Histological alterations in Rabbit Liver after treatment with Dexamethasone

FAIZA IRSHAD¹, KANWAL SAEED², MUHAMMAD ADEEL QAMA³, JAMSHAD LATIF⁴, ZIA UL MUSTAFA⁵, LUBABA MUKHTAR⁶

¹Associate Professor Anatomy, M.Islam Medical & Dental College Gujranwala

²Associate Professor Anatomy, Allama Iqbal Medical College Lahore ³Assistant Professor Gastroentrology, Sahara Medical College, Narowal

⁴Medical Director, Winner Health Care Hospital, WAPDA Town, Gujranwala

⁵Assistant Professor Medicine, Sahara Medical College, Narowal

⁶Medical Officer, Mayo Hospital, Lahore

Correspondence to Dr. Faiza Irshad, Email; faizamufassar@hotmail.com, Tel. 3217769912

ABSTRACT

Background One of the most potent glucocorticoids is known as Dexamethasone. Many metabolic side effect shave been reported on almost every organ after dexamethasone treatment specially its effect on liver.

Aim: To investigate harmful side effects of dexamethasone sodium phosphate on rabbit's liver that serve as human liver model via using light microscope, by administration of two doses (extreme) and two durations in order to depict the duration as well as dosage dependency.

Methods: Liver samples were taken via rabbits who were administered dexamethasone sodium phosphate. Then two Stratas were made namely, 1 and 2. The fixations of liver samples were carried out and underwent into evaluation in order to observe any histochemical and histological alterations. Study duration is from February to May 2021 Rabbits were brought from Veterinary Research Institute, Lahore. These Rabbits were kept in cages in the animal house of PGMI, Bird wood road Lahore. **Results:** The ballooning and vacuolation of hepatic cells were seen in the liver in case of Stratas that were treated along with the degenerative alterations of these cells, congestion and dilatation of central hepatic vein with sinusoidal capillaries, positive periodic acid schiff's stain (PAS) reactions. The severity of all these alterations was dependent upon duration and dosage. **Conclusion:** Morphological variations induced in the liver by dexamethasone sodium phosphate could be accepted as side effects of these drugs.

Keywords: Liver, dexamethasone, histology, glycogen.

INTRODUCTION

The liver sever as an most important organ in human body that help in nutrients processing that were absorbed via gastrointestinal tract and then help in transformation of these nutrients into such materials that is demanded by body tissues and organs¹.

Liver is in influence of several hormonal activities like adrenal steroids⁴ glucagon³ and insulin². The glucocorticoids in synthetic form are given for many diseases but its effects clearly visible on almost all organs of body. The severity of complications are dependent on various factors, such as treatment duration, administration time, selected glucocorticoid preparation, administration route, dosage administered and intervals⁵ between doses. Dexamethasone is regarded as strong glucocorticoid that is administered in case of many health conditions such as nonendocrine and endocrine diseases like osteoarthritis, rheumatoid arthritis and many other pathologies related to connective tissue. Moreover is given in case of inflammatory diseases like dermatological diseases, respiratory disease etc. However, dexamethasone has potent harmful effects of all systems of body⁶.

A transcortin a serum corticosteroid-binding protein, has been synthesized as well as secreted by liver cells⁷. The role of transcortin is to act as selective glucocorticoid transporter through the plasma membrane and impacts the entry intracellularly and aid in transportation from the nucleus of steroid⁸. Glucocorticoids block uptake of amino acid and glucose in many scenarios and aid in lipolysis in case of adipose tissue¹. For gluconeogenesis, a wide hepatic capacity is present which along with substrate via catabolism (elsewhere) cause enhanced production of glucose. The net result of glucocorticoids in body cause hyperglycemia, fat loss and negative nitrogen balance⁹. On liver, the generalized glucocorticoid stimulating effect results in hepatocytes hypertrophy, since in the liver cells, the total protein content is enhanced¹⁰.

The main aim of this case research is to investigate the dexamethasone sodium phosphate effects on the liver of rabbit that serve as human liver model via using light microscope, by administration of two doses and two using durations in order to make certain its dependency with respect to duration and dosage.

Received on 11-04-2021 Accepted on 22-08-2021

METHODS

Separate plastic cages were arranged for white healthy rabbits that varied in weight from 2.kg-2.5kg, administered ad-libitum and then these were utilized for purpose of scientific research in 2019 from January to march in College animal house & Laboratory. Six Stratas of animals were made and each Strata contained seven rabbits in each. For consecutive 14 days, the first Strata was fed with (0.5mg/kg of body weight (b.w.) equal to 0.5 ml/kg b.w.) dexamethasone sodium phosphate intramuscularly via aid of single dose injection in thigh on every 24 hours. In case of second Strata of rabbits dosage of dexamethasone sodium phosphate was given (1.4mg/kg b.w. equal to 0.5 ml/kg b.w.) for 14 days on thigh as single dosage. The third Strata was administered dexamethasone sodium phosphate (0.5 mg/kg b.w.) for duration of weeks whereas the fourth Strata was administered dexamethasone sodium phosphate (1.5mg/kg b.w.) for again duration of 2 weeks. The fifth Strata served as control (1) animals, who were administered equal quantity of 0.9% saline Strata 2weekssolution for 14 days intramuscularly The sixth Strata was administered same 0.9% saline solution for duration of 2weeks and served as the 2 control Strata¹¹. By using chloroform, animals were anesthetized after twenty four hours of the latest administered injection. The liver of experimental rabbits were taken out via aid of dissection and then fixation was done by using 10% formalin solution for duration of 24 then afterwards samples were dehydrated, cleared, and then embedded via aid of paraffin and then blocks were sectioned following by staining using:

- Haematoxyllin and Eosin stain (H&E): stains used in routine investigation of generalized liver structures¹².
- Alcoholic periodic acid- Schiff's stain (PAS): for investigating carbohydrates that included mucin and basement membranes¹³ and glycogen. Staining techniques and methods were executed depending upon Humason and Luna^{12,13}.

RESULTS

After staining with H&E, treated sections depict vacuolation and ballooning of cells of liver, which started to make its appearance more vividly in case of second and fourth Stratas (with the

increment of duration as well as dosage of treatment) as depicted in fig. 1. Liver cells were discovered to undergo degenerative changes such as destruction of nuclei with cytoplasm of hepartic cells began to make their appearances from second Strata uptill the fourth Strata that depicted pyknotic nuclei (Fig. 2). In case of first Strata, some sections depicted hepatic cells owing some nuclei showing prominent nucleoli (Fig. 3). In case of all treated Stratas, congestion as well as dilatation of central hepatic vein was clearly visible (Fig. 3). Moreover in case of fourth and second Stratas, Sinusoidal congestion and dilation (Fig. 3). Fifth Strata that was considered as controlled, rabbits were administered ⁽¹⁾, same quantities of 0.9% saline solution intramuscularly for duration of about 14 days. In case of sixth Strata, rabbits were administered 0.9% saline solution for duration of 2weeks and marked control² Strata¹¹. By using chloroform, animals were anesthetized after twenty- four hours of the latest administered injection. The liver of experimental rabbits were taken out via aid of dissection and then fixation was done by using 10% formaline solution for duration of 24 then afterwards samples were dehydrated, cleared, and then embedded via aid of paraffin and then blocks were sectioned following by staining using :

- 1. Haematoxyllin and Eosin stain (H&E): routine stains for investigation of generalized liver structures¹².
- Alcoholic periodic acid- Schiff's stain (PAS): for examining carbohydrates that included mucin, basement membranes¹³ and glycogen The staining techniques and methods were executed depending upon Humason and Luna^{12,13}.

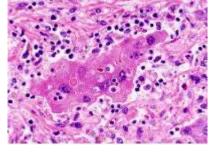
RESULTS

After staining with H&E , treated sections depicted ballooning as well as vacuolation of liver cells, which begin to give its appearance more vividly in case of fourth and second Strata of animals since the duration as well as administered dosage was raised up as depicted in fig. 1. The cytoplasm of liver cells begin to show up from second Strata and further seen till fourth Strata which depicted pyknotic nuclei (Fig. 2). In case of first Strata, some treated sections showed liver cells owing nuclei that contained noteworthy nucleoli (Fig. 3).

Fig1: Liver cells showing dilated and congested central vein



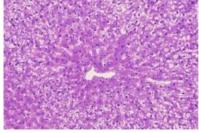
Fig 2 liver showing hepatic cells, central vein and sinusoids H&E



In case of all treated Stratas congestion as well as Dilatation of central hepatic vein was noted clearly (Fig. 3). The congestion and

Sinusoidal dilatation were also seen significantly in case of fourth as well as second Strata (Fig. 3). All these alterations seen above were dosage and time dependent when comparison was made with control Strata animals (Fig.3). In case of PAS staining, PAS strength reaction was dependent upon distribution pattern of stain inside tissue. We observed that there were positive (+ve) PAS reactions in case of Stratas that underwent into treatment but showing difference with respect to degree of positivity. Moreover, this staining firstly visible clearly then gradually turned into a heterogenic pattern and then finally showed up a as clumped masses.





DISCUSSION

One of the most leading cause of liver injury is drugs. Many cases have been seen where liver is being damaged because of administration of drugs. Physicians should be careful while prescribing drugs with respect to injury related to liver because detection in early stages can lower degree of liver toxicity if discontinuation of the medicine is made early⁶. In current case scenario, the histological examination of liver of rabbits was carried out, who were treated with dexamethasone. The histological sections depicted vacuolation and ballooning of liver cells, severity of which was directly proportional to the dose and duration of treatment planned. Hepatocyte that contained glycogen within cytoplasm, gave positive (+ve) PAS reactions in case of all rabbits who underwent into treatment, but showed dissimilarity with respect to degree of positivity, along with dispread staining presence that depicted PAS +ve reaction. With time, this staining appeared as heterogenic and later on showed as clumped bodies that showed Glycogen strong reaction to PAS, that alter in the different duration and dosage administered in this case research. With respect to some scholars¹⁴ deposition of glycogen was dependentupon dose and time and moreover administration repeatedly of dexamethasone cause spikeup the net weight of liver as well as glycogen content and these alterations were lessened after treatment being ceased. In case of the liver, glucocorticoids activate gluconeogenesis inside liver and speedup hepatic synthesis and glycogen storage. Glucocorticoids also play an important role in declining uptake of glucose in peripheral tissues along with adipose tissue, further causing blood glucose levels to spikes up. In reaction to spiked up blood glucose levels, insulin secretion also increased as a compensatory mechanism⁶. However, glucocorticoids stops the gluconeogenesis suppression via insulin and result in insulin resistance typically in peripheral tissues that again exaggerates hyperglycemia9. Administration of dexamethasone results in time dependent alterations in levels of insulin and glucose and results increased insulin secretion, which contributes to deposition of glycogen, so that as with the passage of time, more deposition of glycogen happened in hepatocytes cytoplasm¹⁵. Moreover, dexamethasone cause up regulation of receptors of insulin depending upon time because of activation insulin receptors synthesis¹⁶. Many biochemical reactions are known to be effected via treatment with cortisone like glycogenesis, certain functions related to mitochondria, lipogenesis, hydrolytic enzymes release and protein synthesis. Many above mentioned processes can be linked to particular ultrastructural elements with respect to cytoplasm¹⁷. According to

many case researches, many scholars¹⁸ suggested that dexamethasone cause smooth endoplasmic reticulum (SER) enhancement, which is linked with glycogen increased levels. Increment in quantity of SER has been observed in hepatocytes preceding to deposition of glycogen. Moreover dexamethasone increases glycogen synthase activity which ultimately leads to enhancement in accumulation of the glycogen¹⁹ and prevents glycogen phosphorylase²⁰ activation. Hepatocytes degenerative changes like ballooning are not just because of deposition of glycogen, but also because of piling up of lipids. The main reason for that phenomenon is due to glucocorticoids that increases in hepatic synthesis and due to VLDL secretion²¹. Glucocorticoids are culprit in trapping time dependent triglyceride within hepatocytes cytoplasm due to decline in its release or because of speedup synthesis or fatty acids esterification (22). The evidence suggested that glucocorticoids cause increase in fragility progressively with respect to intracellular organelles, like lysosomes with changes in the properties of plasma membrane²³ and decline in the number along with significant alterations in the mitochondria¹⁷ ultrastructure. It is also well acknowledged fact that dexamethasone is involved in reducing mitochondria total number in case of hepatocytes that were treated and lowers the oxidative phosphorylation and their active respiration²⁴. These all sequences of events results in alteration of electrolyte balance via the "Sodium-Potassium pump". Since this process is energy dependent, the potassium ions efflux may take place in relation with the sodium ions influx, resulting in osmotic pressure to be raised up inside cytoplasm beside the disturbances in function of plasma membrane; which attract water molecules. Due to all these alterations, cells started to swelled up and also hydrolytic enzymes leakage may results in crowding of macromolecules²⁵. Dexamethasone, which is regarded as glucocorticoid synthetic form, cause inhibition in arachidonic acid synthesis and prostaglandin that served as antiaggregant agents normally 26 . This, all together polycythemia and hypertension $^{27},\ resulted$ in congestion and sinusoidal dilatation, which have been observed in case of Stratas that underwent into treatment in this research with the significant dissimilarities among them indicating dependency with respect to duration and dose. Keeping in view our case that the morphological research, we came to conclusion alterations visible in case of liver induction by dexamethasone sodium phosphate and significant harmful effects of these medicines have been observed.

REFERENCES

- 1. Woo Baidal J.A., Lavine J.E. The intersection of nonalcoholic fatty liver disease and obesity. *Sci. Trans. Med.* 2016;8 323rv1.
- Fan J.G., Cao H.X. Role of diet and nutritional management in nonalcoholic fatty liver disease. J. Gastroenterol. Hepatol. 2013;28(Suppl 4):81–87.
- Bray G.A. Soft drink consumption and obesity: it is all about fructose. Curr. Opin. Lipidol. 2010;21:51–57.
- Sanyal A.J., Friedman S.L., McCullough A.J., Dimick-Santos L., American Association for the Study of Liver Diseases. United States

Food and Drug Administration Challenges and opportunities in drug and biomarker development for nonalcoholic steatohepatitis: findings and recommendations from an American Association for the Study of Liver Diseases-U.S. Food and Drug Administration Joint Workshop. *Hepatology*. 2015;61:1392–1405.

- Wong R.J., Aguilar M., Cheung R., Perumpail R.B., Harrison S.A., Younossi Z.M., Ahmed A. Nonalcoholic steatohepatitis is the second leading etiology of liver disease among adults awaiting liver transplantation in the United States. *Gastroenterology*. 2015;148:547– 555.
- Bettermann K., Hohensee T., Haybaeck J. Steatosis and steatohepatitis: complex disorders. Int. J. Mol. Sci. 2014;15:9924– 9944.
- Duwaerts C.C., Maher J.J. Mechanisms of liver injury in non-alcoholic steatohepatitis. *Curr. Hepatol. Rep.* 2014;13:119–129.
- Kawasaki T., Igarashi K., Koeda T., Sugimoto K., Nakagawa K., Hayashi S., Yamaji R., Inui H., Fukusato T., Yamanouchi T. Rats fed fructose-enriched diets have characteristics of nonalcoholic hepatic steatosis. *J. Nutr.* 2009;139:2067–2071.
- Ackerman Z., Oron-Herman M., Grozovski M., Rosenthal T., Pappo O., Link G., Sela B.A. Fructose-induced fatty liver disease: hepatic effects of blood pressure and plasma triglyceride reduction. *Hypertension*. 2005;45:1012–1018.
- Kohli R., Kirby M., Xanthakos S.A., Softic S., Feldstein A.E., Saxena V., Tang P.H., Miles L., Miles M.V., Balistreri W.F. High-fructose, medium chain trans fat diet induces liver fibrosis and elevates plasma coenzyme Q9 in a novel murine model of obesity and nonalcoholic steatohepatitis. *Hepatology*. 2010;52:934–944.
- Tilg H., Moschen A.R. Evolution of inflammation in nonalcoholic fatty liver disease: the multiple parallel hits hypothesis. *Hepatology*. 2010;52:1836–1846.
- Schuppan D., Schattenberg J.M. Non-alcoholic steatohepatitis: pathogenesis and novel therapeutic approaches. *J. Gastroenterol. Hepatol.* 2013;28(Suppl 1):68–76.
- Rivera C.A., Adegboyega P., van Rooijen N., Tagalicud A., Allman M., Wallace M. Toll-like receptor-4 signaling and Kupffer cells play pivotal roles in the pathogenesis of non-alcoholic steatohepatitis. J. Hepatol. 2007;47:571–579.
- Tosello-Trampont A.C., Landes S.G., Nguyen V., Novobrantseva T.I., Hahn Y.S. Kuppfer cells trigger nonalcoholic steatohepatitis development in diet-induced mouse model through tumor necrosis factor-α production. J. Biol. Chem. 2012;287:40161–40172.
- Vos M.B., Lavine J.E. Dietary fructose in nonalcoholic fatty liver disease. *Hepatology*. 2013;57:2525–2531.
- 16. Samuel V.T. Fructose induced lipogenesis: from sugar to fat to insulin resistance. *Trends Endocrinol. Metab.* 2011;22:60–65.
- Doycheva I., Loomba R. Effect of metformin on ballooning degeneration in nonalcoholic steatohepatitis (NASH): when to use metformin in nonalcoholic fatty liver disease (NAFLD) *Adv. Ther.* 2014;31:30–43.
- Sanyal A.J., Chalasani N., Kowdley K.V., McCullough A., Diehl A.M., Bass N.M., Neuschwander-Tetri B.A., Lavine J.E., Tonascia J., Unalp A., NASH CRN Pioglitazone, vitamin E, or placebo for nonalcoholic steatohepatitis. *N. Engl. J. Med.* 2010;362:1675–1685.
- Mahady S.E., Webster A.C., Walker S., Sanyal A., George J. The role of thiazolidinediones in non-alcoholic steatohepatitis - a systematic review and meta analysis. *J. Hepatol.* 2011;55:1383–1390.
- Armstrong M.J., Hull D., Guo K., Barton D., Hazlehurst J.M., Gathercole L.L., Nasiri M., Yu J., Gough S.C., Newsome P.N., Tomlinson J.W. Glucagon-like peptide 1 decreases lipotoxicity in nonalcoholic steatohepatitis. J. Hepatol. 2016;64:399–408.