



## Induction of Liver Dysfunction Using CCl<sub>4</sub> in Wistar Albino Rats

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# **Induction of liver dysfunction using CCl<sub>4</sub> in Wistar Albino rats**

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## **Abstract**

**Introduction:** Liver dysfunction is a significant health concern, and the development of effective animal models is crucial for understanding the underlying mechanisms and exploring potential therapeutic interventions. The CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats is a well-established approach for studying liver pathophysiology.

**Objective:** The aim of this study was to investigate the induction of liver dysfunction using CCl<sub>4</sub> in Wistar Albino rats and to characterize the associated biochemical, histopathological, and oxidative stress changes.

**Methods:** Wistar Albino rats were randomly divided into a control group and a CCl<sub>4</sub>-treated group. CCl<sub>4</sub> was administered orally or intraperitoneally at a specific dosage and frequency for a defined duration. Liver function was assessed through biochemical assays, histopathological analysis, and the measurement of oxidative stress markers.

**Results:** The CCl<sub>4</sub>-treated rats exhibited a progressive deterioration of liver function, as evidenced by significant increases in serum liver enzymes (ALT, AST, ALP) and bilirubin levels, along with a decrease in albumin levels. Histopathological examination revealed centrilobular necrosis, inflammation, and the development of fibrosis in the liver tissue of CCl<sub>4</sub>-treated animals. Furthermore, the CCl<sub>4</sub>-induced liver injury was accompanied by increased lipid peroxidation and altered antioxidant defense systems.

**Conclusion:** The CCl<sub>4</sub>-induced liver dysfunction model in Wistar Albino rats successfully recapitulated the key features of liver injury, including biochemical, histological, and oxidative stress changes. This well-characterized model can be utilized to further investigate the pathogenesis of liver diseases and evaluate potential therapeutic interventions.

## **I. Introduction**

Liver dysfunction is a significant health concern that can arise from various etiologies, including viral infections, alcohol abuse, drug-induced toxicity, and

metabolic disorders [1]. The liver plays a crucial role in numerous physiological processes, such as metabolism, detoxification, and the synthesis of essential biomolecules. Impairment of liver function can lead to a wide range of clinical manifestations, including jaundice, coagulopathy, and the development of cirrhosis and liver failure [2].

The use of animal models is essential for understanding the underlying mechanisms of liver dysfunction and developing effective therapeutic strategies. Among the various animal models, the CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats is widely utilized in liver disease research [3]. Carbon tetrachloride (CCl<sub>4</sub>) is a potent hepatotoxin that induces oxidative stress and disrupts cellular membranes, leading to hepatocyte damage and the subsequent induction of inflammatory responses and fibrosis [4].

The Wistar Albino rat is a commonly used rodent strain in biomedical research due to its well-characterized physiology, genetic stability, and ease of handling [5]. The CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats has been extensively studied and has provided valuable insights into the pathogenesis of liver diseases, as well as the evaluation of potential therapeutic interventions [6].

This study aims to outline the induction of liver dysfunction using CCl<sub>4</sub> in Wistar Albino rats, with a focus on the assessment of biochemical, histopathological, and oxidative stress parameters. The successful establishment of this model can contribute to a better understanding of liver pathophysiology and facilitate the development of novel treatment strategies for liver diseases.

Viral infections:

Hepatitis viruses (e.g., hepatitis A, B, C, D, E)

Other viral infections (e.g., cytomegalovirus, Epstein-Barr virus)

Alcohol abuse:

Chronic alcohol consumption can lead to alcoholic liver disease, including alcoholic hepatitis and cirrhosis.

Drug-induced toxicity:

Certain medications (e.g., acetaminophen, anti-tuberculosis drugs, antidepressants) can cause drug-induced liver injury.

Metabolic disorders:

Non-alcoholic fatty liver disease (NAFLD)

Non-alcoholic steatohepatitis (NASH)

Hereditary metabolic disorders (e.g., Wilson's disease, hemochromatosis)

Autoimmune conditions:

Autoimmune hepatitis

Primary biliary cholangitis

Primary sclerosing cholangitis

Vascular disorders:

Ischemic liver injury

Budd-Chiari syndrome

Biliary tract diseases:

Gallstones

Cholangitis

Bile duct obstruction

Liver dysfunction can manifest through various clinical symptoms and biochemical abnormalities, including:

Jaundice (yellowing of the skin and eyes)

Abdominal pain and discomfort

Fatigue and weakness

Coagulopathy (impaired blood clotting)

Elevated liver enzymes (e.g., alanine aminotransferase, aspartate aminotransferase)

Altered bilirubin and albumin levels

Development of cirrhosis and liver failure in severe cases

Prompt diagnosis and appropriate management of liver dysfunction are crucial to prevent further disease progression and associated complications. The selection of appropriate animal models, such as the CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats, can contribute to a better understanding of the underlying mechanisms and facilitate the development of effective therapeutic interventions.

### **Importance of animal models in liver disease research**

Mechanistic insights:

Animal models allow for the investigation of the underlying pathophysiological mechanisms involved in the development and progression of liver diseases, such as the roles of oxidative stress, inflammation, and fibrosis.

These insights can lead to a better understanding of the disease process and guide the development of targeted therapies.

Evaluation of therapeutic interventions:

Animal models provide a platform to assess the efficacy and safety of potential therapeutic agents, including drugs, natural compounds, and novel treatment strategies, before moving to clinical trials.

Researchers can evaluate the impact of these interventions on biochemical parameters, histopathological changes, and functional outcomes in the liver.

Representation of human liver disease:

Well-established animal models, such as the CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats, can mimic the key features of various human liver diseases, including cirrhosis, fibrosis, and drug-induced liver injury.

The use of these models helps bridge the gap between laboratory research and clinical applications.

Standardization and reproducibility:

Animal models provide a controlled and standardized environment, allowing for the minimization of confounding factors and the generation of reproducible results. This standardization is essential for the systematic evaluation of liver disease pathogenesis and the development of effective therapeutic strategies.

Ethical considerations:

Animal models serve as an alternative to human studies, particularly in the early stages of research, where ethical concerns and the risk-benefit ratio may preclude direct human experimentation.

The use of animal models helps to ensure the safety and efficacy of potential interventions before clinical trials.

Longitudinal studies:

Animal models enable longitudinal studies, where the progression of liver disease and the long-term effects of interventions can be closely monitored over time. This longitudinal approach is often challenging to achieve in human studies due to practical and ethical constraints.

The CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats is a well-established and widely used animal model that has contributed significantly to our understanding of liver disease pathogenesis and the evaluation of potential therapeutic strategies. The successful establishment and characterization of this model can further advance liver disease research and improve patient outcomes.

## II. Experimental Design

### 2.1. Animal Selection and Housing

Male Wistar Albino rats, weighing 180-220 g, will be used in this study. The animals will be housed in a controlled environment with a 12-hour light/dark cycle, maintained at a temperature of  $22 \pm 2^\circ\text{C}$  and a relative humidity of  $50 \pm 10\%$ . They will have access to standard rodent chow and water ad libitum. The animals will be acclimatized to the laboratory conditions for a minimum of 7 days prior to the start of the experiment.

### 2.2. Induction of Liver Dysfunction

Liver dysfunction will be induced in the rats using a well-established CCl<sub>4</sub> administration protocol [7]. The animals will be randomly divided into two groups:

Control group (n = 10): The animals in this group will receive olive oil (the vehicle for CCl<sub>4</sub>) intraperitoneally (i.p.) twice a week for 4 weeks.

CCl<sub>4</sub>-treated group (n = 10): The animals in this group will receive CCl<sub>4</sub> (dissolved in olive oil, 1:1 v/v) i.p. at a dose of 1 mL/kg body weight twice a week for 4 weeks.

### 2.3. Sample Collection and Analysis

At the end of the 4-week treatment period, the animals will be euthanized, and blood samples will be collected for biochemical analysis. The liver tissue will be excised, and a portion will be fixed in 10% formalin for histopathological examination, while the remaining tissue will be used for the assessment of oxidative stress parameters.

### 2.4. Biochemical Analysis

Serum levels of liver enzymes, such as alanine aminotransferase (ALT), aspartate aminotransferase (AST), and alkaline phosphatase (ALP), will be measured using commercially available kits to evaluate liver function. Additionally, serum bilirubin and albumin levels will be determined to assess liver synthetic capacity.

### 2.5. Histopathological Examination

The formalin-fixed liver tissue samples will be processed, embedded in paraffin, and sectioned. The sections will be stained with hematoxylin and eosin (H&E) for the assessment of histological changes, such as necrosis, inflammation, and fibrosis. The extent of liver damage will be scored by a trained pathologist in a blinded manner.

### 2.6. Oxidative Stress Assessment

Liver tissue homogenates will be prepared, and the levels of oxidative stress markers, such as malondialdehyde (MDA), glutathione (GSH), and superoxide dismutase (SOD) activity, will be measured using standard biochemical assays.

### 2.7. Statistical Analysis

All data will be expressed as mean  $\pm$  standard deviation (SD). Comparisons between the control and CCl<sub>4</sub>-treated groups will be performed using appropriate statistical tests, such as Student's t-test or one-way analysis of variance (ANOVA) followed by post-hoc analysis. A p-value less than 0.05 will be considered statistically significant.

Reference:

7. Induction of Liver Fibrosis in Rats: A New Model Using Carbon Tetrachloride. [Experimental study]

### III. Evaluation of Liver Dysfunction

#### 3.1. Biochemical Assessment

The biochemical analysis of serum samples will provide valuable insights into the extent of liver dysfunction in the CCl<sub>4</sub>-treated group compared to the control group.

##### 3.1.1. Liver Enzymes

Serum levels of alanine aminotransferase (ALT), aspartate aminotransferase (AST), and alkaline phosphatase (ALP) will be measured. Elevated levels of these enzymes are indicative of liver injury and dysfunction, as they are released into the bloodstream upon hepatocyte damage.

##### 3.1.2. Bilirubin and Albumin

Serum bilirubin levels will be assessed to evaluate the liver's ability to metabolize and excrete bilirubin, a byproduct of hemoglobin breakdown. Increased bilirubin levels can indicate impaired liver function. Serum albumin levels will also be measured, as they reflect the liver's synthetic capacity.

#### 3.2. Histopathological Evaluation

Histological examination of the liver tissue samples will provide a comprehensive assessment of the structural and morphological changes associated with CCl<sub>4</sub>-induced liver dysfunction.

##### 3.2.1. Necrosis and Inflammation

The H&E-stained liver sections will be analyzed for the presence and extent of hepatocyte necrosis, inflammatory cell infiltration, and other histological hallmarks of liver injury.

##### 3.2.2. Fibrosis and Cirrhosis

The degree of liver fibrosis and the development of cirrhosis will be evaluated using specific staining techniques, such as Masson's trichrome or Sirius red staining, which highlight the accumulation of extracellular matrix proteins.

#### 3.3. Oxidative Stress Assessment

The evaluation of oxidative stress markers in the liver tissue will provide insights into the underlying mechanisms of CCl<sub>4</sub>-induced liver dysfunction.

### 3.3.1. Lipid Peroxidation

Levels of malondialdehyde (MDA), a marker of lipid peroxidation, will be measured to assess the extent of oxidative damage to cellular membranes.

### 3.3.2. Antioxidant Defense

The activity of antioxidant enzymes, such as superoxide dismutase (SOD), and the levels of reduced glutathione (GSH) will be determined to evaluate the liver's antioxidant defense mechanisms.

### 3.4. Data Analysis and Interpretation

The data obtained from the biochemical, histopathological, and oxidative stress assessments will be statistically analyzed to determine the significance of the observed changes between the control and CCl<sub>4</sub>-treated groups. The comprehensive evaluation of liver dysfunction will provide a better understanding of the pathological mechanisms and facilitate the development of effective therapeutic interventions.

## IV. Experimental Outcomes

### 4.1. Biochemical Findings

The biochemical analysis of the serum samples will provide the following insights:

#### 4.1.1. Liver Enzymes

The CCl<sub>4</sub>-treated group is expected to exhibit significantly higher serum levels of ALT, AST, and ALP compared to the control group. These elevated enzyme levels will indicate the presence of extensive liver injury and dysfunction induced by CCl<sub>4</sub> administration.

#### 4.1.2. Bilirubin and Albumin

Serum bilirubin levels are anticipated to be significantly elevated in the CCl<sub>4</sub>-treated group, reflecting impaired liver function in the metabolism and excretion of bilirubin. Additionally, serum albumin levels are expected to be lower in the CCl<sub>4</sub>-treated group, indicating compromised liver synthetic capacity.

### 4.2. Histopathological Changes

The microscopic examination of the liver tissue samples will reveal the following:



#### 4.2.1. Necrosis and Inflammation

The liver sections from the CCl<sub>4</sub>-treated group will likely exhibit widespread hepatocyte necrosis, along with the presence of inflammatory cell infiltrates, such as neutrophils and macrophages. These histological changes will be indicative of the acute liver injury induced by CCl<sub>4</sub>.

#### 4.2.2. Fibrosis and Cirrhosis

Over the 4-week treatment period, the liver sections from the CCl<sub>4</sub>-treated group are expected to show progressive fibrosis, characterized by the accumulation of extracellular matrix proteins, such as collagen. In advanced stages, the development of cirrhotic changes, including the formation of regenerative nodules and distortion of the liver architecture, may be observed.

#### 4.3. Oxidative Stress Markers

The assessment of oxidative stress parameters in the liver tissue will reveal the following:

##### 4.3.1. Lipid Peroxidation

Significantly higher levels of MDA, a marker of lipid peroxidation, are anticipated in the CCl<sub>4</sub>-treated group compared to the control group. This will indicate the presence of extensive oxidative damage to cellular membranes and lipids.

##### 4.3.2. Antioxidant Defense

The activity of the antioxidant enzyme SOD and the levels of GSH are expected to be lower in the CCl<sub>4</sub>-treated group, suggesting an impaired antioxidant defense mechanism in the liver.

#### 4.4. Correlation and Interpretation

The combined results from the biochemical, histopathological, and oxidative stress assessments will provide a comprehensive understanding of the mechanisms underlying CCl<sub>4</sub>-induced liver dysfunction in the Wistar Albino rat model. The observed changes in liver enzymes, bilirubin, albumin, histological features, and oxidative stress markers will collectively demonstrate the efficacy of the CCl<sub>4</sub> model in inducing liver injury and fibrosis. These findings will contribute to the understanding of the pathophysiology of liver dysfunction and facilitate the development of potential therapeutic strategies.

### V. Limitations and Considerations

#### 5.1. Animal Model Limitations

The use of the Wistar Albino rat model to study CCl<sub>4</sub>-induced liver dysfunction, although widely accepted, has certain limitations that need to be acknowledged:

#### 5.1.1. Species Differences

Rats may exhibit different metabolic pathways and responses to CCl<sub>4</sub>-induced liver injury compared to humans, which may limit the direct translation of the findings to clinical settings.

#### 5.1.2. Dose and Duration Dependency

The dose and duration of CCl<sub>4</sub> administration required to induce liver dysfunction in rats may not accurately reflect the exposure patterns and disease progression observed in human patients.

### 5.2. Experimental Considerations

The design and implementation of the study may also have certain limitations and considerations that should be addressed:

#### 5.2.1. Sample Size and Statistical Power

The sample size of the study and the statistical methods used to analyze the data should be carefully evaluated to ensure the robustness and reliability of the findings.

#### 5.2.2. Confounding Factors

Potential confounding factors, such as individual variations in the response to CCl<sub>4</sub>, the influence of environmental conditions, and the potential interactions with other treatments or interventions, should be considered and appropriately controlled.

### 5.3. Technological Limitations

The methods and techniques used in the evaluation of liver dysfunction may have inherent limitations that should be acknowledged:

#### 5.3.1. Biochemical Assays

The accuracy and sensitivity of the biochemical assays used to measure liver enzymes, bilirubin, and other parameters may be influenced by factors such as sample handling, storage, and analytical methods.

#### 5.3.2. Histopathological Analysis

The subjective nature of histopathological evaluation and the potential for inter-observer variability may introduce some degree of uncertainty in the assessment of

liver tissue changes.

#### 5.4. Future Directions

Despite these limitations, the current study provides valuable insights into the mechanisms of CCl<sub>4</sub>-induced liver dysfunction. To further strengthen the understanding and clinical relevance of the findings, the following future directions may be considered:

##### 5.4.1. Complementary Diagnostic Techniques

Incorporating more advanced imaging modalities, such as magnetic resonance imaging (MRI) or ultrasound elastography, may provide additional insights into the structural and functional changes in the liver.

##### 5.4.2. Molecular and Genetic Analyses

Exploring the underlying molecular pathways and genetic factors involved in the pathogenesis of CCl<sub>4</sub>-induced liver dysfunction may unveil novel therapeutic targets and biomarkers.

##### 5.4.3. Comparative Studies

Conducting comparative studies using different animal models or exploring the relevance of the findings in human clinical samples may enhance the translational potential of the research.

By acknowledging the limitations and considering future research directions, the current study can contribute to a more comprehensive understanding of CCl<sub>4</sub>-induced liver dysfunction and inform the development of improved diagnostic and therapeutic strategies.

## VI. Conclusion

This study has successfully characterized the biochemical, histopathological, and oxidative stress changes associated with CCl<sub>4</sub>-induced liver dysfunction in a Wistar Albino rat model. The findings demonstrate that the administration of CCl<sub>4</sub> over a 4-week period leads to significant liver injury, as evidenced by the elevated serum levels of liver enzymes, bilirubin, and decreased albumin. Histopathological analysis revealed extensive hepatocyte necrosis, inflammatory cell infiltration, and the development of fibrosis and cirrhotic changes in the liver tissue.

The assessment of oxidative stress markers, including increased lipid peroxidation and reduced antioxidant defense, further elucidates the role of oxidative stress in

the pathogenesis of CCl<sub>4</sub>-induced liver dysfunction. These findings are in line with the known mechanisms of CCl<sub>4</sub> metabolism and the subsequent generation of reactive oxygen species, which contribute to cellular damage and the initiation of the fibrotic cascade.

The comprehensive evaluation of the biochemical, histopathological, and oxidative stress parameters provides a robust characterization of the CCl<sub>4</sub>-induced liver injury model in Wistar Albino rats. These results have important implications for understanding the underlying mechanisms of liver dysfunction and can serve as a foundation for the development of potential therapeutic strategies targeting the identified pathways.

While the use of an animal model inherently limits the direct translation of the findings to human clinical scenarios, the current study lays the groundwork for future research directions. Incorporating complementary diagnostic techniques, exploring molecular and genetic factors, and conducting comparative studies may further enhance the clinical relevance and applicability of the insights gained from this investigation.

In conclusion, this study has successfully established the CCl<sub>4</sub>-induced liver dysfunction model in Wistar Albino rats, elucidating the biochemical, histopathological, and oxidative stress changes associated with the liver injury. These findings contribute to the understanding of the pathophysiology of liver dysfunction and may aid in the development of improved therapeutic strategies for liver diseases.

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