

Research Article



Chlorpyrifos Produces Cardiovascular Risks by Shifting Set Point Lipid Metabolism and Diabetes Mellitus by inhibiting the Insulin Secretion in Rat

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ABSTRACT

We report here that chlorpyrifos (CPF), an organophosphate insecticide which is used widely in agricultural and domestic sectors, produces cardiovascular risks and diabetes mellitus in rat model. Adult male rats of Charles Foster strain weighing about 120-130 gm were exposed with CPF at a dose level of 19.4mg/kg BW/day, 38.84mg/kg BW/day, 58.24mg/kg BW/day for consecutive 10, 20 and 30 days were considered as test animals. We observed significant increase in the level of triglycerides (TG), total cholesterol (TC), low density lipoprotein (LDL) and very low density lipoprotein (VLDL); and significant decrease in the level of high density lipoprotein (HDL) in blood serum of CPF exposed rats dose and duration dependently compared to control groups of rat. This result suggests that CPF might induce the cardiovascular risks by changing the set-point lipid metabolism responsible for maintaining normal level of lipid profile variables. CPF probably induces the genesis of atherosclerosis by increasing the level of TG, TC, LDL and VLDL; and decreasing the level of HDL. We also observed significant increase in the total serum glucose level in CPF exposed rats compared to control rats. From the result, we hypothesize that CPF might induce the genesis of diabetes mellitus probably by inhibiting the β -cell function of the pancreatic islets to synthesize and release insulin, the hormone involved in glucose uptake by the tissues. Considering the above results, it is concluded that CPF induces cardiovascular risks and diabetes mellitus in rats probably by shifting set-point lipid metabolism and inhibiting the insulin secretion.

Keywords: Chlorpyrifos, cardiovascular risks, diabetes mellitus, low density lipoprotein, high density lipoprotein.

INTRODUCTION

Chlorpyrifos is a broad spectrum organophosphate insecticide which is widely used in agricultural and domestic sectors to fight against harmful insects¹. Right now, approximately 800 registered pesticide products in the market contain CPF². Exposure to chlorpyrifos causes harmful effect on animal and humans³. Human beings are getting exposed to this chemical through ingestion of vegetables, inhalation and dermal exposure due to indiscriminate use of this chemicals⁴. After entering the body, it is absorbed quickly from the alimentary and respiratory tract, then metabolized and excreted through the urine and faeces⁵. A few reports have stated that chlorpyrifos can alter the blood cholesterol and liver glycogen level. Jaroli and Sharma⁶ reported that Chlorpyrifos causes significant increase in blood cholesterol level and decrease in liver glycogen level in *Channa punctatus*. From the investigation on rabbit it was found that chlorpyrifos induces the cholesterol and reduces the triglyceride level in the serum⁷. A study on broiler chicks revealed that Chlorpyrifos causes enhancement of TG, TC, LDL and drastically reduces the HDL level⁸. The effect of chlorpyrifos on mammalian body has also been reported by several groups of investigator. A group of scientists reported that chlorpyrifos significantly reduces the VLDL and TC level in treated groups of rats, and the other groups of scientists reported that chlorpyrifos

significantly increase the level of VLDL and TC in treated groups of rats^{9, 10}. Several research groups in India and abroad reported that chlorpyrifos exerts toxic effects on liver and particularly promotes cellular degeneration of the liver in fish, amphibia, birds and mice¹¹⁻¹⁶.

It has been well established that HDL is considered as good cholesterol, because it reduces the cardiovascular risks by lowering the LDL cholesterol¹⁷. Besides, HDL cholesterol plays an important role in ameliorating type-II diabetes mellitus. It helps to synthesize and secret insulin from the β cell of the islets of Langerhans of the pancreas. It has been studied that if the HDL level is lowered than the normal, the blood glucose level is increased due to inadequate amount of insulin in the blood¹⁸. Because, insulin stimulates the synthesis of glycogen in the cells of liver and muscle¹⁹. The report about the effects of chlorpyrifos in inducing cardiovascular risks and metabolic syndrome like diabetes mellitus have not been reported till date. In this paper we report that chlorpyrifos produces cardiovascular risks and diabetes mellitus in rat.

MATERIALS AND METHODS

Animals

Studies were carried out on adult male albino rats of Charls Foster strain with initial body weight of 120-130gm. The rats were maintained in Animal House as per recommendations of the Kalyani University Animal Ethics Committee (KUAEC). The animals were kept under



standard environmental conditions (12 hours artificially day-night cycle and normal room temperature) during the acclimatization and experimental period. Rats were provided food and water *ad libitum*.

Reagents and chemicals

All the reagents used for this study were of analytical grade. Chlorpyrifos was purchased from Dow Agrosciences Pvt. Ltd, India. Sodium metabisulfate, activated charcoal, basic fuchsin, periodic acid were procured from Merck, Loba Chemie and SRL Diagnostics, India, respectively. Besides, the commercial kits were

procured from Span diagnostics Ltd., India and ERBA Diagnostics Mannheim GmbH, Germany.

Animal exposure and grouping

After 2 week of acclimatization to the environment the rats were randomly distributed into four experimental groups along with their respective control groups (vide Table-1). Different doses of chlorpyrifos were selected according to the different percentage of oral LD₅₀ value of chlorpyrifos in rats (i.e., 194mg/kgBW/day) and the doses were administered to animals by oral gavage.

Table 1: Experimental design for animal exposure of CPF

Group 1	Animal received distilled water for 10, 20 and 30 days durations- Control groups.
Group 2	Animal received 19.4mgCPF/KgBW/day for 10, 20 and 30 days durations (i.e., 10% of LD ₅₀ value).
Group 3	Animal received 38.8 mgCPF/KgBW/day for 10, 20 and 30 days durations (i.e., 20% of LD ₅₀ value).
Group 4	Animal received 58.2 mgCPF/KgBW/day for 10, 20 and 30 days durations (i.e., 30% of LD ₅₀ value).

Sample collection

After the end of each treatment duration rats were sacrificed by cervical dislocation on the 24th hour after completion of the last dosage. Therefore, the whole blood sample was collected by cardiac puncture. The serum sample was prepared by centrifugation of whole blood sample at 3000rpm for 15min at 4^oC at kept in -20^oC for further biochemical study. The segregated parts of liver tissues washed in buffer solution and kept in Bouin's fixatives for further histological study.

Biochemical assay

Serum glucose, cholesterol, HDL and triglyceride levels were estimated by using commercial kits (Glucose test kit, Autospan, Newcode:93DP100-74, cholesterol test kit, Autospan, Newcode-71LS300-56, HDL test kit, ERBA Diagnostics Mannheim GmbH, Germany, Cat.no-BLT00028, triglyceride assay kit, ERBA Diagnostics Mannheim GmbH, Germany XSYS0041), according to the kit instruction. VLDL was calculated followed by the method of Friedewald by using Friedewald formula (TG/5) given by Friedewald (20). LDL concentration (mg/dl) was estimated indirectly from the measured level of TG, HDL and cholesterol by using equation $LDL = CHOLESTEROL - (VLDL + HDL)$ ²⁰.

Histopathological study

After fixing the liver tissues in Bouin's fixatives for 24 hours, the tissues were dehydrated in ascending grades of ethyl alcohol, cleaned in xylene until they become translucent and embedded to paraffin wax (melting point 58-60^oC). Uniform section of 5µm thickness were cut and stained with PAS followed by Lillie's Cold Schiff's method^{21,22,23} and then observed under the light microscope (Olympus CH20i) fitted with camera (E-620 Olympus digital SLR camera).

Statistical Analysis

All the data obtained from this study were expressed as mean±SEM (n=7). Statistical analysis between the values obtained from control and treated rats were carried out by using ANOVA. p≤0.05 was considered statistically significant.

RESULTS

Effects of chlorpyrifos on some biochemical variables related to cardiovascular risks.

We observed significant increase in the level of LDL, VLDL, TG and TC in a dose and duration response manner in chlorpyrifos expose groups of rats in comparison with control groups of rats (Table-2). We also observed significant decrease in the level of HDL cholesterol in chlorpyrifos treated groups of rats compared with control rats. Further, in 10% exposure group we did not observe significant alterations of LDL, VLDL, TG, TC and HDL level (Table-2).

Biochemical variables	10 days Treatment duration				20 days Treatment duration				30 days Treatment duration			
	Control	10%	20%	30%	Control	10%	20%	30%	Control	10%	20%	30%
Glucose (mg/dl)	110.43 ±0.46	119.06 ±0.84	120.56 ±0.53	125.63 ±0.40	109.13 ±0.84	118.23 ±1.009	132.10 ±0.88	141.83 ±1.12	109.06 ±0.80	122.86 ±1.19	136.26 ±0.99	154.50 ±1.38
HDL(mg/dl)	69.26 ±0.203	64.80 ±0.520	60.83 ±0.92	52.36 ±0.47	68.33 ±0.41	61.30 ±0.28	54.06 ±0.145	46.00 ±0.16	68.00 ±0.723	53.66 ±0.52	48.10 ±0.252	38.46 ±0.40
LDL(mg/dl)	37.25 ±0.35	46.40 ±0.27	53.04 ±0.32	63 ±1.3	37.60 ±0.50	52.16 ±0.96	59.36 ±0.769	68.83 ±0.499	38.74 ±0.091	58.80 ±0.91	67.94 ±0.38	79.68 ±0.48
VLDL(mg/dl)	24.88 ±0.24	25.20 ±0.16	25.62 ±0.14	26.63 ±0.14	24.49 ±0.20	25.60 ±0.29	28.36 ±0.25	31.30 ±0.12	24.16 ±0.24	25.80 ±0.15	29.05 ±0.15	33.24 ±0.21
TG(mg/dl)	124.4 ±1.22	126 ±0.81	128.13 ±0.73	133.16 ±7.42	122.46 ±10.3	128.03 ±1.48	141.83 ±1.28	156.50 ±0.62	120.83 ±1.20	129 ±0.75	145.26 ±0.79	166.23 ±1.09
TC(mg/dl)	131.40 ±0.37	136.40 ±0.55	139.37 ±0.53	142 ±0.98	130.43 ±0.63	139.06 ±0.93	141.13 ±1.04	146.06 ±0.73	130.90 ±0.40	138.26 ±0.570	145.10 ±0.43	151.40 ±0.55

Values are represented as Mean ± SEM (n=7), *p<0.05 vs. control group.

Table 2: Showing the changes in the level of some blood biochemical variables. HDL: high density lipoprotein, LDL: low density lipoprotein, VLDL: very low density



lipoprotein, TG: Triglycerides and TC: Total cholesterol. 10%, 20%, and 30% indicates 10%, 20% and 30% LD₅₀ value of chlorpyrifos respectively in 10, 20 and 30 days treatment durations.

We found significant increase in the level of basal blood glucose level in chlorpyrifos treated groups of rat dose and duration dependently in comparison with control group of rats (Table-2).

Effect of chlorpyrifos on the blood glucose level

Histopathological study: (PAS staining of liver tissues)

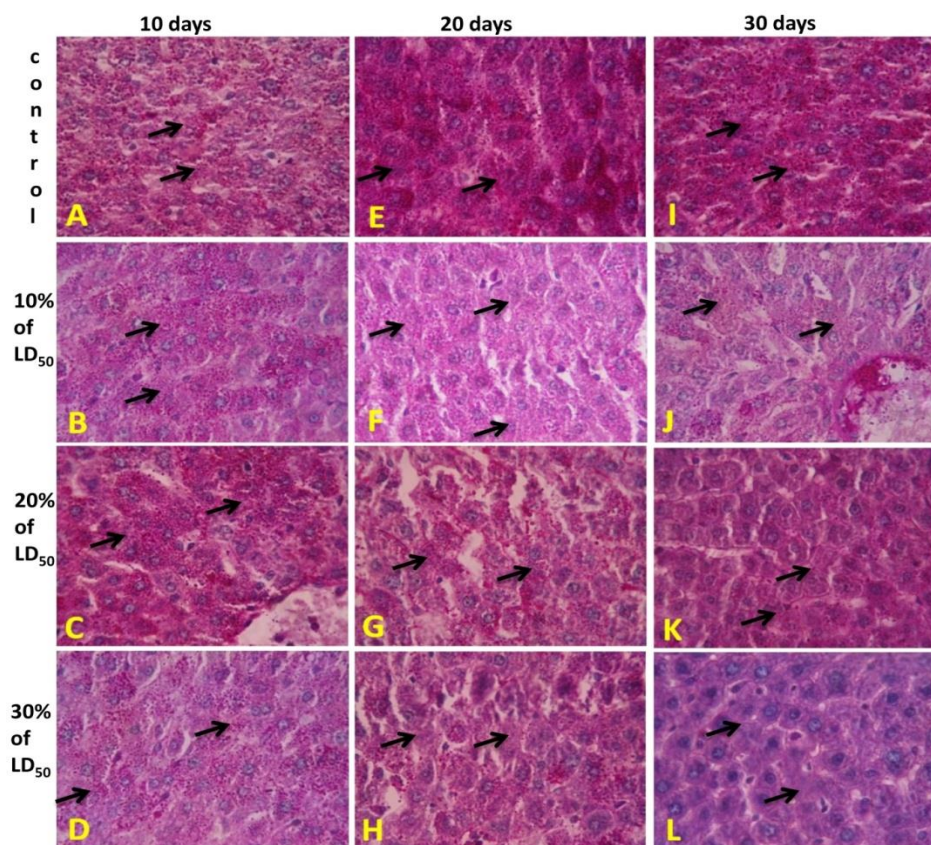


Figure 1: Microphotographs (400 X magnifications) of periodic acid-Schiff stained liver sections showing the density of distributed glycogen granules in CPF exposed and control rats. A, E, I : Control section of 10 days, 20 days and 30 days exposure groups; B, F, J : Sections of liver exposed with 10% LD₅₀ of CPF for 10 days, 20 days and 30 days exposure durations; C, G, K: Sections of liver exposed with 20% LD₅₀ of CPF for 10 days, 20 days and 30 days exposure durations; D, H, L: Sections of liver exposed with 30% LD₅₀ of CPF for 10 days, 20 days, 30 days exposure durations. Arrow heads indicate glycogen deposition as granules in hepatocytes.

Effects of chlorpyrifos on the deposition of glycogen granules in liver tissues.

We observed significant decrease in the density of distributed glycogen granules in the liver cells (hepatocytes) in a dose and duration dependent manner, particularly in two higher doses in three exposure durations, in periodic acid-Schiff stained liver section of chlorpyrifos exposed rats compared to control (Fig-1). Though, we have found significant anatomical changes in the structure of liver in CPF treated rats. We observed significant degenerations of tissues, vascular enlargement, pyknosis and dilations of sinusoids.

DISCUSSION

To examine the effects of chlorpyrifos in inducing cardiovascular risks we have determined the lipid profile variable of chlorpyrifos exposed and control groups of

rats in three exposure durations. In the present study we have found significant elevation of low density lipoprotein (LDL), very low density lipoprotein (VLDL), triglycerides (TG) and total cholesterol (TC) from their basal levels in chlorpyrifos exposed groups of rats compared to control in a dose and duration dependent manner. Further, the level of HDL was significantly decreased in chlorpyrifos exposed rats compared to control in a dose and duration response manner also. LDL, VLDL, TG and TC are generally called cardiovascular risks generating factors considering their potentials to produce cardiovascular diseases. Because, these variables promote hypertension by forming atherosclerotic plaque in the lumen of the blood vessels. HDL is called good cholesterol because it prevents the formation of atherosclerotic plaque in the blood vessels and thus, counteracts the genesis of hypertension induced by LDL, VLDL, TG and TC. Because, HDL cholesterol reduces the level of LDL, VLDL, TG and TC in

the blood by inducing the transport of those variables to tissues. So, these results suggest that CPF increases the cardiovascular risks probably by decreasing the level of HDL and increasing the level of LDL, VLDL, TG and TC.

We have examined the serum glucose level of CPF exposed rats to find out the probable role of CPF in inducing diabetes mellitus. In our present study we observed a significant increase in the level of serum glucose in CPF exposed groups of rats in both dose and duration response manner. This result suggests that CPF probably decreases the release of insulin from pancreatic β -cells, because insulin normally maintains the blood glucose level at the basal range by inducing transport of glucose from blood to interior of the cells for utilization. The elevated blood glucose level beyond the basal range produces the symptoms of diabetes mellitus.

From the above results it can be concluded that CPF probably induces cardiovascular risks by increasing the level of risk producing lipid variables and lowering the risk minimizing lipid variable; and promotes the development of diabetes mellitus probably by decreasing secretion of insulin. The results may be extrapolated in human beings.

CONCLUSION

It is concluded that CPF induces cardiovascular risks and diabetes mellitus in rat.

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