl of methanol were added into a tube and vortexed and incubated at 37°C for 30 minutes. 5,5-Dithiobis (2-nitrobenzoic acid) (DTNB) was used as an chromogen and it formed a yellow-
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colored complex with sulphydryl groups. The absorbance was measured at 412 nm using a spectrophotometer (Beckman DU 500, USA). The standard curve was obtained using reduced glutathione.

**Glutathione reductase (GR) analysis**

GR activity was determined spectrophotometrically by measuring the rate of NADPH oxidation at 340 nm according to Carlberg and Mannervik method (Carlberg and Mannervik 1985). After tissue homogenization, supernatant was used for GR measurement. After the NADPH and GSSG addition, chronometer was on and absorbance was measured for 5 min by 30-min intervals at 340 nm spectrophotometric methods.

**Superoxide dismutase (SOD) analysis**

Measurements were performed according to the method of Sun et al (1988). When xanthine is converted into uric acid by xanthine oxidase, SOD forms. Providing that the nitro blue tetrazolium (NBT) is added to this reaction, SOD reacts with NBT and a purple formazan dye is formed. The sample was weighed and homogenized in 2 ml of 20 mmol/l phosphate buffer containing 10 mmol/l of EDTA at pH 7.8. The sample was centrifuged at 6000 rpm for 10 minutes and than the brilliant supernatant was used as assay sample.

**Histological examination**

All samples in each group were evaluated histologically. Histological examination was performed at the pathology department of University Hospital. Following dehydration of the excised ovaries and embedment in paraffin blocks, 4–6 mm slices were prepared and stained with hematoxylin and eosin. The specimens were evaluated under light microscopy; primary, secondary and antral follicle-containing ovarian tissue was considered normal ovary structure. Ovarian damage, including follicular cell degeneration, vascular congestion, hemorrhage, and inflammation (neutrophil infiltration), was evaluated histologically

**Statistical analysis**

The software SPSS 16.0 was employed for the statistical analysis (SPSS Inc., Chicago, IL). Differences among the three groups were evaluated with Tuckey analysis. p < 0.05 was considered as statistically significant.

**Results**

Effect of cisplatin or its combination with lycopene on levels of ovary MDA, GSH, GR and SOD activities in rats are presented in Table 1. As the results of our study demonstrated, in ovarian tissues of animals administered cisplatin, an increase in the levels of MDA was observed, while levels of GSH, GR, and SOD activities were decreased, but these ratios are reversed in the C and in the LC groups (Figure 1).

Evaluation of histological ovarian damage results is shown in Figure 2. The ovarian tissue of rats from the C group showed normal ovarian architecture with an orderly arrange.

| Group | MDA (μmol/g) | GSH (nmol/g) | GR (u/g) | SOD (u/g) |
|-------|--------------|--------------|----------|-----------|
| C     | 5.583 ± 0.7574 | 5.350 ± 0.5010 | 6.150 ± 0.3834 | 9.550 ± 0.3271 |
| CisPt | 15.5 ± 1.8708a | 1.533 ± 0.2066b | 2.15 ± 0.3391c | 4.717 ± 0.6113d |
| LC    | 6.4 ± 0.5762   | 4.35 ± 0.4806  | 5.333 ± 0.5715  | 8.917 ± 0.3312  |

Data are mean ± SD. a p = 0.784, b p = 0.003, c p = 0.018, d p = 0.078 vs. corresponding value of C group.

MDA, malondialdehyde; GSH, total glutathione; GR, glutathione reductase; SOD, superoxide dismutase; C, control.

**Figure 1.** Malondialdehyde (MDA), total glutathione (GSH), glutathione reductase (GR), and superoxide dismutase (SOD) levels between groups. Data are mean ± SD. a p = 0.784, b p = 0.003, c p = 0.018, d p = 0.078 vs. corresponding value of C group. CisPt, cisplatin; LC, lycopene.
ment of follicles (Figure 2A). The ovarian tissue of animals treated with cisplatin (CisPt group) exhibited disordered, apoptotic cells with shrunken pyknotic nuclei, hemorrhage and vascular congestion as well as follicular degeneration and edema compared to the C group (Figure 2B). Animals treated with lycopene before cisplatin administration (LC group) showed improved histological architecture and orderly arrangement (Figure 2C).

Discussion

Every year, thousands of women undergo chemotherapy, and some face decreased fertility ranging from minimal to complete ovarian failure. Cisplatin is used in the treatment of many solid tumors, mainly testicular and ovarian tumors. However, it was reported that cisplatin caused severe adverse effects such as nephrotoxicity, neurotoxicity, gastric toxicity, and infertility (Pogach et al. 1989). It was shown that chemotherapeutic medicines leading to either temporary or permanent infertility severely affected the ovaries and hormonal balance (DeVita et al. 2005). Limited studies have shown that cisplatin damages primordial follicles, which constitute a major part of the ovarian reserve. The number of primordial follicles is positively correlated with reproductive proficiency in female mammals (Yucebilgin et al. 2004). Meirow et al. examined human ovaries that had been exposed to cisplatin, and histologically identified apoptosis in granulosa cells and the destruction of primordial follicles (Meirow 2000). Antioxidants reduce reactive oxygen radical-induced oocyte and follicular damage. Bas and Pandır (Bas and Pandır 2016) have shown that furan induced lung toxicity in the diabetic rats with severe pathological alterations. Emphysematous changes, hemorrhage, changes in connective tissue of the alveolar septa, edema, and desquamation of the epithelial cell of the terminal bronchiole were observed in the diabetic furan group. Lycopene treatment cured these transformations. Emphysematous and hemorrhage were seen in the diabetic furan + lycopene group in moderate level (Unal et al. 2016). They demonstrated that histological damages of kidney were more severe in diabetic furan group, particularly extensive inflammatory cell infiltration, glomerular lobulation,

Figure 2. Histological ovarian damage. A. Normal histopathologic appearance is observed in overgrowth of healthy control group (H&E, 100× magnification). B. The destructive secondary follicle (straight arrow), dilate congestive blood vessel (striated arrow), hemorrhage and edema (bilateral arrow) are observed in the CisPt group treated with cisplatin alone (H&E, 200× magnification). C. Normal appearance is observed except for the congestive blood vessel (straight arrow) in LC group (H&E, 100× magnification). For abbreviations, see Fig. 1.
glomerular atrophy, tubular degeneration, hemorrhage, and dilatation of Bowmann’s space. Lycopene supplementation was protective against furan caused histopathological changes, too. Administration of cisplatin increased severe hemorrhage, edema, follicular degeneration, and vascular congestion in the ovary tissue in this study. However, milder pathological changes were seen in lycopene + cisplatin group. In this way, the toxicity caused by cisplatin in rat ovarian tissues appears to be inhibited by lycopene.

In chemotherapy-induced ovarian damage, the effects of protective drugs are evaluated by measuring plasma levels of antioxidants and reactive oxygen radicals and follicle morphology. As the results of our study demonstrated, in ovarian tissues of animals administered cisplatin, there was an increase in the levels of MDA, which is oxidant parameter, while the levels of antioxidants such as GSH, GR, and SOD were decreased. (Figure 1).

MDA is the end-product of lipid peroxidation. Lipid peroxidation is known to be the most harmful effect of free radicals in the cell (Girotti 1998). It was reported that cisplatin caused oxidative damage in the ovarian tissue increasing MDA concentration and decreasing GSH concentration (Girotti 1998). In our study, for ovarian tissues of the animals in CisPt group, there was an increase in the levels of MDA. On the other hand, it was clearly seen that this increase observed in the CisPt group was not observed in the LC and C groups (15.5 ± 1.8708 µmol/g, 6.4 ± 0.5762 µmol/g, 5.583 ± 0.7575 µmol/g, respectively).

GSH is a non enzymatic endogenous antioxidant parameter. Under physiological conditions, the oxidant/antioxidant balance is maintained with predominance of antioxidants. Degradation of this balance causes tissue damage called oxidative stress. Therefore, oxidant/antioxidant balance is used to assess if tissue damage emerges (Dayangan Sayan et al. 2018). GSH protects the cells against oxidative damage, keeping the –SH groups of proteins reduced and preventing them from reacting with free radicals (Urso and Clarkson 2003). In the ovaries of the rats given only cisplatin, GSH level was decreased in comparison with the LC and C group (4.717 ± 0.6113 u/g, 8.917 ± 0.3312 u/g, 9.55 ± 0.3271 u/g, respectively).

It has been shown that lycopene has the highest antioxidant activity among carotenoids against hydrogen peroxide and nitrogen dioxide radicals (Czeczuga-Semeniuk et al. 2009). In addition, lycopene has been reported to attenuate oxidative stress and exert anticancer effects both in vitro and in vivo (Czeczuga-Semeniuk et al. 2009). The main antioxidant feature depends on upregulating antioxidant systems in the cell, and it also has a direct destructive effect on free radicals. During 1O2 quenching (oxygen 1O2 quenchers), the energy is converted from 1O2 to the lycopene molecule into an energy-rich triplet state. In contrast, capture of other reactive oxygen species (ROSs) such as hydroxyl radical (OHs), Nitronium (NO2+) or peroxynitrite leads to oxidative degradation of the lycopene molecule. Thus, lycopene may protect in vivo against oxidation of lipsids, proteins and DNA (Czeczuga-Semeniuk et al. 2009). In the present investigation, pre-treatment with lycopene inhibited the increase in MDA induced by cisplatin in ovary, but activated the increase the levels of antioxidants such as GSH, GR, and SOD.

There are some limitations of our study. First, the results of experimental studies on laboratory animals may not be extrapolated to humans. Thus, our study needs to be verified in future studies in humans. In addition, our results can be verified by more ovarian-toxic agent, namely alkylating agents that destroys primordial follicle pool. For example, cyclophosphamide can be chosen for future studies instead of cisplatin that is moderately gonadotoxic.

Conclusion

It was shown that cisplatin treatment induced ovary damage and especially pre-treatment with lycopene provided protective effect against this cisplatin-induced ovarian damage. But, before a conclusive statement on potential usefulness of lycopene as adjunct to the cisplatin therapy there is a need for further studies including human trials.

Conflict of interest. The authors declare that they have no conflict of interest. All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2008.

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