



Calcium dobesilate prevents cisplatin-induced nephrotoxicity by modulating oxidative and histopathological changes in mice

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Abstract

Cisplatin is one of the synthetic cancer medicines with nephrotoxicity being one of its major side effects. Past research shows that calcium dobesilate (CaD), a vascular protective agent in diabetic retinopathy, has antioxidant properties. Thus, this study aims to evaluate the protective effects of CaD in cisplatin-induced nephrotoxicity in mice. A many as 28 mice, in the present experimental research, were randomly distributed into four groups, including control, cisplatin (the intraperitoneal administration of 20 mg/kg cisplatin only on the first day of the experiment), cisplatin + CaD 50 (cisplatin with the oral administration of 50 mg/kg CaD), and cisplatin + CaD 100 (cisplatin with the oral administration of 100 mg/kg CaD). The treated groups received CaD by oral gavage for 4 constitutive days. On the fifth day, the mice were sacrificed, and some biochemical (serum levels of Cr and BUN, renal tissue level of MDA, and renal activities of SOD and GPx) and pathological parameters were evaluated. Based on the results, there was a significant decrease in the renal SOD and GPx activities; in contrast, there was a significant increase in the BUN, Cr, and renal MDA levels following administering cisplatin. However, the CaD treatment (100 mg/kg) significantly attenuated these alterations. In addition, the kidney's histological examination of kidneys confirmed the nephroprotective effects of CaD. The findings proved the protective impact of CaD on cisplatin-induced nephrotoxicity by an improvement in the oxidative stress factors. is the major side effect that limits its clinical use (Goudarzi

et al. 2017b; Sharp and Siskind 2017). There are several **Abstract** **Keywords** Nephrotoxicity. Cisplatin. Calcium dobesilate. Antioxidant. Mice involved in nephrotoxicity induced by cisplatin. One of the major mechanisms of this type is the overproduction of reactive oxygen species (ROS) and tissue oxidative damage (Ozkok and Edelstein 2014; Bazmandegan et al.

Introduction

Cisplatin is a well-known chemotherapeutic drug with cellular alkylating properties, which is used in the treatment of cancers, such as brain cancer, carcinoma, lung cancer, and ovarian cancer (Yao et al. 2007). Cisplatin-induced nephrotoxicity

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2019). Cisplatin-induced oxidative stress leads to lipid peroxidation, cell membrane degradation, protein, and nucleic acid oxidation, as well as tissue degradation (Dasari and Tchounwou 2014). It has been shown that damage to renal tissues increases the levels of blood urea nitrogen (BUN) and creatinine (Cr) (Rasoulizadeh et al. 2014; Boroushaki et al. 2015; Ghaznavi et al. 2018). Moreover, molecular changes include an increase in the malondialdehyde (MDA) concentration and a decrease in the antioxidant system enzymes, including glutathione peroxidase (GPx) and superoxide dismutase (SOD) in renal tissues (Liu et al. 2010; Bazmandegan et al. 2019). Furthermore, histopathological changes include tubular necrosis, leukocyte infiltration, and glomerular injury (Dehnamaki et al. 2019). It has been shown in several studies that one of the prevention approaches to cisplatin-induced nephrotoxicity is the use of antioxidant agents such as magnesium sulfate and cysteine (Hamroun et al. 2019; Casanova et al. 2020). Accordingly, research on finding agents that reduce cisplatin-induced nephrotoxicity could be very helpful in increasing cisplatin usage in clinics (Saleh and El-Demerdash 2005; Chirino et al. 2008; Ehsani et al. 2017). Calcium dobesilate (CaD) is one of the derivatives of cyclohexadinitylbisulfate, which was introduced over 40 years ago for treating diabetic retinopathy as it reduces vascular permeability (Haller et al. 2017). It has been well established that CaD has potent antioxidant properties (Zhan et al. 2015). In vitro studies show this drug has a scavenging effect on oxygen free radicals. However, these results have been confirmed by in vivo studies as well (Rota et al. 2004). Jafarey et al. showed that CaD reduces free ROS and increases antioxidant enzymes, such as SOD and GPx in gentamicin-induced nephrotoxicity (Jafarey et al. 2014). Against this background, it is necessary to find a drug that reduces the renal toxicity of cisplatin. However, it seems CaD has highly protective effects in these conditions. Accordingly, this research aims to investigate if CaD has an impact on cisplatin-induced kidney impairment in mice through examining oxidative stress indices and histological changes.

in polycarbonate cages at room temperature (24 ± 2 °C), with a 12-h light/dark cycle, and with free access to food (Pars Industrial Company, Iran) and water.

In this study, the animals were randomly divided into 4 groups with 7 animals in each group, including Group 1 served as control and received no particular treatment, Group 2 received 20 mg/kg cisplatin intraperitoneally on the first day, and Groups 3 and 4 received 20 mg/kg cisplatin intraperitoneally on the first day and different doses of CaD (50 and 100 mg/kg/day) orally which was started on day 1 and continued for 3 consecutive days.

Sample collection

Four days after the initial CaD administration, the mice were anesthetized with diethyl ether. Next, blood samples were collected by cardiac puncture and centrifuged at 1000 rpm for 3 min for collecting the serum. The samples of the serum were kept at -80 °C for measuring BUN and Cr levels. The mice were then decapitated with both kidneys harvested for them with. The right kidneys were fixed in a 10% formalin solution for histopathological studies. In addition, the left kidneys were frosted in an nitrogen tank for the evaluation of oxidative stress indices (Bazmandegan et al. 2019; Taghipour et al. 2019).

Serum parameters

The serum levels of Cr and BUN were measured using an automated analyzer (Mindray, Guangzhou, China) by respective commercial kits (Pars Azmoon Co., Tehran, Iran).

Oxidative parameters

The frozen kidneys were defrosted and homogenized with phosphate-buffered saline and centrifuged 25 min at 6000 rpm at 4 °C for collecting supernatants (Kaeidi et al. 2020a,b). Next, the kidney levels of MDA as well as SOD and GPx activities were evaluated by commercially available kits (ZellBio, Ulm, Germany) in the collected supernatants.

Histopathological evaluation

After preparing the kidney sections using hematoxylin and eosin (H&E), they were stained and observed in a blind manner by a pathologist under a light microscope (Nikon Labophot, Japan) (Karimi et al. 2019; Hosseinzadeh et al. 2020).

CaD (Doxium®) was obtained from OM PHARMA Company (Switzerland), and cisplatin (CISPLATIN MYLAN®) was purchased from MYLAN Firm (France).

Animals and study groups

In this experimental research, as many as 28 male mice were obtained from the animal house of Rafsanjan University of Medical Sciences, Rafsanjan, Iran. The animals were housed

Statistical analysis

Statistical analysis was performed using GraphPad Prism (version 6, USA), and the results were reported as mean \pm SEM. Alterations between the groups were defined via a one-way ANOVA followed by a post-hoc analysis of the Tukey's test. $p < 0.05$ was considered significant.

Results

Serum parameters

The mean BUN and Cr levels of the serum increased significantly in the cisplatin group ($p < 0.01$ and $p < 0.001$,

respectively) (Fig. 1). The administration of CaD at a dose of 100 mg/kg for 4 constitutive days significantly decreased the BUN and Cr levels of the serum compared with the cisplatin group ($p < 0.05$ and $p < 0.01$, respectively).

Oxidative parameters

The results of the present work revealed that the MDA concentration increased significantly via cisplatin administration compared with the control group ($p < 0.001$) (Fig. 2). It was also found out that the mean concentration of MDA decreased significantly in the group that received 100 mg/kg of CaD for 4 constitutive days compared with the cisplatin group ($p < 0.001$).

According to the results, the activities of GPx and SOD were reduced significantly following cisplatin administration

compared with the control group ($p < 0.001$) (Fig. 3a and b). The administration of CaD (100 mg/kg) for 4 constitutive days significantly increased the SOD activity compared with the cisplatin-treated mice ($p < 0.01$). In addition, CaD at both doses (50 and 100 mg/kg), for 4 constitutive days, significantly increased the GPx activity compared with the cisplatin group ($p < 0.05$ and $p < 0.01$, respectively).

Fig. 1 CaD treatment effects on the levels of BUN (a) and Cr (b) in cisplatin-induced nephrotoxicity. ** $p < 0.01$ and *** $p < 0.001$: compared with the control group. # $p < 0.05$ and ## $p < 0.01$: compared with the cisplatin group. CaD calcium dobesilate, BUN blood urea nitrogen, Cr creatinine

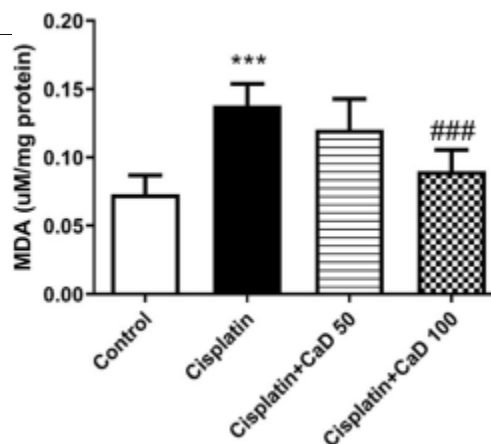
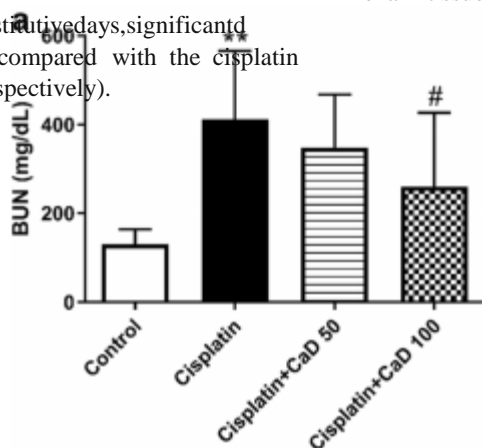


Fig. 2 CaD treatment effects on the concentration of MDA in cisplatinC induced nephrotoxicity. *** $p < 0.001$: compared with the control group. ### $p < 0.001$: compared with the cisplatin group. CaD calcium dobesilate, MDA malondialdehyde

The effects of CaD on histopathological indices in cisplatin-induced nephrotoxicity

Nopathological lesions were seen in the kidneys of the control

group (Fig. 1a; Table 1). Extensive pathological lesions, such as tubular degeneration, tubular necrosis, tubular cell vacuolation, and case cast, were seen in the

cisplatin group due to cisplatin administration (Fig. 1b; Table 1). The administration of CaD (potentially 100 mg/kg) significantly reduced cisplatin-induced pathological lesions in the renal tissues (Fig. 1c and d; Table 1; Fig. 4).

Discussion

According to the results of the present investigation, the intra peritoneal administration of cisplatin (20 mg/kg) significantly increased BUN and Cr levels in the serum. Moreover, it was found out that cisplatin increased MDA levels and decreased SOD and GPx activities in the renal tissues. These

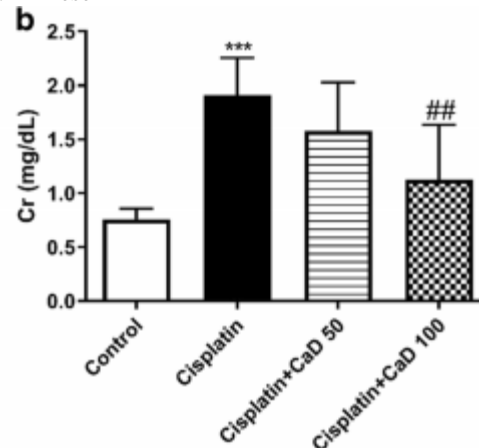
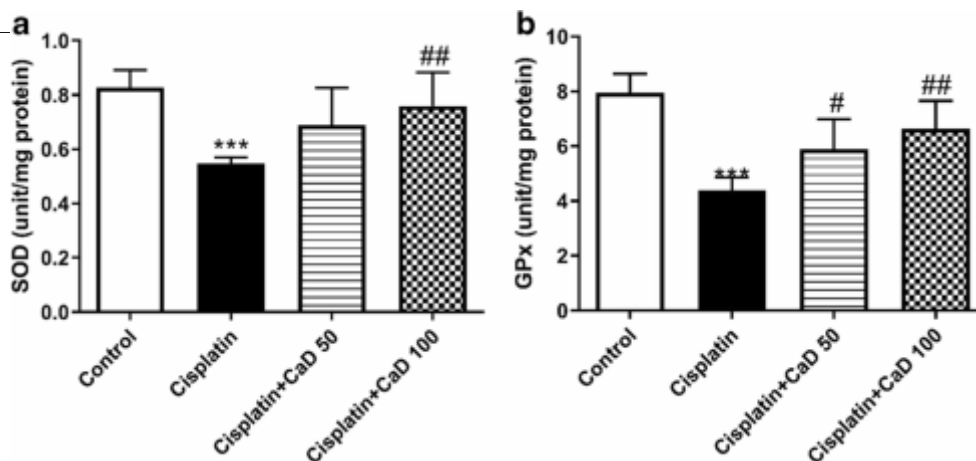


Fig. 3 The effects of treatment with CaD on SOD (a) and GPx (b) in cisplatin-induced nephrotoxicity. ***p<0.001: compared with the control group. #p<0.05 and ##p<0.01: compared with the cisplatin group. CaD calcium dobesilate, SOD superoxide dismutase, GPx glutathione peroxidase



biochemical alternations were in line with histopathological lesions in the kidney. According to the results, the oral administration of CaD (100 mg/kg) for 4 constitutive days significantly mitigated the deleterious effects of cisplatin on the kidney.

Although cisplatin is a potent antineoplastic agent, it has certain serious side effects, including nephrotoxicity (Yao et al. 2007; Goudarzi et al. 2017b). It is well established that cisplatin induced nephrotoxicity causes functional disorders characterized by a rise in BUN and Cr levels (Saleh and Elc Demerdash 2005; Ghaznavi et al. 2018; Mehrzadi et al. 2018a,b).

Consistent with past reports, the present study demonstrated that cisplatin administration increases Cr and BUN levels in the serum. Moreover, it was shown that treatment with 100 mg/kg CaD for 4 constitutive days reduced the increment levels of Cr and BUN in cisplatin-treated animals. Some reports indicate that antioxidant compounds such as ellagic acid, lycopene, and cashew phenolic exhibit similar protective effects in cisplatin-induced renal injuries (Atessahin et al. 2005; Atessahin et al. 2007; Chandrasekara and Shahidi 2011).

At present, it is well documented that CaD exerts antioxidant effects by increasing the level and activity of antioxidant enzymes or/and scavenging free radicals (Berthet et al. 1999; Haller et al. 2017; Solà-Adell et al. 2017). In a human study, it was shown that CaD could

improve renal functions, including Cr and BUN levels, in patients with diabetic nephropathy (Qin et al. 2017). Jafarey et al. (2014) reported that CaD at the doses of 50 and 100 mg/kg reduced serum levels of BUN and Cr in nephrotoxicity induced by gentamicin in rat (Jafarey et al. 2014).

It is believed that cisplatin increases lipid peroxidation and MDA levels in renal tissues by inducing oxidative stress (Priyamvada et al. 2008). MDA has highly reactive properties that were increased in the present and similar investigations following cisplatin administration (Priyamvada et al. 2008; Ghaznavi et al. 2018). The overproduction of MDA induces functional changes and histopathological lesions in the kidney (Goudarzi et al. 2017a; Mehrzadi et al. 2018a,b; Dehnamaki et al. 2019; Karimi et al. 2019). We also demonstrated that treatment with CaD at the dose of 100 mg/kg for 4 constitutive days significantly decreased MDA levels in the renal tissue. Bogdanov et al. found out that the oral administration of CaD (200 mg/kg/day) for 15 days reduced oxidative stress biomarkers, such as MDA in the retina of diabetic mice (Bogdanov et al. 2017). Moreover, CaD reduces MDA levels in the human's isolated varicose veins (Alda et al. 2011). Furthermore, CaD reduces liver damages in experimental obstructive jaundice by reducing the MDA levels of the liver (Unal et al. 2019). Hence, it seems that CaD exerts its beneficial effects by reducing MDA levels.

Previous reports indicate that cisplatin reduces the capacity of antioxidant enzymes, such as SOD and GPx (Atessahin et al. 2005; Atessahin et al. 2007; Chirimo et al. 2008). Consistent with these reports, the present study demonstrated that cisplatin administration significantly reduced the levels of SOD and GPx in the kidney (Fig. 3). Treatment with CaD (50 and 100 mg/kg) significantly increased the levels of SOD and GPx in the kidney (Fig. 3). These results suggest that CaD treatment may protect against cisplatin-induced oxidative stress and renal damage by restoring antioxidant enzyme levels.

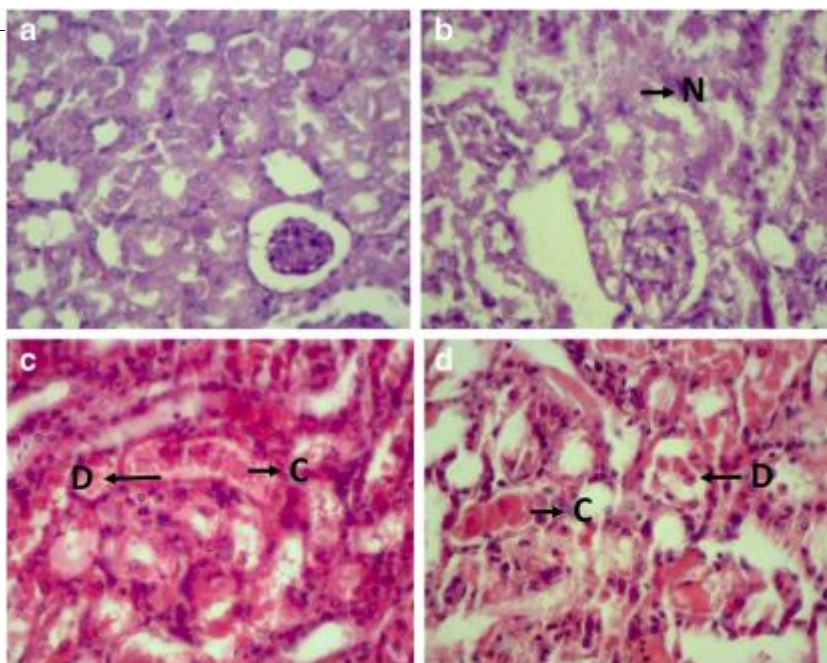
Group	Tubular necrosis	Tubular degeneration	Tubular cells vacuolation
Control	0	0	0
Cisplatin	+++	+++	+++
Cisplatin+CaD 50	+	+	+
Cisplatin+CaD 100	+	+	+

Table 1 Effect of CaD on kidney histopathology in cisplatin induced nephrotoxicity in mice

Control
Cisplatin
Cisplatin + CaD 50
Cisplatin + CaD 100

Fig. 4

Histopathological observations (sections of the kidney were stained using hematoxylin and eosin, at a magnification of $\times 400$) indicate CaD effects on cisplatin-induced nephrotoxicity alterations in the kidney. a Control group; b cisplatin group; c cisplatin + CaD 50 group; d cisplatin + CaD 100 group. CaD calcium dobesilate, C cast, N tubular necrosis, D tubular degeneration



cast, N tubular necrosis, D tubular degeneration

that cisplatin decreased the activity of these enzymes in the antioxidant system. In addition, we demonstrated that CaD administration (especially 100 mg/kg) for 4 constitutive days in cisplatin-treated rats restored the activities of SOD and GPx. CaD reduces free radicals and strengthens the body's antioxidant defense system,

including SOD and GPx (Jafarey et al. 2014). According to a human study, CaD enhanced the levels of SOD and GPx and reduced MDA levels in cardiac surgery

(Cerrahoglu et al. 2009). In another report, it was shown that CaD had protective effects on the damage to

diabetic rats' retina by increasing the activity of GPx (Heetal.

2019).

It has been demonstrated that cisplatin induces tubular damages, including tubular cell vacuolation, tubular necrosis, tubular degeneration, and cast (Atessahin et al. 2005; Bazmandegan et al. 2019). In the same vein, we found these tubular lesions in the kidney samples of cisplatin-treated animals.

It was also shown in the present study that CaD reduced these pathological lesions in the kidney at the dose of 50 mg/kg and more potentially at the dose of 100 mg/kg. Previous reports also verified the nephroprotective effects of CaD through histopathological studies. For example, Gao et al. found out that CaD decreased renal pathological damage and protected the kidney from fibrous degeneration

in early diabetic nephropathy (Gao et al. 2009).

to protection against cisplatin-induced oxidative stress possibly through its antioxidant activities. Therefore, these findings indicate that treatment with CaD could act as a beneficial strategy for reducing cisplatin-induced renal damage in patients with cancer.

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Authors' contributions Conceived and designed the experiments: GB and MA. Performed the experiments: BG, AK, MK, and AF. Analyzed the data: GB and MA. Contributed reagents/materials/analysis tools: AK, GB, and IF. Wrote the paper: IF and GB. The authors declare that all data were generated in-house and that no paper mill was used.

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Compliance with ethical standards All experiments were performed in accordance with the guidelines set by the ethical committee under ethics code IR.RUMS.REC.1397.028.

Conflict of interest The authors declare that they have no conflict of interest.

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Conclusions

It is concluded that cisplatin causes oxidative stress-induced damage in the kidney tissue of rats. Treatment with CaD leads

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