



EFFECT OF THYMOQUINONE (TQ) NANOPARTICLE TO PROTECTIVE NEURO TOXICITY CELLS INDUCED BY EHRlich ASCITES CARCINOMA (EAC) & LEAD IN VIVO STUDY

MAHA IBRAHIM^{a1}, AMMAR BAYOUMI^b, MAAN ALMADDAH^c, SALEH ALGHAMDI^d, MAHMOUD SAIRAFI^e, SAADIA ALFAKIH^f, HASSAN MAHBOB^g, AMANI IBRAHIM^h, OMAR IBRAHIMⁱ AND WED ZAKI^j

^{abhi}Medical Scientific Foundation for Research and Development, Faculty of Pharmacy, King Abdulaziz University, Jeddah, Saudia Arabia

^{cdefg}Advanced Technology Dental Research Laboratory, Faculty of Dentistry, King Abdulaziz University, Jeddah, Saudia Arabia

^jKing Fahad Medical Research Center, King Abdulaziz University Jeddah, Saudia Arabia

ABSTRACT

This paper TQ-nanoparticle formulations showed improved anticancer and anti-inflammatory activities when compared with Cisplatin is a chemotherapy drug used to treat brain damage cancer. Here, we provide an overview of the various TQ-nanoparticle formulations, highlight their superior efficacy and discuss up-to-date solutions to further enhance TQ bioavailability and anticancer activity, thus improving potential for clinical translation.

KEYWORDS: Nanoparticle, Thymoquinone (TQ), Cisplatin

Depration is the major cause of death and many factors that lead to its occurrences, such as environmental pollution and pesticide and other factors. Ehrlich carcinoma development depends on many things associated with the environment. The present study aimed to evaluate the potential protective effects of the active ingredient of Nagilla Sativa is a Thymoquinone (TQ). TQ nanoparticle research aims to improve TQ's pharmaceutical effects, such as targeting capacity, bioavailability, and avoiding unspecific binding. Different formulations of TQ nanoparticles were tested against several of brain damage & cancer, whereby the studies showed greater effectiveness of TQ nanoparticle than free TQ. These formulations included nanostructured lipid carriers (NLCs), solid lipid nanocarriers (SLNs), polymeric, niosomal, and liposomal. Using Nanoparticle formulation, against Ehrlich ascites carcinoma (EAC) & lead-induced damage in the prefrontal cerebral cortex, hippocampus, and cerebellum can lead to a variety of neurological disorders, such as brain damage, mental retardation, behavioral problems, nerve damage, in male mice. Thymoquinone (TQ) is a promising anticancer molecule that inhibits cancer cell growth and progression in vitro experimental animal model. Despite the promising anticancer activities of TQ, its translation to the clinic is limited by its poor bioavailability and hydrophobicity. As such, we and others encapsulated TQ in nanoparticles to improve its delivery and limit undesirable cytotoxicity.

MATERIALS AND METHODS

The Ehrlich Tumor Cells Inoculation & Lead

The Ehrlich tumor cells were collected from ascitic fluid of the peritoneal cavity of mice 10 days after tumor administration. The ascitic fluid was washed in phosphate-buffered saline (PBS, pH 7.4), centrifuged (200 g, 10 min), and washed with PBS three times. The cell viability was determined by the 0.5% trypan blue exclusion method in the Neubauer chamber. The Ehrlich tumor cells were suspended to the final concentrations of 1×10^4 , 1×10^5 , 1×10^6 , and 1×10^7 in 25 μ L of saline. Measurements were performed before and after injection of tumor cells between days 0 and 12.

Dose of lead using by injection of 350 mg/kg lead

Protocols

Firstly, mice received intraplantar (i.pl.) injection of the Ehrlich tumor cells (1×10^4 – 10^7 in 25 μ L) with 350 mg/kg of lead (mix) or saline. Measurements of mechanical and thermal hyperalgesia, paw edema/tumor growth, and overt pain-like behavior were performed on days 0–12. According to the results, the dose of 1×10^6 /paw of tumor cells was chosen for next experiments of mechanical hyperalgesia, thermal hyperalgesia, paw edema/tumor growth, and histological analysis at indicated timepoints. The dose of 1×10^7 /paw of tumor cells and evaluation at the 8th day after inoculation were chosen for experiments of overt pain.

¹Corresponding author

Paw samples were collected for histological analysis and microscopic observation 12 days after tumor injection. To evaluate the hyperalgesic effect of cellular remnants, the Ehrlich tumor cells with lead were inactivated and injected i.pl., and compared with the saline and the viable Ehrlich tumor cells groups; measurements were performed on days 0–12. To evaluate the pharmacological modulation of the Ehrlich tumor-induced pain-like behavior, mice were treated with Cisplatin 5mg/kg i.pl.injection and TQ-nanoparticle treatment orally administrated 10 mg/kg on the 8th day after the Ehrlich tumor cells & Lead administration.

Experimental Design

A total of 40 adult male Swiss albino mice was randomly assigned into 4 groups, 10 mice each. Control group: Mice were orally administered distilled water, day by day, till the end of the experiment. Lead & EAC (mix) group: Mice were injected (i.p) with 0.2 mL of 2.5×10^6 EAC cells & 350 mg/kg of lead mix /mouse on day “0”. Mix then TQ-nanoparticle protected group: Mice were orally administered distilled water, day by day, for two weeks before mix inoculation, and 3 days after mix inoculation; mice were orally treated with TQ nanoparticles (100 mg/kg), day by day, till the end of the experiment. Cis-treated (mix then Cis) group: Mice were orally administered distilled water, day by day, for two weeks before EAC inoculation, and 3 days after mix inoculation; mice were treated with a single i.p dose of Cis (5 mg/kg) day by day, till the end of the experiment.

RESULTS AND DISCUSSION

The current study proved the impairment of brain functions inmix of lead & EAC-bearing mice, which was indicated by the elevated serum dopamin & serotonin levels. In association with these findings, various vascular, degenerative, and inflammatory pathological changes, along with a heavy infiltration of neoplastic cells were also recorded in Brain tissue of

EAC-lead -bearing mice., the elevation of brain function biomarkers could be attributed to the brain damage induced by the tumor metastasis and the infiltration of cancer cells in brain tissue, resulting in the impairment of the reduction in serum dopamin & serotonin. Oxidative stress is well known to be one of the pivotal triggers for cancer initiation and progression, and it is also implicated as a possible mechanism of EAC-induced renal damage by asinificant evaluated serum dopamin & serotonin. Recorded brain oxidative damage, evidenced by a significant reductions in the GSH the precursor for tumor progression that ultimately decreases the cellular antioxidants and, subsequently, induces brain tissue damage the nanoTQ treatment is able to fix dopamine, serotonin unbalance In a record time during the period of neuro damage symptoms, which contributes to solving the problems and symptoms of Brain da symge symptoms and their complications.

Effect of Thymoquinone (TQ) nanoparticle on Ehrlich tumor cells induced tumor and inflammation on serum TNF-a levels in experimental rats. Statistical analysis was done by Prism software and graphs were automatically generated according to p value. * to **** indicate least to maximum significant difference (high to low p value). ns indicates non-significant values. Each value represents the mean± SEM of the group. Tumor with thymoquinine nanoparticles dose show significantly decreased TNF-a and significantly increase of GSH levels (Figure 1).

Effect of Thymoquinone (TQ) nanoparticle on induced neurotoxicity on serum dopamin & serotonin levels in experimental mice. Statistical analysis was done by Prism software and graphs were automatically generated according to p value. Results showing significantly balance of serum dopamin & serotonin level No significant correlation between Thymoquinone (TQ) nanoparticle group and Cisplatin treated groups.

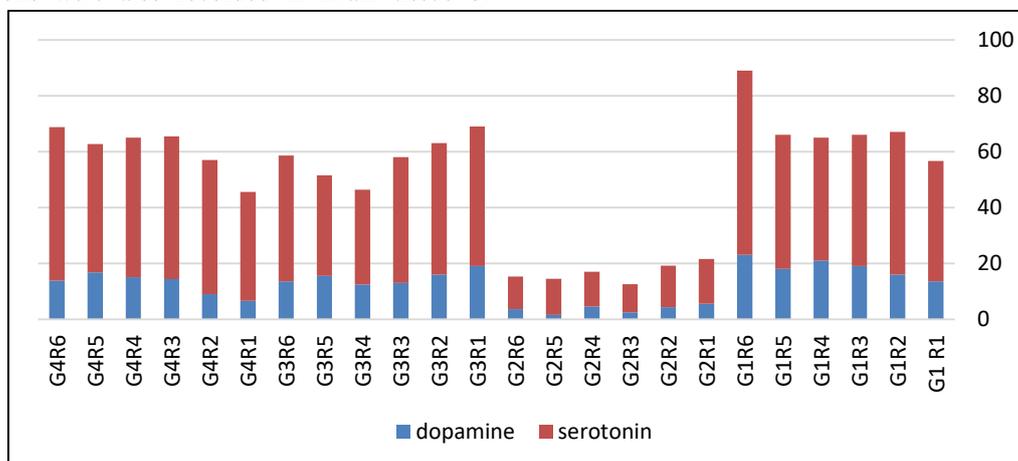


Figure 1: Effect of nano TQ in brain damage neurotransmitters

REFERENCES

- Bhattacharya S., Ahir M., Patra P., Mukherjee S., Ghosh S., Mazumdar M., Chattopadhyay S., Das T., Chattopadhyay D. and Adhikary A., 2015. PEGylated-thymoquinone-nanoparticle mediated retardation of breast cancer cell migration by deregulation of cytoskeletal actin polymerization through miR-34a. *Biomaterials*, **51**: 91–107.
- Ballout F., Habli Z., Rahal O.N., Fatfat M. and Gali-Muhtasib H., 2018. Thymoquinone-based nanotechnology for cancer therapy: Promises and challenges. *Drug Discov. Today*, **23**: 1089–1098.
- Chaudhuri P.K., Low B.C. and Lim C.T., 2018. Mechanobiology of tumor growth. *Chem. Rev.*, **118**(14):6499-6515.
- Dinarvand R., Sepehri N., Manouchehri, Rouhani H. and Atyabi F., 2011. Polylactide-co-glycolide nanoparticles for controlled delivery of anticancer agents. *Int. J. Nanomed.*, **6**: 877–895.
- Donia T.I.K., Gerges M.N. and Mohamed T.M., 2018. Amelioration effect of Egyptian sweet orange hesperidin on Ehrlich ascites carcinoma (EAC) bearing mice. *Chem. Biol. Interact.*, **285**: 76–84.
- Fisher R., Pusztai L. and Swanton C., 2013. Cancer heterogeneity: implications for targeted therapeutics. *Br. J. Cancer*, **108**(3):479-485.
- Ganea G.M., Fakayode S.O., Losso J.N., Van Nostrum C.F., Sabliov C.M. and Warner I.M., 2010. Delivery of phytochemical thy-moquinone using molecular micelle modified poly (D, L lactide-co-glycolide) (PLGA) nanoparticles. *Nanotechnology*, **21**: 285104.
- Giri B., Dey S. and Gomes A., 2018. Indian toad (*Bufo melanostictus*, Schneider) skin extract induces apoptosis and shows cytotoxic effect on Ehrlich ascites carcinoma (EAC) cells. *J. Drug Deliv. Ther.*, **8**(5):303-312.
- Glamočlija U., Padhye S., Špirtović-Halilović S., Osmanović A., Veljović E., Roca S., Novakovic I., Mandić B., Turel I., Kljun J., Trifunovic S., Kahrovic E., Pavelic S.K., Harej A., Klobucar M. and Završnik D., 2018. Synthesis, biological evaluation and docking studies of benzoxazoles derived from thymoquinone. *Molecules*, **23**: 3297.
- Hashem M.A., Shooeb S.B.A., Abd-Elhakim Y.M. and Mohamed W.A.M., 2020. The antitumor activity of *Arthrospira platensis* and/or cisplatin in a murine model of Ehrlich ascites carcinoma with hematinic and hepato-renal protective action. *J. Funct. Foods*, **66**: 103831
- Harris W.G., Benson E.A., Cartwright D. et al. 1983. Symptoms and signs of operable breast cancer. *The Journal of the Royal College of General Practitioners*, **33**: 473–476, 1983.
- Hartveit F., 1965. The immediate cause of death in mice with Ehrlich's ascites carcinoma, *Acta Pathologica et Microbiologica Scandinavica*, **65**(3): 359–365. View at: Google Scholar
- Jaganathan S.K., Mondhe D., Wani Z.A., Pal H.C. and Mandal M., 2010. Effect of honey and eugenol on Ehrlich ascites and solid carcinoma. *Biomed Res Int.*, 2010:989163.
- Kroner K., Krebs B., Skov J. and Jorgensen H.S., 1989. Immediate and long-term phantom breast syndrome after mastectomy: incidence, clinical characteristics and relationship to pre-mastectomy breast pain, *Pain*, **36**(3): 327–334.
- Kumari S., Mg S. and Mayor S., 2010. Endocytosis unplugged: Multiple ways to enter the cell. *Cell Res.*, **20**: 256–275.
- Mayer K.D., 1966. The pathogenicity of the Ehrlich ascites tumour. *British Journal of Experimental Pathology*, **47**(5): 537–544.
- ohnson-Ajinwo O.R., Ullah I., Mbye H., Richardson A., Horrocks P. and Li W.-W., 2018. The synthesis and evaluation of thymo-quinone analogues as anti-ovarian cancer and antimalarial agents. *Bioorg. Med. Chem. Lett.*, **28**: 1219–1222.
- Vieira J., Matsuzaki P., Nagamine M.K., Haraguchi M., Akisue G., Gorniak S.L. and Dagli M.L.Z., 2010. Inhibition of ascitic Ehrlich tumor cell growth by intraperitoneal injection of *Pfaffia paniculata* (Brazilian ginseng) butanolic residue. *Brazilian Archives of Biology and Technology*, **53**(3): 609–613.
- Vissers K., Hoffmann V., Geenen F., Biermans R. and Meert T., 2003. Is the second phase of the formalin test useful to predict activity in chronic constriction injury models? A pharmacological comparison in different species. *Journal of World Institute of Pain*, **3**(4): 298–309.