



Histopathological effects of chronic use of tramadol on liver and kidney in sheep model.

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Abstract

Background: Tramadol " a synthetic analgesic of opioids " is serotonin reuptake blocker. Also it is inhibitor of norepinephrine transporter function.

Objectives: to evaluate the effect of chronic use of tramadol on liver and kidney in sheep model, focusing on histopathological changes.

Material and method: current study was done in the Basic Science Department, Dental College, Mosul University, Iraq. Ten mature healthy male sheep of "10-12 months old" and "body weight of 25±2kg" were incorporated in the study. They were randomly divided into 2 groups, each group consisted of 5 sheep: Group 1: received no any treatment "control group". Group 2: were treated by tramadol hydrochloride in dose of 5 mg/kg/day "treatment group". All animals were sacrificed on day 125. Tissues of liver and kidneys were washed with physiological saline, and fixed with 10% neutral buffered formalin for morphological and histopathological examination. These sections were then examined under a light microscope for histological changes.

Results: Liver sections of treatment group showed several abnormal histological alteration includes congestion and dilatation of central vein and degenerative hepatocytes. Also kidneys demonstrate uneven pathological changes in glomeruli and renal tubules which characterized by swelling of tubular cells, with dilation of inter-tubular blood vessels, degeneration and necrosis in epithelial cells lining the renal tubules, infiltration of inflammatory cells were also observed, with thickening in the blood vessels wall and deposition of collagen fibers in the interstitial tissue around the blood vessels wall.

Conclusion: there are risks of increased hepatic and renal damage due to a long duration use of tramadol. Although its effective in pain management including dental pain, tramadol destructive effects must be considered during the continual treatment.

Key Words: tramadol, sheep, liver, kidney.

INTRODUCTION

Tramadol is analgesic drug with chemical structure of (C₁₆H₂₅NO₂). Its action is dependent on block of serotonin reuptake and inhibition of norepinephrine transport system. It is weak μ -receptor agonist [1]. It relieves pain within one hour after intake orally [2]. Tramadol is metabolized in the liver into O- and N-demethylated five different metabolites by cytochrome P450 [3]. The most significant metabolite is O-desmethyltramadol " 200 times the μ -opioid receptors affinity of the parent tramadol molecule ". In the previous few years, tramadol maltreatment is gradually growing. The long term usage of opioids could provoke destruction and apoptosis of tissues like neurons [3].

The major task of liver and kidney in drug kinetics predisposes them to toxic injury. Every drug induced hepatotoxicity almost definitely related to the essential role of the liver in metabolism of that drug which converts it into easily excreted products with lower pharmacologic activity. Although metabolite could have greater activity and/or more toxicity than the parent drug [4]. Also drugs metabolites that are eliminated by kidneys may induce tissue injury causing functional problems in this organ [4]. The work of this study aimed to inspect the sequel of chronic use of tramadol on the liver and kidney in sheep model, focusing on histopathological changes.

MATERIALS AND METHODS

This study was accepted by scientific committee in the Basic Science department, Faculty of Dentistry, Mosul

University, Iraq. Fifteen mature male sheep of 10-12 months old and body weight of 25±2kg, were included in the work. Animals were kept in a standard group housing. Clinical examination of animals was done in daily manner by veterinarian until slaughtering. Sheep were divided randomly into 2 groups " 5 animals / group ": Group 1: receive no any treatment " control group ". Group 2: were treated by intramuscular injection of tramadol hydrochloride in dose of 5mg/kg/day " treatment group ". All animals were sacrificed on day 125 and tissues of liver and kidneys were washed with physiological saline, and fixed with 10% neutral buffered formalin for morphological and histopathological examination. They were embedded in paraffin and cut into 5 μ m sections, then stained with Masson's Trichrome and hematoxylin-eosin (H&E) stains. These sections were then examined for histological changes by 2 blinded pathologists.

RESULTS

Histopathological examination of liver section of sheep treated with tramadol (Figure 1) showed several histological alteration includes congestion and dilatation of central vein, diffuse of kupffer cells between the sinusoids and degenerative hepatocytes, on other hand infiltration of mononuclear inflammatory cells were observed, dilatation of sinusoids). Additionally, there was pre-portal fibrosis, with moderate proliferation of fibroblastic cells. Area of hepatocytes necrosis with pyknotic nuclei and karyolytic in other nuclei. Other section showed proliferation of bile ducts also observed

with thickening of the liver capsule, and thickening in the wall of the interlobular blood vessels. Histopathological examination of kidney taken from sheep treated with tramadol (Figure 2) showed variable pathological changes in glomeruli and renal tubules which characterized by swelling of tubular cells and inter-tubular blood vessels dilatation. The alteration in the glomeruli include glomerular tuft lobulation and atrophy leads to expansion

of space, degeneration and necrosis of epithelial lining the renal tubules. Also infiltration of inflammatory cells were observed with lobulation of glomeruli and thickening in the blood vessels wall (Vasculitis) with deposition of collagen fibers in the interstitial tissue around the blood vessels wall.

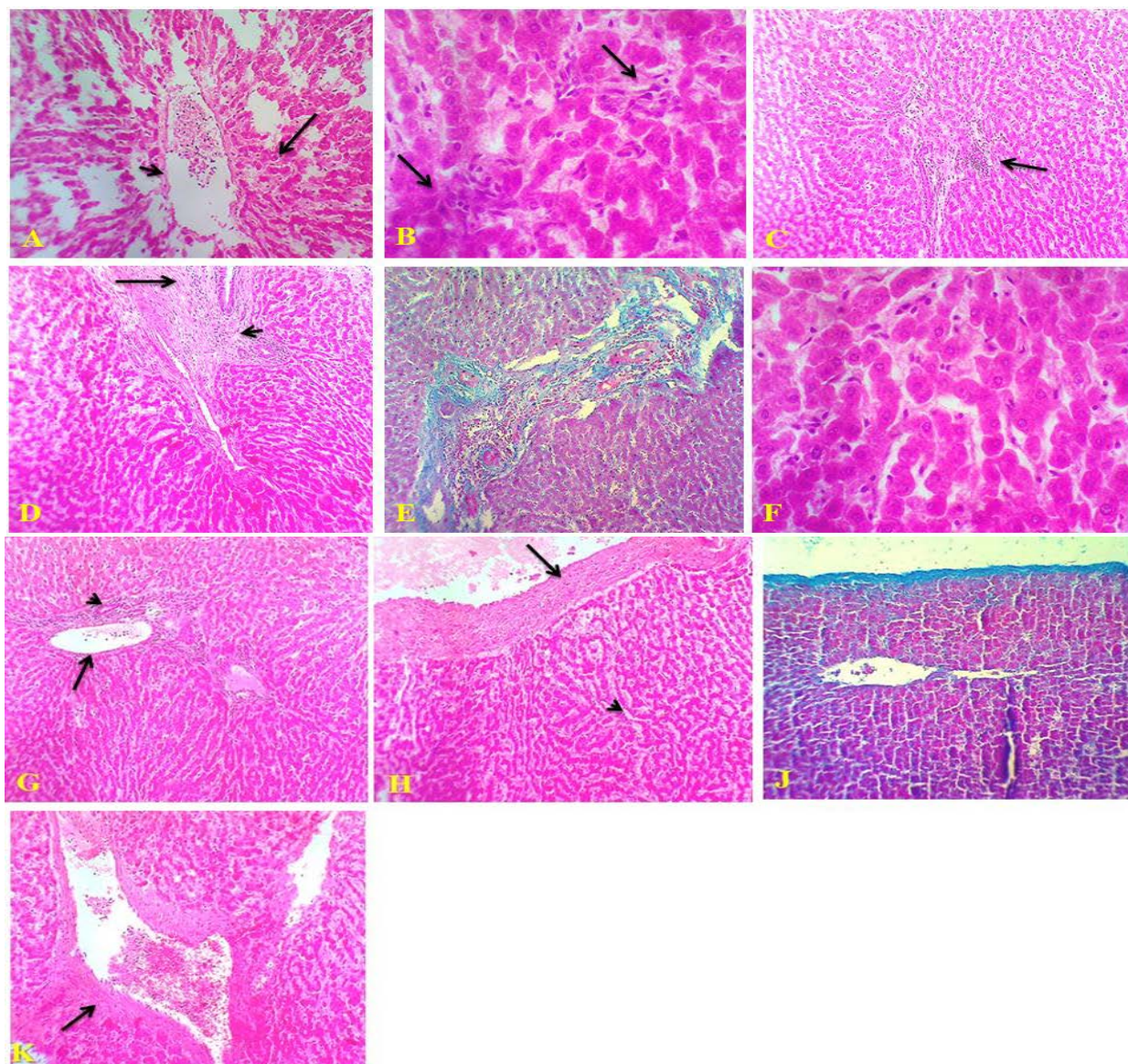


Figure 1: Micrograph of sheep liver , treated with tramadol (A) Dilatation and congestion of central vein (Arrowhead) , Coagulative necrosis of hepatocyte(Arrow) (H&E 10x). (B) Kupffer cells difused between sinusoid (Arrow) (H&E 40x). (C) Infiltration of mononuclear inflammatory cells(Arrow)(H&E10x). (D) Periportal fibrosis (Arrowhead) with infiltration of fibroblast(Arrow) (H&E 10x). (E) Masson’s Trichrome stain(10x). (F) Pyknotic and karyolytic of hepatocytes nucleus (H&E 40x) . (G) Proliferation of bile ducts((Arrowhead) and dilatation of portal vein (Arrow) (H&E 10x). (H)Thickening of liver capsule (H&E 10x). (J) Masson’s Trichrome stain(10x). (K) Thickening of interlobular blood vessels (Arrow) (H&E 10x).

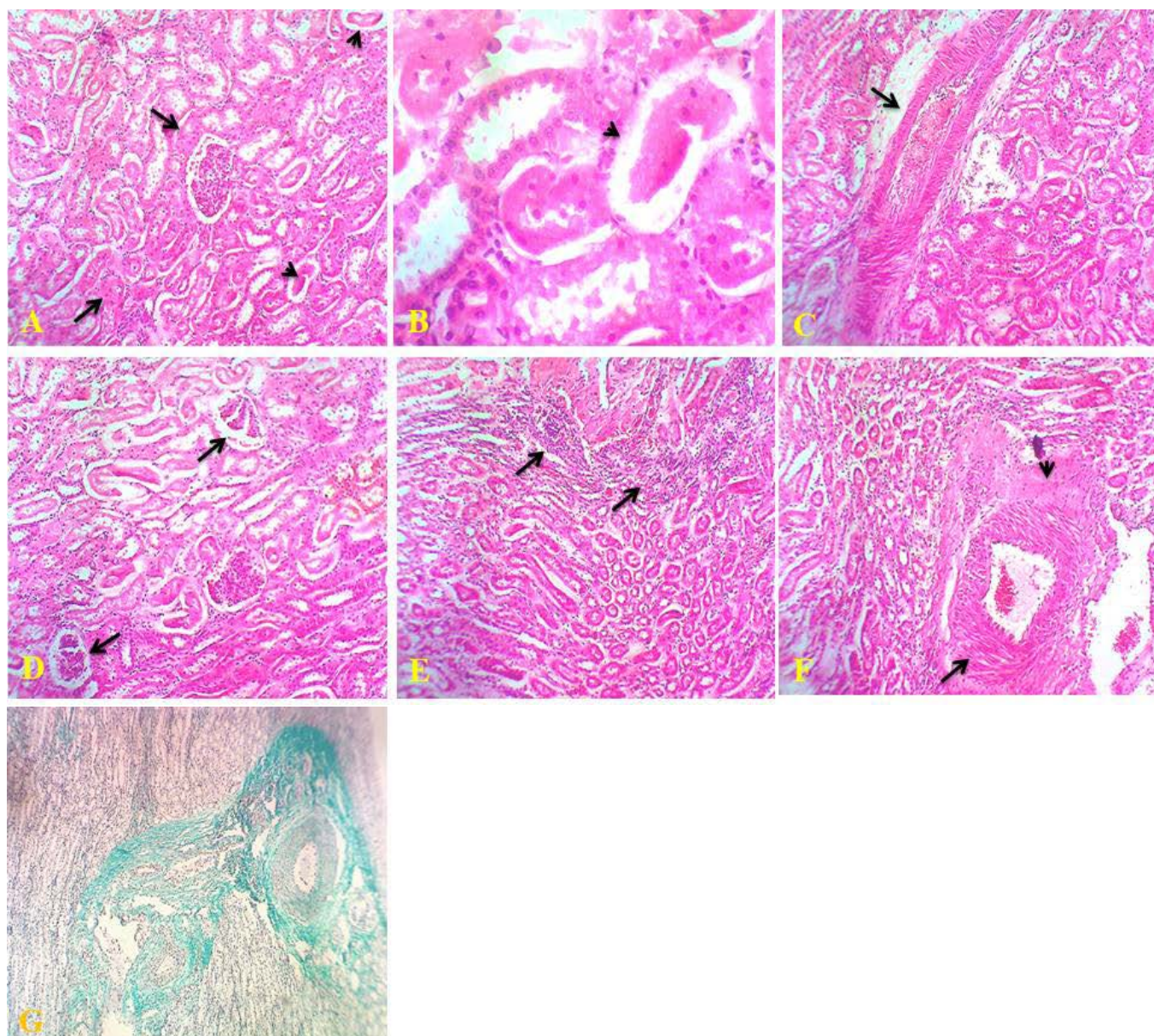


Figure 2: Micrograph of sheep kidney , treated with tramadol (A) Swelling of renal tubules(Arrow) , Necrosis of of renal tubules (Arrowhead) (H&E 10x). (B) , Necrosis of of renal tubules (H&E 40x). (C) Congestion and thickening in the wall of blood vessels (Arrow) (H&E 10x). (D) Lobulation of the glomerular tuft and expansion of Bowman's space(Arrow) (H&E 10x). (E) interstitial infiltration of inflammatory cells (H&E 10x). (F) Vasculitis with thickening of the blood vessels wall (H&E 10x) . (G) Masson's Trichrome stain(10x).

DISCUSSION

Tramadol is synthetic codeine analog with analgesic effect mediated centrally. The antinociceptive effect of tramadol is due to both parent compound and its metabolite (O-desmethylated tramadol) and this metabolite is 4–6 times more potent than the tramadol itself [5,6]. Tramadol is largely prescribed for numerous medical and dental implications for management of moderate to severe pain, but there has been a raising incidence of its misuse, and accordingly in the recorded undesirable reactions and intoxications. however, little is known about its exact mechanisms of toxicity [7] .The present study was performed to assess the effect of chronic use of tramadol on both liver and kidney functions in

sheep model. Histopathological changes resulted from long term use of tramadol in liver tissues and kidneys were evaluated in sheep model, alterations in central vein and hepatocytesin beside inflammatory cells infiltrate were noticed. Additionally , there was proliferation of fibroblastic cells and areas of hepatocytes necrosis. Other section showed observed thickening of the liver capsule, and thickening in the wall of the interlobular blood vessels. This was in agreement with other studies which revealed severe centrolobular congestion and focal necrosis, disarranged hepatic architecture, hepatic congestion, hemorrhage and necrosis, apoptotic hepatocytes, mononuclear cellular infiltration in the liver after chronic usage of tramadol in rats [8,9].

Histopathological examination of kidney taken from sheep treated with tramadol chronicaal revealed pathological changes in glomeruli and renal tubules with dilatation of inter-tubular blood vessels. Moreover, degeneration and necrosis in epithelial cells lining the renal tubules, With infiltration of inflammatory cells were observed also thickening in the blood vessels wall (Vasculitis) with deposition of collagen fibers in the interstitial tissue around the blood vessels wall .all these finding was in agreement with other study that describe vacuolization in tubular cells and kidney damage after long term use of opioids [8]. These histopathological changes in both liver and kidney could be related to mitogen activated protein kinase pathway (MAPK) protein expression in tissues, oxidative stress, and apoptosis signaling pathways [7,10,11]. On other hand, the dose of tramadol should be adjusted in the existence of liver and kidney diseases to allow normal metabolism and excretion of this drug [12,13]. In disagreement with these results, Mahmoud MF et al [2016] evaluate the hepatoprotective effects of tramadol on hepatic I/R, they suggest that tramadol has a beneficial role in the protection of liver from I/R injury during liver transplantation and hepatic resection after short term (single dose) use [6]. Many researchers have referred to the relation between the intake of opioids and greater synthesis of reactive oxygen species " ROS " [14-18]. Oxidative stress is defined as an discrepancy between ROS synthesis and the capacity of antioxidant to counteract them. High concentrations of reactive intermediates initiate cellular destructions with formation of secondary toxic compound. Nuclear factor-kappa B " NF- κ B " can be activated by ROS; which then activates inflammatory genes transcription and consequent formation of numerous inflammatory mediators [19]. In accordance, a recent study conducted by H.M. Mohamed et al demonstrate the pro-oxidant effect of continual tramadol intake demonstrated by the significant increase in the levels of MDA and NO in the cerebrum of rats [20]. Also opioid pro-oxidant effect has been reported in the tissues of liver and kidney in mouse model [14,15]. Bameri et al offered a proof that dopaminergic system is implicated in oxidative damage induced by tramadol [21]. A single injection of tramadol intravenously " 25 mg/kg " result in considerable increase in mitochondrial ROS production, peroxidation of protein and lipid and mitochondria GSH reduction in the brain tissue of mice model. These results recommended that tramadol-induced oxidative stress is connected with dysfunction of mitochondria [21]. Also, the dopamine D2 receptors inhibition caused reduction in mitochondrial dysfunction and oxidative stress of tramadol. On other hand, their stimulation cause reduction in GSH contents, indicating the function of dopaminergic system in mediating the role of tramadol in mice brains [21]. Both oxidative stress and inflammation can take action in the induction of cell death through apoptosis [22,23,24,25]. Accordingly, oxidative stress and inflammation induced by tramadol were connected with considerable, dose dependent up-regulation of gene and protein expression of the pro-apoptotic markers [26,27, 28]. Tramadol can act by

inhibition the reuptake of Norepinephrine and improve the release of 5-HT [29], and this lead to significant increase in NE and 5-HT levels. Panadanabiona has newly reported elevated levels of E, NE, DA and 5-HT in the cerebral cortex of rats 72 h after acute SC injection of tramadol [30]. Although opioids are being widely used since very long time, their chronic effects particularly at molecular and cellular levels are not obviously explained. The impacts of tramadol on the liver and kidney need to be demonstrated [31,32]. So, the present study intended to examine the effects of chronic use of tramadol on the these tissues.

CONCLUSION

This study referred to the increased risk of liver and kidney damage due to the use of tramadol over long period. Opioids are reported to be effective in management of medical and dental pain, but their adverse toxic reactions must be taken into consideration. Focused attention by the dental and medical communities is required.

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