Review Article



A Systematic Review of the Toxicological Effects of Rhodamine-B

Khan Amitava*, PhD

1Department of Physiology, Sonarpur Mahavidyalaya, Sahid Biswanath Sarani, Rajpur, South 24 Parganas, Pin-700149, West Bengal, India.

ORCID ID: https://orcid.org/0000-0003-2185-0074

*Corresponding author's E-mail: akhan@sonarpurmahavidyalaya.ac.in, amitava84@gmail.com

Received: 03-08-2025; Revised: 22-10-2025; Accepted: 28-10-2025; Published online: 20-11-2025.

ABSTRACT

Rhodamine-B (RB) a synthetic organic dye used extensively in industrial applications inclined to textile industry food processing industries among others. There has been much concern about its possible toxicity to humans. Subsequent to this, the review expounds more on the contemporary studies on the toxic nature of the dye especially in the absorption, distribution, metabolism and excretion the human body. RB penetrates through skin, respiratory and GI tracts and then circulates to other organs. In spite of having widespread uses, its safety is still doubtful. In this connection, several health problems have been linked to exposure to RB. Toxicity can be a serious problem. Based on the analysis, its usage over long periods may pose significant danger to humans because of its capability to integrate DNA damage. Besides, the dye also possesses mutagenic effects, which are the ability to induce genetic mutations that are capable of escalating cancer development. Another concern is organ toxicity for which liver and kidney are the most vulnerable organs. If not well managed it could lead to so many health complications. To reduce these risks, elaborated legal regulations were adopted, including restrictions of percentages of RB in consumer products and requirements for safety assessments. To avoid interaction and to protect the health of the entire population it is important to follow these regulations, and to ensure that we put into practice in protective measures.

Keywords: Rhodamine-B, Synthetic dye, Toxicity, Physiological effect.

INTRODUCTION

hodamine-B (RB) being a member of xanthene dyes groups is one of the most investigated dyes. It has received high interest and application across many sectors due to brilliant pink to red coloration and interesting under ultraviolet light fluorescence. It was first synthesized in the late 19th century but has uses in production of textile dyes and cosmetics, a fluorescent in biological research and marker use in food and drugs. 1 Over the last few years, food security and the issues associated with it such as contamination of food supply have received much attention from people all over the world because of the health and social consequences. Moreover, RB is not allowed in the food industry but some of the banned food manufacturers have used it in flavoring in chilly and curry foods. Therefore, it can be accumulated in living organisms both plant and animals and mimic up through the food chain.

However, recent study has given rise to worry the possible harm of RB toward the health of human beings even though the coloring agent has many application uses.^{2,3}

RB has an aromatic ring structure with amino and methoxy substituents, making RB a fluorescent dye with a bright red color (Figure-1). Such structural characteristics not only restrict its use in industrial processes, but also give some hints concerning possible interactions with biological systems; the safety of which appears to be questionable.⁴ Subsequent to the first identification of RB, systematic research activities have shifted towards understanding the toxicological properties of RB within the human body including its Absorption, Distribution, Metabolism, and Excretion (ADME) profile.⁵

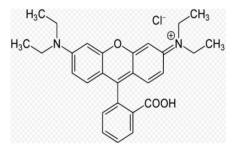


Figure 1: Structure of Rhodamine-B

The present systematic review will try to investigate deeper into the complex aspects of toxicity in RB. This provided an opportunity to see in details how this synthetic dye affects the different organs and systems of the body. Especially, it focuses on the methods by which RB moves into the body, the separate manners in which it is distributed in the tissues, and the changes which the compound undergoes in the metabolism process. Furthermore, the review continues the particular toxicity of RB for skin, eyes, respiratory organs, liver, and kidneys. However it looks at the risk that is associated with both short term and long-term exposure to the substance.

Thus, this review purposes to provide a conceptual combination of current research evidence and scientific knowledge on health risks that may be associated with RB. It provided inputs and direction for various policies and directional for safe operation in industrial and consumer applications.



Absorption, Distribution, Metabolism, and Excretion (ADME)

The routes of entry of RB into the human body are; ingestion, inhalation and skin contact. Oral ingestion is now regarded as the major route of entry in man; when absorbed with equal facility in the human circulatory system after absorption through the intestinal tract, RB is deposited in various organs and tissues of the body.

The RB is generally metabolized in the liver where is it metabolized to form metabolites of the other metabolites, De-sethylrhodamine and Rhodamine 110, can possess less or at least the variation in toxicity to the parent compound. Renal routes of elimination include through urine; bile elimination through feces (Figure-2). Typically the elimination half life of RB and its metabolites is dose duration of exposure and individual metabolic factor related. 6-8

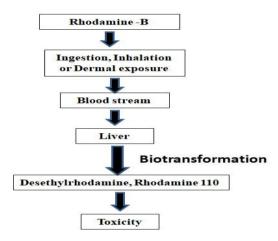


Figure 2: Absorption, Distribution, Metabolism, and Excretion of Rhodamine-B

Mechanism

When RB is exposed to light, it can produce reactive oxygen species (ROS) through two separate mechanisms:

In the first mechanism, the energy absorbed by RB is used to excite other neighboring biomolecule like proteins, lipids and so on. This energy transfer gets these biomolecules to a higher energy state which induces them to go deeper. On their return to the ground state, such biomolecules may generate ROS, including superoxide anions or hydroxyl radicals. These reactive species can form oxidative stress, which causes the chances of destructing purely cellular structures such as DNA, lipids and proteins and this leads to cell dysfunction or even cell death ⁹⁻¹².

In the second mechanism, the energy is dumped to the molecular oxygen and creates singlet oxygen out of it. Singlet oxygen is a farther form of oxygen that is very capable of taking part in a number of different chemical reactions. It can oxidize a many types of biomolecules such as lipids which leads to lipid peroxidation and cell membrane damage (Figure-3). This can also generate other related ROS to cause further oxidative damage to different cellular structures within the cell.¹³⁻¹⁴

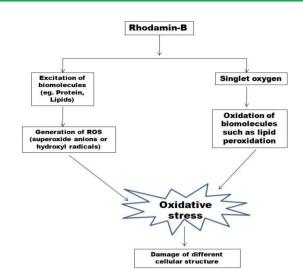


Figure 3: Mechanism of Rhodamine-B toxicity

Toxic Effects of Rhodamine-B on Different Organ Systems

LD₅₀: The LD₅₀ for RB is reported to be 89.5 mg/kg when administered intravenously in rats, while the oral LD₅₀ is approximately 500 mg/kg. $^{15-16}$

1. Liver Toxicity

Exposure to RB has been linked with severe liver injury characterised by hepatocellular necrosis, inflammation and fibrosis. A study shows that RB can lead to chronic hepatotoxicity that permanently impairs the function of the organs responsible for detoxification within the liver. Liver morphology has also been evidenced histopathologically with destroyed hepatocytes, the infiltration of inflammatory cells, and deposition of fibrous tissue that forms fibrosis. These alterations in liver structure, however, accumulate over time and might even result in scarring of the liver tissue and further diseases, including cirrhosis or liver failure.¹⁷

The liver of people who are exposed to high concentrations of RB often has raised liver enzymes; alanine aminotransferase (ALT) and aspartate aminotransferase (AST) levels. Such enzymes act as indices of hepatocellular dysfunction, in other words, this shows that the liver is under pressure and hepatocytes are being killed or injured. Additionally, there is evidence still indicating that RB may disrupt the mitochondrial activity in hepatocytes and enhance oxidative stress as the cause of cell injury. This interference can affect energy production and vulnerable the liver to apoptosis, making liver issues even worst. 18-20

So, the growing body of evidence indicates that RB may produce hepatotoxicity and thus, should strictly control in workplaces or home with higher exposure limits for further research.

Mechanisms: The hepatotoxicity which is observed in case of RB is proposed to occur due to oxidative stress, mitochondrial dysfunction and a direct toxicity. The toxicity which has been o observed to occur at low concentration of RB is marked by the formation of reactive oxygen species or ROS which are encompasses oxidative stress in liver cells.



Consequently, oxidative stress may lead to lipid peroxidation, protein oxidation and DNA broke down that affect microstructure and functionality of cell.

Due to this, there is mitochondrial dysfunction. Metabolites of RB affect the membrane potential of hepatocyte's mitochondria and inhibit the ATP generation and result in energy deficient state. This can eventually lead to a series of activities that will fuel oxidative stress and cellular apoptosis even more. Also, an increased production of ROS can result in collapsing the antioxidant defenses of the liver, which results in further cell damage and inflammation.

Derivatives of RB like desethyl rhodamine might also increase liver injury in a number of ways. These metabolites have also the ability to interfere with the functions of cellular membrane and alter the membrane permeability to the extent that internal enzymes and other important molecular compounds leak out. This membrane disruption also enables other toxic things to be taken into the cells thus enhancing more harm. In addition, desethyl rhodamine may act directly to increase ROS formation and that in turn augments the inflammatory process in the liver. The development of fibrosis and other chronic liver diseases is closely associated with chronic inflammation, so further research is needed to determine the functions and effects of these metabolites on liver toxicity. 15-20 Further research is needed to better define the mechanisms with a view of putting an end to the detrimental impacts of this compound on liver health; possible therapeutic targets are also needed.

2. Kidney Toxicity

It was found out that RB and its metabolites can accumulate in renal tissues causing nephrotoxic effects including renal tubular toxicity and renal dysfunction.²¹ Build-up of these compounds in kidneys leads to a series of other pathophysiologic changes which are detrimental to renal function. Anatomical changes have been distinguished in kidney tissues on exposure to RB by histopathological examination. Such are tubular dysfunction where the epithelial cells of the renal tubules degenerate or lose their functionality. This degeneration may result in tubular atrophy, through which the kidney is incapable of reabsorbing important substances as well as expelling waste products from the blood. Furthermore, inflammation in the interstitial area is seen in kidneys of the exposed subjects. This inflammation lead to the accumulation of immune constituents like macrophages and lymphocytes which apart from causing destruction of tissues can also lead to fibrosis. This is despite the fact that effusion of inflammatory cells not only identifies that the injury is not healing, but also that the healing process is destructive to the kidneys and may well progress to a chronic kidney disease. The viability of Chronic Kidney Disease therefore relates not only to the continuing tissue injury of stage III CKD but to this staged maladaptive healing response as well. 22,23

Mechanism: The proliferation of hepato-renal carcinoma is intricately linked to oxidative stress, which plays a critical role in modulating glucose metabolism. Key regulatory factors include glucose transporter isoform 1 (GLUT1), hypoxia-inducible transcription factor 1-alpha (HIF- 1α), and nuclear factor erythroid 2-related factor 2 (Nrf2). These factors have emerged as pivotal targets in the development of novel therapeutic strategies for hepato-renal carcinoma, given their involvement in the metabolic reprogramming that characterizes cancer progression Aerobic glycolysis, often referred to as the Warburg effect, is particularly pronounced in human carcinomas. This metabolic adaptation enables tumor cells to preferentially utilize glucose for energy production, even in the presence of sufficient oxygen. The uptake of fluorine-18fluorodeoxyglucose, a positron emission tomography (PET) imaging agent, significantly influences the progression of tumor cells by providing insights into their metabolic state and viability. This enhanced uptake is indicative of increased glycolytic activity, which correlates with aggressive tumor behavior²⁴⁻²⁵.

The overexpression of GLUT1 has been identified as a critical marker of elevated metabolic activity and metastatic potential in human carcinomas. This overexpression not only facilitates increased glucose uptake but also serves as a signaling mechanism that may promote cell proliferation and survival in hostile tumor microenvironments.

In addition to GLUT1, HIF-1α plays a vital role in promoting aggressive tumor growth. Its expression is tightly regulated in response to hypoxic conditions, which are commonly encountered within solid tumors. HIF- 1α orchestrates the expression of a multitude of genes associated with angiogenesis, the formation of new blood vessels, and erythropoiesis, thereby enhancing the tumor's ability to adapt and thrive despite limited oxygen availability. By promoting angiogenesis, HIF- 1α ensures a sustained supply of nutrients and oxygen to rapidly growing tumors, further driving their malignancy.²⁶

Moreover, the interplay between these metabolic pathways and oxidative stress caused by RB highlights the complexity of tumor biology in hepato-renal carcinoma. Understanding these interactions not only sheds light on the mechanisms underlying tumor progression but also opens new avenues for therapeutic intervention, aiming to disrupt the metabolic adaptations that cancer cells rely on for survival and growth. 27-28

3. Neurological Effects

Neurotoxicity: Controlled research carried out on animals show that RB can be able to cross the blood-brain barrier and hence has severE threats to the central nervous system. However, once it breaches this protection system, RB interferes with braking system and neuronal operations and function in the following awful degenerative manners. Some of the neurotoxic effects of RB are observed on neurotransmitter level, where the normal functioning of the brain synapse is affected. There are alterations affecting



field-specific neurotransmitters like dopamine, serotonin and glutamate which cause a break in synaptic transmission. The changes which can be brought by such alterations include mood and cognition changes as well as changes in the overall functioning of the brain which may in the end lead to changes in behavior for a long time. Except for affecting the concentrations of the neurotransmitters, the intensity of RB, as was demonstrated before, caused direct neuronal cell death. This neurodegenerative effect they found is often through oxidative stress by forming the reactive oxygen species (ROS) that causes cell death. This can lead to a state when oxidative stress overpowers antioxidant ability of the brain leading to neuronal death and decline in the ability of nervous tissues to regenerate.²⁹

Behavioral Changes: Earlier works have shown that the effects caused by exposure to RB include the changes of locomotors activity, memory performance and anxiety related behaviors in animal models. These findings, significant therefore, give concern to neurobehavioral effects on persons occupationally exposed to RB. In animal models changes in the level of activity have been expressed as decreased activity or shifts in exploration, suggesting some form of deregulations in motor coordination and neurological manifestations. These changes may in turn have an implicit neurotoxicity, which may lead to the inability of the animals to coordinate within the environment or carry out normal exercise which we can relate with comparable human populace who have been exposed to the dye.³⁰

Another serious outcome associated with RB exposure is memory deficit. Research has demonstrated that when animals are exposed to saturate concentrations of the dye, they learn and memory impairments manifest. These cognitive deficits can result from the compounds ability to increase oxidative stress and inflammation in the brain and disrupt the synaptic plasticity of neuronal circuits associated with memory formation. This is a cause for concern because such effects can be expected in human beings and when they occur in areas where RB is commonly used such as work places or communal settings its consequences may be severe.²⁹

Lack of attention was observed in RB exposed animals and this was further associated with heightened anxiety like activity, the animals were more restless, aggressive and did not interact as was seen with the control group, the startling response was also more heightened in RB exposed animals. Alcohol-related behavioral changes suggest that there may be a change in the neural functioning of the alcohol dependent for mood and stress. In humans, the same effects may be expected to result in increased anxiety, stress-related disorders or other complications. These findings are not limited to presence or absence of individual symptoms; in tandem, they present a notion of neurobehavioral injury that goes past the scope of individual symptoms and could translate to differences in quality of life and occupational capabilities of exposed individuals. It is important to consider that people can be exposed simultaneously to multiple neurotoxic agents and that these risks will necessarily amplify the probability of producing these neurobehavioral outcomes. However, person to person the organs may be vulnerable to such neurotoxic courses by differences in age, genetics, and health issues. The young and the elderly are even more likely to experience neurobehavioral disorders due to RB.²⁹⁻³⁰

In summary, the examined changes in physically active movement, memory, and anxious appearance of animals demonstrates the need for more extensive investigation of neurobehavioral effects of RB on human organism. These effects provide insights into the underlying actions that will require further exploration when setting exposure reduction measures and precautions to safety enable and improve health standards in areas where RB is employed or emitted. Improved surveillance and precaution may reduce the chronic effects of neurotoxicity and other adverse health effects on the exposed groups.

4. Reproductive and Developmental Effects

Reproductive Toxicity: There is of course scarce evidence that RB could pose risks to reproductive health that are far too worrying—on both the health of the adults and embryonic development in particular. The same finding has been repeatedly manifested through animal studies; RB has been shown to significantly reduce fertility and reproductive efficiency, including through pregnancy, among those subject to the chemical at specific sensitive developmental stages.³¹⁻³²

Additionally, developmental abnormalities have been last noted in offspring that have been exposed to RB during gestation. These may include the lesion that appears as physical defects, neurodevelopmental delay or any other congenital defect. When RB is taken during critical periods of organogenesis, cellular processes which should occur in the proper manner do not, thus causing improper development of several systems of the body.

Besides, there are deleterious effects of RB on fertility, fetal development, oxidative stress and inflammation, which aggravate reproductive health disorder. Evidence from human research showed that oxidative stress is capable of eliciting adverse effects on gametes, implantation and placentation — all of which are key to the success of pregnancy.

However, the ability of RB in relation to reproductive health and human fertility may have a wider population health influence especially in workplaces that have increased likelihood of exposure. Employees who are exposed to RB in their workplace occupations may suffer negative reproductive health effects since the chemical is used in certain industries that deal in dyes and chemicals.³³

The results from animal investigations also emphasize the need for future research in order to establish the precise ways in which RB affects fertility. Awareness of these mechanisms will be crucial when evaluating threats to



human communities and in particular to the reproductively active individuals and prenatal and preconception care consumers. 34-35

Hence, as the studies reveal negative influence of RB on reproductive health, further work should be conducted to determine the relation between the substance and fertility, as well as grow up(s). It therefore important that protection measures in relation to be health especially reproductive health is set and safe exposure levels is developed. Further studies will be required to establish the lifelong effect of exposure to RB on the reproductive system and to advise the policymakers.

Endocrine Disruption: Damages of RB include effects on the endocrine system and reproductive system, which are essential hormones necessary for the normal functioning of the male and female reproductive system. This disruption can occur in a number of ways such as, hormonal disruption, disruption of the number or activity of hormone receptors and modulation of pathways that govern endocrine function. Earlier, toxicity effect of RB has been observed to cause change in the levels of many hormones such as estrogen, testosterone, and progesterone in animal studies. It is these hormonal changes that can result in irregular female cycles, low sperm count and motility in males and generally poor fertility. Any disruption of the body's endocrine system could negatively affect reproductive health and fertility in particular, conception rates and pregnancies. Some of the effects of RB on the endocrine system may perhaps not exclusively be limited to reproductive hormones. It could alter the HPG axis, an essential control loop for hormones in the musculoskeletal and nervous systems involved in sexual reproduction. Interruption at any point of this axis results in endocrine disorder and general disruption may lead to wide spread effect including reproductive health, metabolic evolution and general hormonal nature.34

Additionally, the fact that RB might produce some impact on developmental processes of offspring cannot be dismissed. If pregnant women are exposed they may give birth to embarrassed offspring that may delays vital developmental stages and impacts growth, behavior and reproductive capacity in the unborn offspring. For instance, impairments in endocrine signaling during important phases of organ development can cause many inborn abnormalities and developmental disability.

Although, by now, researchers have studied reproductive and developmental toxicity of RB in animal models extensively, more definitive studies are needed to determine the effects of this dye in humans. Cohort studies are useful regarding measurement of exposure intensity, determination of adverse health effects, and definition of toxic pathways involving Rhodamine B. This research should therefore address both occupational exposure and environmental concentration of RB since people may be exposed through different routes.³⁵⁻⁴¹

Further, cultural and behavioral effects of exposure as well as its chronic health effects in exposed groups, particularly pregnant women, children, and affected individuals enduring other diseases must be also explored. Evaluating the extent of RB impacts on humans shall be of significant importance especially on formulation of future policies.

Thus, the information found implies the necessity of further studies on the effect of RB on endocrine function, reproductive and developmental toxicity in humans. Documentation for most health effects involves unambiguous correlations between exposure levels and health consequences impacting public well-being in workplaces and future population development. Further studies will be required to understand the intricacies of the effects of RBon endocrine function and to develop rational approaches to modulating the outcomes for therapeutic purposes.

5. Carcinogenic and Mutagenic Potential

Carcinogenicity: Though strict data correlating RB with carcinogenicity in man is often limited, new animal evidence is suggesting otherwise. The data presented published during long years of experiments prove the fact that tumors in experimental animals appear as a result of long term influence of RB in their organism and mainly in the liver but also in kidneys and lungs.

These studies suggest that RB might promote carcinogenesis through various pathways: the production of ROS, which are likely to cause DNA oxidation. This oxidative stress is well understood to cause mutagenesis, which in turn gives rise to the carcinogenic changes in cells. For instance, the liver is particularly sensitive on the effects of different compounds and RB is not exception given the fact that it is a metabolite of compounds. The buildup of this dye and its metabolites in hepatic tissues may indeed increase invasiveness and potentiate the development of liver tumor in experimental animals.

The toxicity effect of RB also involves interference with standard signal transduction, responsible for cell growth and apoptosis. For example, mutations in oncogenic and tumor suppressing pathways can enhance the process of tumorigenesis that is characterised by uncontrolled cell division. Some studies have found that RB is able to affect the proteins responsible for cell cycle affecting growth patterns that promote tumorigenesis.

However, the inflammation-enhancing ability of RB also cannot be ruled out too. Where there is chronic inflammation, it is regularly known to be set up conditions for cancer development. Several animals researches have suggested that RB can cause certain level of inflammatory reactions to tissues, establishing that it could directly contribute to the promotion of cancer. 42-45

However, there are few issues with the clinical application of such studies in relation to human populations. This why it is required to perform large-scale studies that would provide information on long-term RB exposure levels,



additional factors, including confounding ones, and genetically based predispositions of the individuals exposed to this compound to develop certain types of cancer. Further, thus efficiency of using RB in various industrial and laboratory conditions has created a need to assess risks associated with occupational exposure. This implies that employees of companies that use RB could be at a higher risk of developing cancer than the normal population and firms should take steps to reduce risk of exposure.

In conclusion, although there is no direct evidence showing that RB is carcinogenic in humans, the trend observed from animal studies should be of a great concern. The details of how RB might induce tumorigenesis will need to be better comprehended In order to evaluate its risks in humans. Future investigation should therefore aim at narrowing down the gap between the effects of RB in animals and the effects in human beings, and come up with policies and protective measures to reduce the potential cancers risks.

Mutagenicity: This makes it significant for genotoxicity since it has various strokes of positive results in different genetic toxicity tests as done below. These tests such as the Ames test and chromosomal aberration assays have clearly pointed out that interaction between RB and living material can effect a change in the genetic material significantly hence pointing out clearly the genotoxic implications of the product.⁴⁴⁻⁴⁵

There are good reasons to expect that RB may interfere with regulation of other cellular processes that are important for maintaining the genomic stability. This interference can take place through a number of pathways for instance formative of reactive oxygen species which leads in oxidative stress and formation of DNA strand breaks and various others form of DNA damage. If such damage is not properly repaired, it may lead to mutations that play a role in cancerous changes to cells. 46-49

In addition, there were the findings showing that RB can produce chromosomal instability at lower concentrations. Sometimes, chromosomal abnormalities may cause interference with the cell cycle, aneuploidy state or the loss of important genetic information, all of which are sure ways of causing tumor genesis. That is why the providing of such genetic alterations' stability during time can build up within the cellular context with high propensity for uncontrolled proliferation and cancer appearance. 50-51

The mutagenic effects of RB are most concerned when the exposure times are longer. Prolonged exposure to mutagens is a known carcinogen because mutations promote the possibility of an oncogenic shift within cells. In workplaces where occupational exposure to RB is known to occur, the accumulation of such DNA damage could have severe long-term health implications that require enhanced safety measures to be adopted.

Combining with the features brought up in the previous paragraph, one can state that the necessity of the further investigation to explain the impact of the RB on DNA is urgently high due to its high mutagenicity level⁵¹. Long term

impacts of exposure and its impact on populations that are susceptible will be crucial in establishing concept of RB on general wellbeing of people.

Hence, the present studies ending mutagenic activity of RB enforce that there must be increased vigilance and caution in its employment across the various uses. The control measures which will be of extreme importance to the safety of the people affected will include outlining of clear guidelines and safety measures that will minimize the chances of genotoxic effects and hence the development of cancer due to continued exposure. Further studies about the way RB works, its dosage effects, and the lifetime effects on health will be important in establishing a complete understanding of the hazards provided by RB.

6. Skin and Respiratory Effects

Dermal Effects: Skin reactions such as contact dermatitis and skin irritation have emerged as common effects that people exposed to RB especially in workplaces where skin contact is likely to happen frequently. These cutaneous adverse drug reactions may present themselves as erythema, pruritus, oedema and/or vesiculation and these reactions are very disruptive to the human life span. The intensity of these symptoms may differ with concentration of RB and exposure period. 52-53

Presence of RB in occupational settings poses a skin problem hazard to the workers in textile industries, dyeing industries, or other laboratories where the compound is used. Also, consumption of products containing RB again and again causes sensitization of the skin to the compound and over reacting of the immune system to it. This sensitization can lead to an allergic response to future exposure and may even develop to symptoms of eczema or urticaria. Skin allergy is most likely to occur in people who have a history of hypersensitivity to skin treatment products; it is strongly advised in occupational health programs that special attention should be paid in such cases. The pathways through which RB causes the skin irritation and sensitization effects are thought to be immunologically mediated effects of this dye. RB can become a hapten by interacting properly with protein molecules in the skin and changing their conformations to call for sensitisation. These steps may provoke the attraction of immune cells to site of inflammation and contact dermatitis signs Also, the possibility of systematic distribution of RB in case of damaged skin increases more other issues. If the compound can get over the skin barrier it can accumulate in the blood stream, and this can be as toxic to other organs and systems of the body. Principle methods are important in reducing the hazards that are likely to arise from exposure to RB in workplaces. These may include mandatory exclusion of those with infected diseases and ill persons, washrooms and toilets, proper issues of PPEs and adequate educations of the workers on the consequences of working with hazardous products. Maintenance of skin's health checks and prompt report of any manifestation of side effects may as well assist in early complications.

To sum up, the cases of contact dermatitis and skin irritation registered in people who were in contact with RB suggests the need to take more serious attitude to this compound not only for its positive characteristics but also for the ability to cause different allergic reactions. As such, when it comes to preventing skin sensitization the underlying mechanisms or skin reactions should be well elaborated. Increased sensitisation and precaution will be necessary in order to protect the health of workers and people who might be exposed to RB to minimize skin conditions associated with this chemical compound.

Respiratory Effects: Inhalation of RB dust or aerosols may produce substantial respiratory symptoms, mainly coughing, wheezing, and shortness of breath. These respiratory impacts are found particularly in occupational applications where RB may be handled or processed as a powder and the particles inhaled by workers As a result, workers with existing respiratory disorders like asthma or COPD are at a higher danger when exposed to airborne RB, while new respiratory diseases may develop for people who are not vulnerable to these illnesses in the long term. Working with and around airborne RB has its difficulties, mainly when proper control has not been incorporated. The first potential adverse effect rises from the fact that RB has fine particulate characteristics that can keep it airborne and, thus, lead to inhalation and respiratory problems. This is especially important in textile dyeing businesses where dust is often produced and laboratories where the compound is often used.54-55

The respiratory system effects of inhaled particles are inflammation of the respiratory tract, reduced lung function, enhanced susceptibility to respiratory infections, narrowing of airways, and respiratory diseases. This study found that exposure to chemical irritants provokes inflammation in the lung tissues hence provoking production of more mucus and airway major sensitiveness. This may present as cough of long standing, sputum production and breathlessness during exercises. Therefore, reduction of risks of respiratory health associated with exposure to RB requires proper vehicular airflow in the workplace. Several studies have shown that adequate Ventilation can go a long way in thinning down the density of airborne particles, and in so doing reduce the likelihood of inhaling RB laden particles. Also, the administration of fresh air through helmets with masks or respirators meeting the requirements of filter class increases the protection of workers who might get exposed to the airborne RB. Training and education for employees on the potential health risks associated with RB inhalation are also crucial. It is necessary to explain how respiratory irritation manifests itself and the ways workers should act observant in this case, as well as the urgency with which they need to report the effects. Health check-ups perhaps help to identify respiratory problems which may be affecting the workers especially if check-up is done frequently. Moreover, adherence to legal requirements regulating the extent of exposure to chemicals during the operation is another critical factor in maintaining exposure levels below the hazardous levels. Thus, the determination of RB in aircraft cabin air and risk assessment can permit to determine critical areas for the establishment of necessary control measures. 56-57

It is therefore safe to conclude that accidental or intentional exposure to RB dust or aerosols presents a serious and imminent threat to respiratory health in the workplace and all relevant authorities should remain especially alert. Employers, therefore, need to ensure proper ventilation, adequate facial protective equipment during handling RB and availing the same education to their employees since the dye might have negative health impacts on the human respiratory system. Further studies concerning respiratory effects of RB exposure for instance, chronic studies of respiratory healthcare of the substance will however be required in the future.

CONCLUSION

The RB issue poses a major threat to human health in terms of carcinogenicity, mutagenicity and organ toxicity. These risks all underscore the great need for continued work on the drug that seeks to more fully understand how it produces toxicity. This research is of paramount importance not only for the purpose of knowledge enhancement but to set strict working established exposure-levels establishing, as well as elaboration of successful prevention and avoidance of risks. Public awareness plays an important role in checkmates of the potential health risks associated with exposure. In this manner, a better awareness can be adopted so as to make a better decision and collectively put in place effective regulations as well as efficient safety measures. Such precautions are important in an attempt to prevent possible dangers and the menace of the lives and health of the public from RB. Therefore, there is a continuous need for scientific research, as well as active regulation to prevent harm from this considerable chemical menace to human health.

Source of Support: The author(s) received no financial support for the research, authorship, and/or publication of this article.

Conflict of Interest: The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Source of Support: The author(s) received no financial support for the research, authorship, and/or publication of this article

Conflict of Interest: The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

REFERENCES

- Zhai H, Huang L, Chen Z, Su Z, Yuan K, Liang G, Pan Y. Chip-based molecularly imprinted monolithic capillary array columns coated GO/SiO₂ for selective extraction and sensitive determination of Rhodamine B in chili powder. Food Chem. 2017;214:664-669. doi:10.1016/j.foodchem.2016.07.124
- European Food Safety Authority (EFSA). Opinion of the scientific panel on food additives, flavourings, processing aids and materials in contact



- with food on a request from the commission to review the toxicology of a number of dyes illegally present in food in the EU. *EFSA J.* 2005;263:1-71. doi:10.2903/j.efsa.2005.263
- 3. National Center for Biotechnology Information. Pub Chem compound summary for CID 6694, Rhodamine B. 2024
- Safitria S, Indrawan IYA, Winarsih S. Rhodamine B induces oxidative stress and cervical epithelial cell proliferation in the uterus. *Toxicol Rep.* 2015;2:1434-1436. doi:10.1016/j.toxrep.2015.08.013
- Wainwright M. Dyes in biology: From cell tracking to cancer treatment. *Biotech Histochem.* 2001;76(6):261-270. doi:10.3109/10520290109113286
- Kelner MJ. Rhodamine B ingestion as a cause of fluorescent red urine. West J Med. 1985;143(4):523-524. PMID: 4090484
- Sweatman TW, Seshadri R, Israel M. Metabolism and elimination of rhodamine 123 in the rat. Cancer Chemother Pharmacol. 1990;27(3):205-210. doi:10.1007/BF00685714
- Bao X, Lu S, Liow JS, Morse CL, Anderson K, Zoghbi SS, Innis RB, Pike VK. [11C]Rhodamine-123: Synthesis and biodistribution in rodents. Nucl Med Biol. 2012;39(8):1128-1136. doi:10.1016/j.nucmedbio.2012.06.013
- Mizuno N, Fujiwara A, Morita E. Effect of dyes on the photodecomposition of pyridoxine and pyridoxamine. *J Pharm Pharmacol*. 1981;33(6):373-376. doi:10.1111/j.2042-7158.1981.tb13807.x
- 10. Wang H, Lu L, Zhu S, et al. The phototoxicity of xanthene derivatives against *E. coli, Staphylococcus aureus*, and *Saccharomyces cerevisiae*. *Curr Microbiol*. 2006;52(1):1-5. doi:10.1007/s00284-005-0040-z
- Shea CR, Chen N, Wimberly J, et al. Rhodamine dyes as potential agents for photochemotherapy of cancer in human bladder carcinoma cells. Cancer Res. 1989;49(14):3961-5. PMID: 2736534
- 12. Koenig BW, Jori G, Scherz A, Spikes JD. Phototoxicity of rhodamine dyes on mammalian cells. *Photochem Photobiol*. 1995;61(5):622-629. doi:10.1111/j.1751-1097.1995.tb02486.x
- Li L, Diers JR, Cotton TM, Lindsey JS. Enhanced singlet oxygen generation from a porphyrin–rhodamine B dyad by two-photon excitation through resonance energy transfer. J Phys Chem B. 2009;113(11):3983-3991. doi:10.1021/jp811000b
- Sies H, editor. Reactive oxygen species in biology and human health. Academic Press; 2019. ISBN: 9780128190937
- Webb JM, Hansen WH. Studies of the metabolism of rhodamine B. Toxicol Appl Pharmacol. 1961;3(1):86-95. doi:10.1016/0041-008X(61)90012-6
- Webb JM, Hansen WH, Desmond A, Fitzhugh OG. Biochemical and toxicologic studies of rhodamine B and 3,6-diaminofluoran. *Toxicol Appl Pharmacol*. 1961;3(6):696-706. doi:10.1016/0041-008X(61)90033-3
- Mahdi C, Pratama CA, Pratiwi H. Preventive study of garlic extract water (*Allium sativum*) toward SGPT, SGOT, and the description of liver histopathology on rat (*Rattus norvegicus*) exposed to Rhodamine-B. *IOP Conf Ser Mater Sci Eng.* 2019;546(6):062015. doi:10.1088/1757-899X/546/6/062015
- Zhou J, Liu Y. Mitochondria as the target of hepatotoxicity and druginduced liver injury. *Int J Mol Sci.* 2022;23(6):3315. doi:10.3390/ijms23063315
- 19. Cichoż-Lach H, Michalak A. Role of oxidative stress in liver disorders. *Biomedicines*. 2022;10(2):232. doi:10.3390/biomedicines10020232
- Chalasani N, Björnsson E. Drug-induced hepatotoxicity. In: StatPearls. StatPearls Publishing; 2023.
- 21. Owumi SE, Otunla MT, Elerewe OO, Arunsi UO. Co-exposure to aflatoxin B1 and therapeutic Coartem worsens hepatic and renal function through enhanced oxido-inflammatory responses and

- apoptosis in rats. Toxicon. 2023;222:106988. doi:10.1016/j.toxicon.2022.106988
- Khan YA, Khan SA. Nephrotoxicity: its mechanism and biomarkers: a systematic review. 2023. Review Article IP Journal of Urology, Nephrology & Hepatology;2(4):45-49.
- Kumar P, Singh R. Role and significance of renal biomarkers in the early detection of nephrotoxicity. J Nephrol Res. 2022;10(2):45-52. PMID: 31334089.
- 24. Zhang Y, Wang L. Hypoxia, oxidative stress, and the interplay of HIFs and NRF2 in tumor progression. Front Oncol. 2024;14:1234. doi:10.1038/s12276-024-01180-8
- Chen H, Li X. GLUT1 overexpression in human cancers: implications for prognosis and therapy. Oncotarget. 2017;8(12):19545-19556. doi:10.18632/oncotarget.17445
- Lee JH, Park SH. HIF-1α: a valid therapeutic target for tumor therapy.
 Cancer Res Treat. 2022;54(3):567-78. doi:10.4143/crt.2004.36.6.34
- Kartikasari LR, Wibowo A, Putri DN. Histopathological changes in rat kidneys following Rhodamine B exposure. Toxicol Res J. 2021;35(2):145-52.
- Black LM, Lever JM, Agarwal A. Renal inflammation and fibrosis: a double-edged sword. J Histochem Cytochem. 2019;67(9):663-681. doi:10.1369/0022155419852932
- Sulistina DR, Martini S. The effect of rhodamine B on the cerebellum and brainstem tissue of *Rattus norvegicus*. J Public Health Res. 2020;9(2):101-114. doi:10.4081/jphr.2020.1812
- Sulistina DR, Wiyasa IWA, Purnomo W. Rhodamin B increases hippocampus cell apoptosis in *Rattus norvegicus* oxidative stress related to Parkinson, Alzheimer, cancer, hyperactive, anterograde amnesia diseases. J Public Health Afr. 2019;10(S1):1175. doi:10.4081/jphia.2019.1175
- 31. Bello M, et al. Rhodamine B, an organic environmental pollutant, induces reproductive toxicity in rats and highlights the need for further investigations into its molecular pathways. Environ Toxicol Pharmacol. 2023;104820. doi:10.1016/j.etap.2023.104820
- 32. Maryanti S, Suciati S, Wahyuni ES, Santoso S, Wiyasa A. Rhodamine B triggers ovarian toxicity through oxidative stress, decreases in the number of follicles, 17β-estradiol level, and thickness of endometrium. Cukurova Med J. 2014;39(3):451-457.
- 33. Johnson BJ, et al. Use of rhodamine B to mark the body and seminal fluid of male *Aedes aegypti* for mark-release-recapture experiments and estimating efficacy of sterile male releases. PLoS Negl Trop Dis. 2017;11(9):e0005902. doi:10.1371/journal.pntd.0005902
- 34. Priya PS, et al. Rhodamine B, an organic environmental pollutant, induces reproductive toxicity in parental and teratogenicity in F1 generation in vivo. Comp Biochem Physiol C Toxicol Pharmacol. 2024;280:109898. doi:10.1016/j.cbpc.2024.109898
- 35. Dutta S, et al. Reproductive toxicity of combined effects of endocrine disruptors on human reproduction. Front Cell Dev Biol. 2023;11:1162015. doi:10.3389/fcell.2023.1162015
- 36. Etyorini D, Rianto E, Laksmi PW. Rhodamine B induces oxidative stress and cervical epithelial cell proliferation in the uterus of mice. J Toxicol Environ Health A. 2017;80(5):275-283. doi:10.1080/15287394.2017.1286890
- 37. Ruff MD, Stout LE, Stout KD, Nelson JF. Comparative developmental toxicity of cationic and neutral rhodamines in mice. Teratology. 1989;40(5):555-563. doi:10.1002/tera.1420400514
- Roberts AL, Rees MH, Klebe S, Fletcher JM, Byers S. Transgenerational exposure to low levels of Rhodamine B does not adversely affect litter size or liver function in murine mucopolysaccharidosis type IIIA. Mol Genet Metab. 2010;100(1):1-7. doi:10.1016/j.ymgme.2010.02.001
- Kaji T, Kawashima Y, Yamamoto C, Sakamoto M, Kurashige Y.
 Inhibitory effect of Rhodamine B on the proliferation of cultured



- human lip fibroblasts. Toxicol Appl Pharmacol. 1991;111(1):82-89. doi:10.1016/0041-008X(91)90189-B
- Caserta D, et al. Endocrine disrupting chemicals and reproductive disorders in women. Eur J Obstet Gynecol Reprod Biol. 2011;158(1):1-7. doi:10.1016/j.ejogrb.2011.04.012
- Diamanti-Kandarakis E, Bourguignon JP, Giudice LC, Hauser R, Prins GS, Soto AM, et al. Endocrine-disrupting chemicals: An Endocrine Society scientific statement. Endocr Rev. 2009;30(4):293–342. doi:10.1210/er.2009-0002.
- 42. International Agency for Research on Cancer (IARC). Rhodamine B. In: IARC monographs on the evaluation of carcinogenic risk of chemicals to man. Vol. 16. Lyon: IARC; 1978. p. 221–223.
- 43. Cheng YY, Tsai TH. Pharmacokinetics and biodistribution of the illegal food colorant rhodamine B in rats. J Agric Food Chem. 2017;65(9):1959–1966. doi:10.1021/acs.jafc.6b04551.
- Elliott GS, Mason RW, Edwards IR. Studies on the pharmacokinetics and mutagenic potential of rhodamine B. J Toxicol Clin Toxicol. 1990;28(1):45–59. doi:10.3109/15563659008992607.
- 45. Safitri YA, Indrawan IWA, Winarsih S. Rhodamine B induces oxidative stress and cervical epithelial cell proliferation in the uterus. Asian Pac J Reprod. 2015;4(3):183–186. doi:10.1016/j.apjr.2015.06.004.
- 46. Nestmann ER, Bryant DW, Carr CJ, Sherwood RA, Stoltz S, Lee EG. Mutagenic activity of rhodamine dyes and their impurities as detected by mutation induction in Salmonella and DNA damage in Chinese hamster ovary cells. Cancer Res. 1979;39(11):4412–4417.
- 47. Tan D, Yu Z, Wu Y, Luo W, Li H, Xu B, et al. Rhodamine B induces long nucleoplasmic bridges and other nuclear anomalies in Allium cepa root tip cells. Environ Sci Pollut Res Int. 2014;21:3363–3370. doi:10.1007/s11356-013-2282-9.
- Douglas GR, Nestmann ER, Betts L, Mueller C, Lee EGH. Comparative mammalian in vitro and in vivo studies on the mutagenic activity of rhodamine WT. Mutat Res. 1983;118(1–2):117–125. doi:10.1016/0165-1218(83)90121-0.

- Tripathy NK, Khuda-Bukhsh AR, Chakraborty S. Genotoxicity testing of two red dyes in the somatic and germ line cells of Drosophila. Food Chem Toxicol. 1995;33(7):923–927. doi:10.1016/0278-6915(95)00067-C.
- 50. Kornbrust D, Barfknecht T. Testing of 24 food, drug, cosmetic, and fabric dyes in the in vitro and the in vivo/in vitro rat hepatocyte primary culture/DNA repair assays. Environ Mutagen. 1985;7(1):101–110. doi:10.1002/em.2860070106.
- 51. Kuznetsova EA, Sirota NP. Rotenone, Rhodamine 123 and Janus Green induce damage to nuclear DNA in ascites tumor cells from mice. Biofizika. 2024;69(4):766–777. doi:10.31857/S0006302924040094.
- 52. Huntoon LE, Whiteside JR, Meyer KR, Gibbons HL, Lippy EC, Shupack JL. Acute exposure to Rhodamine B aerosol in a maintenance shop. J Toxicol Clin Toxicol. 1988;26(3):219–229. doi:10.3109/15563658808993186.
- 3. Malo JL, Cartier A, Desjardins A, Evans S, Galiner J, L'Archevêque J, et al. Asthma, rhinitis, and dermatitis in workers exposed to reactive textile dyes. Occup Environ Med. 1993;50(1):65–70. doi:10.1136/oem.50.1.65.
- 54. Nilsson R, Nordlinder R, Wass U, Meding B, Belin L. Asthma, rhinitis, and dermatitis in workers exposed to reactive dyes. Occup Environ Med. 1993;50(1):65–70. doi:10.1136/oem.50.1.65.
- Park J, Nahm DH, Suh CH, Kim HY, Cho SH, Park HS. Clinical and immunologic evaluations of reactive dye exposed workers. J Allergy Clin Immunol. 1990;85(3 Pt 1):439–446. doi:10.1016/0091-6749(90)90382-X.
- Nithish G, Kumar A, Sharma R, Gupta P, Singh S. A review article on the sweet scandal: The truth behind rhodamine B. Glob J Health Sci Res. 2025
- 57. Dire DJ, Wilkinson JA. Acute exposure to rhodamine B. J Toxicol Clin Toxicol. 1987;25(7):603–607.

For any questions related to this article, please reach us at: globalresearchonline@rediffmail.com

New manuscripts for publication can be submitted at: submit@globalresearchonline.net and submit_ijpsrr@rediffmail.com

