IMMUNOHISTOPATHOLOGICAL STUDY OF BOVINE BILE SALT AGAINST SALMONELLA TYPHIMURIUM INFECTION IN RABBITS

Hawraa M. Murad* , Ahlam J.H.AL-Khamas , Suhad J., Rawaa S.A.AL-Azawi
College of Veterinary Medicine Al Qasim Green University, Babylon
*E-mail: howraa_alhussaini@yahoo.com

Abstract:
The current study was carried out to investigate some immunohistopathological effects of bovine bile salts against *Salmonella typhimurium*. In laboratory animal thirty albino rabbits of both sex that ages ranged between (10-12) months were divided randomly into three groups ,the first group immunized orally by 0.5ml (5mg/ml) and the second group immunized orally with 0.3ml (3mg/ml) of bile salts in zero time after two weeks the same doses repeated against *Salmonella typhimurium*, then delayed type hypersensitivity test was made on these groups and compared with the third group "that had been inoculated with 0.5 ml of sterile PBS as a control group at day 27 post immunization using soluble bile salts. At day 30 half number of animals from each group were scarified. Then challenge dose by 1ml of *salmonella typhi* were injected intraperitoneally (I/P) for the remaining half of all study groups ,then after three days they scarified. Samples of blood were collected from each group to ELIZA analysis for determine the level of IgG in serum in order to obtain their tissues for histopathological .The results showed that marked necrotic lesion, together with blood vessel congestion accompanied by hyperplasia with hypertrophy goblet cell of intestine and thickness of splenic capsule due to mononuclear cells (MNCs) infiltration. While the immunized groups with bile salts revealed presence of granulomatous lesion in liver with lymphoid hyperplasia and slight megakaryocyte proliferation in spleen. Finally, the results showed that the bile salts was highly immunogenic against *Salmonella typhimurium* and its toxins and this may be related to the fact that the one of component of bile salts deoxy cholic acid in their structure which has the ability of destroyed effect on salmonella and their toxins in the rabbits tissues.

Keywords: *Salmonella typhimurium*, Bile salts, Rabbits, ELISA.
be efficiently excreted in urine because they are insoluble or protein bound, for example "cholesterol which is derived from excess synthesis or the pigment bilirubin, the end product of hemi metabolism, which is carried in blood attached to albumin proteins (2). Finally, some of the secondary bile salts generated by microorganisms are potentially toxic and/or mutagenic. It is suggested that they can disturb the normal micro biota of the gut leading to diarrhea, mucosal inflammation or activation of harmful drugs and carcinogens in the intestinal contents (3).
immunosorbent assay): This test was done according to manufacturer (immunological consultants laboratory, Inc.) to determine the level of IgG in serum.

3- Histological examination: Four animals from each groups were scarified under deep anesthesia and specimens from liver and kidney fixed in buffered formalin (10 %), sectioned (5 mm thickness ) and stained with Hematoxylin and Eosin according to( 4).

Results and discussion :
1- Cellular immune response detected by skin test(delayed type hypersensitivity-DTH).

The results of the current study revealed that the mean values of the skin thickness after 24 hours were significantly (p<0.05) higher in the group that immunized by bile salts for concentration (5mg/ml) which rached 4±0.08 mm as compared with the control group (0.87± 0.02) mm , while it was significantly (p>0.05) lower in the group that immunized by bile salts by concentration (3mg/ml) which reached (0.2.74±0.05) mm respectively as compared to those that immunized by bile salts but significantly higher as compared with control the group (PBS) . Also after 48h, the results were showed a significant difference (p<0.05) in the group that immunized with bile salts for concentration 5mg/ml which were (2.75±0.04 ) as compared with 3mg/ml concentration which were (1.89 ±0.09)mm and control group (PBS) (0.66±0.06) mm

Therefore the train of this study was to determine the effect of the bile salts on the immunopathological change in rabbits that infected by salmonella typhimurium.

Materials and Methods
A-Experimental design:
Thirty rabbits were randomly divided into three groups as following:

1. The first group (10) rabbits were immunized orally by (0.5 ml) containing ( 5mg /ml) of bile salt by two doses for 14 days intervals (first immunization at day 0 and followed by booster immunizations at day 14) .

2. The second group (10)rabbits immunized orally with( 0.3ml) containing(3mg /ml)of bile salt for two doses with 14 days intervals (first immunization at day 0 and followed by booster immunizations at day 14).

3. The control group (10) rabbits were inoculated by 0.5 ml of sterile PBS. Then these groups were infected with hydatid cysts after 2 weeks from adaptation were injected intraperitoneally with (1ml/rabbit) containing salmonella typhimurium).

B-Tests
1- Cell mediated immune response of experimental rabbit determined by Delayed type hypersensitivity test was done on all animals at 27 day post immunization and post challenge.

2- Humoral immune response detected by ELISA(enzyme linked
Table 1: Values of skin thickness in the three groups.

<table>
<thead>
<tr>
<th>Group</th>
<th>Time</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1\textsuperscript{st} group: animal immunized with bile salt at \textit{concretions} (5 mg /ml)</td>
<td>4.00±0.08</td>
<td>2.57±0.04</td>
</tr>
<tr>
<td></td>
<td>Aa</td>
<td>Ab</td>
</tr>
<tr>
<td>2\textsuperscript{nd} group: animal immunized with bile salt at \textit{concretions} (3 mg /ml)</td>
<td>2.74±0.05</td>
<td>1.89±0.09</td>
</tr>
<tr>
<td></td>
<td>Ba</td>
<td>Bb</td>
</tr>
<tr>
<td>3\textsuperscript{rd} control group</td>
<td>0.87±0.02</td>
<td>0.66±0.06</td>
</tr>
<tr>
<td></td>
<td>Ca</td>
<td>Cb</td>
</tr>
</tbody>
</table>

Different small letters in row denote significant differences between periods (P≤0.05).

Inflammatory cytokines mainly IL10 and adaptive modulation of macrophage phenotype in adding to their role in nutrient absorption, BAs were signaling molecules that can control immune cell responses via FXR and TGR5 (6).

2- ELISA test for detecting levels of humeral immunity (Ab Titers)

ELISA test was showed the levels of IgG titer. The results revealed that there were a significant differences (p<0.05) in the mean values of the groups that immunized by bile salts for both concentrations (5mg/ml) and (3mg/ml) which were (30.68±0.78) as compared with control group (PBS)(6.12±0.040), also there were a significant (p<0.05) differences in the mean value of the group that immunized with bile salts for concentration (3mg/ml) which were (19.96±0.29) as compared with control group (PBS) (6.12±0.40).

The role of bile that had both primary and secondary BAs which could activate the cellular immune response. First, activation of Toll-like receptor 4 (TLR4), by damage-associated molecular pattern molecules released from dead hepatocytes, triggers an inflammatory response. Second, bile acids act as inflammagens, and directly activate signaling pathways in hepatocytes that stimulate production of proinflammatory mediators. Treatment of hepatocytes with bile acids did not directly cause cell toxicity but increased the expression of numerous proinflammatory mediators, including cytokines, chemokines, adhesion molecules, and other proteins that influence immune cell and function (5).
Table (2): The mean values of antibody IgG titers (\text{	extmu}g/ml) of the immunized groups and control group at 30th days:

<table>
<thead>
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<th>Group</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1\textsuperscript{st} group animal immunized with bile salt at concretions (5 mg /ml).</td>
<td>30.68±0.78 A</td>
</tr>
<tr>
<td>2\textsuperscript{nd} group animal immunized with bile salt at concretions (3 mg /ml).</td>
<td>19.96±0.29 B</td>
</tr>
<tr>
<td>3\textsuperscript{rd} control group</td>
<td>6.12±0.40 C</td>
</tr>
</tbody>
</table>

Different capital letters in column denote significant differences between periods (P≤0.05).

This current study showed the titer of IgG by bile salts was high significant. Whereas bile acids in extra reduce the cell-mediated immune response, their effects on the humeral response have been many investigated, the results are contract with (7 and 8) Biliary epithelial cells participate in both innate and adaptive immunity. (9 and 10). In contrast, the adaptive immune response induces memory to foreign antigens and is mediated by both B and T cells. Following activation, the adaptive immune response can also stimulate the production of a variety of cytokines and the recruitment of inflammatory cells (11).

3- Histopathological changes
A. Group (1) None immunized infected animals (positive control group).

B. Group(2). Oral immunized group with (3mg/ml) of bovine bile salts.

Microscopic pictures of liver tissue showed small granulomatous lesion in liver paranchyma (figure 4). In addition to presence of small granulomatous lesion consist of neutrophils intense PMNs aggregation (figure 5). Also the histopathological section in spleen showed per arteriolar lymphoid hyperplasia (figure 6).

C. Group(3). Oral immunized group with (5mg/ml) of bovine bile salts.

There is no clear histopathological changes in hepatic liver of this group (figure 7). While in histopathological section of intestinal tissue the predominant lesion showed sub mucosal MNCs infiltration associated with slight intestine infiltration inflammatory cell and hyperplasia with hypertrophy goblet cell (figure 2). The predominant splenic lesion was characterized by slight thickness of splenic capsule due to MNCs infiltration figure (3).
desquamation of intestinal mucosa (figure 8) and the splenic microscopically lesion showed diffuse amyloid like substances deposition with slight megakaryocyte proliferation (figure 9).

Fig:(1). Histopathological section in liver of non-immunized animals infected shows intense MNCs aggregation, necrosis, together with blood vessel congestion (H&E stain40x).

Fig:(2). Histopathological section in the intestine of non-immunized infected animals shows infiltration inflammatory cell and hyperplasia with hypertrophy goblet cell (H&E stain40x).

Fig:(3). Histopathological section in the spleen of non-immunized animals shows slight thickness of splenic capsule due to MNCs infiltration (H&E stain40x).
Fig:(4). Histopathological section in liver of Immunized group with (3mg/ml) of bovine bile salt shows small granulomatous lesion in liver paranchyma (H&E stain 40x).

Fig:(5). Histopathological section in intestine of immunized animal with (3mg/ml) of bovine bile salts shows presence of small granulomatous lesion consist of neutrophils intense PMNs aggregation (H&E stain 40x).

Fig:(6). Histopathological section in spleen Immunized group with (3mg/ml) of bovine bile salt shows per arteriolar lymphoid hyperplasia (H&E stain 40x).
Fig:(7). Histopathological section in liver Immunized group with (5mg/ml) of bovine bile salts shows no clear pathological changes (H&E stain40x).

Fig:(8). Histopathological section in intestine Immunized group with (5mg/ml) of bovine bile salt shows sub mucosal MNCs infiltration associated with slight desquamation of intestinal mucosa. (H&E stain40x).

"Fig(9). Histopathological section in the spleen of immunized deposition with slight megakaryocyte proliferation (H&E stain40x)."
concentration (5mg/ml). Also appearance of lymphoid hyperplasia in the spleen showed as a result to its persist stimulated by this antigen especially 1 month post immunity which revealed a good immune response following bacterial infection which act as a mitogen stimulate lymphoid cell According to the above histopathological results of this group mainly histopathological findings in the spleen tissue could be related directly to the function of the spleen as a secondary lymphoid organ in which the recognition and presentation of non-self-antigens occurs (16 and 17). While it has shown that MNCs aggregation was in various tissue mainly with higher bile salts concentration with slight evidence of serious degenerative changes comparing to the other treated groups that revealed more degenerative histopathological changes mainly in the intestine tissue which showed slight desquamation. In our histopathological results there were MNCs aggregations, neutrophils infiltration in various tissues when these tissues were immunized by bile salts with two concentrations (3mg/ml) and (5mg/ml), these results similar with (18). Also disappearance of lesion in liver tissue which were immunized with bile salts specially in 5mg/ml of salts due to decomposition of bacteria with bile so this result agreed with (19 and 17) who observed that the fatty acids and the basic phosphatase found in bile play a role in protoscolices decomposition because of the influence of this enzyme on the chemical composition of protoscolices. According to the above histopathological results of the first group (Non immunized infected animals group) mainly histopathological findings in the liver tissue showed necrosis, this lesion caused by factors external to the cell or tissue, such as infection, toxins, or trauma which result in the unregulated digestion of cell components. So the toxin of salmonella caused necrosis in this organ also this lesion lead to activation of MNCs aggregation to remove this necrotic tissue (12). Lesions of the intestine after treatment with S. typhimurium orally characterized by hyperplasia of goblet cells, inflammatory cells in the lamina propria of atrophic villi and the result agreed with (13) that said Salmonella typhiurium causes gastroenteritis in humans and other mammals. When the bacterial cells enter epithelial cells lining the intestine they cause host cell ruffling which temporarily damages the microvilli on the surface of the cell. As well as granulomatous lesion may also be seen in the examined organs of the second group (Oral immunized group with (3mg/ml) of bovine bile salts) this may be explained that host defense attempts to localize and destroy the invading bacteria through inducing proliferation and aggregation of phagocytic cells mainly alternative activated macrophage which produce cytokines IL-8 and IL-12 (14). On the other hand the increase in number of megakaryocytes, which produce platelets that have antibody receptors, paralleled the increase in antibodies (15) These effects increased as the dose increased, especially in high bile salts
References:


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