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2 **Therapeutics Effect of Costus Root Extract against**  
3 **Copper Oxide Nanoparticles Induced Liver and**  
4 **Kidney Toxicity in Rat**

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11 **ABSTRACT**

**Aims:** Copper oxide nanoparticles (CuO NPs), which have potential hazards for organisms and the environment in a number of applications, have emerged as a prominent class of nanomaterials.

**Study design:** This study aimed to investigate the effect of copper oxide nanoparticles in rat liver and kidney tissues.

**Methodology:** A total of 20 adult male rats were assigned randomly to 2 groups [1<sup>st</sup>, control; 2<sup>nd</sup>, CuO NPs (100 mg/kg body weight/day) intraperitoneally for 4 weeks].

**Results:** Current results revealed, significant increases in serum ALT, AST, urea, creatinine, potassium ions and liver and kidney tissue damage after CuO NPs administration when compared to control group. Conversely, statistical significant decreases were detected in serum albumin, total proteins, calcium and sodium ions levels in CuO NPs group as compared to control group.

**Conclusion:** We can conclude that; CuO NPs induced toxicity and injury in rat liver and kidney.

12  
13 *Keywords:* Copper oxide nanoparticles; liver; Kidney; Toxicity; Rats.

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15 **1. INTRODUCTION**

16 Nanoparticles (NPs) are generally defined as particulate matter with at least one dimension that is less  
17 than 100 nm. This definition puts them in a similar size domain as that of ultrafine particles (air borne  
18 particulates) and places them as a sub-set of colloidal particles [1]. Due to unique properties of NPs  
19 such as small size (1-100 nm in diameter) and the greater surface area to volume ratio as well as  
20 different electronic, magnetic, optical and mechanical properties and also particle shape, these  
21 particles hold great interests in the various fields [2,3].

22 Nanoparticles may do not have toxic effects and used in treatment of many diseases and it has  
23 antimicrobial and antibacterial activates [4,5], however; the greater surface area to volume ratio of  
24 some NPs causes their higher chemical reactivity and results in increased production of reactive  
25 oxygen species [6,7]. Metal and metal oxide nanoparticles have been hypothesized to promote  
26 cytotoxicity and apoptosis via generation of reactive oxygen species, activation of intracellular  
27 signaling pathways, DNA damage and autophagic cell death [8-10].

28 Copper (Cu) is an essential trace element and has important role in many metabolic and chemical  
29 processes in cells and tissues [11,12]. Copper is a chemical element with numerous functions in living  
30 organisms. It belongs to the group of essential trace elements and is an integral part of many  
31 metabolic and other chemical processes in cells and tissues. Copper is located in a variety of enzymes  
32 important for detoxification such as superoxide dismutase which is active against reactive oxygen  
33 species [11].

34 Copper-based nanoparticles have wide industrial and engineering applications, predominantly as  
35 catalyst, sensing materials, part of superconductors, storage systems, and photothermal / thermoelectric  
36 materials. Copper oxide NPs may also serve as a valuable rocket propellant combustion catalyst.  
37 Copper oxide nanoparticles (CuO NPs) have developed as a significant class of nanomaterials with  
38 potential dangers to organisms and the environment in a variety of applications as industrial,  
39 chemical, electronic and medical applications [13,14].

40 In a range of applications, CuO NPs have emerged as an important class of nanomaterials that may be  
41 harmful to living things and the environment human exposure to these nanoparticles has risen as a  
42 result of their diverse applications [15-17]. Oxidative stress and reactive oxygen species (ROS)  
43 production are considered the main mechanism by which copper oxide nanoparticles (CuO NPs)  
44 induce toxicity [18]. The goal of this study was to determine the effect of copper nanoparticle on liver  
45 and kidney in male rats.  
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## 47 **2. MATERIAL AND METHODS**

### 48 **2.1 Preparation of CuO NPs**

49 CuO NPs was purchased from NanoFab Technology, Cairo, Egypt with particle size about  $25 \pm 5$  nm  
50 and a 99.9% trace metal basis.

### 51 **2.2 Animals, Ethical Considerations and Experimental Design**

52 A total of 20 male albino rats (*Rattus norvegicus*) weighing  $175 \pm 15$  g, that were delivered from  
53 National Research Center in Giza, Egypt. The study design was endorsed by the Institutional Ethical  
54 Committee for Animal Care and Use (code: IACUC-SCI-TU-0242). Before the trial began, rats were  
55 kept at our Faculty's animal house for a week. They were kept in conventional circumstances with a  
56 standard rodent feed, unlimited access to water, a standard temperature of 25°C, 12-hour light/dark  
57 cycles, and a minimum relative humidity of 40%. Rats were allocated equally to 2 groups; Group 1-  
58 Control group: rats didn't receive any treatment, Group 2- CuO NPs group: included animals that were  
59 intraperitoneally injected with CuO Nps (400 mg/Kg body weight/ day) for 4 weeks [19].

### 60 **2.3 Blood and serum samples**

61 Finally, at the end of the study period, rats were anesthetized by sodium pentobarbital then sacrificed.  
62 Blood samples have been collected aseptically by venipuncture into a dry clean and sterile tube  
63 without anticoagulant substances and allow it to clot. Blood samples permitted to stand for 30 min at  
64 4 ° C for clotting and then centrifuged for 10 minutes at 3000 rpm. The collected serum was kept at -  
65 18° C until it was analyzed to determine a blood parameter.

66 Animals were dissected just after decapitation; liver and kidney were quickly removed and cleaned  
67 with a saline solution (0.9%), then fixed with neutral buffered formalin solution (10%) for  
68 histopathological examinations.

### 69 **2.4 Assessment of serum liver function tests**

70 Alanine transaminase (ALT) and aspartate transaminase (AST) in sera were estimated according to  
71 assay designated by Reitman and Frankel [20]. Albumin and total proteins levels sera were estimated  
72 accordance to assay designated by Doumas et al. [21] and El-Aarag et al. [22] respectively.

### 73 **2.5 Assessment of serum Kidney function and electrolytes tests**

74 Creatinine and urea in sera were estimated according to assay designated by Patton and Crouch [23].  
75 Potassium, calcium, sodium, and chloride ions levels in sera were estimated using marketable kits of  
76 Indian Sensa-core electrolyte according to the method planned by Tousson et al. [24].

### 77 **2.6 Histopathological examination**

78 Fixed liver and kidney samples were processed for paraffin sectioning, stained with hematoxylin and  
79 eosin (H&E) for histopathological examination according to Tousson [25].

## 80 2.7 Statistical Analyses

81 Data were expressed as means values + SE and statistical analysis was performed using one-way  
82 analysis of variance (ANOVA) to assess significant differences among treatment groups. The criterion  
83 for statistical significance was set at  $p < 0.01$ . Analysis was performed using (Graphpad prism,  
84 Graphpad software, Inc, La Jolla, CA, USA).

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## 86 3. RESULTS

### 87 3.1 Changes in liver functions

88 Table (1) showed that; a significant elevation in the levels of serum ALT, AST and a significant  
89 depletion in the level of albumin and total proteins in CuO NPs as compared control.

### 90 3.2 Changes in kidney functions and electrolytes

91 Table (2) showed that; CuO NPs induced a significant increase in the level of urea, creatinine, and  
92 potassium ions while a significant decrease in the level of sodium and calcium ions as compared  
93 control group.

### 94 3.3 Histopathological effects of CuO NPs on the liver

95 Liver sections in control group indicated typical hepatocyte organisation, including polygonal cells  
96 with large oval nuclei, eosinophilic cytoplasm, and a few spaced-apart hepatic sinusoids distributed  
97 between the hepatic cords with fine Kupffer cell arrangement (Figure 1A). Contrarily, liver sections in  
98 rat treated with CuO NPs showed many of histopathological changes as marked cytoplasmic  
99 vacuolization in hepatocytes, inflammatory cells and congestion in the central veins (Figure 1B).

### 100 3.4 Histopathological effects of CuO NPs on the kidney

101 Kidney sections in the control group revealed normal histological structures of the glomeruli and  
102 tubules in the cortical and medullary portions (Figure 1C). In contrast, kidney section in treated rats  
103 with CuO NPs revealed many of histopathological changes as marked atrophy of tubular cells and  
104 glomeruli and marked inflammatory cellular infiltration (Figure 1D).

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Table 1: Changes in serum liver functions tests in control and CuO NPs groups.

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	Control	CuO NPs
GPT (U/L)	41.1 <sup>#</sup> ± 2.25	79.4* ± 5.86
GOT (U/L)	131.0 <sup>#</sup> ± 7.60	185.5* ± 9.04
Albumin (g/dl)	3.92 <sup>#</sup> ± 0.22	2.77* ± 0.18
T. protein (g/dl)	6.047 <sup>#</sup> ± 0.39	5.282* ± 0.30

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Data are expressed as mean ± SE of 10 observations. Significant difference from the control group at  
\* $p < 0.01$ . Significant difference from the CuO NPs group at # $p < 0.01$ .

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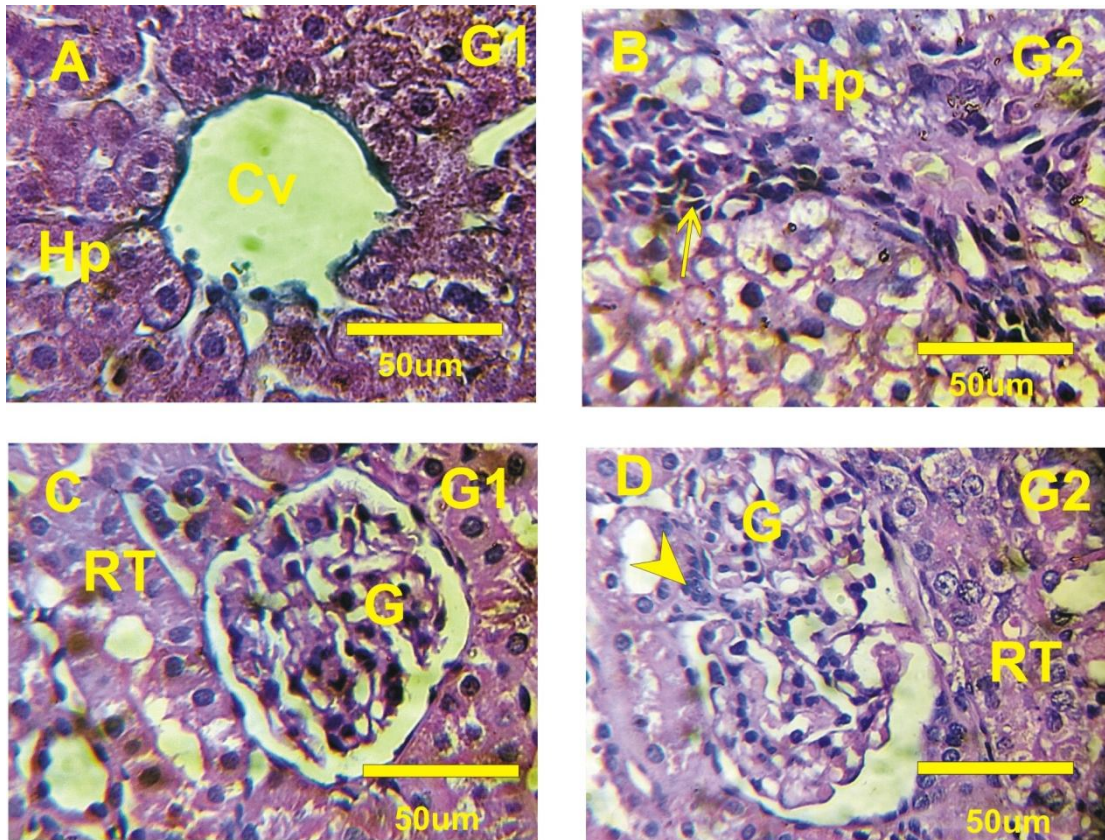
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Table 2: Changes in kidney functions and electrolytes levels in control and CuO NPs groups.

	Control	CuO NPs
Creatinine (mg/dl)	0.38 <sup>#</sup> ± 0.027	0.96* ± 0.040
Urea (mg/dl)	33.46 <sup>#</sup> ± 1.16	62.2* ± 3.88
Phosphorus	4.35 <sup>#</sup> ± 0.27	6.01* ± 0.49
Na+(mEq/L)	135.9 <sup>#</sup> ± 9.6	130.8* ± 10.5
K+(mEq/L)	4.77 <sup>#</sup> ± 0.31	3.50* ± 0.40
Ca++(mEq/L)	1.195 <sup>#</sup> ± 0.018	0.944* ± 0.016

124 Data are expressed as mean ± SE of 10 observations. Significant difference from the control group at  
 125 \*p < 0.01. Significant difference from the CuO NPs group at #p < 0.01.

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**Figure 1:** Liver and kidney sections in control and CuO NPs groups stained with H&E. **A:** Normal structure of liver section revealed hepatocytes (Hp) and normal central veins **B:** liver section in CuO NPs revealed marked cytoplasmic vacuolization of hepatocytes with marked inflammatory cells (arrows). **C:** Kidney sections in the control group revealed normal histological structures of the glomeruli (G) and tubules (RT) in the cortical portions. **D:** Kidney section in treated rats with CuO NPs revealed marked atrophy of tubular cells and glomeruli (G) and marked inflammatory cellular infiltration (arrow heads).

#### 4. DISCUSSION

Copper is an essential trace element and has important role in many metabolic and chemical processes in cells and tissues. Due to their flexible properties, copper-based nanoparticles have been used in many industrial, chemical, electronic and medical applications. As a result of these wide applications exposures of human to these nanoparticles are increased. Oxidative stress and reactive oxygen species

141 (ROS) production are considered the main mechanism by which copper oxide nanoparticles induce  
142 toxicity.

143 Exposure to CuO NPs can result in significant adverse health effects in multiple organ systems [11-  
144 13]. CuO NPs originates from various industrial and/or household sources, and enters the body  
145 through food and fluid intakes, as well as by inhalation [17,14]. In line with this, the goal of this work  
146 was to investigate renal and hepatic toxicity of copper oxide nanoparticles (CuO NPs) in male rats.

147 According to our findings, CuO NPs cause an increase in AST and ALT levels as well as a depletion  
148 of total proteins and albumin. These findings point to hepatic toxicity and dysfunction, and the rise in  
149 liver enzymes may be caused by free radicals generated by the copper oxide nanoparticles.  
150 Additionally, changes in protein synthesis and/or metabolism may be to blame for the drop in protein  
151 levels. These results concurred with those of Yari et al. [26], El-Magd [27], Abdelazeim et al. [28]  
152 who reported that; CuO NPs induce marked liver damage.

153 These results concurred with those of **Yaqub et al. [29]; Elkhateeb et al. [30]** who reported that;  
154 CuO-NPs induced renal toxicity in rats and changes in liver functions.

155 According to our findings; CuO NPs induced marked liver injury as marked cytoplasmic  
156 vacuolization of hepatocytes with marked inflammatory cells. According to our results; CuO NPs  
157 induce increase in the level of urea, creatinine, and potassium ions while a significant decrease in  
158 the level of sodium and calcium ions as compared control group. These results mean that CuO NPs  
159 induced nephrotoxicity. These results concurred with those of **Chibber and Shanker [31]** who  
160 reported that; CuO-NPs induced renal toxicity and changes in blood parameters in mice.

161 These results concurred with those of **Elkhateeb et al. [30]** who reported that; CuO-NPs induced  
162 renal toxicity in rats. Current results revealed that CuO NPs induced severe atrophy of tubular cells  
163 and glomeruli, notable necrotic tubular cells, and marked inflammatory cellular infiltration, Current  
164 findings support **Yaqub et al. [29]** who studies the evaluation of CuO-NPs acute toxicity on the  
165 changes in kidney structures in mice.

## 166 **5. CONCLUSION**

167 Copper oxide nanoparticles (CuO NPs) induced elevation in liver enzymes (ALT and AST) and  
168 depletion in total proteins and albumin in addition to induce damage in liver tissues as atrophy,  
169 cellular infiltrations and congestion in the blood vessels. Also; CuO NPs induced elevation in kidney  
170 functions (urea and creatinine) and elevation in potassium and chloride ions and depletion in sodium  
171 and calcium ions, in addition to induce damage in kidney tissues as as marked atrophy of tubular cells  
172 and glomeruli and marked inflammatory cellular infiltration.

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## 174 **DISCLAIMER**

175 The products used for this research are commonly and predominantly use products in our area of research  
176 and country. There is absolutely no conflict of interest between the authors and producers of the products  
177 because we do not intend to use these products as an avenue for any litigation but for the advancement of  
178 knowledge. Also, the research was not funded by the producing company rather it was funded by personal  
179 efforts of the authors.

## 180 **CONSENT**

181 It is not applicable.

## 182 **ETHICAL APPROVAL**

183 Animal Ethic committee approval has been collected and preserved by the author(s).

## 184 **COMPETING INTERESTS**

185 Authors have declared that no competing interests exist.

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273

## 274 5. CONCLUSION

275 Copper oxide nanoparticles (cuo nps) induced renal and liver toxicity and damage in tissues in rats

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277 **FUNDING INFORMATION**

278 There is no financial support received for this research.

**DATA AVAILABILITY**

All data used in this study are included in this published article.

**CONFLICT OF INTEREST**

All authors declared that they have no conflicts of interest regarding the publication of this manuscript.

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287 **AUTHORS' CONTRIBUTIONS**

288 Ehab Tousson designed the study, performed the statistical analysis, wrote the protocol, and  
289 Marow Negm wrote the first draft of the manuscript. 'Afaf El-Atrsh, Somia Zaki managed the  
290 analyses of the study. All authors read and approved the final manuscript."

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## **CONSENT (WHERE EVER APPLICABLE)**

No manuscripts will be peer-reviewed if a statement of patient consent is not presented during submission (wherever applicable).

This section is compulsory for medical journals. Other journals may require this section if found suitable. It should provide a statement to confirm that the patient has given their informed consent for the case report to be published. Journal editorial office may ask the copies of the consent documentation at any time.

Authors may use a form from their own institution or SDI Patient Consent Form 1.0. It is preferable that authors should send this form along with the submission. But if already not sent during submission, we may request to see a copy at any stages of pre and post publication.

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Authors may use the following wordings for this section: "All authors declare that 'written informed consent was obtained from the patient (or other approved parties) for publication of this case report and accompanying images. A copy of the written consent is available for review by the Editorial office/Chief Editor/Editorial Board members of this journal."

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All manuscripts which deal with the study of human subjects must be accompanied by Institutional Review Board (IRB) or Ethical Committee Approval, or the national or regional equivalent. The name of the Board or Committee giving approval and the study number assigned must accompany the submission. If required, author should be ready to submit a

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345 post publication stage).

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347 For manuscripts involving human experiments, Authors may use the following wordings for  
348 this section: "All authors hereby declare that all experiments have been examined and  
349 approved by the appropriate ethics committee and have therefore been performed in  
350 accordance with the ethical standards laid down in the 1964 Declaration of Helsinki."

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## 352 REFERENCES

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354 References must be listed at the end of the manuscript and numbered in the order that they  
355 appear in the text. Every reference referred in the text must also present in the reference list  
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359 Only published or accepted manuscripts should be included in the reference list.

360 Articles submitted for publication, unpublished findings and personal communications should  
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376

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381 Note: Use of a DOI number for the full-text article is encouraged. (if available).

382 Note: Authors are also encouraged to add other database's unique identifier (like PUBMED  
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385 For Accepted, unpublished papers.

386 Same as above, but "In press" appears instead of the page numbers.

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392 Note: List the first six authors followed by et al.

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436 **DEFINITIONS, ACRONYMS, ABBREVIATIONS**

437 Here is the Definitions section. This is an optional section.

438 **Term:** Definition for the term

439

440 **APPENDIX**