



# Nano-titanium dioxide induced cardiac injury in rat under oxidative stress



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## ABSTRACT

Heart diseases, which are related to oxidative stress (OS), negatively affect millions of people from kids to the elderly. Titanium dioxide (TiO<sub>2</sub>) has widespread applications in our daily life, especially nanoscale TiO<sub>2</sub>. Compared to the high risk of particulate matter ( $\leq 2.5 \mu\text{m}$ ) in air to heart disease patients, related research of TiO<sub>2</sub> on diseased body is still unknown, which suggest us to explore the potential effects of nanoscale and microscale TiO<sub>2</sub> to heart under OS conditions. Here, we used alloxan to induce OS conditions in rat, and investigated the response of heart tissue to TiO<sub>2</sub> in healthy and alloxan treated rats. Compared with NMs treatment only, the synergistic interaction between OS conditions and nano-TiO<sub>2</sub> significantly reduced the heart-related function indexes, inducing pathological changes of myocardium with significantly increased levels of cardiac troponin I and creatine kinase-MB. In contrast with the void response of micro-TiO<sub>2</sub> to heart functions in alloxan treated rats, aggravation of OS conditions might play an important role in cardiac injury after alloxan and nano-TiO<sub>2</sub> dual exposure. Our results demonstrated that OS conditions enhanced the adverse effects of nano-TiO<sub>2</sub> to heart, suggesting that the use of NMs in stressed conditions (e.g., drug delivery) needs to be carefully monitored.

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## 1. Introduction

Nowadays, mainstream nanomaterials (NMs), e.g., nano-titanium dioxide (TiO<sub>2</sub>), are produced with the rapid development of nanotechnology. TiO<sub>2</sub> NMs are in close contact with people, showing a trend to replace microscale TiO<sub>2</sub> in foods, cosmetic, etc. (Lanza et al., 2006; Vicent and Duncan, 2006; Wickline and

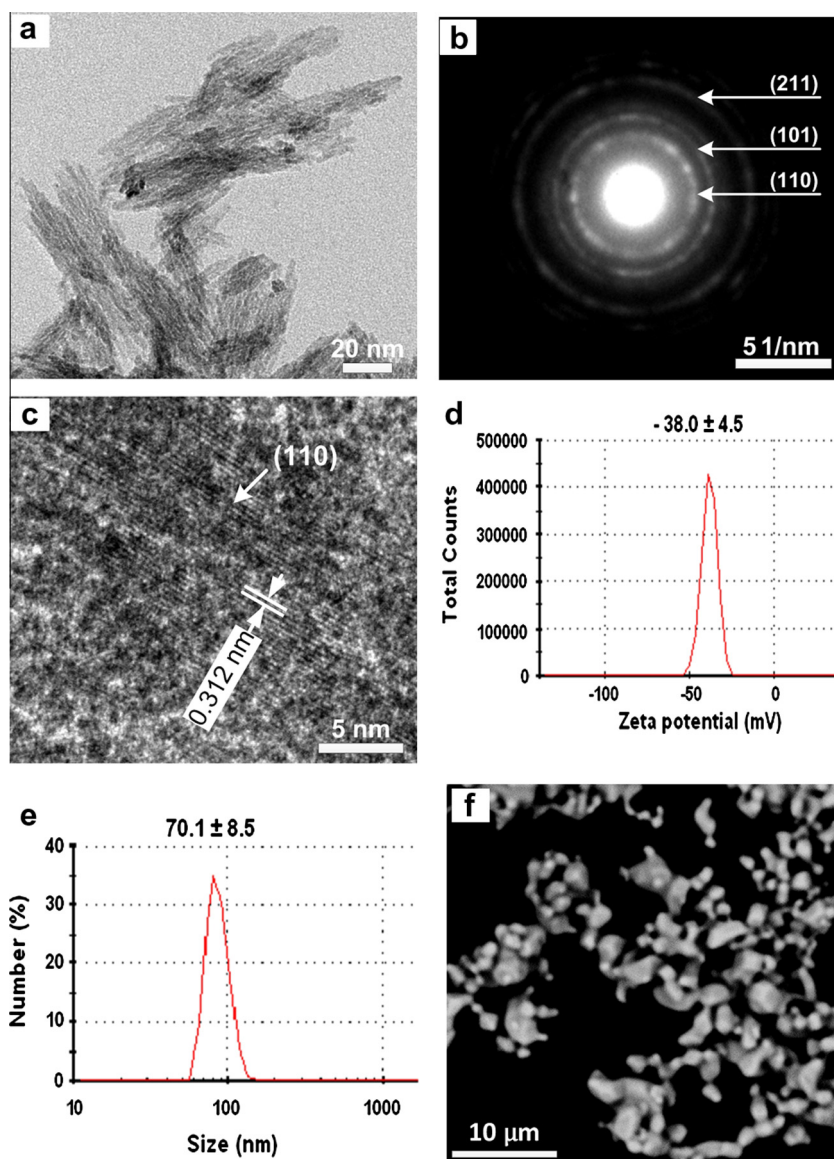
Lanza, 2003). Further, due to their valuable physicochemical properties, recent studies suggested that nano-TiO<sub>2</sub> can work as drug delivery systems and additive in pharmaceuticals (Drobne et al., 2009; Lanza et al., 2006; Shin and Lee, 2008). However, adverse effects, such as cellular dysfunction, oxidative damage, inflammatory responses, induction of thrombosis, impaired the spatial recognition memory, and liver lesions were shown *in vitro* and *in vivo* after nano-TiO<sub>2</sub> exposure (Cai et al., 2011; Fabian et al., 2008; Hu et al., 2010; Iavicoli et al., 2012; Li et al., 2008; Sha et al., 2011; Valant et al., 2012). In the present situation, it will be the paramount thing to consider for the safe usage of nano-TiO<sub>2</sub> to human beings.

As the largest cause of deaths in the world, heart diseases are no longer geriatric diseases and attack young people as well (McGill et al., 2008). The imbalance between oxidants and antioxidants can lead to oxidative stress (OS), which affects the micro-environment of cells, tissues, and organs in the body (Singal et al., 1998). Accumulating evidences show the crucial and negative roles of OS conditions in different types of heart diseases, such as heart failure, cardiovascular disease (Griendling and Alexander, 1997; Heitzer et al., 2001), hypertensive heart disease (Kadiiska

**Abbreviations:** ANOVA, analysis of variance; ALP, alkaline phosphatase; ALT, alanine aminotransferase; AST, aspartate aminotransferase; BW, body weight; DLS, dynamic light scattering; ELISA, enzyme linked immunosorbent assay; EDTA, ethylenedinitriletetraacetic acid; FBS, fetal calf serum; GSH, glutathione; H<sub>2</sub>O<sub>2</sub>, hydrogen peroxide; HRTEM, high resolution transmission electron microscopy; LDH, lactate dehydrogenase; MDA, malondialdehyde; MTT, 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide; NMs, nanomaterials; O<sub>2</sub><sup>-</sup>, superoxide anion; OD, optical density; OS, oxidative stress; PI, propidium iodide; SAED, selected area electron diffraction; SEM, scanning electron microscope; SOD, superoxide dismutase; XRD, X-ray diffraction; TiO<sub>2</sub>, titanium dioxide.

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**Fig. 1.** Characterization of TiO<sub>2</sub> particles. (a) TEM micrograph of nano-TiO<sub>2</sub> dispersed in ethanol; (b) SAED pattern of nano-TiO<sub>2</sub>; (c) crystal lattice plane of nano-TiO<sub>2</sub>; (d) zeta potential of nano-TiO<sub>2</sub> (5 mg/mL) was the average after 12 runs of 15 measurements; (e) size distribution of nano-TiO<sub>2</sub> (5 mg/mL) was shown after 15 runs of 30 measurements; and (f) SEM image of micro-TiO<sub>2</sub>.

et al., 2012), ischemic heart disease (Borillo et al., 2010), and cardiomyopathy (Cesselli et al., 2001). Compared to the high risk of particulate matter (PM, diameter  $\leq 2.5 \mu\text{m}$ ) to heart disease patients (Peters et al., 2001; Pope et al., 2006), the adverse effects of TiO<sub>2</sub> to heart tissue under OS conditions remain unknown, although several studies have shown that nano-TiO<sub>2</sub> can accumulate in healthy heart tissues *in vivo* (Chen et al., 2006; Wang et al., 2009b).

Based on the low toxicological potential and biological response of nano-TiO<sub>2</sub>, in this study, we used alloxan to induce the artificial OS conditions, and investigated the potential synergistic effect of TiO<sub>2</sub> and OS conditions during cardiac injury in Sprague–Dawley (SD) rats. Compared to NMs exposed healthy rats, rats in conditions of OS showed the significantly reduction of heart rate (HR), stroke volume index (SVI), and cardiac index (CI) after nano-TiO<sub>2</sub> exposure, following the pathological changes of myocardium and the significantly increased levels of cardiac troponin I (cTnI) and creatine kinase-MB (CK-MB). In addition, a type of micro-TiO<sub>2</sub> was used as a control to study the different responses of rat hearts

exposed to nanoscale and microscale TiO<sub>2</sub> particles, and to explore the potential synergy between nano-TiO<sub>2</sub> and OS conditions during cardiac injury.

## 2. Methods and materials

### 2.1. Reagent preparation

Alloxan monohydrate, nano-TiO<sub>2</sub> and micro-TiO<sub>2</sub> were purchased from Sigma–Aldrich Trading Co., Ltd., (Shanghai, China). Glutathione (GSH), brain natriuretic peptide (BNP), cardiac troponin I (cTnI), creatine kinase-MB (CK-MB), and myoglobin (MYO) enzyme linked immunosorbent assay (ELISA) kits were obtained from Roche Ltd., (Shanghai, China), R&D Systems and Jiancheng Bioengineering Company (Nanjing, China).

### 2.2. Characterization of TiO<sub>2</sub>

To avoid contamination during rat experiments, TiO<sub>2</sub> was firstly sterilized through 140 °C dry heat for 5 h. Dry heat sterilized TiO<sub>2</sub> was suspended in 0.9% saline solution and 30 min ultrasonic treatment in advance before rat experiments. Morphology, selected area electron diffraction (SAED) pattern and crystal lattice plane of sterilized nano-TiO<sub>2</sub> were checked using high resolution transmis-

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