

大豆水提物对四氯化碳诱导的肝损伤小鼠肝脏抗氧化活力的影响

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摘要:为研究大豆水提物(SWEs)对四氯化碳(CCl_4)所致急性肝损伤小鼠的保护作用以及对肝脏抗氧化活力的影响。将60只试验小鼠随机分为正常对照组、模型组、SWEs低($50\text{ mg}\cdot\text{kg}^{-1}$)、中($100\text{ mg}\cdot\text{kg}^{-1}$)、高($150\text{ mg}\cdot\text{kg}^{-1}$)剂量组及阳性对照组(联苯双脂, $100\text{ mg}\cdot\text{kg}^{-1}$)。每天灌胃给药1次,连续7 d。末次给药1 h后,除正常对照组外的其余5组采用10% CCl_4 2.0 $\text{mL}\cdot\text{kg}^{-1}$ 剂量一次性腹腔注射,建立小鼠急性肝损伤模型。6 h后摘眼球取血及肝脏,计算各组小鼠的肝指数,比色法测定血清谷丙转氨酶(ALT)和谷草转氨酶(AST)活性,及总胆红素(TBIL)和白蛋白(ALB)水平,检测肝组织中丙二醛(MDA)和还原型谷胱甘肽(GSH)水平及一氧化氮合酶(NOS)活性。结果表明:模型组小鼠肝重和肝指数、血清ALT和AST活性及TBIL水平、肝组织MDA水平及NOS活性均显著高于对照组;而血清ALB及肝组织GSH水平显著低于对照组。与模型组相比,中、高剂量的SWEs及联苯双脂显著降低 CCl_4 所致急性肝损伤小鼠的肝重和肝指数、血清ALT和AST活性及TBIL水平、肝组织NOS活性和MDA水平,并显著提高血清ALB及肝组织GSH水平。大豆水提物对 CCl_4 所致小鼠急性肝损伤具有保护作用,其机制可能与抗氧化作用有关。

关键词:大豆水提物; 肝损伤; 抗氧化; 联苯双脂

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Antioxidant Effect of Soybean Water Extracts (SWEs) on Acute Liver Injury induced by CCl_4 in Mice

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Abstract: To explore the protective effects of soybean water extracts (SWEs) on acute liver damage induced by carbon tetrachloride (CCl_4) in mice. Sixty mice were randomly divided into control group, model group and SWEs groups at dose of 50, 100 and $150\text{ mg}\cdot\text{kg}^{-1}$, and positive control group (bifendate, $100\text{ mg}\cdot\text{kg}^{-1}$). All the mice were intragastrically administrated the corresponding agents respectively once a day for 7 days. One hour after the administration, 10% CCl_4 2.0 $\text{mL}\cdot\text{kg}^{-1}$ was given to mice in all groups except the control group, with a single intraperitoneal injection to establish the acute liver injury mouse model. Six hours later, mice were sacrificed, and the liver index, alanine aminotransferase (ALT) and aspartate aminotransferase (AST) activities, total bilirubin (TBIL) and albumin (ALB) level in serum were detected; the malondialdehyde (MDA) and glutathione (GSH) levels, and nitric oxide synthase (NOS) activity in liver tissue were also analyzed. Results indicated that CCl_4 significantly increased the liver weight, liver index, and levels of ALT, AST and TBIL in serum, MDA and NOS in liver tissue; while levels of ALB in serum and GSH in liver tissue were remarkably reduced in model group compared with normal group. Compared with model group, 100 and $150\text{ mg}\cdot\text{kg}^{-1}$ SWEs and bifendate notably decreased liver weight and index, levels of ALT, AST and TBIL in serum, NOS activity and MDA level in liver tissue in acute liver injury mice induced by CCl_4 treatment; Meanwhile significantly increased levels of ALB in serum and GSH in liver tissue. As a conclusion, SWEs has a significant protective effect on CCl_4 -induced liver injury mice, which might be related to the anti-oxidant function.

Keywords: Soybean water extracts (SWEs); Liver injury; Antioxidant; Bifendate

随着人们生活水平的提高和工作节奏的加快,肝病发病率呈逐年上升趋势。病毒性肝炎、酒精或药物引起的肝损伤、肝纤维化及自身免疫性肝炎等在全世界范围内威胁着人类健康^[1]。各型肝病的病理学基础是肝细胞损伤,治疗肝细胞损伤是各型肝病治疗的主要措施之一。大量研究表明,植物药在抗肝细胞损伤及纤维化治疗中具有良好的效果和优势,这与其抗氧化和自由基活性有关。大豆为

药膳两用植物,富含大豆异黄酮和皂苷等活性成分,具有提高机体免疫力、抗氧化、抗癌及防治心血管疾病等药理功效^[2-3]。近年来的研究还表明,大豆有效成分对肝脏脂质过氧化损伤具有抑制作用,对多种损伤因素引起的肝损伤及肝纤维化具有保护作用^[4-6]。本试验利用四氯化碳(CCl_4)所致小鼠肝损伤模型,探讨大豆水提物的抗肝脏氧化应激作用,以期为大豆在肝病防治中的应用提供科学依据。

1 材料与方法

1.1 材料

1.1.1 试验动物 供试动物为 60 只清洁级健康雄性昆明小鼠(20 ± 2) g, 购自南京青龙山动物中心, 饲养在温度为(24 ± 2)℃, 12 h 光照/12 h 黑暗的室内, 常规饲料, 自由饮水进食, 适应 5 d 后用于试验。

1.1.2 主要试剂 谷丙转氨酶(ALT)、谷草转氨酶(AST)、白蛋白(ALB)、丙二醛(malondialdehyde, MDA)、还原型谷胱甘肽(GSH)、一氧化氮合酶(NOS)及蛋白质测试盒, 均购自南京建成生物工程研究所; 联苯双酯购于南京市鼓楼医院, 由北京协和制药厂生产, 批号为 H11020980, 其它试剂均为国产分析纯。

1.2 方法

1.2.1 大豆水提物制备 试验用大豆(苏豆 4 号)由江苏省农业科学院提供。取 50 g 大豆样品, 用二蒸水 500 mL 浸泡 1 h, 在 90~95℃ 下回流提取 1 h, 冷却后抽滤。重复提取 3 次, 合并滤液后用旋转蒸发仪蒸干, 得浸膏 8.95 g。

1.2.2 动物分组及处理 60 只昆明小鼠随机分为 6 组, 分别为正常对照组、模型组、SWEs(低, 中, 高剂量)组和联苯双酯组。SWEs 低, 中, 高剂量组小鼠分别给予 SWEs 50, 100, 150 mg·kg⁻¹ 灌胃; 阳性对照组小鼠给予联苯双酯 100 mg·kg⁻¹ 灌胃; 正常对照组和模型组均给予同体积蒸馏水灌胃, 每日 1 次, 连续 7 d, 末次给药 1 h 后, 模型组及各给药组小鼠腹腔注射 10% CCl₄ 2.0 mg·kg⁻¹, 正常对照组小鼠腹腔注射同体积橄榄油, 禁食不禁水。所有程序

遵循中国小动物保护协会的要求。

1.2.3 测定项目及方法 上述小鼠造模 6 h 后摘眼球取血, 离心(10 000 g, 10 min), 取上层血清, -70℃ 冰箱冻存备用。断颈髓处死小鼠后迅速破腹取出肝脏, 放冷生理盐水中洗净, 用滤纸吸干后称重, 计算肝指数(肝指数 = 肝重/体重 × 100%)。取肝组织 100 mg 加入 9 倍量的生理盐水, 冰浴匀浆后离心(4℃, 12 000 g, 20 min), 取上清液, 4℃ 冰箱保存, 按试剂盒说明书方法分别测定血清 ALT, AST, TBIL 及肝组织 MDA, GSH 及 NOS 水平。

1.3 数据分析

小鼠体重、肝重、肝指数、血清 ALT, AST 和 TBIL 水平、肝组织 MDA、GSH 水平及 NOS 活力等所有实验结果以“均值 ± 标准差”($\bar{x} \pm s$) 表示($n = 10$), 采用 SPSS 13.0 进行单因素方差分析, 两组均数间差异采用 *t* 检验, $P < 0.05$ 认为差异具有统计学意义。

2 结果与分析

2.1 大豆水提物对急性肝损伤小鼠体重与肝指数的影响

表 1 表明, SWEs 及联苯双酯对急性肝损伤小鼠体重无显著性影响。模型组小鼠肝重及肝指数都显著高于对照组($P < 0.01$); 与模型组相比, 100 和 150 mg·kg⁻¹ SWEs 及联苯双酯显著降低急性肝损伤小鼠的肝重和肝指数(100 mg·kg⁻¹ SWEs, $P < 0.05$; 150 mg·kg⁻¹ SWEs, $P < 0.01$; 联苯双酯, $P < 0.05$)。而 50 mg·kg⁻¹ SWEs 对急性肝损伤小鼠的肝重和肝指数无显著性影响。

表 1 大豆水提物对急性肝损伤小鼠体重与肝指数的影响

Table 1 Effect of SWEs on body weight and liver weight indexes in mice with liver injury

组别 Group	剂量 Dose /mg·kg ⁻¹	体重 Body weight /g	肝重 Liver weight /g	肝指数 Liver index /%
对照 Control	-	28.63 ± 2.01	1.31 ± 0.12	4.58 ± 0.31
模型 Model	-	28.01 ± 1.34	1.64 ± 0.15 **	5.86 ± 0.33 **
大豆水提物	50	27.25 ± 1.22	1.59 ± 0.14	5.83 ± 0.29
SWEs	100	26.98 ± 1.57	1.41 ± 0.11 *	5.22 ± 0.27 *
	150	27.43 ± 1.76	1.34 ± 0.12 **	4.89 ± 0.36 **
联苯双脂 Bifendate	100	27.55 ± 1.14	1.41 ± 0.13 *	5.12 ± 0.31 *

相对于对照组, ** $P < 0.01$; 相对于模型组, ** $P < 0.01$, * $P < 0.05$.

** $P < 0.01$ as compared to the control group. ** $P < 0.01$ and * $P < 0.05$ as compared to the model group.

2.2 大豆水提物对急性肝损伤小鼠血清 ALT、AST 活性和 ALB、TBIL 水平的影响

表 2 表明, 与对照组相比, 模型组小鼠血清 ALT、AST 活力及 TBIL 含量显著升高($ALT, P <$

0.001; AST, $P < 0.01$; TBIL, $P < 0.01$), ALB 含量显著减少($P < 0.05$)。与模型组相比, 50 mg·kg⁻¹ SWEs 对急性肝损伤小鼠血清 ALT、AST 活性和 ALB、TBIL 水平无显著影响; 而 100 和 150 mg·kg⁻¹

SWEs 及联苯双酯显著降低急性肝损伤小鼠血清 ALT、AST 活性和 TBIL 水平 ($P < 0.05$)，显著升高

血清 ALB 含量 ($P < 0.05$)。表明 SWEs 对 CCl₄ 所致小鼠急性肝损伤具有保护作用。

表 2 大豆水提物对急性肝损伤小鼠血清 ALT、AST、ALB 和 TBIL 水平的影响

Table 2 Effect of SWEs on ALT, AST, ALB and TBIL levels of serum in mice with liver injury

组别 Group	剂量 Dose/mg·kg ⁻¹	ALT /U·L ⁻¹	AST /U·L ⁻¹	ALB /g·L ⁻¹	BIL /μmol·L ⁻¹
对照 Normal	-	67.21 ± 11.02	81.26 ± 11.89	37.21 ± 3.01	130.09 ± 11.23
模型 Model	-	211.12 ± 29.43 **	172.45 ± 17.76 **	25.09 ± 2.89 *	289.31 ± 78.12 **
大豆水提物	50	200.01 ± 17.09	170.09 ± 13.34	26.78 ± 2.13	279.54 ± 67.32
SWEs	100	163.55 ± 15.31 *	101.87 ± 10.22 *	35.97 ± 3.45 *	180.22 ± 19.67 *
	150	157.76 ± 20.13 *	112.34 ± 11.05 *	35.42 ± 2.97 *	167.44 ± 20.52 *
联苯双脂 Bifendate	100	159.32 ± 22.56 *	95.73 ± 10.11 **	36.88 ± 2.34 *	166.78 ± 21.22 *

相对于对照组, *** $P < 0.001$, ** $P < 0.01$, * $P < 0.05$; 相对于模型组, ++ $P < 0.01$, + $P < 0.05$.

*** $P < 0.001$, ** $P < 0.01$ and * $P < 0.05$ as compared to the control group. ++ $P < 0.01$ and + $P < 0.05$ as compared to the model group.

2.3 大豆水提物对急性肝损伤小鼠肝组织 MDA、GSH 水平及 NOS 活性的影响

表 3 表明, 模型组小鼠肝组织匀浆 MDA 水平及 NOS 活性显著高于正常组 ($P < 0.01$), 而 GSH 水平

显著低于正常组 ($P < 0.01$), 这说明 CCl₄ 显著引起小鼠肝组织氧化应激反应。与模型组相比, 大豆水提物 (100, 150 mg·kg⁻¹) 及联苯双酯则显著缓解这种 CCl₄ 引起的小鼠肝组织氧化应激水平。

表 3 大豆水提物对急性肝损伤小鼠肝组织 MDA、GSH 和 NOS 水平的影响

Table 3 Effect of SWEs on hepatic MDA, GSH and NOS levels in mice with liver injury

组别 Group	剂量 Dose/mg·kg ⁻¹	MDA /μmol·g ⁻¹	GSH /mg·g ⁻¹	NOS /U·mg ⁻¹
对照 Normal	-	2.56 ± 0.44	4.95 ± 1.23	0.13 ± 0.04
模型 Model	-	4.33 ± 0.98 **	2.86 ± 0.76 **	0.31 ± 0.08 **
大豆水提物	50	4.11 ± 0.36	2.95 ± 0.44	0.29 ± 0.09
SWEs	100	2.85 ± 0.34 *	3.75 ± 0.87 *	0.19 ± 0.04 *
	150	2.76 ± 0.64 **	4.02 ± 0.91 *	0.20 ± 0.05 *
联苯双脂 Bifendate	100	2.69 ± 0.24 **	4.54 ± 1.01 **	0.21 ± 0.03 *

相对于对照组 ** $P < 0.01$; 相对于模型组, ++ $P < 0.01$, + $P < 0.05$.

** $P < 0.01$ as compared to the control group. ++ $P < 0.01$ and + $P < 0.05$ as compared to the model group.

3 结论与讨论

CCl₄ 所致急性肝损伤动物模型是用来评价改善肝细胞损伤药物的经典模型^[7]。CCl₄ 损伤肝组织的机制是 CCl₄ 经肝细胞色素 P450 代谢激活, 生成三氯甲基自由基 (-CCl₃) 和氯自由基 (-Cl), 引起生物膜脂质过氧化, 造成膜结构和功能的损伤, 蛋白质等物质合成代谢的障碍, 导致肝细胞坏死, 胞浆内 ALT, AST 这两种酶大量释放入血液, 使血清中该酶的活性显著增高^[8,9]。因此, 血清 ALT 和 AST 活力被认为是反映肝损伤程度的敏感指标^[10]。本试验中, CCl₄ 使模型组小鼠的肝指数和血清 ALT 及 AST 活性显著升高, ALB 含量显著下降, 表明造模成功。而 100, 150 mg·kg⁻¹ SWEs 显著降低 CCl₄ 所致急性肝损伤小鼠的肝指数及血清 ALT 和 AST 的活性, 显著提高血清 ALB 含量, 说明 100, 150

mg·kg⁻¹ SWEs 能够通过抑制细胞色素酶 P450 的活性, 降低自由基的产生, 减轻或阻断由于脂质过氧化而引起的肝细胞膜、线粒体、溶酶体损伤导致的肝细胞坏死, 从而达到降低转氨酶活性的效果, 且其效果与 100 mg·kg⁻¹ 联苯双脂相当。表 1 还显示, 150 mg·kg⁻¹ SWEs 对肝重及肝指数作用效果 ($P < 0.01$) 要显著于 100 mg·kg⁻¹ 联苯双脂 ($P < 0.05$)。

肝脏是胆红素 (TBIL) 代谢及排泄的主要场所, 肝损伤可导致胆汁摄取、转化、分泌和运输障碍, 使肝脏清除 TBIL 的能力下降, 致使 TBIL 水平升高。本实验中, 模型组小鼠血清 TBIL 水平明显升高, 说明肝脏受到损伤后清除 TBIL 的能力显著下降, 出现了显著的胆汁淤滞。而 100, 150 mg·kg⁻¹ SWEs 显著降低急性肝损伤小鼠血清 TBIL 水平, 说明一定剂量的 SWEs 能够改善 CCl₄ 所致急性肝损伤小鼠的肝脏分泌和排泄功能, 缓解胆汁淤滞。

自由基和脂质过氧化是引发肝损伤的重要因素^[11-12]。Michiels发现,CCl₄作用后,脂质过氧化产物MDA的含量显著提高^[13]。MDA可与生物大分子物质结合形成加醛复合物,从而进一步破坏生物膜的结构和功能。因此MDA水平能反应肝细胞膜脂质过氧化的强弱和受自由基攻击而致肝损伤的程度。NOS是NO合成的关键酶,NO对肝脏的作用与活性氧的浓度有关,当NO及活性氧水平均较高时,二者发生氧化反应,生成细胞毒性很强的过氧亚硝基阴离子(ONOO⁻),发挥自由基对肝细胞的DNA、蛋白质和脂质的毒性,引起严重的肝损伤^[14-15]。当体内产生过多的自由基时,还原型谷胱甘肽(GSH)将被耗竭^[16]。本试验中,模型组小鼠肝组织MDA和NOS明显升高,而GSH水平下降,表明CCl₄引起的肝细胞损伤与过氧化反应有关。100, 150 mg·kg⁻¹SWEs显著降低了肝组织MDA水平和NOS活性,而GSH水平显著提高,说明一定剂量的SWEs能够抑制自由基脂质过氧化反应,阻止肝细胞脂质过氧化,维持膜的正常结构,从而避免肝细胞的损伤。这些结果表明,SWEs对CCl₄所致小鼠急性肝损伤具有保护作用,其机制可能与抗自由基脂质过氧化反应有关,效果与100 mg·kg⁻¹联苯双脂相当甚至更加显著。

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产中应合理控制钼肥的施用量,避免过量施入。

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