

# Effects of prednisolone on adriamycin-induced nephropathy in rats

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## Summary in Japanese

慢性腎臓病 (chronic kidney disease : CKD) は、腎機能が慢性にかつ進行性に悪化する病態の総称である。抗がん剤の一種であるアドリアマイシン (以下、ADR) を動物に投与することで、大量のタンパク尿を生じるネフローゼ症候群を誘導できることが知られている。このような背景から本研究では、ADR腎症ラットモデルについて、モデル確立 (実験①) およびプレドニゾンの薬効薬理試験 (実験②) を実施した。

実験①では、Crlj:WI 雄性ラットに ADR を 3 パターンの用量 (① 3 mg/kg, ② 5 mg/kg, ③ 10 mg/kg) で静脈内投与し、モデルを誘発した。なお 3 mg/kg 投与群のみ、初回 ADR 投与日の 15 日後に、再度 2 mg/kg の用量で ADR を投与した。ADR 初回投与日を Day 1 として、Day 42 までの間に 1 回/週の頻度で採尿および採血を実施し、生化学的パラメータを測定した。

その結果、5 mg/kg の用量で以降の薬効評価試験を実施することとした。

実験②では、ADR 初回投与日より 1 回/日の頻度で 35 日間、プレドニゾンを 1 mg/kg または 5 mg/kg の用量にて経口投与した。その結果、プレドニゾンを 5 mg/kg の用量で投与した際に、有意ではないものの腎障害の改善が認められた。

また実験②では、Day 35 に採取した新鮮尿、または Day 36 の解剖時に採取した腎臓の薄切切片から RNA を抽出し、糸球体障害マーカーとされるマイクロ RNA (miR-26a) の測定を試みた。なお腎臓の薄切切片からのマイクロ RNA の抽出は、レーザーマイクロディセクションを使用して糸球体部分のみを切り出し、糸球体特異的な RNA を抽出した。RT-PCR 法で正常群、モデル対照群、プレドニゾン投与群の miR-26a の発現を測定したところ、正常群に対してモデル対照群の miR-26a の発現が有意に低値を示し、(新鮮尿) プレドニゾン投与群では有意ではないものの、モデル対照群に対して高値を示した (薄切切片)。本研究の内容は慢性腎臓病に対する薬効検討を実施するにあたり、有用であると考えられる。

## Objective

Chronic kidney disease (CKD) is characterized by progressive and chronic kidney dysfunction. Although it can be categorized various types with pathogenesis, adriamycin (ADR) induced nephrotic syndrome is considered to be a classic rat model of CKD. By administration of ADR, glomerular filtration barrier damage and subsequently massive proteinuria are induced. In this study, we tried to prepare an ADR-induced nephropathy model in rats (Experiment 1) and to validate the usefulness of the model by administration of prednisolone (Experiment 2).

## Materials and Methods

### [Animal]

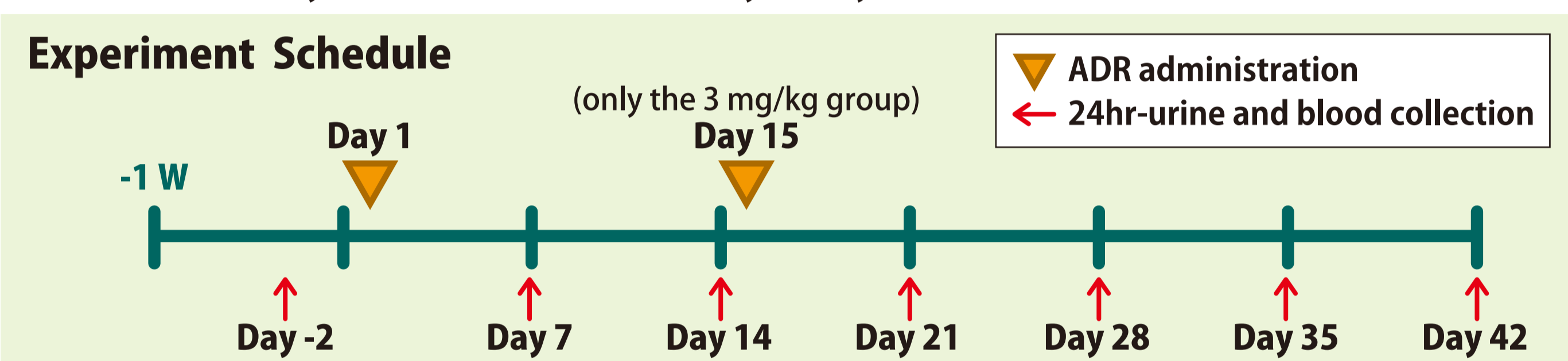
Crlj:WI, ♂, 7w (At the ADR administration)

**Experiment 1:** N=8×4 [Non-treatment, ADR-low dose group (3+2 mg/kg), ADR-middle dose group (5 mg/kg), ADR-high dose group (10 mg/kg)]

**Experiment 2:** N=8×4 [Non-treatment, Control group, prednisolone-low dose group (1 mg/kg), prednisolone-high dose group (5 mg/kg)]

### [ADR-induced nephropathy model in Experiment 1]

In the day 1, animals were administered ADR intravenously at 3, 5 or 10 mg/kg. Only the 3 mg/kg group, 2 mg/kg of ADR was additionally administered at day 15. 24 hr-urine and blood were collected once weekly for 6 weeks (Day -2, 7, 14, 21, 28, 35 and 42) for urinalysis and blood chemistry-analysis.

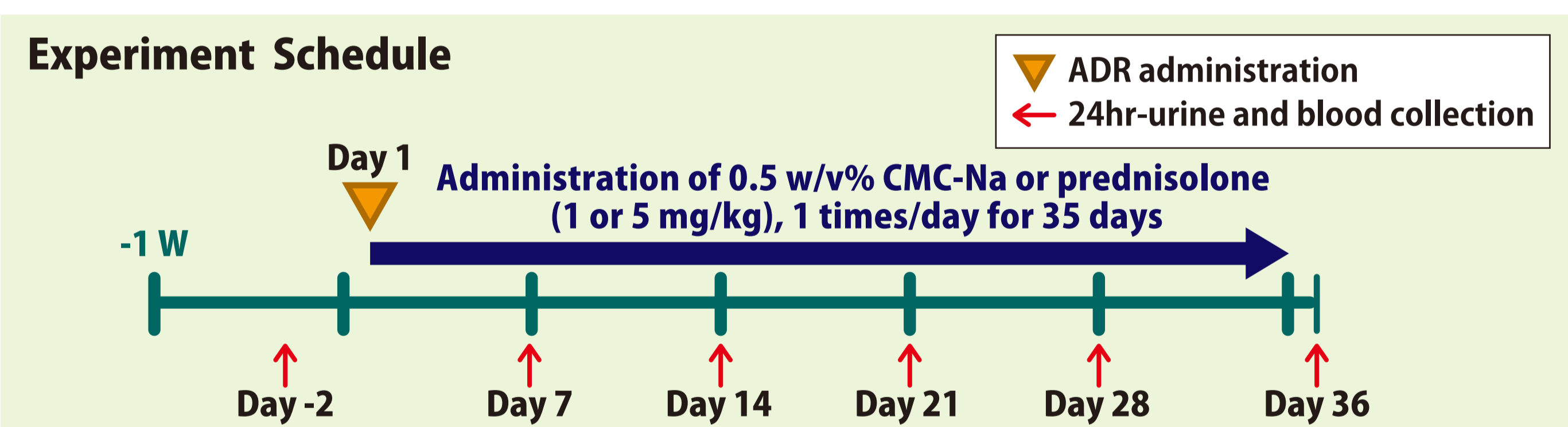


### [ADR-induced nephropathy model in experiment 2 and drug administration]

In the day 1, animals were administered ADR intravenously at 5 mg/kg. 24hr-urine and blood were collected once weekly for 6 weeks (Day -2, 7, 14, 21, 28 and 36) for urinalysis and blood chemistry-analysis.

In the day 35 only, fresh urine was collected for real-time PCR analysis. Prednisolone was administered orally at 1 or 5 mg/kg once a day for 35 days. 0.5 w/v% carboxymethyl cellulose-Na (0.5 w/v% CMC-Na) was administered orally to non-treatment and control group.

In the day 36, kidneys were collected and left kidney was used for histopathological analysis (H&E staining) and right kidney was used for real-time PCR analysis.



### [Examination items]

#### (1) Urinalysis (Automated analyze method)

Total protein, Albumin (Alb), Creatinine (Cre)

#### (2) Blood chemistry-analysis

Total cholesterol (T-CHO), Creatinine (Cre), Total protein, Albumin (Alb), Urea nitrogen (UN) (Data of Cre, Total protein and Alb are not shown.)

#### (3) Real-time PCR (RT-PCR)

Collected fresh urine was centrifuged (3,000×g for 15 minutes at r.t.) and supernatant (cell-free fraction) was transferred to a new tube. Transferred cell free-fraction was added Urine Conditioning Buffer (ZYMO RESEARCH CORP) and was centrifuged (3,000×g for 15 minutes at r.t.) to form a urine pellet. Collected left kidney were embedded with O.C.T compound in a routine method, and stained with toluidine blue. In the toluidine blue microscope slide, glomeruli (15 pieces per slide) were collected using laser microdissection (LMD, LMD7, Leica Microsystems GmbH).

Total RNA was extracted from urine pelleted or glomeruli section using the miRNeasy Mini Kit (QIAGEN). Complementary DNA was synthesized using the TaqMan™ advanced miRNA cDNA synthesis kit (Thermo Fisher scientific K.K.). Real-time PCR was carried out with the TaqMan™ advanced miRNA assay (Thermo Fisher scientific K.K.) in the LightCycler 480 II instrument (Roche). Endogenous controls was used miR-361-5p.

The relative expression of target gene (miR-26a) was calculated according to the next expression.

$$\Delta Cp(miR-26a) = Cp(miR-26a) - Cp(miR-361-5p)$$

$$\Delta \Delta Cp(miR-26a) = \Delta Cp(miR-26a) - \Delta Cp(\text{average of Non-treatment group})$$

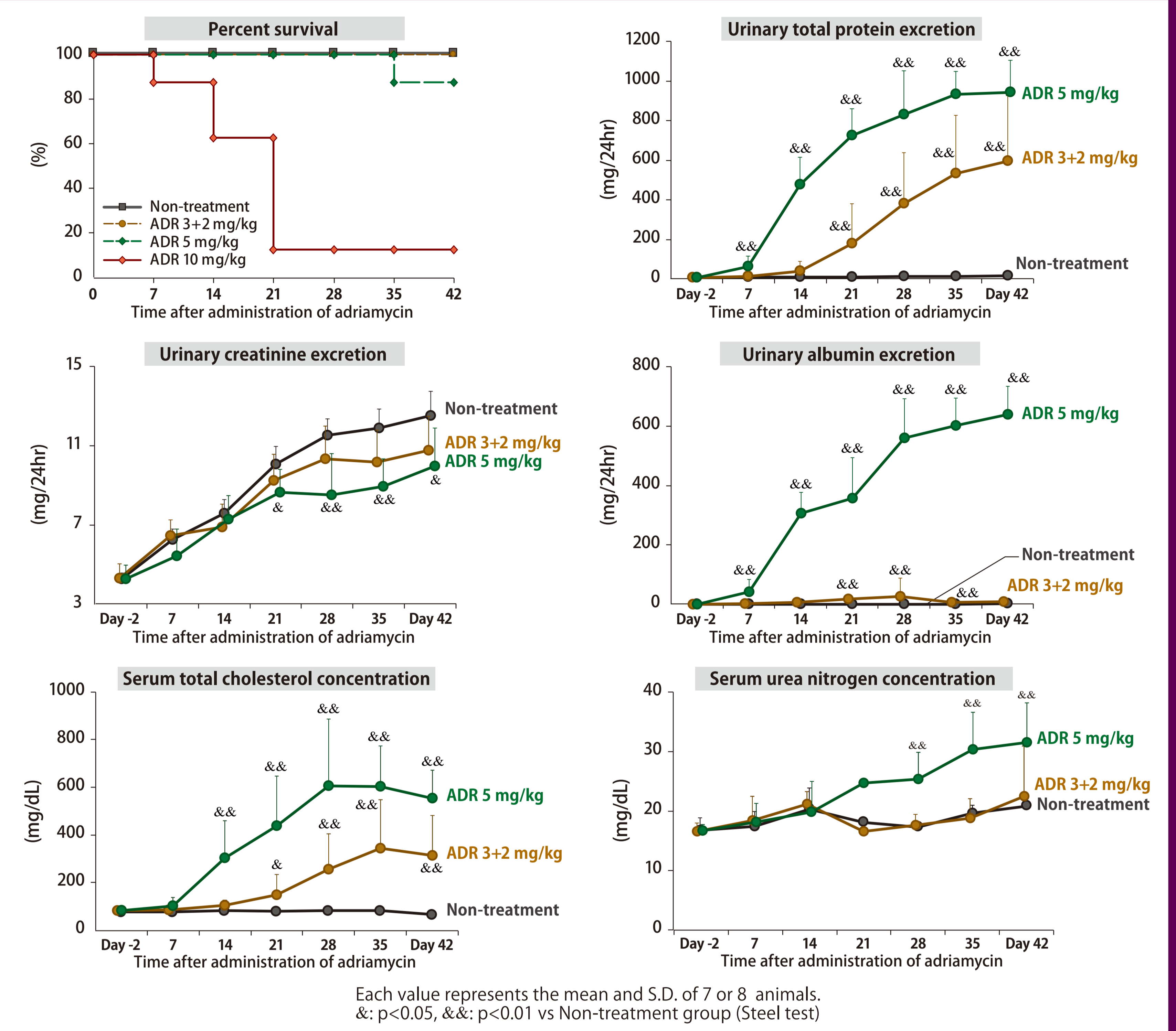
$$\text{Relative expression to Non-treatment group} = 2^{-\Delta \Delta Cp(miR-26a)}$$

## Conclusion

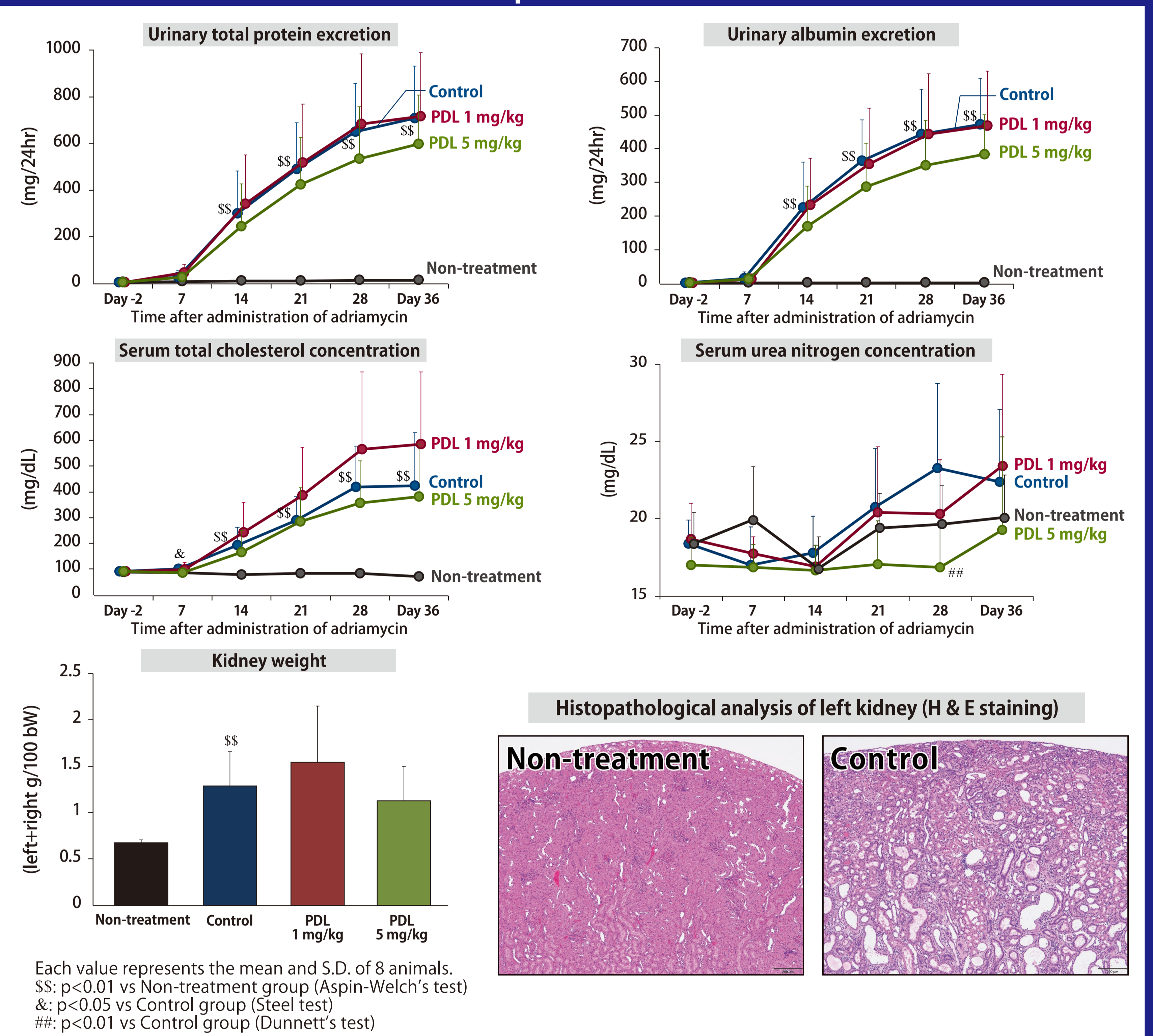
- Results of Experiment 1 (the percent of survival, the urinary total protein excretion and the urinary albumin excretion) indicated that ADR at 5 mg/kg was found to be suitable for induction of the nephropathy model rats.
- By the administration of prednisolone at 1 mg/kg, the urinary total protein excretion, the urinary albumin excretion and serum total cholesterol concentration were not improved (Experiment 2).
- The administration of prednisolone at 5 mg/kg was observed to be effective on dysfunction of the kidney by urinalysis and blood chemistry-analysis.
- As already known, the expression of miR-26a is decreased following nephropathy symptoms progression, and we analyzed the expression miR-26a in urine and the glomerulus in this study.
- In the ADR administration group (control group), the expression of urinary miR-26a was significantly decreased from the non-treatment group.
- In the PDL 5 mg/kg administration group, the expression of glomerular miR-26a was significantly increased from the control group.
- ADR-induced nephropathy rat model and the measurement of miR-26a are useful in evaluation of developing therapeutic drugs under the present experimental condition.

## Results

### Experiment 1



### Experiment 2



### Experiment 2 (Real-time PCR)

