



Rat Model of DOCA-Salt-Induced Hypertension

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Nitric oxide (NO) is the most powerful vasodilator. Caveolin has been documented to inhibit eNOS and decrease the activity of NO. Hypertension is associated with an impaired endothelial function that includes reduced production and/or NO release. Caveolin directly binds to eNOS, thereby regulating the NO production. Daidzein- A caveolin inhibitor by decrease caveolin activity, increase eNOS and NO production. In present study we focused on NO pathway to further

various stimuli such as VEGF and shear stress, eNOS binds to HSP90 which facilitates calmodulin-induced displacement of caveolin-1 from eNOS (Gratton et al., 2000). However, the interrelationship of caveolin-1 and eNOS is a dynamic one. For example, caveolin-1 is crucial for agonist-induced eNOS activation. Thus, the aim of this study was to demonstrate daidzein a caveolin inhibitor may have beneficial actions on NO activity and perhaps have the potential to selectively improve hypertension and its associated vascular complications.

Materials and Method

Experimental animals

Wistar albino rats weighing 125–175 g (8–10 week old) purchased from animal house, I.S.F College of Pharmacy, Moga, Punjab, were employed in the present study. They were housed in an air-conditioned room and were kept in standard laboratory conditions under natural light and dark cycles (approximately 14 h light/10 h dark) and humidity $60 \pm 5\%$ and temperature of $25 \pm 3^\circ\text{C}$ in the departmental animal house.

The animals were allowed free access of standard diet (24% protein, 5% fat, 4% fiber, 55% carbohydrates, 0.6% calcium, 0.4% phosphorus, 7% moisture and 4% ash w/w) and tap water ad libitum and allowed to acclimatize for 2 weeks before starting the experiments. The experimental protocol was approved by the Institutional Animal Ethics (IAEC) and conformed to the Indian National Science Academy (INSA) Guidelines for the use and care of experimental animals in research.

Drugs and chemicals

Daidzein was purchased from Medchem Express LLC chemicals and DOCA from Sigma-Aldrich. Other chemicals and biochemical reagents of analytical grade were used freshly.

DOCA- salt induced hypertension

DOCA- Salt-induced hypertension is due to the sodium-retaining properties of the steroid causing increases in plasma and extracellular volume. The hypertensive effect is increased by salt loading and unilateral nephrectomy in rats. Wistar Albino rat (125-175g) were anesthetized with Ketamine (70 mg/kg, i.p.) and xylazine (5mg/kg, i.p.) through a flank incision, the left kidney was removed. The rats were injected twice weekly with 40 mg/kg, s.c. deoxycorticosterone-acetate in olive oil for 6 weeks. Drinking water is replaced with a 1% NaCl solution. Blood pressure starts to rise after one week and reaches Mean arterial blood pressure value between 160 and 190 mm Hg after 6 Week.

Experimental protocol: (Each group n=6)

Group I Normal control: Rats were maintained on normal chow diet with drinking water.

Group II Hypertensive control: Rats were uninephrectomized and DOCA Salt was administered twice weekly for 6 weeks and drinking water replaced with 1% NaCl solution.

Group III Hypertensive rats were treated with Daidzein (0.2mg/kg/day, s.c) for the 1st week started from the 5th week of DOCA Salt administration.

Group IV Hypertensive rats were treated with Daidzein (0.4mg/kg/day, s.c) for 1st week started from the 5th week of DOCA Salt administration.

Group V Hypertensive rats were treated with Lisinopril (1mg/kg/day, p.o) for the 1st week started from the 5th week of DOCA Salt administration.

Assessment of Hypertension

Assessment of mean arterial blood pressure

The rat blood pressure was measured by Tail cuff method (NIBP-BIOPACK MP 100, USA). Rat tail was heated with the exact time of 3 minutes after that tail was inserted into the cuff, the pressure was applied with cuff pressure of 250 mmHg and mean arterial blood pressure was recorded by Data Acquisition System (BIOPAC).

Assessment of oxidative stress

Reduced glutathione (GSH)

To measure reduced glutathione level, aortic tissue homogenate (in 0.1 M phosphate buffer pH 7.4) was taken. The procedure was followed initially as described by Ellman, 1959. The homogenate was added with an equal volume of 20% trichloroacetic acid (TCA) containing 1mm EDTA to precipitate the tissue proteins. The mixture was followed to stand for 5 min prior to centrifugation for 10 min at 200 rpm. The supernatant (200µl) was then transferred to a new set of the test tube and added 1.8 ml of the Ellman reagent (5,5'-dithio bis-2-nitrobenzoic acid) (0.1mm) was prepared in 0.3M phosphate buffer with 1% of sodium citrate solution. Volume was made up to 2ml of all the test tubes. After the completion of the total reaction, the solution was measured at 412 nm against blank. Absorbance values were compared with a standard curve generated from a standard curve from known GSH. The level of GSH was expressed as µmol/mg of Aortic wt [3-8].

Serum Nitrite/Nitrate level using greiss reagent

Serum nitrite/nitrate was estimated using Greiss reagent which served as an indicator of nitric oxide production. 400µl of carbonate buffer (pH 9.0) was added to 100µl of serum sample followed by addition of small amount (~0.15g) of the copper-cadmium alloy. The tubes were incubated at room temperature for 1 hour to reduce nitrate to nitrite. The reaction was stopped by adding 100µl of 0.35 M sodium hydroxide following this, 400 µl of zinc sulfate solution (120mm) was added deproteinate the serum samples, the samples were allowed to stand for 10 min and then centrifuged at 4000g for 10 min. Greiss reagent (250µl of 1.0% sulphanilamide and 250µl of 0.1% naphthylaminediazohydrochloric acid in water) was added to aliquots (500µl) of clear supernatant and serum nitrite/nitrate was measured spectrophotometrically at 545 nm. The standard curve of sodium nitrite was plotted and expressed as µmol/l [9].

Estimation of tumor necrosis factor –alpha (TNF- α) levels

TNF- α level was estimated by using rat TNF- α kit (RayBio, Rat TNF- α ELISA kit protocol) which uses a microtitre plate reader read at 450nm. Concentrations of TNF- α were calculated from the plotted standard curve.

Principle

This assay employs the quantitative sandwich enzyme immunoassay technique. An affinity polyclonal antibody specific for mouse TNF- α has been precoated onto a microplate. Standards, coded (6(2ml)0.6(ofkmm)l w

a blue product that turns yellow when the stop solution is added. The intensity of the color measured is in proportion to the amount of rat TNF- α bound in the initial step. The sample values are then read on the standard curve.

Vasoreactivity

Ach and SNP induced vasorelaxation: Isolated rat aortic ring preparation: - The rats were sacrificed by cervical dislocation, followed by decapitation. Thoracic aorta was removed, cut into a ring of 4-5mm in length and mounted in an organ bath containing Krebs-Henseleit solution (NaCl, 119Mm, KCl, 4.7mm; KH_2PO_4 , 1.2Mm and CaCl_2 , 2.5 Mm) of pH 7.4, bubbled with carbonated oxygen (95% O_2 and 5% CO_2) and maintained at 37°C. The preparation was allowed to equilibrate for 90min under 1.5g tension. The isometric contractions were recorded with a force transducer (Ft-2040) connected to a physiograph (INCO, Ambala, India) the aortic ring preparation was primed with 80mm KCL to check its functional integrity and to improve its contractility. The cumulative dose response of Ach (10^{-8} to 10^{-4} M) or sodium nitroprusside SNP (10^{-8} to 10^{-4} M) were recorded in phenylephrine (3×10^{-6} M) precontracted with intact or denuded endothelium, respectively [10].

Molecular Assays

Assessment of mRNA expression of eNOS

100 mg of aortic tissue was homogenized in 1ml of triazole reagent and incubated for 5 min at 20°C. 0.2ml of chloroform was added to the homogenate, incubated at 20°C for 3 min. the mixture was centrifuged at 10,000 g for 15 min at 4°C, the upper aqueous phase was isolated and 0.5ml isopropyl alcohol was added to precipitate RNA. The sample was centrifuged at 10,000g for 15 min at 4°C to form a gel-like pellet of RNA in the tube. The supernatant was removed, RNA pellet was washed with 75% ethanol, mixed, centrifuged at 7,500g for 5 min at 4°C and RNA pellet was briefly vacuum dried for 5-10 min. The RNA was quantified by ultraviolet absorbance spectrophotometry to ascertain A260/A280 ratio < 1.6 and dissolved in RNase-free water. The 5 μ l reverse primer was added to crude RNA, 29 μ l reverse transcriptase buffer incubated for 10 min at 65°C and cooled on ice. 16 U AMV transcriptase (10U/ μ l) and 5 μ l 10mM dNTP mixture were added, incubated at 42°C for 1hr and 10mM Tris buffer (pH- 7.5) was added to synthesized single-stranded cDNA. 5 μ l cDNA product was mixed with 4 μ l dNTP mixture, 5 μ l forward primer, backward primer, 10 X amplification buffer, 0.9 μ l of Taq DNA polymerase enzyme (3U/ μ l) and 70.1 μ l RNase free water in PCR tube and overlaid with 100 μ l mineral oil. 24 PCR cycles of GAPDH (94°C for 1 min, 62°C for 1 min, 72°C for 1 min) and 30 PCR cycles of eNOS (94°C for 1 min, 62°C for 1min, 72°C for 1 min) followed by 1 cycle at 57°C for 2 min and 72°C for 7min were performed using 1 half of the reverse transcription mixture (Biorad, MJ Mini thermal cycler), sense and antisense primers for eNOS: (5'-TCCAGAAACACAGACAGTGCA-3' and 5'-CAGGAAGTAAGTGAGAGC -3' resp.) and for GAPDH (5'-TCCCTCAAGATTGTCAGCAA -3' and 5'-AGATCCACAACGGATACATT -3' resp.) were used. The PCR products so obtained were analyzed on ethidium bromide-stained agarose (1.5%) gel on Gel electrophoresis apparatus (Biorad). The eNOS and GAPDH products were quantified using the image (Gel Doc EZ image, Biorad) and the amount of eNOS was normalized with respect to the amount of GAPDH product [11].

Statistical analysis

All values will be expressed as mean \pm S.D. The data for aortic ring preparations were statistically analyzed using repeated measures

of ANOVA followed by Newman-Keuls test. The data for aortic glutathione level, serum nitrate/nitrite level, Mean arterial blood pressure (MABP) were statistically analyzed using one-way ANOVA followed by Tukey's multiple comparison tests. The p-value < 0.05 was considered to be statistically significant.

Results

Effect of pharmacological interventions on mean arterial blood

Uninephrectomy + DOCA salt-induced hypertension for six weeks has been noted to produce vascular endothelial dysfunction. Uninephrectomy + DOCA administration increases mean arterial blood pressure (MABP) in rats after 5 weeks as compared to normal control group. Treatment with Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly decreased mean arterial blood pressure (MABP) as compared to hypertensive rats [12-14].

Effect of pharmacological interventions on serum nitrite/nitrate concentration

The serum concentration of nitrite/nitrate was noted to significantly reduced in Hypertensive control (DOCA, 40 mg/kg, s.c.) as compared to normal control. Treatment with Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly increased the serum concentration of nitrite/nitrate as compared to hypertensive control.

Effect of pharmacological interventions on reduced glutathione level in thoracic aorta

Aortic GSH concentration was noted to significantly reduce in hypertensive control after 6 weeks in comparison to normal control rats. Treatment with Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly increased the serum concentration of nitrite/nitrate as compared to hypertensive control.

Effect of Pharmacological Interventions on endothelium-dependent and independent relaxation:

- Ach and SNP in a dose-dependent manner produced endothelium-dependent and independent relaxation in phenylephrine (3×10^{-6} M) pre-contracted isolated rat aortic ring preparation. DOCA (40 mg kg⁻¹, s.c.) induced hypertension markedly attenuated Acetylcholine-induced endothelium-dependent relaxation but they did not affect SNP-induced endothelium-independent relaxation. Moreover, Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly prevented hypertension induced attenuation of Ach-induced endothelium-dependent relaxation.

Effect of pharmacological interventions on TNF levels

Administration of DOCA-Salt (40 mg/kg, s.c.) for 6 weeks caused a significant increase in TNF levels as compared to normal control rats. Treatment with Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly reduced the TNF levels as compared to hypertensive control.

Effect of pharmacological interventions on mRNA expression of eNOS

Administration of DOCA-Salt (40 mg/kg, s.c.) for 6 weeks caused a

significant significant decrease in expression ratio of eNOS/GAPDH as compared to normal control rats. Treatment with Daidzein (0.2mg/kg/day, 0.4mg/kg/day, s.c) and lisinopril for the 1st week started from the 5th week of DOCA Salt administration significantly reduced the TNF levels as compared to hypertensive control.

Discussion

The major findings of our study are that blood pressure lowering effects of Daidzein are associated with increased activation of eNOS and increased serum NO levels. Hypertension is the most common cardiovascular disorder worldwide, and oxidative stress is a major contributor to the elevation of blood pressure and its complication [1-3, 6]. Our findings, as well as previous studies, demonstrated that DOCA/HS administration in rats display many characteristics of hypertension including increased SBP, DBP, MBP, oxidative stress, and decreased serum NO levels and eNOS activation. Uninephrectomy + DOCA administration increased mean arterial blood pressure (MABP) in rats after 5 weeks as compared to normal control group [15].

Vascular endothelial dysfunction was assessed in terms of decreased serum nitrite/nitrate conc., reduced aortic glutathione levels, ACh-induced endothelium-independent vasorelaxation, and SNP-induced endothelium-independent vasorelaxation. The earlier results suggest that NO is, in fact, the most important endothelium-derived mediator

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