Adverse effects of energy drink on rat pancreas and the therapeutic role of each of bone marrow mesenchymal stem cells and nigella sativa oil

Authors: Heshmat Haroun, Enas Mohamed, Abd El Rahman El Shahat, Heba Labib, Mariam Atef

DOI: 10.5603/FM.a2019.0069

Article type: ORIGINAL ARTICLES

Submitted: 2019-02-21

Accepted: 2019-04-01

Published online: 2019-06-27

This article has been peer reviewed and published immediately upon acceptance. It is an open access article, which means that it can be downloaded, printed, and distributed freely, provided the work is properly cited. Articles in "Folia Morphologica" are listed in PubMed.
Adverse effects of energy drink on rat pancreas and the therapeutic role of each of bone marrow mesenchymal stem cells and nigella sativa oil

Running title: Adverse effects of energy drink on rat pancreas and therapeutic role of BMSCs and NSO

Heshmat Haroun¹, Enas Mohamed¹, Abd El Rahman El Shahat², Heba Labib¹, Mariam Atef¹

¹Anatomy Department, Faculty of Medicine, Cairo University, Egypt
²Anatomy Department, Faculty of Medicine, Port Said University, Egypt

Address for correspondence: Mariam Atef Fahim, MD, Anatomy Department, Faculty of Medicine, Cairo University, emails: dr.mariam_atef@yahoo.com; Maryam.Atef@kasralainy.edu.eg

Abstract

Background and objectives: Energy drinks have been observed to threaten public health leading to many medical problems. Bone marrow-derived mesenchymal stem cells (BMSCs) have broad prospects in tissue regeneration. Nigella Sativa (NS) possess great therapeutic properties for the treatment of a wide range of diseases.

Material and Methods: Forty adult male albino rats were divided into: control group and treated group. The treated group was further subdivided into: energy drink subgroup 2a, BMSCs-injected subgroup 2b, NS-injected subgroup 2c. Histological, immunohistochemical and biochemical assessment was performed.

Results: Administration of energy drink revealed that it adversely affected the pancreatic cytoarchitecture. BMSCs and NS have been similarly observed to significantly ameliorate the histological, biochemical and immunohistochemical changes induced by energy drink.
Conclusions: The extent of pancreatic regeneration, exerted by each of BMSCs and NSO, is nearly similar but the effect of BMSCs is more superior, however, nigella sativa could be privileged to BMSCs as a line of treatment being easily accessible and of lower cost.

Key words: energy drink, pancreas, bone marrow derived mesenchymal stem cells, nigella sativa

INTRODUCTION

Energy drinks are types of stimulants-containing beverages which are marketed to improve mental and physical performance [1]. These beverages contain large concentrations of caffeine and other additives such as taurine, creatine, herbal supplements, sugar and gurana [2]. The adverse reactions and toxicity of energy drinks stem primarily from their caffeine content [3]. Energy drinks have been mentioned to have negative impact on different body organs [4] including hepatotoxicity [5], derangement of secretory glands [6], nephrotoxicity [7], haematopoietic disorders [8], overweight / obesity risk and type II diabetes mellitus [9]. However, reviewing the literature has displayed few studies on the effects of these drinks on the pancreas.

Mesenchymal stem cells (MSCs) are multipotent undifferentiated stromal cells that are capable of self-renewal and multidirectional differentiation [10]. Administration of stem cells can regulate the activity of native stem cells and modify the inhibitory regenerative environment through secretion of soluble trophic factors that can exert potent paracrine effects on other cell types [11].

Nigella Sativa (NS) is an annual herb belonging to the plant family Ranunculaceae [12]. Studies have shown that NS seeds possess great therapeutic properties as an antidiabetic [13], anti-apoptotic [14] and antioxidant agent [15].

Thus, this study was designed to detect the adverse changes that occur in both exocrine and endocrine parts of pancreas of rat and to determine the possible therapeutic role of each of bone marrow mesenchymal stem cells (BMSCs) and Nigella sativa oil (NSO).

MATERIALS AND METHODS

Chemicals
Energy drink which is known in the Egyptian market by the name Red Bull [Red Bull GmbH, 5330 Fuschl am See, Austria]. It is available in the form of cans of 250ml. Each 100 ml of the drink contains a mixture of water, sucrose, glucose, sodium citrate, citric acid, carbon dioxide, taurine (0.4%), caffeine (0.03%), inositol (0.02%), niacin (8mg), pantothenic acid (2mg), vitamin B6 (2mg), B12 (0.002mg), riboflavin, caramel, natural and artificial flavoring and coloring agents. It was used in this study in a dose 10 mg/kg/day (equivalent to 5ml) by gastric tube [2].

Fluorescent labeled BMSCs were obtained from Biochemistry Department, Faculty of Medicine, Cairo University. Each rat was given single injection in the tail vein at a concentration of one million units /ml [16]. NS oil was purchased in the form of a bottle of 30 ml (Cap Pharma Company, Egypt) given by intraperitoneal injection at a dose of 0.2 ml/kg [17].

**Flow cytometry for bone marrow derived mesenchymal stem cells**

The isolated cells were washed and re-suspended in PBS. Cells were incubated with fluorescein isothiocyanate-conjugated mouse monoclonal antibodies against rat CD90 (Becton Dickinson, Franklin Lakes, NJ), fluorescein isothiocyanate-conjugated hamster anti-rat CD29 monoclonal antibody (Becton Dickinson), phycoerythrin-conjugated mouse monoclonal antibodies against rat CD34 (Santa Cruz Biotechnology, Santa Cruz, CA), and were characterized as MSCs by fluorescence-activated cell sorting (FACSCaliber; Becton Dickinson). Isotype-identical antibodies served as controls.

**Animals**

This experimental study was approved by Cairo University Institutional Animal Care and Use Committee (CU- IACUC). Forty adult male albino (Sprague Dawley) rats, aged three to five months and weighing 150-200 grams were obtained from the Animal House, Faculty of Medicine, Cairo University. They were housed under standard laboratory and environmental conditions. The rats were divided into two main groups: Group1 (control group n=10) and Group 2 (treated group n=30). Control group rats were kept on normal diet and water and received no medication. Group 2 (treated group) in this group rats received energy drink for four weeks and they were further divided into three subgroups: **Subgroup 2a (energy drink):** Rats were
sacrificed four weeks after ingestion of energy drink at a dose of 10 mg/kg/day (equivalent to 5ml) by gastric tube [2].

**Subgroup 2b (BMSCs):** Energy drink-administered rats were further injected, into the tail vein, with single injection of fluorescent labelled BMSCs at a concentration of one million units /ml. The rats were sacrificed four weeks following this injection [16]. **Subgroup 2c (NSO):** Energy drink-administered rats were intraperitoneally injected with nigella sativa oil (NSO) at a dose of 0.2 ml/kg for six days a week for four weeks [17]. Rats were sacrificed six hours after the last meal by cervical dislocation. A midline ventral abdominal incision was performed and the pancreas was dissected. The splenic part of the pancreas was chosen in all rats [18].

**Histological study**

The pancreatic tissue was fixed in 10% formalin overnight and processed for paraffin blocks and then serial sections of 5 μm thick were obtained. Sections were subjected to hematoxylin and eosin and Masson’s trichrome staining. Unstained sections were used to detect fluorescent labelled BMSCs under the fluorescent microscope (Leica-Germany) at a magnification of x100 to detect the PKH26-labelled cells. PKH26 is the cell linker dye of choice for in vitro and in vivo cell tracking studies.

**Biochemical study**

Blood samples were collected through retro-orbital puncture, six hours after the last meal. After centrifugation, serum was collected and kept at -80°C. Serum insulin was determined by enzyme linked immunosorbent assay (ELISA) method, serum glucose level was determined using an oxidase-peroxidase system supplied as kits by “Diamond Diagnostics, Egypt”. The serum level of tumor necrosis factor-α (TNF-α) was measured using ELISA kits supplied by “My Biosource-USA”. Serum level of nitric oxide (NO) was measured using nitric oxide assay kit for quantitative determination of nitrite and nitrate supplied by “Biodiagnostics, Egypt” according to the manufacturer’s instructions. Levels of malondialdehyde (MDA), reduced glutathione (GSH) and superoxide dismutase (SOD) were measured in pancreatic tissue homogenate as previously described [19] using kits supplied by “Biodiagnostics, Egypt” according to the manufacturer’s instructions.
**Immuno-histochemistochemical study**

Immuno-histochemistry was carried out using the peroxidase-labeled Streptavidine-Biotin Technique [20]. The sections were blocked with 1.5% normal goat serum in PBS. Anti-caspase-3 rabbit monoclonal antibody (Abcam, Cairo, Egypt, Catalog No. ab184787 at a dilution 1/1000) was used for detection of apoptosis (active) [21]. Anti-proliferating cell nuclear antigen (PCNA) rabbit monoclonal antibody (Abcam, Cairo, Egypt, Catalog No. ab92552 at a dilution 1/1000) was used for detection of proliferating cells. Slides were rinsed well in PBS and then incubated with biotinylated secondary antibody. Substrate chromagen (DAB) mixture was applied then rinsed well. Slides were counterstained with hematoxylin, dehydrated and mounted [22].

**Histomorphometric assessment**

Quantitative data were obtained using "Leica Qwin 500 C" image analyzer computer system Ltd. (Cambridge, England). At magnification of 400, ten non overlapping fields from ten slides of each animal in the different groups were randomly chosen for assessment of the area percentage for collagen in Masson’s trichrome sections, the area percentage of caspase-3 immuno-expression and the number of PCNA-positive nuclei in both pancreatic acinar and islets cells.

**Statistical analysis**

Numerical data of the histomorphometric measurements and the biochemical levels were analyzed using Statistical Package for Social Science (SPSS) version 21 using one-way analysis of variance (ANOVA) followed by Bonferroni pairwise comparisons. Results were presented as mean ± standard deviation (SD). Significance was considered when the p-value was ≤ 0.05.

**RESULTS**

I-Light microscopic results

Hematoxylin and eosin stained sections
The energy drink-administered rats (subgroup 2a), the pancreatic acini as well as the islets of Langerhans were distorted with loss of the normal structural pattern. In BMSCs-injected rats (subgroup 2b), there was a restoration of the acinar and islet cytoarchitecture. In NSO-injected rats (subgroup 2c), the pancreatic acini and islets of Langerhans showed regaining of their normal structure. However, some vacuolated islet cells were noticed with areas of wide intercellular spaces (Fig.1 A,B,C,D).

Masson’s trichrome stained sections

Energy drink-administered rats have shown a significant increase in the pancreatic mean area percentage of collagen fibers. There was a significant decrease in the mean area percentage of collagen fibers in each of subgroup 2b and subgroup 2c when compared to subgroup 2a. However, there was an insignificant difference on comparing subgroup 2b with subgroup 2c (Fig.1.E,F,G,H ; Fig.2A)

Caspas-3 immuno-expression sections

Subgroup 2a showed a significant increase in the mean area percentage of caspase-3 immuno-expression in both the exocrine and the endocrine parts. However, each of subgroup 2b and subgroup 2c displayed significant decrease in the area percentage of caspase-3 immuno-expression in both pancreatic parts when compared to subgroup 2a. The mean area percentage of caspase-3 immuno-expression in the pancreatic acinar cells versus that of the islet cells displayed a significant decrease in all of the control group and subgroups 2a, 2b and 2c (Fig.1.I,J,K,L; Fig.2 B,C).

PCNA-immunostained sections

The mean number of PCNA-positive nuclei in the pancreatic acinar and islet cells was significantly increased in the energy drink-administered rats when compared to each of the control group and the subgroups 2b and 2c. There was a significant decrease in these values in subgroup 2b when compared to subgroup 2c. The number of PCNA-positive nuclei of pancreatic acinar cells versus that of the islet cells showed a significant increase in all the studied groups. (Fig.1 M, N, O, P; Fig.2 D, E).
III- Biochemical assay results

Effect on serum insulin and glucose levels (Fig.2 F, G).

Energy drink administered rats (subgroup 2a) showed a significant decrease in serum insulin level with a significant increase in serum glucose level when compared to the control group. However, subgroup 2b displayed a significant increase in serum insulin level when compared to subgroup 2a and insignificant difference when compared to control group as well as a significant decrease in serum glucose level when compared to subgroup 2a. However, subgroup 2c showed an insignificant increase in serum insulin level and a significant decrease in serum glucose level as compared to subgroup 2a. On comparing subgroup 2b with subgroup 2c, there was an insignificant increase in serum level of insulin and a significant decrease in serum glucose level.

Effect on serum levels of TNF-α and NO (Fig.2 H, I).

Subgroup 2a showed a significant increase in serum levels of TNF-α and NO as compared to control group. In subgroup 2b and subgroup 2c, there was a significant decrease in both values in each subgroup as compared to subgroup 2a.

Effect on pancreatic tissue levels of MDA, GSH and SOD (Fig.2 J, K, L).

Subgroup 2a displayed a significant increase in MDA level and a significant decrease in GSH and SOD levels as compared to control group. Each of subgroup 2b and subgroup 2c showed a significant decrease in MDA level and a significant increase in GSH and SOD levels. Insignificant differences were detected on comparing subgroup 2b with subgroup 2c regarding these parameters.

DISCUSSION

Increased consumption of energy drinks among adolescents and young adults has raised attention [23]. In the present study, histological examination of pancreas of rats ingesting energy drink revealed marked distortion of the pancreatic cytoarchitecture with pyknotic nuclei and cytoplasmic vacuolations. Those findings are similar to those reported by [21] in rat pancreas. Manifestations of acute pancreatitis in patients ingesting energy drinks have also been reported [24, 25]. These findings were attributed to the high caffeine-content of these drinks and the
interaction between it and taurine as an ingredient in the energy drinks [21, 26]. The cytoplasmic vacuolations of injured cells, observed in the present work, could be explained by fatty degeneration of the affected cells [6]. The addition of sodium benzoate, as a preservative could also be the cause of those nuclear changes [6].

The BMSCs-injected rats, has revealed restoration of pancreatic cytoarchitecture. This therapeutic effect could be attributed to the differentiation ability and immunoregulatory functions of BMSCs [27, 28]. In the present work, fluorescent labelled-BMSCs homing was identified in the pancreatic lobules and in the interlobular spaces. This is similar to previous observation [29].

The NS-injected rats have demonstrated obvious islet and acinar improvement. These findings are consistent with previous findings [29, 30]. The protective effect of NS could be attributed to its role in reduction of inflammatory cytokines and lipid peroxidation [31, 32]. The increased area percentage of collagen fibers in the energy drink-treated group could be attributed to the toxic effect of caffeine [6]. The ameliorating effect of BMSCs on fibrosis runs in accordance to the previous reports which related it to inhibition of tissue stellate cells activity [33, 34, 35, 36]. The potent anti-fibrotic effect of NS has been previously attributed to downregulation of mRNA expression of fibrosis-related genes [37, 38]. The increase in immunoreactivity of caspase-3 with energy drink could be attributed to the effect of the high caffeine content of energy drink on oxidative stress-induced apoptosis [21]. The BMSCs- and NSO-injected subgroups have showed significant decrease in caspase-3 immuno-expression. Decreased apoptosis in response to BMSCs therapy in different tissues has been reported [39, 40]. The literature is deficient in observations comparing the anti-apoptotic effect of BMSCs and NSO on pancreas of animals.

In the present work, there is a significant increase in the area percentage of caspase-3 immuno-expression in the cytoplasm of islets cells as compared to that in the cytoplasm of the pancreatic acini, in all investigated subgroups. This endocrine versus exocrine difference in mean caspase-3 immuno-expression could be explained by the fact that the pancreatic islet cells are more vulnerable for apoptosis than the exocrine cells [41] and that the pancreatic β-cells possess diminished content of antioxidant enzymes than other tissues [42].
The regenerative effect of MSCs is reported to be due to either reduction of inflammation in situ or paracrine action. On the other hand, the diminished rate of proliferation observed with NS is attributed to the antioxidant activity of NS [43,44].

The mean number of PCNA-positive cells in the exocrine part of pancreas of different rat subgroups has been significantly higher than in the endocrine part of the pancreas. The apoptotic β-cells release chemokines that stimulate pancreatic duct gland; the latter was considered as a pancreatic stem cell niche that results in increased proliferation in response to pancreatic inflammation [45].

The energy drink-induced hyperglycemia noticed in the current study is attributed to the synergistic action of glucose and caffeine [21, 46]. The caffeine content of energy drink leads to decreased tissue sensitivity to insulin and increased secretion of stress hormones [47]. In current BMSCs-injected rats, the serum glucose is significantly decreased whereas the serum insulin is significantly increased. These findings confirm previous studies [29, 48, 49]. The decreased serum glucose level in NSO-injected rats confirms previous findings [32]. NS extract resulted in direct stimulation of isolated pancreatic islets and release of insulin [50].

In the current investigation, the energy drink has caused significant increase in the serum level of TNF-α. This finding is in agreement with previous reports [21, 26]. The decrease in serum TNF-α level in the BMSCs- and NSO-injected subgroups could be attributed to the immunomodulatory effect of BMSCs [28, 51]. The current decreasing effect of NSO on the serum level of TNF-α is concordant with previous findings [52, 53].

In the current work, there is a significant increase in the serum level of NO in with energy drink. This could be attributed to the effect of energy drink on activation of iNOS and increase in NO concentration [21, 26]. The BMSCs- and NSO-injected subgroups have shown increase in the serum level of NO. Similar findings have been previously [51, 53, 54].

Tissue level of MDA, GSH and SOD levels have been significantly increased in energy drink-administered rats in comparison to control rats and significantly decreased in BMSCs- and NSO-injected of rats in comparison to energy drink-administered rats. This anti-oxidant effect explains the ability of MSCs and NSO to repair the injured pancreatic tissue in the current study.

CONCLUSIONS
Chronic ingestion of energy drink has been observed to have a negative impact on the integrity of exocrine and endocrine portions of rat pancreas. Islets of Langerhans are more adversely affected by energy drinks than the pancreatic acini. The extent of pancreatic regeneration, exerted by each of BMSCs and NSO, is nearly similar but the effect of BMSCs is more superior.

The authors declare that there is no conflict of interest.
There is no source of funding
Informed consent was obtained from all individual participants included in the study.
All applicable international, national, and/or institutional guidelines for the care and use of animals were followed.

References


FIGURES LEGEND

Figure 1. A- Hematoxylin and eosin stained section of A- control group showing islet of Langerhans with oval, darkly-stained nuclei and pancreatic acini with apical acidophilia, B- subgroup 2a showing lost architecture of islet cells, pyknosis, wide intercellular spaces, vacuolations and massive inflammatory cell infiltrate C- subgroup 2b showing relatively normal cytoarchitecture of the pancreatic acini and islets. D- subgroup 2c showing some areas of wide intercellular spaces (asterisks). Masson’s trichrome stained section of E- control group F- subgroup 2a showing extensive collagen deposition around the pancreatic acini ,the interlobular duct and blood vessels. G- subgroup 2b showing a moderate amount of collagen H- subgroup 2c showing considerable amount of collagen between the acini as well as around the interlobular ducts and the blood vessels. Caspase-3 immuno-expression in I- control group J- subgroup 2a showing strong caspase-3 immuno-expression in the islets and surrounding acinar cells. K- subgroup 2b showing weak caspase-3 immuno-expression, L- subgroup 2c showing weak caspase-3 immuno-expression in the cytoplasm of the acinar and islet cells. PCNA-immunoreactivity in M- control group, N- subgroup 2a showing strong PCNA-positive immunoreactivity, O- subgroup 2b showing PCNA- positive nuclei immunoreactivity (arrows) in the pancreatic acini, the islet of Langerhans and the intralobular duct, P- subgroup 2c showing PCNA-positive nuclei immunoreactivity (arrows) in the cells of islet of Langerhans and in the
surrounding pancreatic acinar cells. (IL: islet of Langerhans, Ac: Acinar cells, D: duct, BV: blood vessels)

**Figure 2.** Mean values of A- area percentage of collagen, B- area percentage of caspase-3 immuno-expression of the pancreatic acinar cells, C- area percentage of caspase-3 immuno-expression in islets of Langerhans, D- number of PCNA-positive nuclei in the acinar cells, E- number of PCNA-positive nuclei in the islets of Langerhans, F- serum insulin level, G- serum glucose level, H- serum level of tumor necrosis factor alpha (TNF-α) I- serum level of nitric oxide (NO), J- malondialdehyde (MDA) level, K- reduced glutathione (GSH) level, L- superoxide dismutase (SOD) level. ( *: statistically significant compared to control group, #: statistically significant compared to subgroup 2a, &: statistically significant compared to subgroup 2b, @ and +: statistically significant compared to subgroup 2c).