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## EFFECT OF *Rauvolfia vomitoria* ON MERCURY-INDUCED CHANGES ON THE FINE MOTOR COORDINATION AND HISTOLOGY OF THE CEREBELLUM IN WISTAR RATS

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### ABSTRACT

The present study was aimed at evaluating the effect of the aqueous extract of *Rauvolfia vomitoria* (RV) on mercury-induced changes on the cerebellum of adult Wistar rats. Thirty male adult Wistar rats were divided into six groups of five animals each. The control was administered with distilled water for 35 days, mercury chloride (HgCl<sub>2</sub>, 49.8mg/kg) body weight, RV (750mg/kg); HgCl<sub>2</sub> (49.8mg/kg) and low dose of RV (250mg/kg), HgCl<sub>2</sub> (49.8mg/kg) and medium dose of RV (500mg/kg) and HgCl<sub>2</sub> (49.8mg/kg) and high dose of RV (750mg/kg). The administration lasted for 35 days through oral route daily with HgCl<sub>2</sub> given for 21 days and RV was for 14 days for the treated groups. Walking track equipment was used to test for gait and motor coordination and the animals were humanely sacrificed after the animals were anaesthetised with chloroform while tissue samples were harvested by opening the mid sagittal suture for histological studies. The result of gait and motor coordination test showed decrease in stride length, increase in sway length and stance length after mercuric chloride administration but stride length increased while sway and stances length decreased after the administration of RV. Observation of the cerebellum showed normal histology in the control, while mercury control, RV control, mercuric chloride and low dose RV, mercuric chloride and medium dose RV, and mercuric chloride and high dose RV groups showed some degenerative and cellular changes. The administration of RV has shown to ameliorate the degenerative changes in the cerebellum caused by mercuric chloride toxicity in Wistar rats.

**Key words:** Mercuric chloride, Cerebellum, *Rauvolfia vomitoria*, Wistar rats

### INTRODUCTION

Mercury and its compounds can be obtained from Industrial sources, fossils fuels power, mining co-operations, and natural forms such as mercury chloride that is found in higher densities in rocks and volcanic activities (FAO 1994; Park et al. 2000). Burning of fossil fuels such as petrol and gas, fumes, battery disposals, broken mercury thermometer and coal combustion are other high sources of emitting mercury and its compounds (Booth and Zeller 2005). Consumer products such as photographic plates and toners contain high amount of mercury chloride

(Goyer 1986). Some cosmetics also contain mercury. Examples include creams, perfumes, soaps and mascara (Adepoju-Bello et al. 2012).

There are many routes of exposure to mercuric compounds but the evidence of exposure is dependent on the levels of toxicity (Vimercati and Pesola 2001; WHO 2005). These exposure routes include; oral exposure via consumption of food

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products and grains preserved with mercuric compounds (Vupputuri et al. 2005; WHO 2005).

Children and women within the reproductive age are more susceptible to mercury poisoning (Murphy et al. 1979). In children, mercury poisoning is known as acrodynia or pink disease. Mercury and its compounds have been shown to have effects on the respiratory, cardiovascular and reproductive systems, blood, hair, skin and enzymes, and many other organs and tissues (Olivieri et al. 2000; Valera et al. 2008; Rao and Chhunchha 2009).

Mercuric chloride was evaluated in toxicity and carcinogenicity studies because of its extensive use and its occurrence as an environmental pollutant (U.S. DHHS 1993). Neurological symptoms include mental retardation, seizures, vision and hearing loss, delayed development, language disorders and memory loss. In children, a syndrome characterized by red and painful extremities called acrodynia has been reported to result from chronic mercury exposure (WHO 2007).

*Rauvolfia vomitoria* (RV) is a medicinal plant widely distributed all over the world, especially in Asia and West African Countries. The constituents of the plant was first extracted by a Swiss chemist in 1952 becoming the first neuroleptic. The plant later become a source of a lot of drugs used in psychiatry (Ehiagbonare 2004). In traditional medicine the root and leaf of *R. vomitoria* are brewed as tea, and used in humans for the treatment of hypertension, insanity, snakebite and cholera (Erhenhi and Obadoni 2015). The common name is Swizzle stick (Fapojuwomi and Asinwa 2013) and its Nigerian names include Asofeyeje in Yoruba, Akanta in Igbo and Wada in Hausa (Etukudo 2003).

Research work devoted to phytochemical evaluation of *R. vomitoria* revealed the presence of alkaloids, tannins, saponins, and flavonoids (Akpanabiatu et al. 2006). The extract has also been found to exhibit antioxidant activity, significant hydrogen peroxide scavenging effect relative to ascorbic acid, nitric oxide scavenging effect, metal chelating activity and ferric reducing power relative to ascorbic acid (Okolie et al. 2011). The aim of the present study was to evaluate the effect of *R. vomitoria* on mercuric chloride-induced changes on the cerebellum of adult Wistar rats.

## MATERIALS AND METHODS

### Animal Handling

Thirty male adult Wistar rats of average weight of 195g were used for this study. They were acclimatized for two weeks and kept in the animal house of the Department of Human Anatomy, Faculty of Medicine Ahmadu Bello University Zaria. The rats were then divided into six groups of five rats per group for the experiment.

### Chemicals/Extract Preparation

Mercuric chloride manufactured by May and Bakers Chemical Laboratory Limited Dagenham England. *R. vomitoria* root was obtained from Dakaci area of Zaria, Kaduna, Nigeria. The aqueous extraction of *R. vomitoria* root back was prepared according to Handa et al. (2008) in the Department of Pharmacognosy and Drug Development, Faculty of Pharmaceutical Sciences, Ahmadu Bello University, Zaria.

### Animal Experimentation

Thirty Wistar rats were divided into six groups of five animals each: Control was administered distilled water; mercury chloride ( $\text{HgCl}_2$ ) group administered 49.8mg/kg body weight, corresponding to 30% of its lethal dose at 50% ( $\text{LD}_{50}$ ) (Berlin et al. 2007); *R. vomitoria* (RV) group administered 750mg/kg body weight, equivalent to 4.29% of its  $\text{LD}_{50}$  (Amole et al. 2009);  $\text{HgCl}_2$  (49.8mg/kg) and low dose of RV (250mg/kg) group;  $\text{HgCl}_2$  (49.8mg/kg) and medium dose of RV (500mg/kg) group; and  $\text{HgCl}_2$  (49.8 mg/kg) and high dose of RV (750mg/kg) group. The administration of  $\text{HgCl}_2$  was for 21 days, after which RV was administered for 14 days. The administration was by oral route daily and lasted for 5 weeks while animal feed and drinking water was allowed *ad libitum*. The extract was diluted using distilled water. This experiment was approved by the Committee on Research and Postgraduate Studies of the Department of Human Anatomy, Ahmadu Bello University, Zaria.

### Gait and Motor Co-ordination Assessment

Walking track equipment according to Yu et al. (2001) and Paxinos and Watson (2005) was modified from previous studies for gait analysis and motor coordination in this study. The walking track apparatus consisted of a perplex glass chamber 80 (l) × 10 (w) × 12 (h) cm. The forepaw was painted red with ink and the hind paw painted black, thus permitting the recording of the prints of each forepaw



Figure 1: Picture of the Working Track

and hind paw on a reading sheet spread on the walking track as shown in Figure 1.

### Animal Sacrifice

At the end of administration, the animals were weighed, humanely sacrificed after the animals were anaesthetized with chloroform in an anaesthesia box and incision was made through the skin and muscle of the skull. The skull was opened through mid sagittal suture incision and the brain was removed and fixed in Bouin's fluid for twenty four hours. The tissues were routinely processed and stained using haematoxylin and eosin method.

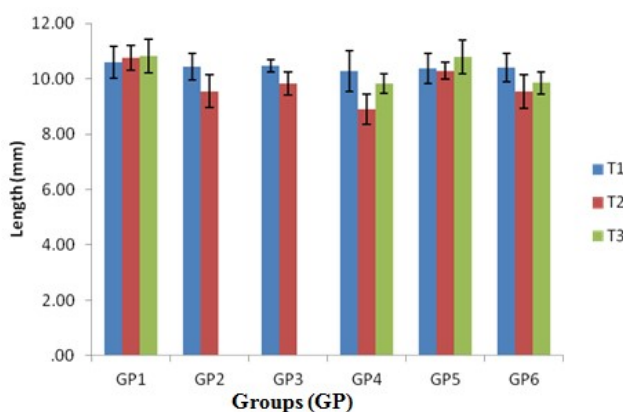


Figure 2: The mean training stride length (T1) and test stride length (T2) after HgCl<sub>2</sub> administration and after treatment with *R. vomitoria* (T3) in gait and motor co-ordination. No significant difference in mean training and test stride lengths.

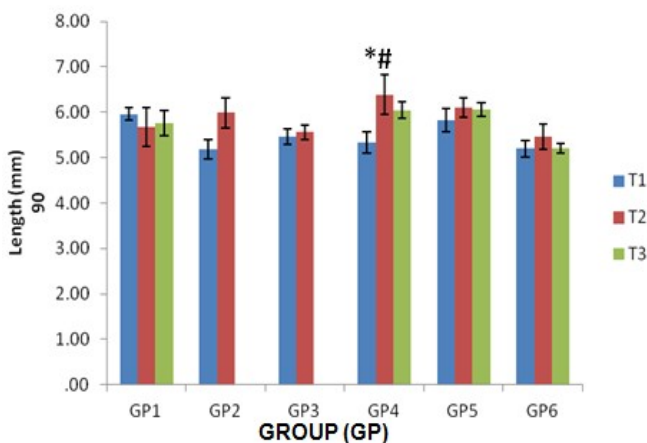


Figure 3: The mean training sway length (T1) and test sway length (T2) after HgCl<sub>2</sub> administration and after treatment with *R. vomitoria* (T3) in gait and motor co-ordination. \*#p ≤ 0.001 in the HgCl<sub>2</sub> and low dose of RV group

### Statistical Analysis

All data were presented as mean ± standard error of mean, and for establishing significant differences, data were analyzed by one-way analysis of variance, followed by Tukey post-hoc test. Values were considered significant if p value ≤ 0.05.

## RESULTS

### Physical Observation of the Animals

The result of physical observation of the animals showed that rats in control were active, while mercury chloride (HgCl<sub>2</sub>) control, HgCl<sub>2</sub> and low dose of RV, HgCl<sub>2</sub> and medium dose of RV and HgCl<sub>2</sub> and high dose of RV animals exhibited increased activity and aggression, and drank more water and increased gnawing during HgCl<sub>2</sub> administration, RV only animals showed little gnawing, were calmer and passed watery stools, while HgCl<sub>2</sub> and low dose of RV animals exhibited restlessness and more gnawing during RV administration. HgCl<sub>2</sub> (49.8mg/kg) and medium dose of RV and HgCl<sub>2</sub> and high dose of RV animals showed least change in their physical activity compared to the control.

### Gait and Motor Co-ordination Test Parameters

The motor co-ordination test used the narrow corridor to test for stride length, sway and stance of the animals.

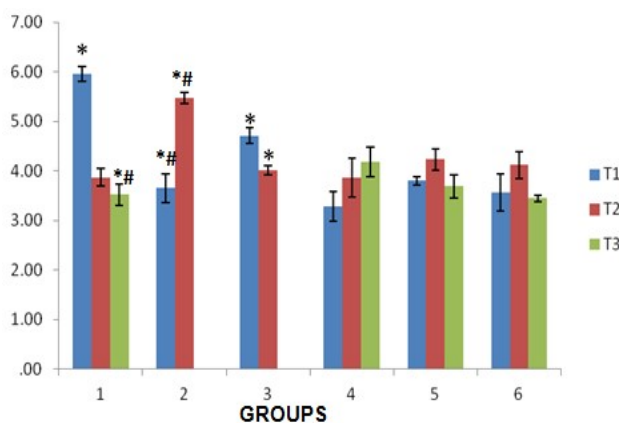


Figure 4: The mean training stance length (T1) and test stance length (T2) after HgCl<sub>2</sub> administration and after treatment with *R. vomitoria* (T3) in gait and motor coordination. \*#p ≤ 0.001 in control and HgCl<sub>2</sub> groups; \*p ≤ 0.01 in the *R. vomitoria* group

### Stride Length

The results of the mean stride length during training (T1), after administration of HgCl<sub>2</sub> (T2) and after treatment with *R. vomitoria* (T3) are shown in Figure 2. The result showed decreased stride length across the groups after administration of HgCl<sub>2</sub> (T2) compared to the control group, but was not significant (p > 0.05). After the administration of *R. vomitoria* there was an increase in the stride length across the group although not significant.

### Sway Length

The results of the mean Sway length of the rats during training (T1), after administration of HgCl<sub>2</sub> (T2) and after treatment with *R. vomitoria* (T3) are shown in Figure 3. The result showed increase in the sway length after administration of HgCl<sub>2</sub> (T2) with

statistically significant change in the Sway length in are HgCl<sub>2</sub> and low dose of RV ( $p \leq 0.001$ ) when compared with mean training length (T1). The Sway length result after treatment *R. vomitoria* (T3) decreased but was not statistically significant.

**Stance Length**

The results of the mean stance length of the rats during training (T1), after administration of HgCl<sub>2</sub> (T2) and after treatment with *R. vomitoria* afzel (T3) are shown in Figure 4. The result showed significant decrease in the stance length in the control ( $p \leq 0.01$ ), mercury chloride ( $p \leq 0.001$ ) and RV ( $p \leq 0.05$ ) groups compared to T1 and T2. The stance length

result after treatment with *R. vomitoria* (T3) increased in are HgCl<sub>2</sub> and low dose of RV but decreased in other treated groups, however, this differenc- were not statistically significant. Also comp-aring mean stance len-gth of the animals dur-ing training (T1) show-ed significant decrease in control ( $p \leq 0.001$ ) as the experiment progr-esses.

**Histological Study of the Cerebellar Cortex**

The histological exami-nation of the cerebellar cortex of the animals in the control administ-ered distilled water showed normal histo-morphology of the cerebellar cortical cells and layers as shown in Figure 5A. The cereb-ellum of animals in mercury chloride

treat-ed group showed necr-osis with shrunked Purkinje cells and vac-uolation around some of the degenerating Purkinje cells, with lar-ge areas of absence of Purkinje cells, but rela-tively normal molecular and granular cell layers as shown in as shown in Figure 5B. The cerebellum of animals in RV treated group showed relatively normal Purkinje cells with disoriented Purkinje cells in the Purkinje cell layer and normal granular and molecular cell layers as shown in Figure 5C. The cerebellum of animals in HgCl<sub>2</sub> and low dose of RV showed fewer but normal Purkinje cells with some areas of loss of the cells, as shown in Figure 5D. Although there was loss of Purkinje cells in HgCl<sub>2</sub> and medium dose of RV group, the observed cells still appeared normal, with normal granular and molecular layers as shown in Figure 5E. The cerebellum of the HgCl<sub>2</sub> and high dose of RV showed better distribution of Purkinje cells, fewer necrosis and vacuolation around Purkinje cells in the

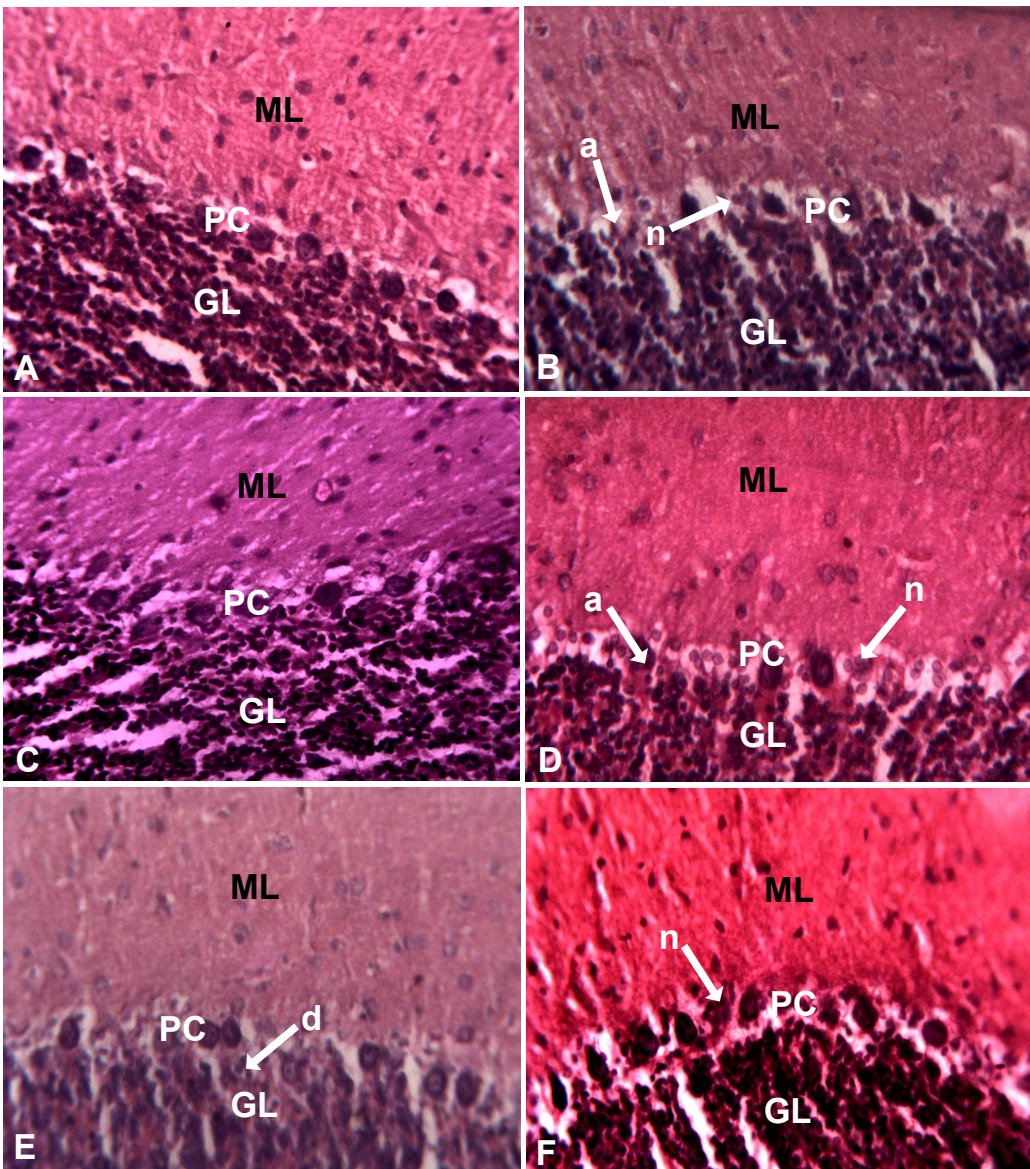


Figure 5: A. Section of the cerebellar cortex of the control group showing normal Purkinje cells (PC); B. Section of the cerebellar cortex of HgCl<sub>2</sub> group showing areas of absence (a) and necrotic cells (n); C. Section of the cerebellar cortex of *R. vomitoria* group showing shrunken Purkinje cells (PC); D. Section of the cerebellar cortex of HgCl<sub>2</sub> and low dose *R. vomitoria* group showing areas of absence of Purkinje cells (a); E. Section of the cerebellar cortex of HgCl<sub>2</sub> and medium dose *R. vomitoria* group showing displaced Purkinje cells (d); F. Section of the cerebellar cortex of HgCl<sub>2</sub> and high dose *R. vomitoria* group showing necrosis. Purkinje cells (PC), Molecular layer (ML) and Granular layer (GL)H & E X250

Purkinje cell layer with areas of complete absence of Purkinje cells, normal granular and molecular cell layers as shown in Figure 5F.

## DISCUSSION

The walking track equipment determined gait and motor coordination of the animals. Tourtellotte and Milbrandt (1998) reported that abnormal gait is due to reduced muscular tone, impaired cerebellar motor or peripheral neurological function, and/or due to underlying musculoskeletal anomaly. The stride length of the control animals increase with age but not statistically significant. During administration of mercury chloride, the stride length of the animals decreased after treatment although not statistically significant. The present result disagrees with the work of Carter et al. (1999), who stated that animals with motor deficit will display shorter stride length. Also, the sway length of the animals increased after administration of HgCl<sub>2</sub> and was statistically significant in the HgCl<sub>2</sub> and medium dose RV group, but decreased after treatment with RV, agreeing with the work of Reimold et al. (1996), who reported that sway length will increase resulting in a shorter, wider gait and motor abnormality. Furthermore, the stance length decreased significantly with age for the control but increased during administration of mercury chloride, which was significant in HgCl<sub>2</sub> control, but decreased after treatment with RV. This result is contrary to the work of Reimold et al. (1996), who reported decrease in stance length in gait and motor abnormalities.

Purkinje cells play a fundamental role in movement. They regulate and coordinate motor movement. So, any damage or loss would result in motor deficit and other neurological diseases. In this study, the cerebellum showed necrosis with shrinkage, karyorrhexis and vacuolation around Purkinje cells in HgCl<sub>2</sub> administration compared to the control group. This agree with the work of Ibegbu et al. (2014) and Ranjam et al. (2015), who reported degeneration and cellular necrosis with gliosis and increased cellularity of granular layer and molecular layer of the cerebellum after administration of mercury. Gray (2004) reported that mercury-induced toxicity in the cerebellum includes cerebellar atrophy involving predominant loss of granular cells and mild loss of Purkinje cells. These changes maybe transient but permanent abnormalities may be induced only by sustained exposure of these chemicals in an excessive quantity (Wolf et al. 2003). Gagalli et al. (2010) and Mello-Carpes et al. (2013), in their separate works reported decreased neural cell sizes and cell number in mice treated orally with inorganic mercury at high dose for a week. These researches were in agreement with the results of the present work. The present study has shown that RV has

ameliorative effects on the Purkinje cells of the cerebellar cortex in mercury induced neurotoxicity. The present study has also shown slight effect of RV as observed in group 3 administered RV alone which shows some level of necrosis, shrinkage and loss in Purkinje cells in the Purkinje cells layer. Similar effect was previously reported by Eluwa et al. (2009) and Ekong et al. (2013). This effect increase with volume of dosage even in groups co-administered mercury, indicating that there was a direct relationship between RV concentration and mercuric chloride concentrations and the level of neurodegeneration in the cerebellar cortex in the studied species of rats. In the work of Ekong et al. (2017) the co-administration of RV and *Gongronema latifolium* showed a protective effect of histopathology on cerebellum induced by RV. So, co-administration of RV should be a point of focus in its neuro-protective evaluation.

## Conclusion

Mercury exposure induced neurodegeneration in the cerebellum of the adult Wistar rats and RV has shown to significantly ameliorate the neurotoxicity induced by mercuric chloride administration. As such, the use of RV as a possible supplement for people exposed to mercury poison should be further investigated.

## Conflict of Interest

None declared.

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