

Histological Changes of Testis in Mice After Administration of Doxorubicin HCL (Adriblastina) Cytotoxic Drug

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ABSTRACT. Ninety adult male mice MF1 (in breeding) strain aged 35-45 days, with weight of 18-20 grams were used in this study. Doxorubicin (adriamycin (Adriblastina)) the cytotoxic drug used for treatment of many cancer types was injected intravenously via tail vein in a single dose (0.02mg/micc) or as repeated doses (0.01mg/2-3 times/ week/ micc) three times per week. Testicular tissue and epididymis were taken after intracardiac perfusion from both control and treated mice, processed for 5 μ paraffin section, stained by haematoxylin and eosin (H&E), Periodic acids schief (PAS) for polysaccharides. The tissues from single dosed group were taken after 3, 5, 7, 10, 15 and 20 days after injection. Those treated with repeated doses were taken after 1, 2 and 3 weeks from starting injection. The results showed that doxorubicin could alter histological structure of testicular tissue in early periods of single dose injection. Vascular congestion of interstitial tissue vessels and focal separation of germ cells were observed, and the animal exhibited slight increase in body and testicular weight. Drastic changes increased in intensity after 7, 15 and 21 days were marked degeneration of apoptotic (programmed cell death pattern) was observed in spermatogenic cells. It seems to be stage specific degeneration. Spermatogonia and mature sperms seem to resist toxicity although alteration in head and tail parts were observed in sever cases (3 weeks of repeated doses). The evidences of apoptotic changes involved in testicular toxicity are the absence of any inflammatory reaction or any features of necrotic degeneration. Sertoli; the supporting cell seems to be affected functionally in early stages, possibly loosing their junction with germ cells leading to their observed disorganization and separation. Later in single dosed group and after repeated doses they showed vacuolated or ballooned cytoplasm and irregular small size nuclei. Interstitial or Leydig cells were apparently not changed in early period of doxorubicin administration, however after 21 days of single dose and 2-3 weeks of repeated doses proliferation of Leydig cells were observed among severely degenerated tubules. The cells showed cytoplasmic vacuoles and strained deeply by osmic acid. Doxorubicin was suggested to exert its action through interference with DNA synthesis, altering microtubule assembly or interference with cellular metabolism. An extensive ultra-structural, histochemical and hormonal assays are needed to shed more light upon doxorubicin degenerative effects observed in the present work.

Introduction

A number of research studies had indicated decreasing sperm counts and increasing reproductive problems in animals and humans upon using cytotoxic drugs (Wyrobek, 1983). Whether these drugs act directly on spermatogenic cells (Soranio, *et al.*, 2000) or through intervention with Sertoli and Leydig interstitial cells (Kotovskii & Shamanov, 1985) it is the interest field of recent researches.

Sertoli cells play a key role in spermatogenesis (Sapori *et al.*, 1986 & Sharpe, 1993), whereas Leydig cells are the main source of androgen production. Both types of cells can be readily affected by toxicants and chemical drugs (Papadakis, *et al.*, 1999). Alterations in the functions of these cells may lead to a change in the hormonal balance, disturbed the process of spermatozoa development and impaired male fertility (Monsees *et al.*, 2000 & 2001).

Doxorubicin was used as both antibiotics (Suwalsky *et al.*, 1999) and anti cancer drug (Baquiran & Gallagher, 1998). Its testicular toxicity was proved in both animals and human (Adachi *et al.*, 2000; Tsunenari *et al.*, 2000). Body weight, spermatogenic activities and serum levels of enzymes responsible for testosterone production were significantly decreased by doxorubicin treatment (Kang *et al.*, 2002 & Adachi *et al.*, 2000).

The present study was designed to investigate the effect of both single and repeated intravenous doxorubicin administration on morphology of testicular tissues, spermatogenic cells in particular Sertoli and Leydig interstitial cells of adult male mice.

Material and Methods

Animals

Ninety MF1 male mice, weighing 18-20 gram, were used in this study. The animals age ranges from 35-45 days (maximum fertility age). The animals were randomly divided into three groups: Group I (n=10) served as controls, Group II (n=40) for single dose injection and Group III (n=40) for repeated doses injection with Doxorubicin.

Doxorubicin drug administration

Doxorubicin hydrochloride (Adriblastina) was purchased in vial contains 10mg powder dissolved in 5 ml solution. Therapeutic doses were transformed for mice using Paget and Barnes schedule (1964). Doxorubicin hydrochloride was injected intravenously via tail vein as a single dose (0.02 mg/m^2) to the animals of group II and every 3 days/week for three weeks in a dose of (0.01 mg/m^2) for group III animals. Control animals group I were given 0.9% saline solution by the same dose and route as those treated animal. The animal weights were recorded before and after drug administration before dissection.

Specimens collection

The animals of group II (single dose) were killed after 3, 5, 7, 10, 15 and 21 days by cervical decapitation and immediate pericardial perfusion with 10% neutral buffered formalin done after dissection to ensure good fixation, then testes were removed and weighted. In group III (repeated doses) animals were killed after 1, 2 and 3 weeks. Cross sectional slices were taken from mid testicular tissue, re-fixed in the same fixative for 24

hours till processing for 5 μ paraffin sections. The slides were stained by Haematoxylin and Eosin and periodic acid Schiff (PAS) (Drury & Wallington, 1980). Other slices were fixed in 2.5% glutaldehyde in phosphate buffer (pH 7.4) for 3-4 hours, washed and post fixed in 1% osmic acid (2 hours), washed and processed for paraffin sections. Using light microscope, histological changes were photographed and compared to control.

Results

MF1 mice (inbreeding strain) were known to simulate cancerous patients in possessing low immunity compared to others strains. The results of the present study showed that Doxorubicin administration to MF1 mice led to an increase in aggressive behavior, loss of hair and loose stools. In early days (5-7 days) of treatment, body weight was increased in all treated animals (group II and group III) (Table 1), whilst they showed continuous decrease after 7 days of treatments till the end of experiment. For the testicular weight, slight increase was observed after 3, 5, 7 days (Table 2), then continuously decreased.

Table (1). Average of body weight (gm) after single and repeated dose administration

Period		MF1	
		Control group (gm)	Experimental group (gm)
Single dose	3 days	21.38	21.73
	5 days	23.25	24.89
	7 days	24.35	29.92
	10 days	25.94	25.63
	15 days	27.02	25.04
	21 days	29.24	24.39
Repeated dose	One week	24.76	26.89
	Tow week	26.83	24.51
	Three week	29.25	22.16

Table (2). Average of testies weight (gm) after single and repeated dose administration.

Period		MF1	
		Control group (gm)	Experimental group (gm)
Single dose	3 days	0.05	0.06
	5 days	0.06	0.08
	7 days	0.07	0.09
	10 days	0.08	0.07
	15 days	0.09	0.05
	21 days	0.1	0.04
Repeated dose	One week	0.07	0.03
	Tow week	0.07	0.02
	Three weck	0.09	0.02

Histological studies

Control animals

Histological studies of testicular tissue were similar to that observed in other mammals. The parenchyma is made up of seminiferous tubules. Among the tubules located interstitial cells of Leydig in contact with few thin walled capillaries. The tubules are lined by few Sertoli cells that lie among germinal or spermatogenic epithelium. Most of the seminiferous tubules of control animals showed all stages of spermatogenic cells namely

from the basement membrane to the lumen, spermatogonia; primary spermatocytes; secondary spermatocytes, spermatids and spermatozoa (Fig.1).

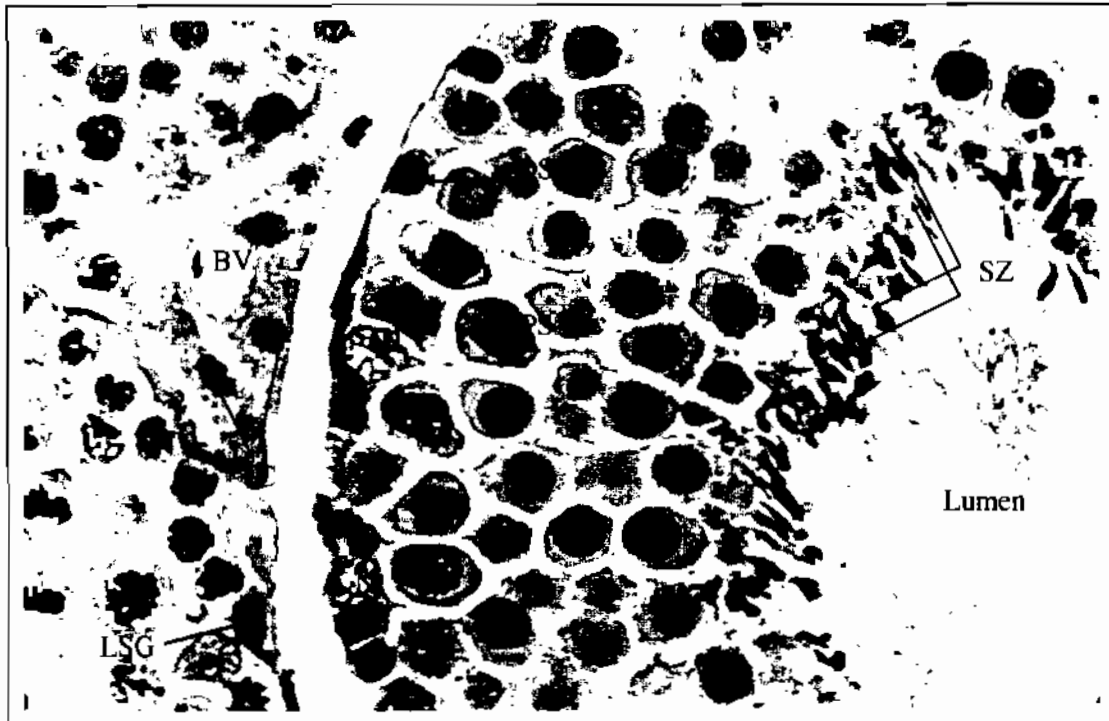


Fig. (1). Photomicrograph of control mouse testis showing the parts of seminiferous tubules. Notice the normal appearance of germinal epithelium; dark spermatogonia (DSG), primary spermatocyte (PS), secondary spermatocyte (SS), early spermatid and mature sperms (SZ) with curved shaped heads. Groups of interstitial cells (IC) surrounding blood vessels (BV) were observed among the tubules.

(40 x 3.3 x 1.25 Haematoxyline & Eosin (H&E))

Treated animals

Doxorubicin administration led to histological changes in testicular tissues, which is dose and time dependant. In single dose treated animals (group II), slight changes in the form of mild separation of spermatogenic cells and vascular congestion of interstitial blood vessels were observed in early days (3, 5, 7 days) of drug administration (Fig. 2). From 10 to 21 days, the changes became more severe; where spermatogenic cells underwent apoptotic changes (programmed cell death). The changes are in the form of deeply stained nuclei (Fig. 3), complete absenece of one or two stages of germ cell leaving only basal spermatogonia and sperms, multinucleated cells were observed in some tubules (Fig.4). Vacuolation and loss of all stages were observed after 15 and 21 days of single dose administration (Figs. 5 & 6). Spermatogonia and Sertoli cells were the last to be affected; the latter undergo vacuolation, their nuclei became irregular and lose their euchromatic appearance.

In group III group (repeated doses administration), histological changes were more evident and severe after two and three weeks of doxorubicin injection. There is loss of most germ cells after 15 days leaving only ghosts of their cell membrances (Fig.7). Specimens from animals with longer period of injection (3 weeks), testicular parenchyma showed progressive changes, massive vacuolation of spermatogenic and Sertoli cells were observed and only their degenerated nuclei were left (Fig. 8).

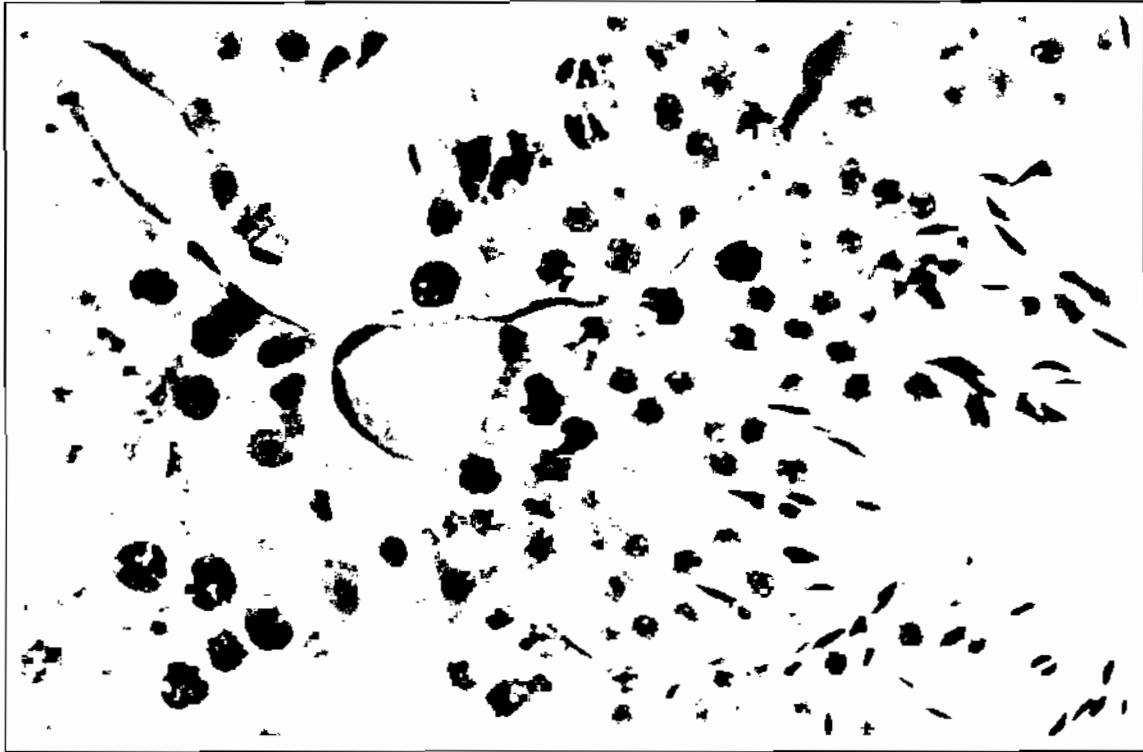


Fig. (2). Cross section of 3 seminiferous tubules after 5 days of doxorubicin administration showing separation of spermatogenic cells, and congestion of interstitial blood vessels (BV).
(40 x 3.3 x 1.25 H&E)

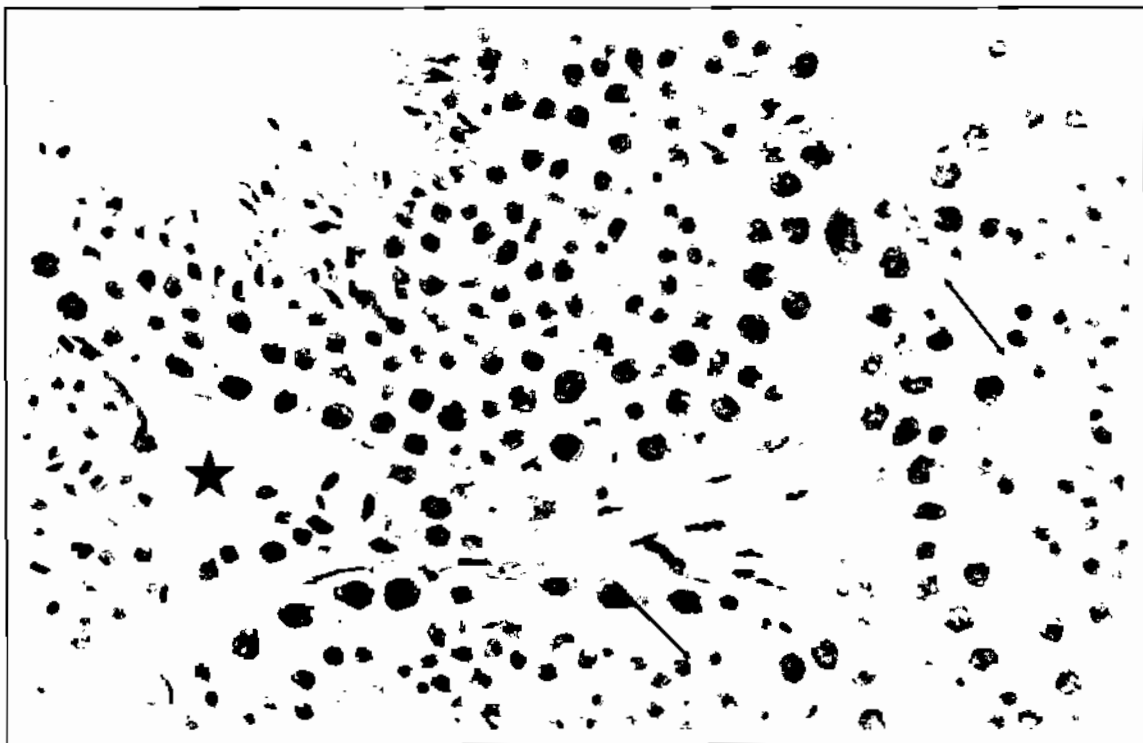


Fig. (3). Seminiferous tubule of mice after 7 days of doxorubicin showing separation of spermatogenic cells (arrow). Notice the congested blood vessels in the interstitial tissue (star).
(40 x 3.3 x 1.25 H&E)



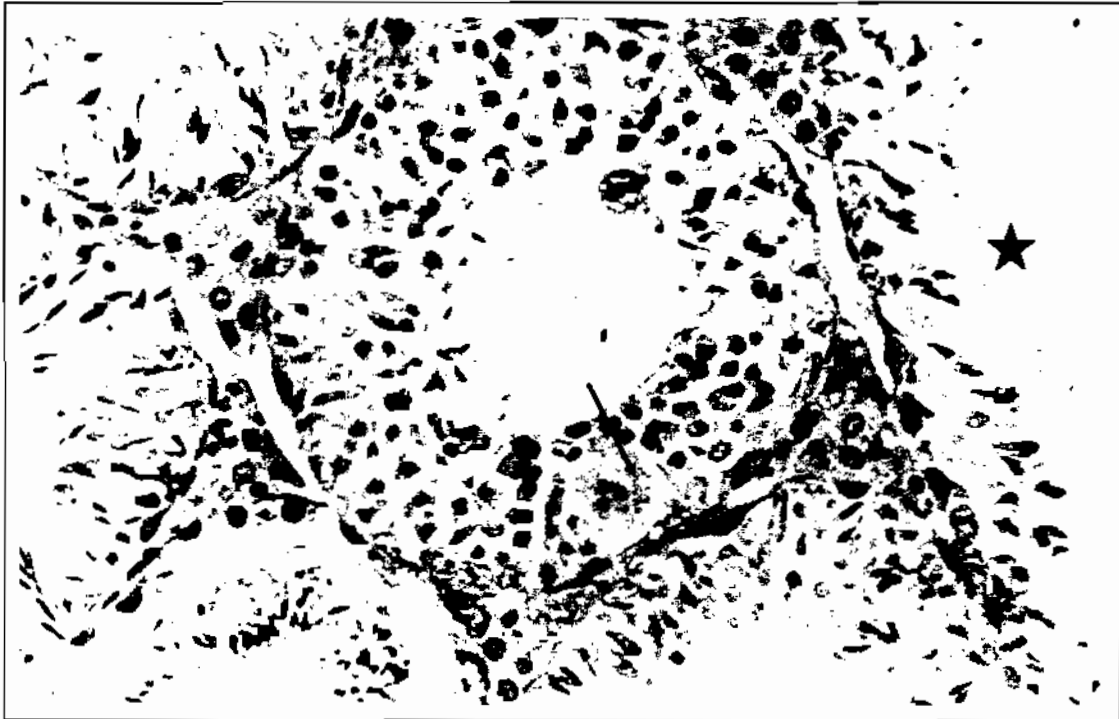


Fig. (4). Cross section of seminiferous tubules after 10 days of single dose injection showing loss of most germ cells in many tubules leaving only spermatogenic and sperm cells (star). Some multinucleated giant cells were observed (arrow).

(40 x 3.3 x 1.25 H&E)

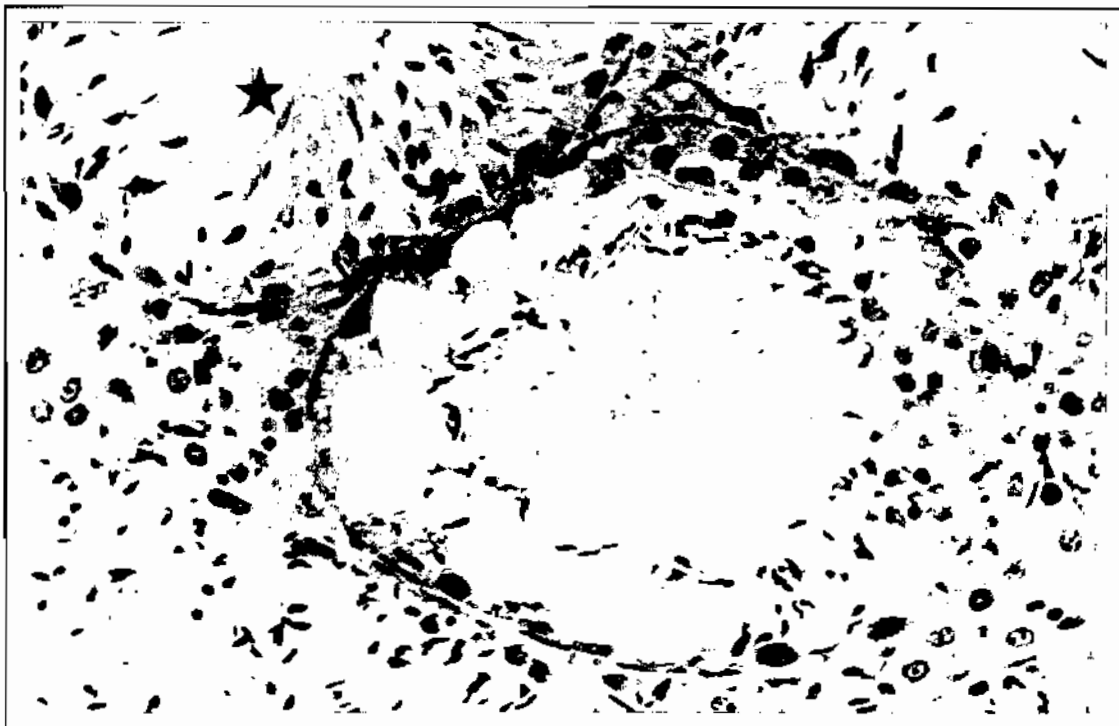


Fig. (5). Cross section of seminiferous tubules after 15 days of single dose showing disappearance of dividing germ cells; only spermatogonia and sperm heads were left (star). Some tubules showed massive vacuulations. Notice the proliferating Leydig cells.

(40 x 3.3 x 1.25 H&E)

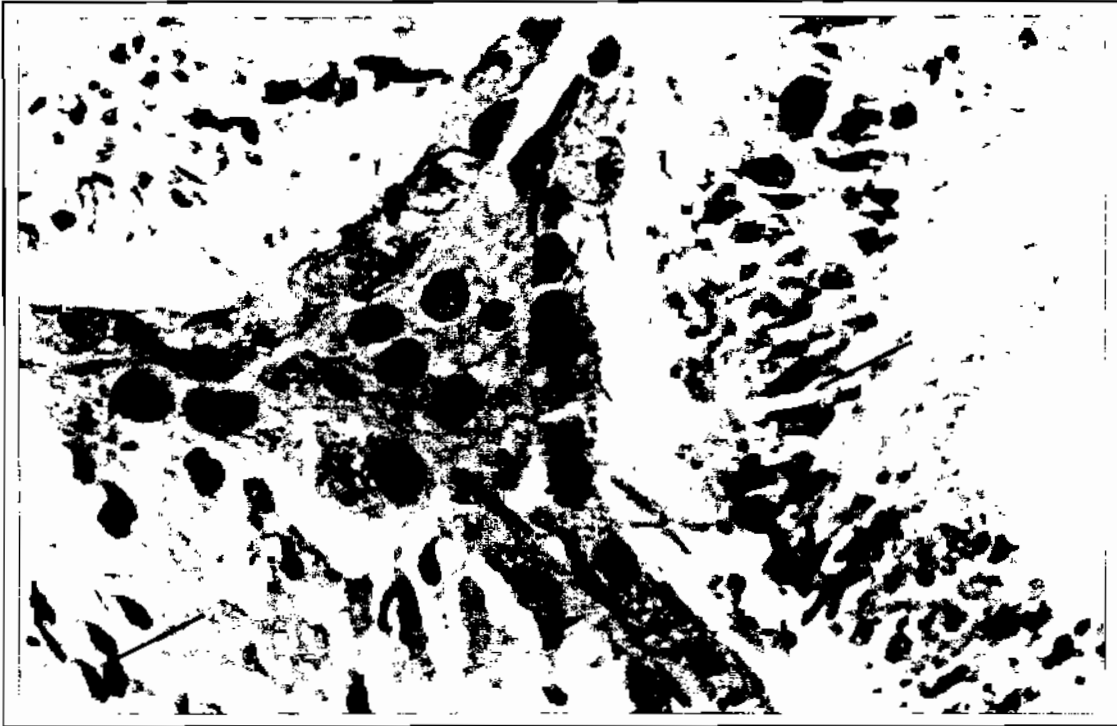


Fig. (6). Cross section of seminiferous tubules after 21 days of single dose injection showing only degenerated basal spermatogonia and deformed sperm heads (arrows). The rest of germ cell layers were disappeared.

(40 x 3.3 x 1.25 H&E)

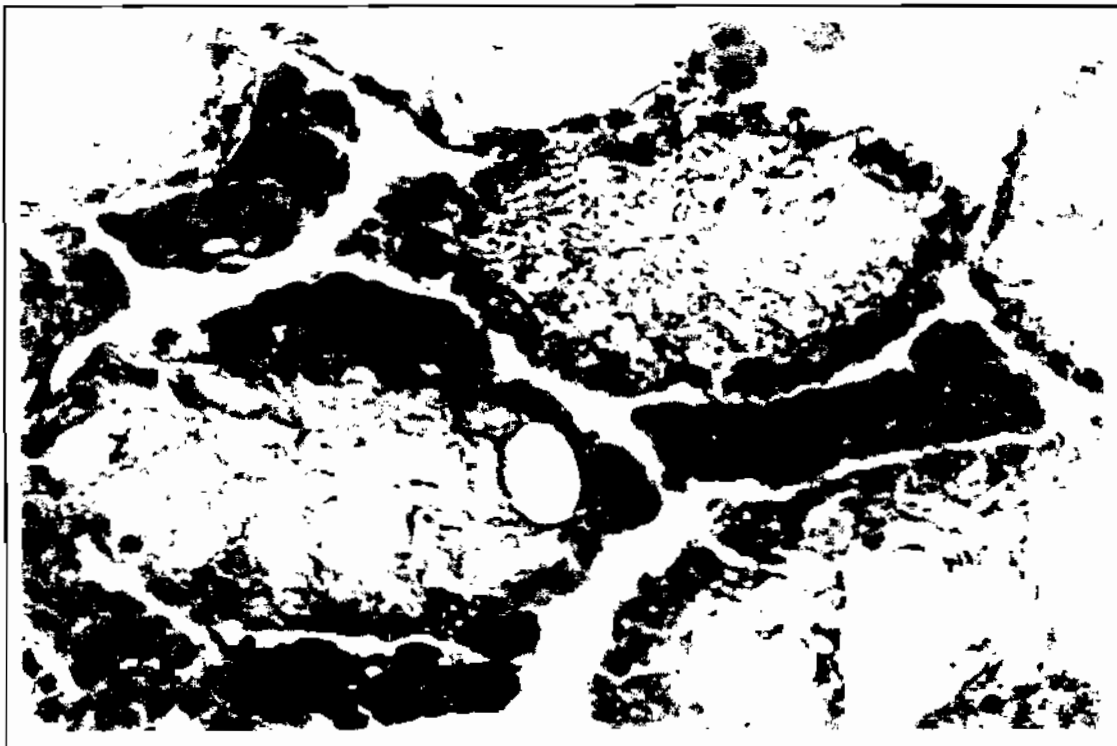


Fig. (7). Cross section of seminiferous tubules after 2 weeks of repeated doxorubicin injection showing complete loss of spermatogenic cells. Notice the proliferation and dark staining of interstitial cells.

(40 x 3.3 x 1.25 H&E)

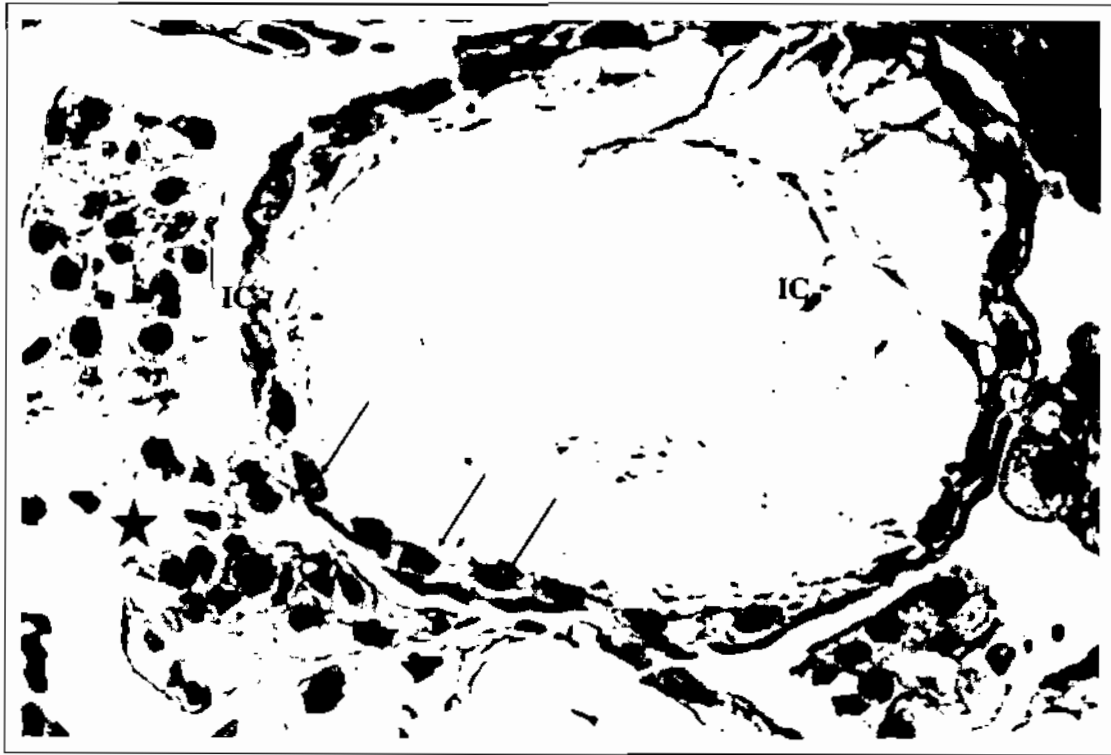


Fig. (8). Cross section of atrophied seminiferous tubules after 3 weeks of repeated doxorubicin injection only the degenerated Sertoli cell nuclei were seen (arrows), the spermatogenic cells are degenerated leaving ghosts of their cell membranes. Interstitial cells are hypertrophied and showed tiny vacuoles (star).

(40 x 3.3 x 1.25 H&E)

Sertoli cells

Plate (1a) showed Sertoli cells in control animals, they can be identified by their oval or pear shaped vesicular nuclei lying perpendicular on basement membrane of seminiferous tubules. The nuclei showed acidophilic nucleolus surrounded by 2 rounded basophilic bodies.

Starting from 10 days up to 21 days of single dose experiment, the nuclei of Sertoli cells appeared to lose their regular pyriform or oval shape, looked irregular and smaller. The cytoplasm in some cells showed vacuolation (Plate 1b) and it lost their junction with germ cells leading to their observed disorganization and separation in latter stages. The changes in Sertoli cells seemed to be more sever in repeated doses. After one week of doxorubicin injection their nuclei get darker, and they appeared dark and irregular in shape after 2-3 weeks of treatment with vacuolation of cytoplasm (Plate 1c & d).

Interstitial cells (Leydig cells)

Plate (2a) showed the normal Leydig interstitial cells lying between seminiferous tubules. They are polyhedral in shape with large nuclei. The cytoplasm contains few tiny vacuoles. After doxorubicin single dose injection, no significant changes were observed in interstitial cells after 3, 5 or 7 days. However, with appearance of degenerative changes in seminiferous tubules after 10-21 days, the cells start to increase in size and amount with appearance of more cytoplasmic vacuoles (Plate 2b), and they stained faintly by PAS (Plate 3b).

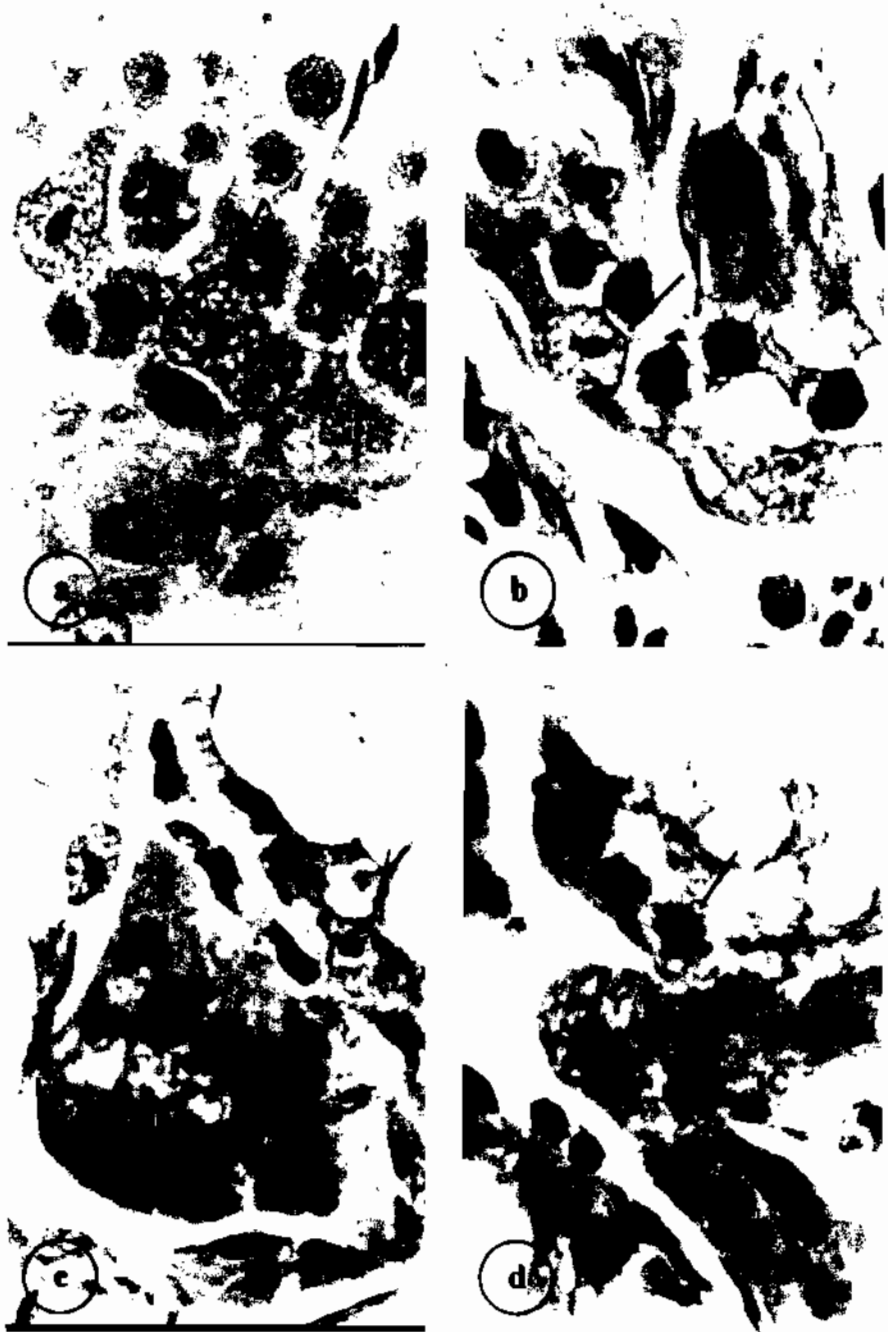
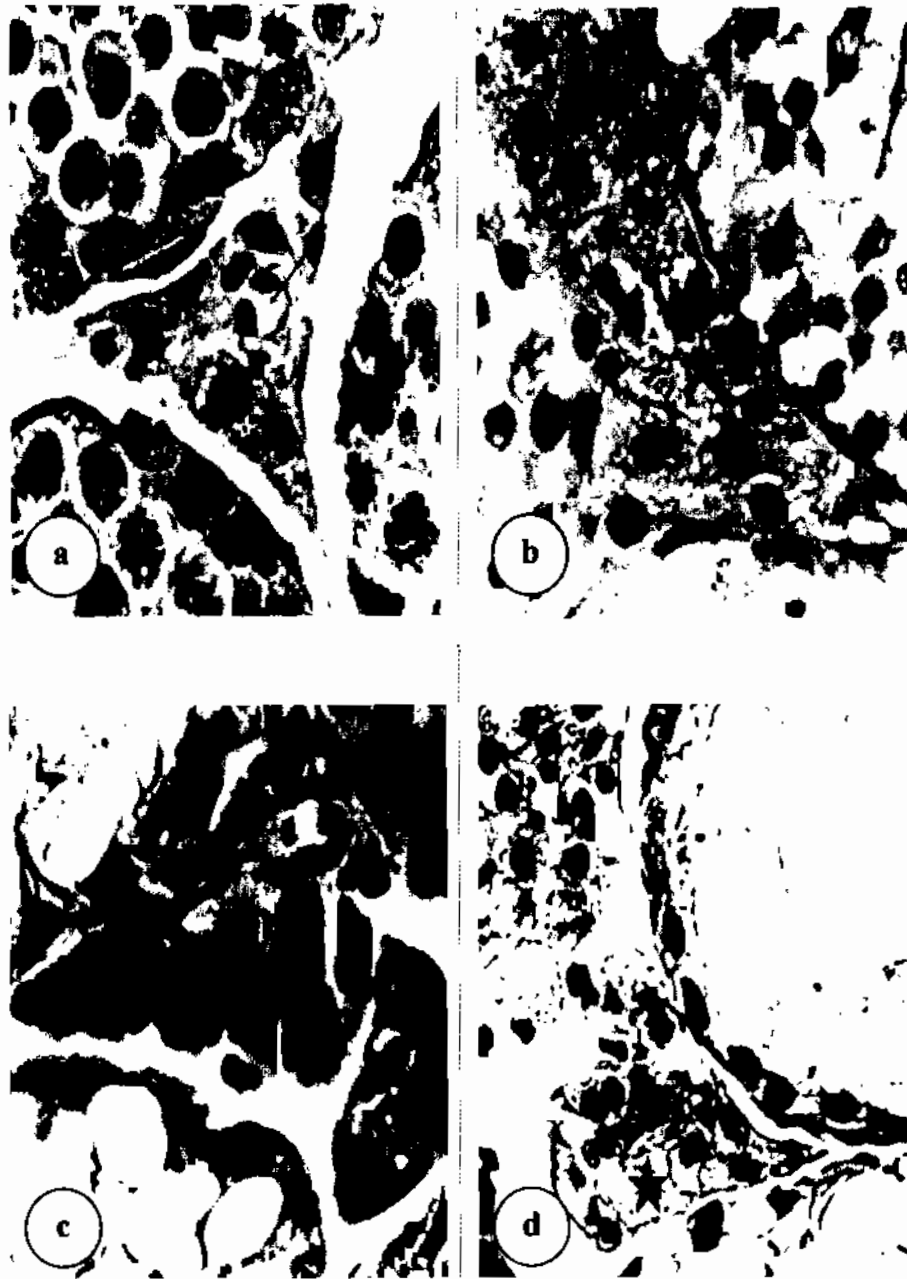


Plate (1).

- (a): A part of seminiferous tubule of control group showing the pear shaped nuclei of Sertoli cells (→). Notice the well defined nucleoli in it.
(100× 3.3 × 1.25 H&E)
- (b): A picture shows the changes and irregularity in Sertoli cells nuclei (→) and the atrophy of spermatogenic cells in 15 day single dose treated mice.
(100× 3.3 × 1.25 H&E)
- (c): A magnified picture showing loss of normal appearance of Sertoli cell nuclei (→) and its vacuolated cytoplasm. (IC) group of hypertrophied interstitial cells after 2 weeks of repeated dose injection.
(100× 3.3 × 1.25 H&E)
- (d): A picture showing the more sever changes in Sertoli cells. the nuclei (→) are irregular in shape and darkly stained . proliferating interstitial cells (IC) contain tiny cytoplasmic vacuoles.
(100× 3.3 × 1.25 H&E)

**Plate (2).**

(a): A part of control mice testes showing the Leydig cells in the interstitial tissue near fine blood capillaries (BV) → see the different shape and size of nuclei (star).

(40× 3.3 × 1.25 H&E)

(b): A part of testis after 10 days single dose treated mice showing atrophy of spermatogenic cells inside the seminiferous tubules and the appearance of some cytoplasmic vacuoles and proliferation of interstitial cells (star). See the vacuoles inside the cells.

(40× 3.3 × 1.25 H&E)

(c): A picture of proliferating Leydig cells (star) after 2 weeks of repeated dose injection showing an increase in cytoplasmic staining (star).

(40× 3.3 × 1.25 H&E)

(d): A picture of Leydig cells (star) after 3 weeks of repeated dose injection showing increasing in cytoplasmic vacuoles size. Notice the loss of most germ cells nearby seminiferous tubule.

(40× 3.3 × 1.25 H&E)

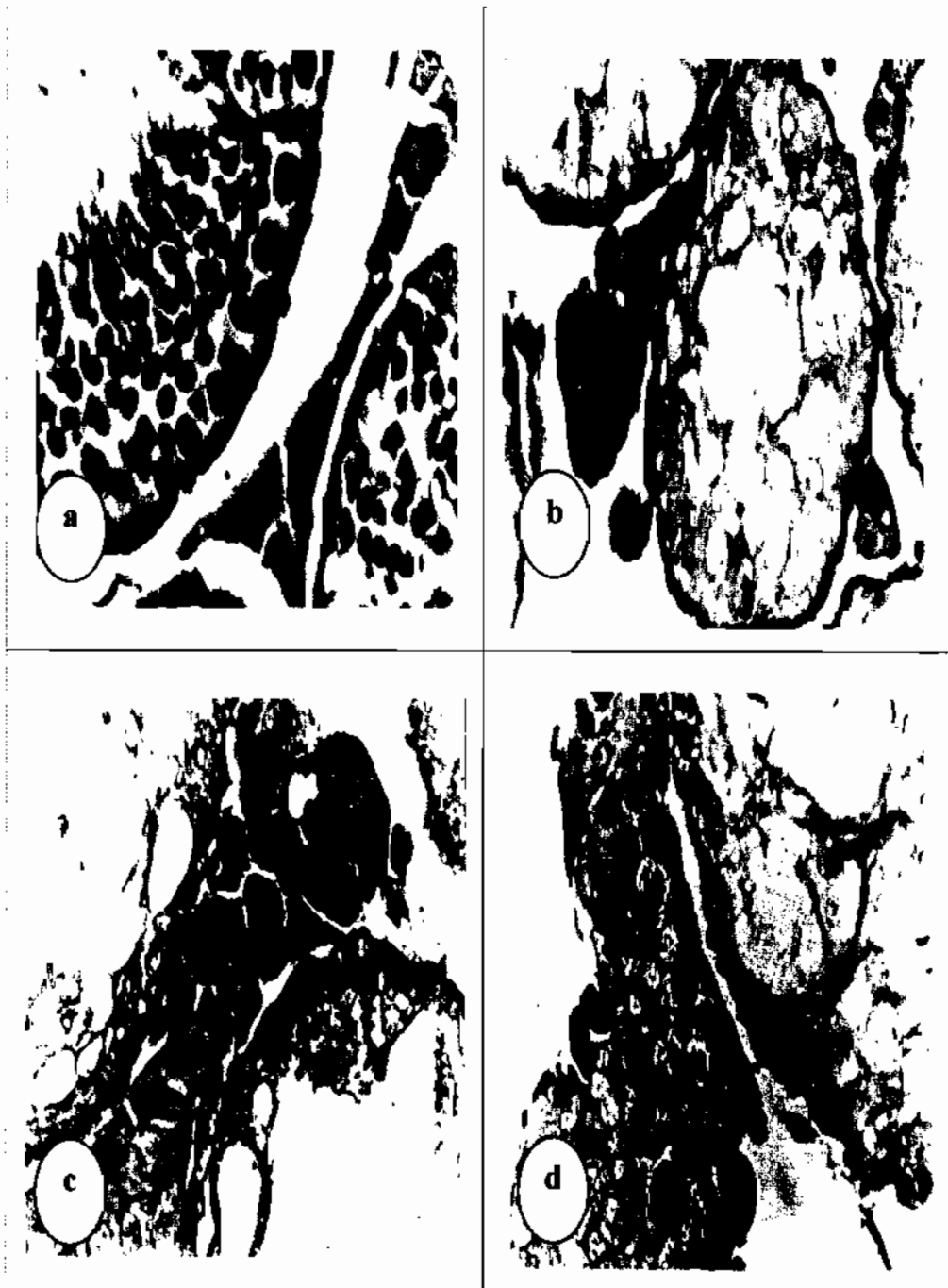


Plate (3):

(a): A picture of a part of control mice testis showing Leydig cells and parts of seminiferous tubules stained for carbohydrates.

(20× 3.3 × 1.25 PAS)

(b): A picture of 15 days single dose treated mice showing little increase in PAS stained substance in some Leydig cells and the basement membrane of seminiferous tubules.

(20× 3.3 × 1.25 PAS)

(c): Two weeks after repeated dose injection PAS stained substance was increased in the basement membrane of seminiferous tubules. Diffused staining for carbohydrates was observed in Leydig cells.

(20× 3.3 × 1.25 PAS)

(d): A 3 weeks repeated dose testis showing diffused staining of proliferating Leydig cells

(20× 3.3 × 1.25 PAS)

After 2 weeks of repeated doses of doxorubicin injection, there was a significant increase in Leydig cells relative to degenerated seminiferous tubules (Plate 2c). The cytoplasm of these cells stained intensely with eosin and its affinity to PAS staining increase (Plate 3b), few granules stained by osmic acid (Plate 4c). After 3 weeks, the cytoplasmic vacuoles increase (Plate 2d), accompanied by marked affinity to osmic acid stain (Plate 4d). Slight increase in PAS positive material was observed in the basement membrane of Sertoli cells and in proliferating Leydig cells in late stage of treatment in 15 day single dose and 2-3 of group III of repeated dose (Plate 3c & d).

Histological studies of epididymal content in control and experimental mice

Plate (5.a) showed the normal appearance of epididymal lining cells and contents in mice. The lining is either of columnar or pseudostratified columnar ciliated type. The sperms could be identified by their curved (sickled- shaped) heads. (Plate 5b) showed the decrease in sperm content after 10-15 days of doxorubicin single dose injection. There is frequent alteration of sperm heads. Some tubules contain degenerated sperms and desquamated spermatogenic cells. After 2 weeks of repeated doses the tubules contain degenerated sperms without apparent heads or just showed reticulated fluids (Plate 5c). The lining epididymal cells looked layered, with clear Golgi region and ciliated borders.

In case of 3 weeks of repeated doses where there is marked destruction of seminiferous tubules in the affected animals, the epididymal tubules were empty from any sperms or just contain reticulated materials (Plate 5d).

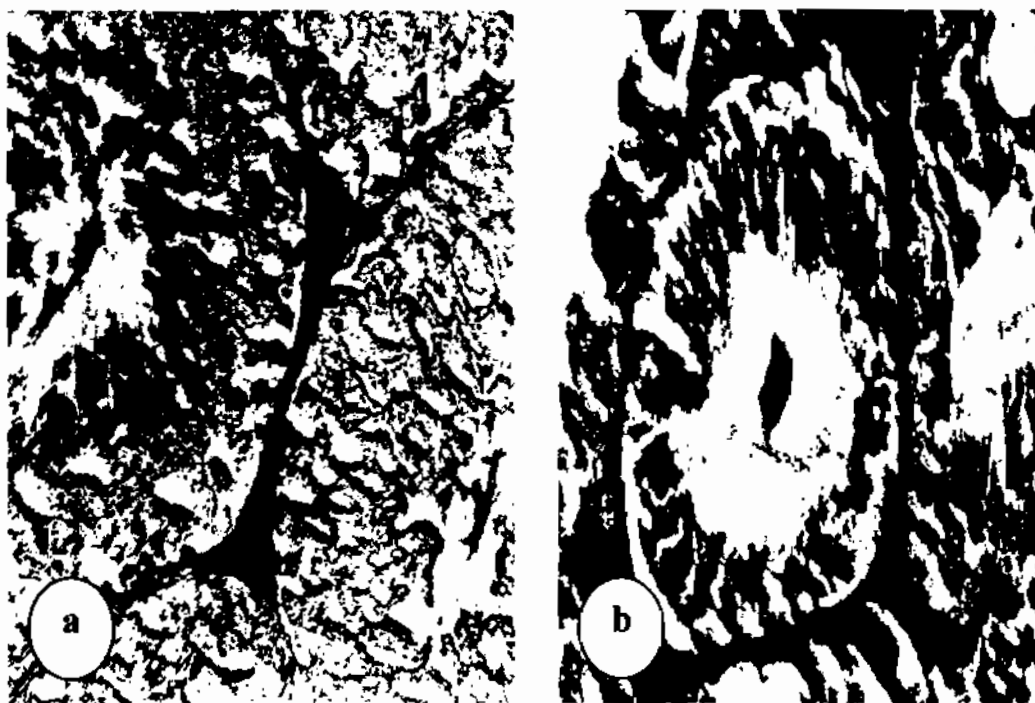


Plate (4):

(a): A part of mice testis of control group showing the stained osmium tetra-oxide interstitial cells and late stages of germ cells.

(20× 3.3 × 1.25 Osmic acid)

(b): A part of testes of 10 days single dose treated mice showing an increase of osmophilic substance in degenerated germ and interstitial cells.

(20× 3.3 × 1.25 Osmic acid)

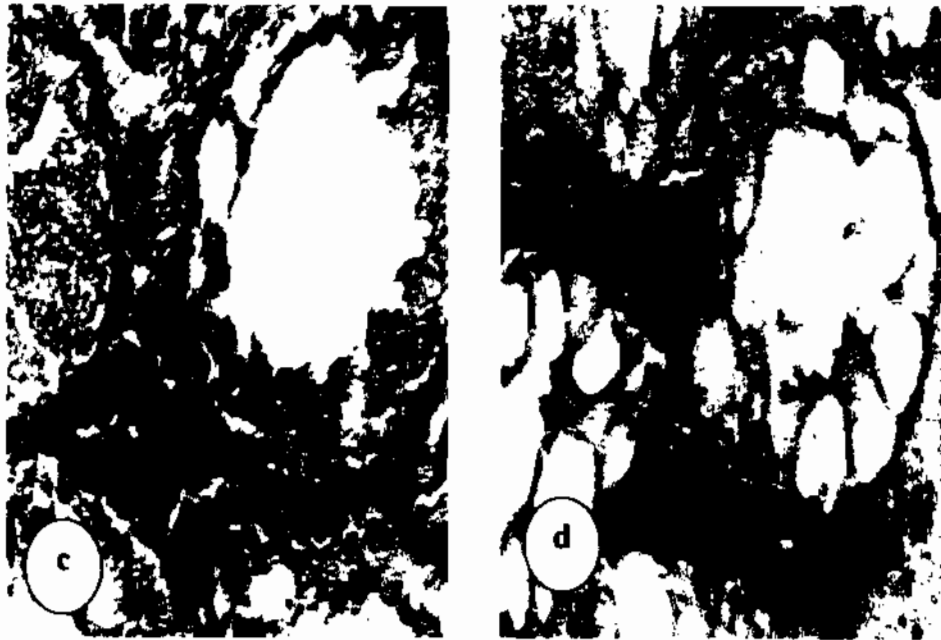


Plate (4):

(c): A part of testes of 21 days single dose treated mice showing an increasing of osmophilic staining of interstitial cells.

(20× 3.3 × 1.25 Osmic acid)

(d): A part of testes after 2 weeks of repeated dose showing an increase in staining degree of interstitial cells.

(20× 3.3 × 1.25 Osmic acid)



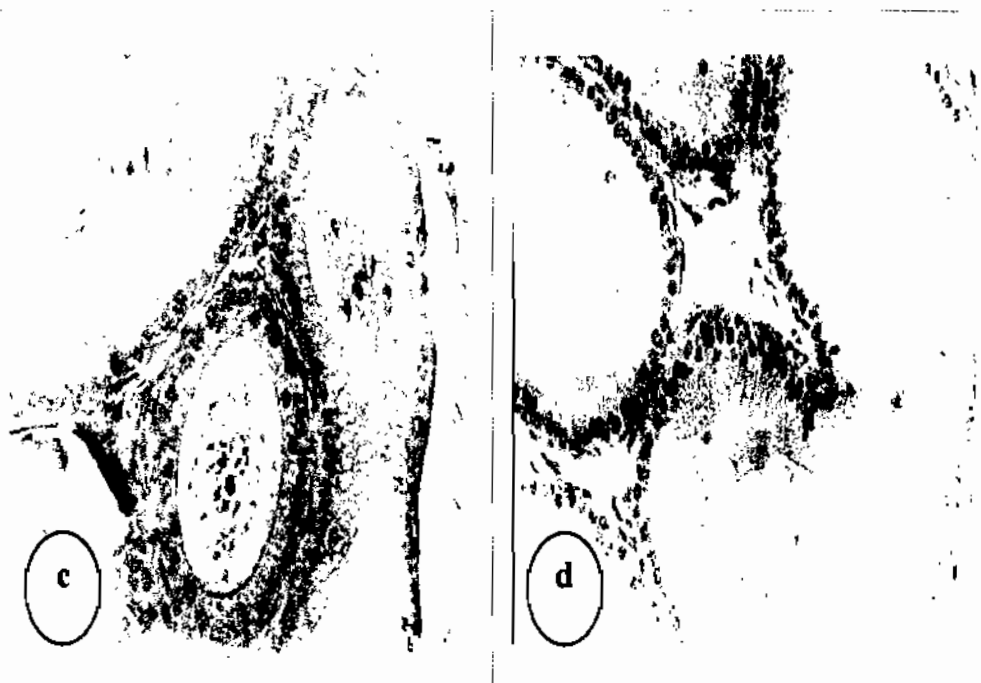
Plate (5):

(a): Parts of epididymal tubules of control group showing a mass of sperms with sickle shaped heads sperm.

(20× 3.3 × 1.25 H&E)

(b): 15 days after single dose treatment shows severe decrease in sperms, the lining columnar cells increase in height and showing prominent -ve Golgi image regions (arrow).

(20× 3.3 × 1.25 H&E)

**Plate (5):**

(c): 2 weeks after repeated dose showing marked loss of sperm content within epididymal tubules. Only cell debris and reticulated material were seen the atrophy of most spermatogenic cells and the filling of it inside the lumen.

(20× 3.3 × 1.25 H&E)

(d): A picture of a part of epididymis after 3 weeks after repeated dose showing complete absence of sperms within the tubules. Notice the increasing in cell height and well defined -ve Golgi image regions.

(20× 3.3 × 1.25 H&E)

Discussion

In the present study it was observed that intravenous injection of doxorubicin (as a single dose or repeated doses) leads to drastic changes in testicular parenchyma. Changes were more pronounced with repeated dose schedule. Spermatogenic cells in dividing stages were more affected so primary spermatocytes disappear in early stages while secondary spermatocytes and early spermatids underwent apoptotic changes in late stages. All stages completely disappeared in affected tubules at 21 days of treatment. Testicular toxicity of adriamycin was observed by (Adaehi *et al.*, 2000 & Tsunenari *et al.*, 2000) after single or repeated dose administration to rat. Multinucleated giant cells were observed within seminiferous tubules possibly may be due to fusion of macrophages to engulf deteriorated spermatogenic cells.

Similar results were reported by (Shinoda *et al.*, 1999) in meiotically dividing spermatocytes and early round spermatids. Intra tubular vacuoles observed in late stages of treatment can be attributed to shrinking and disappearance of degenerating germ cells. Similar results were reported in mice testes by (Stietiea *et al.*, 1994) after volteran administration. Another suggestion was provided by (Monsees *et al.*, 2000) that vacuoles

could be due to an increase in production of seminiferous tubular fluid by Sertoli cells. The process was known to be regulated by germ cells and androgenic hormones. The drug was proved to work through cell cycle effects. The pre-mitotic DNA synthesis was more sensitive than pre-mitotic DNA synthesis to anthracyclines group including doxorubicin (Jahnukainen *et al.*, 2000). Doxorubicin intercalate non-covalently between DNA nitrogenous bases producing helix damage (Bossler & Hortobagyi, 1994).

In the present study, degenerative changes in testicular tissue were not associated with any signs of inflammatory reaction such as lymphocytes or neutrophil aggregation which proved that apoptosis (programmed cell death) was involved in doxorubicin induced testicular toxicity.

Most recent researches had pointed that apoptosis is the way by which damaged spermatogenic cells were removed (Sjublom *et al.*, 1998; Shinoda *et al.*, 1999 and Jahnukainen *et al.*, 2000).

In the present study, Sertoli cells were affected morphologically in late periods of doxorubicin administration. However, in the early stage of treatment, the Sertoli cells tight junction seems to be weakened and this lead to separation of spermatogenic cells observed after 5-7 days of drug administration.

Sertoli cells are the nurse cells for immature sperm. Tight junction between neighboring Sertoli cells creates a special environment that supports and protects the developing germ cells in adluminal (near lumen) compartments. Its damage results in decreased sperm production, which may be permanent even if exposure to toxic agent is discontinued (Monsees *et al.*, 1996 & 2000). The resistance of Sertoli cells to doxorubicin damaging effect till late phases of treatment could be attributed to expression of a multi drug resistance (MDR) type I genes, and the plasma membrane P₁ glycoprotein (P-gP) functioning as an energy dependent pump for the efflux of diverse anticancer drug (Melaine *et al.*, 2002). The absence of expression of these genes in mitotic and meiotic germ cells probably explains their particular vulnerability to anticancer drugs observed in the present study. On the other hand, expression of (P-gP) in the haploid spermatozoa reflects their ability to assume their own anti-drug defense.

The increase in Leydig cells which was observed in the present study could be compensatory to seminiferous tubules degeneration. Similar results were observed in cryptorchid rat testes. Tubular damage might induce an increase of LH level that stimulates Leydig cell differentiation and hypercellularity (Kerr *et al.*, 1985; Barlet and Koye 1986 & El-Samamnouy *et al.*, 1987).

Sertoli cells and Leydig cells however, can be readily affected by toxicants. Alteration in functions of these cells may lead to change in hormonal balance, disturbed development of spermatozoa and impaired male fertility (Monsees *et al.*, 2001).

The decrease or absence of epididymal contents of sperms and appearance of desquamated spermatogenic cells reflect the degenerative changes in seminiferous tubules. Epididymal index could be used for assessment of the extent of testicular damage produced by environmental or chemical factors.

In conclusion, doxorubicin was similar to other cytotoxic drugs in having drastic effects on testicular structure, especially spermatogenic cell lines, Sertoli and interstitial cells suffered late during treatment. Caution should be taken during treatment with this drug.

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التغيرات النسيجية لخصية الفأر بعد تعاطي عقار الدكسوروبيسن هيدروكلوريد (أدريلاستينا) المضاد للسرطان

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مستخلص. في هذه الدراسة تم استخدام عدد ٩٠ فأراً ذكراً بالغاً من سلالة MFI داخلية التزاوج وكانت تتراوح أعمارها بين ٣٥-٤٥ يوماً وأوزانها بين ١٨-٢٠ جم. استخدم في هذه الدراسة عقار الدكسوروبيسن (أدرياميسن) تحت الأسم التجاري (أدريلاستينا)) ذو السمية الخلوية والمستعمل في معالجة العديد من السرطانات حيث حقن وردياً عن طريق الوريد الذيلي بجرعة مفردة (٠.٠٢ مجم/فأر) أو جرعة متكررة (٠.٠١ مجم/فأر) ثلاث مرات في الأسبوع. بعد التشريح حقن القلب فوراً بالفورمالين لضمان وصول المثبت لجميع الأنسجة ثم تم أخذت عينات الخصية والبربخ من كل من المجموعات الضابطة والمعاملة ومن ثم تمريرها لعمل قطاعات شمعية بقطر ٥ ميكرون وصبغت العينات بصبغة الهيماتوكسلين والأويسين وبصبغة حامض البيير أيونك شيف لفحص السكريات العديدة.

جمعت العينات من الجرعات المجموعة ذات الجرعة المفردة بعد ٣، ٥، ٧، ١٠، ٢١ يوماً، وتلك المعاملة بجرعة متكررة تم أخذ العينات منها بعد ١ أسبوع، ٢ أسبوع، ٣ أسابيع من بداية الحقن. أوضحت النتائج أنه يمكن للدكسوروبيسن أن يغير التركيب النسيجي لنسيج الخصية في المراحل الأولية للجرعة المفردة حيث تم ملاحظة احتقان في الأوعية الدموية البين انيببية في النسيج البيني ، ويلاحظ تباعد وانفصال للخلايا الجرثومية كما يلاحظ زيادة طفيفة في وزن كل من الحيوان والخصية. أما التغيرات الشديدة في الخلايا المنوية فيتم ملاحظتها بعد ٧، ١٥، ٢١ يوماً. حيث تبدوا هذه التغيرات على شكل موت خلوي مبرمج (تحلل ذاتي)، ويظهر أن هذا التحلل يكون معتمداً على مراحل دورة الخلية، كما أظهرت خلايا أمهات المنوي والحيوانات المنوية الناضجة مقاومة لسمية العقار بالرغم من ظهور بعض التغيرات في رؤوس الحيوانات المنوية وذبولها في الحالات الشديدة (بعد ٣ أسابيع من الجرعات المتكررة). ومما يدل على أن التغيرات السمية الحاصلة للخصية هي تحلل ذاتي هو غياب التفاعلات الالتهابية أو أي علامات تدل على تركز. ويبدو أن خلايا

سيرتولى الداعمة تتأثر وظيفياً في المراحل الأولية ومن المحتمل أنها فقدت اتصالها مع الخلايا الجرثومية مما أدى إلى عدم انتظامها وانفصالها. وفي المراحل المتأخرة من مجموعة الجرعة المفردة وبعد الجرعات المتكررة ظهرت الخلايا مليئة بالفجوات والانتفاخات السيئوبلازمية وأنوية صغيرة الحجم غير منتظمة. وظاهرياً لا تتغير خلايا ليدج في المراحل الأولية من تعاطي الكسوروبيسين، أما بعد ٢١ يوماً من إعطاء الجرعة المفردة و٢-٣ أسبوعاً من الجرعات المتكررة تم ملاحظة تكاثر في خلايا ليدج خصوصاً بين الأنبيبات المتأثرة بشكل كبير بالمعاملة، ويظهر سيئوبلازم هذه الخلايا فجوات تصطبغ بشدة بصيغة حمض الأوزميك.

ومن المقترح أن الكسوروبيسين يقوم بعمله عن طريق التداخل مع بناء الحمض النووي الدنا ويقوم بالتأثير على تجمع الأنبيبات الدقيقة أو أن يقوم بالتأثير على أيض الخلية. ونحتاج إلى دراسات موسعة للتركيب الدقيق للخلايا وتحليل نسيجية وهرمونية وذلك لتسليط الضوء على تأثيرات الكسوروبيسين التحليلية الملاحظة في هذه الدراسة.

