PATHOLOGICAL CHANGES IN LIVER, SPLEEN AND LYMPH NODES IN MICE TREATED WITH HYDATID CYST FLUID OF HUMAN ORIGIN AND ITS TOXIN FRACTIONS

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ABSTRACT
Swiss albino mice Mus musculus were injected, intraperitoneally, with hydatid cyst fluid (HCF) of human origin and its toxin fractions (TFs) at two concentrations (10 and 50 µg/ml). Obvious changes in the weight and organ index of liver, spleen and lymph nodes of the injected mice, in addition to histopathological changes, were observed. Results obtained indicate that there is a relationship between appearance of pathological lesions and changes in weight and organ index of the above mentioned organs.

INTRODUCTION
Cystic echinococcosis is a zoonotic disease of global importance, distributed in most parts of the world, especially sheep and cattle rearing countries (1). More than 70 species of ungulates, in addition to man, act as intermediate hosts (2). They gain infection through ingesting food or drink contaminated with eggs of the tapeworm.

Pathogenic tissue damage is caused by replacement of host tissues by growing cysts and, in some instances, by vascular compromise. Organ
dysfunction results mainly from gradual process of space-occupying, or
displacement of vital host tissues, vessels of organs (3). Histopathological
changes which occur due to the presence of cysts in different organs have
been studied by previous workers (e.g. 4-23). However, few studies have
focused on the histopathology of tissues in hosts infected with hydatid
disease and treated with immunomodulators of different sources. In the
course of their studies, they took the changes occur in liver and spleen of
infected hosts into consideration (24). However, as far as toxin fractions,
isolated from cyst fluid, are considered, there seems to be no studies
focused on the damage they may cause to host tissues, apart from their
effect on macrophages (25-28) and microphages (29). The present study,
therefore, deals with the damage caused by the toxin fractions, isolated
from cysts of human origin, on liver, spleen and lymph nodes of mice
injected with these toxin fractions.

MATERIALS & METHODS

Source of hydatid cysts

Hydatid cysts of human origin were obtained from surgically-
proved positive patients, directly after surgery, from different hospitals in
Mosul. Cysts were intact, not treated with any substance prior to surgery.

Isolation of cyst fluid

Protoscoleces were removed from the cysts, aseptically, according
to Smyth (30). After centrifugation at 7600 g (10000 rpm), using a
cryofuge 6-4 (Heraeus) for 10 minutes at 4°C, the supernatant (HCF) was
separated and kept in sterile containers in refrigerators at-20°C until used.

Separation of cyst fluid fractions

Cyst fluid fractions (CFFs) were separated according to Janssen et
al.(28). Ammonium sulphate was added to the cyst fluid (49.35
gm/100ml) and the fluid was left in the refrigerator at 4°C for 24 hrs to
give enough time for precipitation of protein. The fluid was centrifuged at
37000g (22150 rpm) for 30 minutes at 4°C, using the above mentioned
centrifuge. An equal volum of chloroform was added to the supernatant.
Two layers were formed after centrifugation. The chloroform layer was
separated and half volume of methanol (chloroform : methanol= 2:1,v/v)
was added and centrifuged under the same conditions, mentioned above.
The supernatant was dried by rotary evaporator. The chloroform-
methanol soluble fractions (CMSFs), or TFs, were kept in refrigerator at-
20°C until used. At use, they were dissolved in few drops of chloroform and completed by phosphate buffer saline (PBS).

Experimental design

21 parasite-free, laboratory-bred, 5-6 weeks old, swiss albino male mice of the species Mus musculus (balb/C) were used in the present study. 3 mice were used as control group (not injected), and 18 were injected, intraperitoneally, with HCF and its TFs as follows:

Experiment 1

6 male mice were injected with crude hydatid cyst fluid (HCF) at a rate of 1ml/w mouse of human origin (from liver and lung). After 32 days mice were killed and their liver, spleen and lymph nodes were removed.

Experiment 2

Same number of mice, as in experiment 1, were injected with TFs at a concentration of 10 μg/ml and also mice were killed after 32 days and their liver, spleen and lymph nodes were removed.

Experiment 3

Same number of mice, as in experiment 1 and 2, were injected with TFs at a concentration of 50 μg/ml and also mice were killed after 32 days and their liver, spleen and lymph nodes were removed.

Estimation of organ index

Organ index was estimated according to Kroeze and Tanner (31) as follows:

\[
\text{Organ index} = \frac{\text{Organ weight}}{\text{Body weight} - \text{Organ weight}} \times 1000
\]
Tissue preparation

For light microscopy, tissues (liver, spleen and lymph nodes) of mice treated with HCF and its toxin fractions were fixed in 10% neutral buffered formalin, processed routinely in alcohol and, finally, embedded in paraffin. and 4-6μm thick-sections were prepared. The sections were stained with hematoxylin-eosin (H & E) (32).

Statistical analysis

Student t-test was applied to determine the significance between the means at P < 0.05 (33)

RESULTS

Weight and organ index

Cysts of liver origin (Table 1)

The weight and organ index of liver decreased significantly in mice treated with HCF and its TFs, at both concentrations, compared with the control group. The decrease in weight was also significant in mice treated with HCF compared with those treated with TFs at 50μg/ml. However, no significant difference appeared between mice treated with TFs at 10μg/ml and 50μg/ml. The organ index decreased, non significantly, in mice treated with HCF compared with those treated with TFs, at both concentrations, and in mice treated with TFs at 10μg/ml compared with those treated with TFs at 50μg/ml.

For spleen, a non-significant increase in its weight and organ index was noticed in mice treated with HCF and TFs at 50μg/ml compared with the control group and those treated with TFs at 10μg/ml.

The weight and organ index of lymph nodes increased significantly in mice treated with HCF, compared with those treated with TFs, at both concentrations, and the control group. A non-significant decrease was observed in mice treated with TFs at 10μg/ml compared with those treated with TFs at 50μg/ml.

Cysts of lung origin (Table 2)

A significant decrease was noticed in the weight and organ index of liver in mice treated with HCF and its TFs, at both concentrations, compared with the control group. However, the decrease was not
significant between mice treated with HCF and those treated with TFs, at both concentrations, and also between the two concentrations of the TFs.

For spleen, a non-significant increase was noticed in mice treated with TFs, at both concentrations, compared with control group whereas the opposite was noticed in mice treated with HCF compared with the control group. A non-significant increase in the organ index was also noticed in mice treated with HCF and its TFs, at both concentrations, compared with the control group. The opposite was observed in mice treated with HCF compared with those treated with TFs, at both concentrations, and in mice treated with TFs at 10μg/ml compared with those treated with TFs at 50μg/ml.

A significant increase in the weight and organ index of lymph nodes was observed in mice treated with HCF and its TFs, at 10μg/ml, compared with the control group. A non-significant decrease was noticed in mice treated with TFs, at 50μg/ml, compared with those treated with TFs, at 10μg/ml, and those treated with HCF.

Histopathological changes

Liver

A high degree of fatty change, foci of coagulative necrosis with enlargement of Kupffer cells and infiltration of inflammatory cells around a central vein and the portal area when the concentration 10μg/ml of the TFs was used. The histopathological changes were more severe when TFs at 50μg/ml were used (Figs. 1 & 2). With HCF a fatty change in the cytoplasm of hepatocytes was observed with infiltration of lymphocytes in the portal area. In addition to necrotic areas (Fig. 2).

Spleen

When TFs at 10μg/ml were used, necrotic foci with depletion of lymphocytes and replacement by plasmocytes were observed in the center of splenic sinusoids with proliferation of megakaryocytes, hemosiderine pigmentation in the cytoplasm of macrophages and precipitation of a substance, eosinophilic in color, around splenic sinusoids. When the concentration 50μg/ml was used, the changes observed were more severe. With HCF the changes observed were hemosiderine pigmentation, proliferation of plasmocytes and congestion of blood vessels (Fig. 3).
Pathological Changes in Liver, Spleen ......

Lymph nodes

When TFs at 10μg/ml were used, a hemorrhage and congestion of blood vessels, proliferation of lymphocytes with thickening of the capsule and hemosiderine pigmentation were observed. At the concentration 50μg/ml, the changes observed were more severe (Fig. 4)

Table (1). Changes in weight and organ index of liver, spleen and lymph nodes in mice treated with HCF and its TFs, obtained from liver cysts of human origin.

<table>
<thead>
<tr>
<th>Organ</th>
<th>Con. μg/ml</th>
<th>Weight (gm)</th>
<th>Organ index</th>
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</thead>
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<tr>
<td>Liver</td>
<td></td>
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</tr>
<tr>
<td>C.</td>
<td>1.8487 A</td>
<td>76.3363 A</td>
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<tr>
<td>HCF</td>
<td>0.8130 C</td>
<td>42.4570 B</td>
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<tr>
<td>TF 10</td>
<td>1.0447 BC</td>
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<td>TF 50</td>
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<tr>
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<tr>
<td>HCF</td>
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<tr>
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<tr>
<td>TF 50</td>
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<tr>
<td>Lymph node</td>
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<tr>
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<tr>
<td>TF 50</td>
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</table>

C.: control group, HCF: Hydatid cyst fluid, TF: Toxin fraction
Table (2). Changes in weight and organ index of liver, spleen and lymph nodes in mice treated with HCF and its TFs, obtained from lung cysts of human origin.

<table>
<thead>
<tr>
<th>Organ</th>
<th>Con. µg/ml</th>
<th>Weight (gm)</th>
<th>Organ index</th>
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<tr>
<td>Liver</td>
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<tr>
<td>C.</td>
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Fig. (1). Section in liver of a mouse treated with TFs at 50µg/ml showing fatty changes in hepatocytes with infiltration of lymphocytes around the central vein. H & E 400X. FC: Fatty change.

Fig. (2). Section in liver of a mouse treated with TFs at 50µg/ml showing focal necrotic areas in the tissues. H & E 200X. NA: Necrotic area.
Fig. (3). Section in the spleen of a mouse treated with TFs at 50μg/ml showing precipitation of substance, eosinophilic in color, around lymphoid sinuses. H & E 400X. E: Eosinophilic

Fig. (4). Section in the lymph nodes of a mouse treated with TFs at 50μg/ml showing congestion in the blood vessels with hemorrhage and hemosiderine pigmentation. H & E 400X. H: Hemorrhage. HP: Hemosiderine pigmentation. V: Vaculation
DISCUSSION

The present study was conducted to demonstrate the histopathological changes along with the changes in the weight and organ index of liver, spleen and lymph nodes which may occur in mice treated with TFs and HCF isolated from hydatid cysts of human origin, obtained from liver and lung of infected hosts, at two concentrations (10 and 50μg/ml).

The results obtained demonstrate that there is an obvious relationship between appearance of pathological lesions and changes in weight and organ index of liver, spleen and lymph nodes. This result is in agreement with those of Al-Kennany et al. (24) and Salih et al. (36) on hydatid cysts of sheep and cattle origin, respectively. The appearance of necrotic lesions along with infiltration of lymphocytes is an indication of inflammatory response due to the fractions which seem to have stimulated the reticuloendothelial system through stimulation of lymphocytes to divide. The fatty changes occurred ensures the increase in the amount of lipid which may refer to the lipid nature of the TFs, as has been demonstrated previously (34). This, in turn, helped in the precipitation of lipid exceeding, quantitatively, the need of the cell in the cytoplasm, leading to a deficiency in the oxygen required for liberation of energy. This seems to have played a role in the necrosis occurred in the liver tissues (Figs 1 & 2). The hemosiderine pigmentation indicates the lysis of the red blood cells, liberating the hemoglobin. The protein part of this substance finally changes to hemosiderine which is engulfed the macrophages.

The precipitation of a substance, eosinophilic in color, around the splenic sinusoids, causing damage to these sinusoids, may refer to the amyloides. These amyloides may be a result of the ability of TFs to stimulate the immune cells, including the plasma cells, to divide and liberate more antibodies leading to antibody-antigen reaction (35) and their precipitation in the areolar tissue around the sinusoids (Fig. 3). When compared with the results obtained from TFs of sheep (24) and cattle (36) origin, the present results supports the previous findings that TFs of different host origin differ in their effect on the same host tissues (25). However, this needs further investigation.

Finally, the appearance of lesions in the lymph nodes is an evidence of acute lymphadenitis (37) which is an inflammatory response to the TFs due to the known role played by lymph nodes in the elimination of these fractions.
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REFERENCES