

Research Article

**Effect of Amlodipine (Calcium Channel Blocker) on Haematological and Biochemical Parameters in Male Wistar Rats**Oyedeji K.O.^{*1}, Okeke O.E.¹, Adeleke K.O.², Oyawale Gboluwaga³¹Department of Physiology, College of Medicine and Health Sciences, Afe Babalola University, Ado-Ekiti, Nigeria.²Department of Pharmacognosy, Faculty of Pharmacy, University of Ibadan, Nigeria.³Department of Physiology, College of Medicine, University of Ibadan, Nigeria.*Corresponding author's E-mail: sinaoyedeji@yahoo.com

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ABSTRACT

Twelve male rats (120 – 140 g) were divided into control (distilled water) and amlodipine-treated (0.7 mg/kg) groups (6 per group) for haematological and biochemical studies. The animals were orally treated on daily basis for 50 days. Red Blood Cell (RBC) count and Total White Blood Cell (TWBC) count were determined using haemocytometer. Activities of plasma Alanine Amino Transferase (ALT), Aspartate Amino Transferase (AST), Alkaline Phosphatase (ALP), as well as levels of total protein, globulin, albumin, creatinine and Blood Urea Nitrogen (BUN) were determined by spectrophotometry. Data were analysed using descriptive statistics and ANOVA at $p=0.05$. Treatment of rats with amlodipine (0.7 mg/kg) produced insignificant ($p>0.05$) changes in PCV, Hb, RBC and TWBC values, but caused significant ($p<0.05$) reduction in MCH value relative to their respective controls. It can therefore be concluded that amlodipine probably has a little beneficial effect on haematological function in male rats.

Keywords: Amlodipine, Rats, Total white blood cell count, Red blood cell count, Total protein.**INTRODUCTION**

Amlodipine is a long-acting calcium channel blocker (dihydropyridine class) used as an anti-hypertensive and in the treatment of angina¹. Like other calcium channel blockers, amlodipine acts by relaxing the smooth muscle in the arterial wall, decreasing peripheral resistance and hence reducing blood pressure; in angina it increases blood flow to the heart muscle. Amlodipine does also act as functional inhibitor of acid sphingomyelinase².

Amlodipine is rapidly absorbed and is extensively metabolized in the liver while it shows linear dose-related pharmacokinetic characteristics and, at steady-state, there are relatively small fluctuations in plasma concentrations across a dosage interval³. Although structurally related to other dihydropyridine derivatives, amlodipine displays significantly different pharmacokinetic characteristics⁴. Amlodipine is a substrate of cytochrome P450 (CYP) 3A subfamily, specifically CYP3A4⁵⁻⁶. In addition, amlodipine is also a P-glycoprotein (P-gp) substrate⁷⁻⁸.

Amlodipine has been reported to have the potential to protect against acetaminophen-induced hepatotoxicity in rats⁹. Amlodipine has been reported to have anticonvulsant activity and also potentiated the anticonvulsant effect of phenytoin in MES model¹⁰. Amlodipine has been reported to potentiate the protective effect of zonisamide on pentylenetetrazol-induced kindling in mice¹¹. Amlodipine has also been reported to reduce angiotensin II-Induced aortic aneurysms and atherosclerosis in hypercholesterolemic mice¹².

However, due to paucity of information from literature on the effect of amlodipine on haematological and biochemical parameters in male rats, this study therefore aims at investigating the effect of this antihypertensive agent on these aforementioned parameters in male rats.

MATERIALS AND METHODS**Experimental Animals**

Adult male rats weighing between 120 g – 140 g bred in the Pre-Clinical Animal House of the College of Medicine and Health Sciences, Afe Babalola University were used. They were housed under standard laboratory conditions and had free access to feed and water; they were acclimatized for two weeks to laboratory conditions before the commencement of the experiments. All experiments were carried out in compliance with the recommendations of Afe Babalola University Ethics Committee on guiding principles on care and use of animals.

Drug

Calcium channel blocker (amlodipine) tablets (TEVA UK, Ltd) were bought from Danax Pharmacy, Ibadan, Nigeria.

Amlodipine (10 mg) was dissolved in 10 ml of distilled water to give a concentration of 1.0 mg/ml.

The dosage of amlodipine used in this study was in accordance with that recommended by the manufacturer.

Experimental Design

Twelve male rats (120 – 140 g) were randomly divided into two groups, with each consisting of six animals. The two groups were subjected to the following oral treatments once a day for fifty (50) days:



Group I: received 0.5 mL/100 g of distilled water as control group.

Group II: received 0.7 mg/kg of amlodipine.

Collection of blood samples

Twenty four hours (day 51) after the last dosing of all the groups, blood samples were collected from all the animals through the medial cantus with heparinized capillary tubes into EDTA bottles for hematological and plasma biochemical analyses. Before assays, the blood was centrifuged for 5 minutes using a bench top centrifuge (Centromix) and the plasma were used for the determination of the biochemical parameters.

Determination of Haematological Parameters

The red blood cells (RBC) and white blood cells (WBC) counts were determined by the Improved Neubauer haemocytometer method. The haemoglobin (Hb) concentration was determined according to ¹³ using the cyanomethaemoglobin method. The packed cell volume (PCV) was determined by the micro-haematocrit method according to ¹⁴. Schilling method of differential leucocyte count was used to determine the distribution of the various white blood cells ¹⁵. Mean corpuscular volume (MCV), mean corpuscular haemoglobin (MCH) and mean corpuscular haemoglobin concentration (MCHC) were computed according to ¹³.

Determination of Plasma Biochemical Parameters

The total protein concentration was determined using the Biuret method ¹⁶ and the albumin concentration by the method of ¹⁷. The globulin concentration was calculated by subtracting the albumin concentration from the total protein concentration. Activities of plasma alanine transaminase (ALT) and aspartate transaminase (AST) were determined according to the method of ¹⁸. The levels of creatinine, urea and alkaline phosphatase were determined using the method of ¹⁹. All the above biochemical parameters were determined in the plasma using the Randox kits.

Statistical Analysis

The mean and standard error of mean (S.E.M.) were calculated for all values. Comparison between the control and experimental groups was done using one-way analysis of variance (ANOVA) with Duncan's Multiple Range Test. Differences were considered statistically significant at $p < 0.05$.

RESULTS

The effect of amlodipine (0.7 mg/kg) on haematological and plasma biochemical parameters after treatment of rats for 50 days is shown in Tables 1 and 2 respectively.

Treatment of rats with amlodipine (0.7 mg/kg) produced no significant ($p > 0.05$) changes in PCV, Hb, RBC TWBC, platelet, lymphocyte, neutrophil, monocyte, eosinophil, MCV and MCHC values relative to their respective controls.

Treatment of rats with amlodipine (0.7 mg/kg) caused significant ($p < 0.05$) reduction in MCH value relative to the control.

Table 1: Effect of 50 days treatment with amlodipine on haematological parameters in male rats

| Parameters | Control | Amlodipine (0.7 mg/kg) |
|---|--------------|------------------------|
| PCV (%) | 43.40 ± 0.52 | 40.60 ± 0.72 |
| Hb (g/dL) | 14.38 ± 0.34 | 13.30 ± 0.31 |
| RBC ($\times 10^6/\mu\text{L}$) | 7.31 ± 0.32 | 6.82 ± 0.16 |
| TWBC ($\times 10^3/\mu\text{L}$) | 3.70 ± 0.21 | 4.36 ± 0.32 |
| Platelets ($\times 10^5/\mu\text{L}$) | 1.39 ± 0.05 | 1.24 ± 0.03 |
| Lymphocytes (%) | 71.00 ± 0.83 | 67.80 ± 0.93 |
| Neutrophils (%) | 25.40 ± 0.75 | 28.20 ± 0.86 |
| Monocytes (%) | 1.60 ± 0.11 | 2.00 ± 0.13 |
| Eosinophils (%) | 2.00 ± 0.16 | 2.00 ± 0.17 |
| MCV (fL) | 59.36 ± 0.55 | 59.59 ± 0.54 |
| MCHC (g/dL) | 33.12 ± 0.41 | 32.73 ± 0.31 |
| MCH (pg) | 19.67 ± 0.34 | 19.51 ± 0.28* |

(n=6, * $p=0.05$)

Treatment of rats with amlodipine (0.7 mg/kg) produced no significant ($p > 0.05$) changes in total protein, albumin, globulin, ALT, AST, ALP, BUN and creatinine values relative to their respective controls.

Table 2: Effect of 50 days treatment with amlodipine on plasma biochemical parameters in male rats

| Parameters | Control | Amlodipine (0.7 mg/kg) |
|----------------------------------|---------------|------------------------|
| Total Protein (g %) | 6.80 ± 0.13 | 7.26 ± 0.21 |
| Albumin (gm %) | 2.66 ± 0.13 | 2.80 ± 0.15 |
| Globulin (gm %) | 4.14 ± 0.18 | 4.46 ± 0.12 |
| AST (μL) | 42.20 ± 0.87 | 40.00 ± 0.76 |
| ALT (μL) | 29.60 ± 0.74 | 29.20 ± 0.86 |
| ALP (IU/L) | 110.00 ± 1.71 | 110.20 ± 1.34 |
| BUN (mg/dL) | 15.96 ± 0.28 | 16.26 ± 0.26 |
| Creatinine ($\mu\text{mol/L}$) | 0.74 ± 0.02 | 0.80 ± 0.01 |

(n=6, * $p=0.05$)

DISCUSSION

The result of the haematological study has shown that amlodipine caused no significant changes on the PCV, RBC and indices relating to it (Hb, MCV and MCHC). This could indicate that the drug does not have the potential to stimulate erythropoietin release from the kidneys which is the humoral regulator of RBC production ²⁰. It could also indicate that there were no changes in the oxygen carrying capacity of the blood and the amount of oxygen



delivered to the tissues since RBC and haemoglobin (Hb) are very important in transferring respiratory gases²¹. It has been reported that values of RBC and associated parameters lower than normal ranges are indicative of anaemic conditions while higher values are suggestive of polycythemia²²; thus, the drug may not have the potential to induce anaemia or polycythemia. Also, the drug may not have adverse effects on the bone marrow, kidney and haemoglobin metabolism, since it has been reported that only substances which significantly affect the values of red blood cells and associated parameters would have effects on the bone marrow, kidney and haemoglobin metabolism²³.

Amlodipine caused no significant change in TWBC value, which probably indicates that it has no effect on the ability of the body to defend against invading organisms²⁴. Contrary result was reported by²⁵ in *Viscum album* extract treated rats.

Amlodipine caused no significant change in the platelet value, which probably indicates that it has no effect on the haemostatic function of the body. Contrary result was reported by²⁶ in *Fadogia agrestis* extract treated rats.

Amlodipine caused no significant change in lymphocyte value, which probably indicates that it has no effect on the acquired immune response of the body. Similar result was reported by²⁷ in isolated ergosterol treated rats.

Amlodipine caused no significant increase in the neutrophil count, which probably indicates it has no effect on the ability of the body to attack and destroy invading bacteria, viruses and other injurious agents (phagocytosis). Contrary result was reported²⁸ in *Dennettia tripetala* extract treated rats.

Amlodipine caused no significant change in the monocyte value, which probably indicates that it has no effect on the phagocytic function of the body²⁹. Contrary result was reported by³⁰ in *Saccharomyces cerevisiae* extract fed hens.

Amlodipine caused no significant change in eosinophil value, which could indicate that it has no effect on the anti-allergic and anti-parasitic infectious responses of the body. Contrary result was reported by³¹ in *Arctotis actotoides* extract treated rats and mice.

Amlodipine caused significant reduction in the MCH value, which probably indicates that it inhibits the induction of macrocytic anaemia, since increased MCV and MCH values are known to be indicative of macrocytic anaemia³². Contrary result was reported by³³ in *Jatropha gossypifolia* extract treated rats. The insignificant change in the MCHC value caused by lisinopril probably indicates that it has no effect on induction of hereditary spherocytosis, since MCHC values are known to be elevated in hereditary spherocytosis. Similar result was reported by³³ in *Jatropha gossypifolia* extract treated rats.

The result of the plasma biochemical study has shown that treatment of rats with amlodipine caused insignificant change in total protein level. This might indicate that the drug has no effect on the buffering capacity of the blood as well as having no effect on colloid osmotic pressure, since plasma proteins have been reported to be responsible for 15% of buffering capacity of blood²⁴ and that osmotic pressure caused by the plasma proteins (called colloid osmotic pressure) tends to cause fluid movement by osmosis. Contrary result was reported by³⁴ in *Euphorbia heterophylla* extract treated rats.

Amlodipine caused no significant change in albumin level, which probably indicates that it has no effect on the plasma levels of metals, ions, fatty acids, amino acids, bilirubin and enzymes; since it has been reported that albumin serves as a carrier for metals, ions, fatty acids, amino acids, bilirubin, enzymes and drugs²⁴. Contrary result was reported by³⁵ in *Enicostemma axillare* extract treated rats.

Amlodipine produced no significant change in globulin level, which probably indicates that it has no effect on both the natural and acquired immunity of the body against invading organisms, since it has been reported that globulins are principally responsible for the body's both natural and acquired immunity against invading organisms²⁹. Similar result was reported by³⁶ in *Portulaca oleracea* extracts treated rats.

The insignificant change in the activity of AST caused by the drug could indicate it has no effect on induction of tissue necrosis, since it has been reported that elevation in the activity of AST can be associated with cell necrosis of many tissues, which allows leakage of large amounts of this enzyme into the blood³⁷. Contrary result was reported by³⁸ in *Sida rhombifolia* extract treated mice and rats.

Amlodipine caused an insignificant change in the activity of ALT, which probably indicates that it has no effect on induction of hepatic damage, since it has been reported that ALT is present in the liver and other cells and is particularly useful in measuring hepatic necrosis, especially in small animals³⁹. Contrary result was reported by⁴⁰ in *Moringa oleifera* extract treated rats.

Amlodipine caused no significant change in ALP level, this probably indicates the absence of cholestasis, since ALP has been reported to be a marker of cholestasis⁴¹. Similar result was reported by³³ in *Jatropha gossypifolia* extract treated rats.

Amlodipine induced insignificant changes in urea and creatinine levels, this probably indicates absence of nephrotoxicism (renal impairment), since high plasma levels of urea and creatinine are markers of kidney dysfunction. Contrary result was reported by⁴² in *Passiflora edulis* extract treated rats.



CONCLUSION

In conclusion, this study has shown that amlodipine has a little beneficial effect on the haematological function in male rats. However, the effect of this antihypertensive agent on human haematological function and blood chemistry are unknown; nevertheless, considering these findings in animal model, it is recommended that patients should strictly comply with the dosage regimen as recommended by their physicians.

REFERENCES

1. United States National Library of Medicine, National Institutes of Health, Drug Information Portal – Amlodipine, 2017.
2. Kornhuber M, Trapp S, Pechmann S, *et al.*, Identification of novel functional inhibitors of acid sphingomyelinase, *PLoS ONE*, 6 (8), 2011, e23852.
3. Abernethy DR, Pharmacokinetics and Pharmacodynamics of amlodipine, *Cardiology*, 80, 1992, 31-36.
4. Meredith PA, Elliott HL, Clinical pharmacokinetics of amlodipine, *Clin Pharmacokinet*, 22, 1992, 22-31.
5. Nishio S, Watanabe H, Kosuge K, *et al.*, Interaction between amlodipine and simvastatin in patients with hypercholesterolemia and hypertension, *Hypertens Res*, 28, 2005, 223-227.
6. Kim KA, Park PW, Park JY, Effect of cytochrome P450 3A5*3 genotype on the stereoselective pharmacokinetics of amlodipine in healthy subjects, *Chirality*, 21, 2009, 485-491.
7. Darvari R, Boroujerdi M, Concentration dependency of modulatory effect of amlodipine on P-glycoprotein efflux activity of doxorubicin - a comparison with tamoxifen, *J Pharm Pharmacol*, 56, 2004, 985-991.
8. Harmsze AM, Robijns K, van Werkum JW, *et al.*, The use of amlodipine, but not of P-glycoprotein inhibiting calcium channel blockers is associated with clopidogrel poor-response, *Thromb Haemost*, 103, 2010, 920-925.
9. Nesreen EMM, Basim ASM, Ali AA, Effect of amlodipine, lisinopril and allopurinol on acetaminophen-induced hepatotoxicity in rats, *Saudi Pharmaceutical Journal*, 24 (6), 2016, 635-644.
10. Roopa B, Janardhan M, Venkata Rao Y, Evaluation of anticonvulsant activity of amlodipine in albino rats, *International Journal of Basic and Clinical Pharmacology*, 6 (3), 2017, 664-668.
11. Alam M, Singh BK, Kumar V, Amlodipine potentiates the protective effect of zonisamide on pentylenetetrazol-induced kindling in mice, *Drug Development and Therapeutics*, 6 (2), 2015, 88-92.
12. Chen X, Rateri DL, Howatt DA, *et al.*, Amlodipine reduces angiotensin II-induced aortic aneurysms and atherosclerosis in hypercholesterolemic mice, *PLoS ONE*, 8(11), 2013, e81743.
13. Jain NC, *Schalm's Veterinary Hematology*, 4th Ed., Lea and Fabiger, Philadelphia, 1986.
14. Dacie JV, Lewis SM, *Practical haematology*, 7th edition ELBS with Churchill Livingstone, England, 1991, 37-85.
15. Mitruka BM, Rawnsley H, *Clinical, biochemical and haematological references values in normal experimental animals*, Masson Publishing USA Inc., 1977, 53-54.
16. Reinhold JG, *Manual determination of serum total protein, albumin and globulin fractions by the Biuret method*, Standard Methods of Clinical Chemistry, Academic Press, New York, 1953.
17. Doumas BT, Watson W, Biggs HC, Albumin standards and the measurement of serum albumin with bromocresol green, *Clinica Chimica Acta*, 31, 1971, 87-96.
18. Duncan JR, Praise KW, Mahaffey EA, *Veterinary Laboratory Medicine (Clinical Pathology)*, 3rd ed., Iowa State University Press, U.S.A., 1994.
19. Tietz NW, Prude EL, Sirgard – Anderson O, *Textbook of clinical chemistry*, Ed. Burtis C.A. and Ashwood E.R., W.B. Saunders Company, London, 1994, 1354 – 1374.
20. Polenakovic M, Sikole A, Is erythropoietin a survival factor for red blood cells? *Journal of American Society of Nephrologists*, 7 (8), 1996, 1178-1182.
21. De Gruchy GC, *Clinical haematology in Medical Practice*. Blackwell Scientific Publication, Oxford, London, 1976, 33-57.
22. American Diabetes Association, Nutrition recommendation and principles for people with diabetes mellitus clinical practice recommendations, *Diabetes care*, 23, 2000, 543-546.
23. Young NS, Maciejewski J, The path physiology of acquired aplastic anemia, *New England Journal of Medicine*, 336, 1997, 1365.
24. Ganong WF, *Review of Medical Physiology (22nd)*, New York; Lange Medical books/Mc Graw Hill, ISBN 007-144040-2, 2005.
25. Imoru JO, Eno AE, Unoh FB, Enkanu E, Ofem OE, Ibu JO, Haematopoietic agents in the crude extracts from the leaves of *Viscum album* (mistletoe), *Nigerian Journal of Health and Biomedical Sciences*, 4(2), 2005, 139-145.
26. Yakubu MT, Akanji MA, Oladiji AT, Hematological evaluation in male albino rats following chronic administration of aqueous extract of *Fadogia agrestis* stem, *Pharmacognosy Magazine* 3, 2007, 34 - 38.
27. Oyedele KO, Bolarinwa AF, Oladosu IA (2013): Effect of isolated ergosterol constituent of *Portulaca oleracea* on Haematological Parameters in male albino rats, *Asian journal of Pharmaceutical and Clinical research*, 6 (2), 2013, 218 – 221.
28. Ikpi DE, Nku CO, Effect of ethanolic extract of *Dennettia tripetala* fruit on haematological parameters in albino wistar rats, *Nigerian Journal Physiological Sciences*, 23(1-2), 2008, 13-17.
29. Guyton AC, Hall JE, *Textbook of Medical Physiology*, 11th edition. Elsevier Inc., 2006.
30. Matur E, Erqul E, Eraslan E, Inal G, Bilgic S, Demircan H, Effect of *Saccharomyces cerevisiae* extract on Haematological Parameters, Immune functions and the



- antioxidant defense system in breeder hens fed aflatoxin contaminated diets, *British Poultry Science*, 52 (5), 2011, 541-550.
31. Jimoh FO, Adedapo AA, Sofidiya MO, Masika PJ, Afolayan AJ, Safety evaluation of the extract from the shoots of *Arctotis actotooides* in rats and mice, *African Journal of Biotechnology*, 7 (18), 2008, 3173-3177.
 32. Ghai, A textbook of practical physiology, fifth edition, Jaypee Brothers Medical Publishers Ltd New Delhi, 1999.
 33. Oyedeji KO, Awoyinka D, Abidoye D, Effect of ethanol extract of *Jatropha gossypifolia* on haematological and plasma biochemical parameters in male albino rats, *Int. J. Pharm. Sci. Rev. Res.*, 35 (2), 2015, 41-45.
 34. Apiamu Augustine, Evuen Uduenevwo Francis, Biochemical Assessment of the Effect of Aqueous Leaf Extract of *Euphorbia Heterophylla Linn* in Hepatocytes of Rats, *IOSR Journal of Environmental Sciences, Toxicology and Food technology*, 3 (5), 2013, 37- 41.
 35. Gite VN, Pokharkar RD, Chopade VV, Takate SB, Hepato-Protective activity of *Enicostemma Axillare* in paracetamol induced hepato-toxicity in albino rats, *International Journal of Pharmacy and Life Sciences*, 1(2), 2010, 50 – 53.
 36. Oyedeji KO, Bolarinwa AF, Effects of Crude Extracts of *Portulaca oleracea* on Haematological Parameters in Albino Rats, *African Journal of Biomedical research*, 15, 2010, 41-47.
 37. Bush BM, Interpretations of Laboratory Results for Small Animal Clinicians, Blackwell Scientific Publications, London, 1991.
 38. Ouedraogo M, Zerbo P, Konate K, Barro N, Laya L. Sawadogo, Effect of long-term use of *Sida rhombifolia L.* Extract on Haematological Parameters of Experimental Animals, *British Journal of Pharmacology and Toxicology*, 4 (1), 2013, 18-24.
 39. Duncan JR, Prasse KW, Mahaffey EA, Veterinary laboratory medicine (Clinical Pathology), Iowa State University Press, Ames, 1994, 102-107.
 40. Ajibade TO, Olayemi FO, Arowolo ROA, The haematological and biochemical effects of methanol extract of the seeds of *Moringa oleifera* in rats, *Journal of Medicinal Plant Research*, 6 (4), 2012, 615-621.
 41. Vasudevan DM, Sreekumari S, Textbook for biochemistry for medical students, 5th ed., Jaypee Brothers Medical Publishers Ltd, New Delhi, 2007, 266.
 42. Devaki K, Beulah, Akila G, Gopalakrishnan, Effect of aqueous extract of *Passiflora edulis* on biochemical and haematological parameters of wistar albino rats, *Toxicology International*, 19 (1), 2012, 63-67.

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