

1 Running Head: The hepatoprotective effect of antrosterol in mice

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3 **Protective effect of antrosterol from *Antrodia camphorata* submerged whole**
4 **broth against carbon tetrachloride-induced acute liver injury in mice**

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1 **ABSTRACT**

2 The hepatoprotective potential of antrosterol (ergostatrien-3 β -ol, **ST1**) from *Antrodia*
3 *camphorata* (AC) against carbon tetrachloride (CCl₄)-induced liver damage was evaluated in
4 preventive models in mice. Pretreatment with **ST1** markedly prevented the elevation of
5 aspartate aminotransferase (AST), alanine aminotransferase (ALT) and liver lipid peroxides in
6 CCl₄-treated mice. We evaluated the activities of antioxidant enzymes [catalase (CAT),
7 superoxide dismutase (SOD) and glutathione peroxidase (GPx)] were significantly increased
8 after treatment with CCl₄ *in vivo*. In addition, **ST1** decreased the level of nitric oxide (NO)
9 production and tumor necrosis factor-alpha (TNF- α) in CCl₄-treated mice. In this study,
10 these results pointed out that **ST1** can inhibit lipid peroxidation, enhance the activities of
11 antioxidant enzymes, decreases the TNF- α level, nitric oxide production and inducible nitric
12 oxide synthase (iNOS), and cyclooxygenase-2 (COX-2) expressions. Therefore, we speculate
13 that **ST1** protects mice from liver damage through their anti-inflammation capacity.

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15 **KEY WORDS:** Chinese herb; Antrosterol; anti-inflammation; MDA; NO; TNF- α .

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1 **1. Introduction**

2 The reactive oxygen species (ROS) play an important role in the degenerative or
3 pathological processes of various diseases, such as aging, cancer, coronary heart disease,
4 Alzheimer's disease, neurodegenerative disorders, atherosclerosis, cataracts, and inflammation.
5 The production of ROS can be induced by a variety of factors such as ionizing radiation,
6 exposure to drug and xenobiotics or enhanced by other factors (Brucoleri et al., 1997). CCl₄,
7 an extensively used xenobiotic, is thought to produce a highly reactive trichloromethyl radical
8 by cytochrome P₄₅₀ system in liver, consequently causes lipid peroxidation that leads to
9 hepatocellular membrane damage and followed by the release of inflammatory mediators
10 from activated hepatic macrophages, which are thought to potentiate CCl₄-induced hepatic
11 damage (Kuo et al., 2010). These activated macrophages released inflammatory mediators
12 including TNF- α and NO have been implicated in liver damage induced by a number of
13 different toxicants (Celik, Temur & Isik, 2007).

14 *Antrodia camphorata* (AC), also called *A. cinnamomea*, is composed of fruiting bodies,
15 mycelium and spores. The fruiting body of AC is well known in Taiwan as a traditional
16 Chinese medicine. It has been used for the treatment of food and drug intoxication, diarrhea,
17 abdominal pain, hypertension, skin itching, and cancer. The fruiting body and cultured
18 mycelia of AC contain fatty acids, lignans, phenyl derivatives, sesquiterpenes, steroids, and
19 triterpenoids (Geethangili & Tzeng, 2009). The fermented culture broth had cytotoxic activity

1 against several tumour cell lines (Yeh et al., 2009), anti-inflammation (Huang et al., 2010),
2 vasorelaxation (Wang et al., 2003) and anti-hepatitis B virus activity (Lee et al., 2002). The
3 filtrate in submerged culture also had protective effects against CCl₄-induced hepatic toxicity
4 and high antioxidant properties (Song & Yen, 2003). However, little information is available
5 on the protective effects against CCl₄-induced hepatic toxicity effects of antrosterol (**ST1**)
6 (Fig. 1A). To our knowledge, this study is the first report that demonstrates the
7 anti-inflammatory effects of **ST1** in liver protection and regulation of iNOS and COX-2 in
8 CCl₄-induced liver injury model by AC component.

9

1 **2. Material and methods**

2 *2.1. Chemicals.*

3 Carbon tetrachloride was purchased from Merck (Darmstadt, Germany). Silymarin,
4 malondialdehyde, and other chemicals were purchased from Sigma Chemical Co (Steinheim,
5 Germany). Biochemical assay kits for measurement of ALT and AST contents were
6 purchased from Randox Laboratories (Crumlin, United Kingdom). TNF- α was purchased
7 from Biosource International Inc., (Camarillo, CA, USA).

8

9 *2.2. Fungus material.*

10 Freeze-dried powder of AC of the submerged whole broth (Batch No. MZ-247) was
11 provided by the Biotechnology Center of Grape King Inc., Chung-Li City, Taiwan, Republic
12 of China.

13

14 *2.3. Isolation and Determination of the Active Compound.*

15 Freeze-dried powder of AC of the submerged whole broth (1.6 kg) was extracted three
16 times with methanol (16 L) at room temperature (1 day each). The methanol extract was
17 evaporated *in vacuo* to give a brown residue, which was suspended in H₂O (1 L), and then
18 partitioned (3 times) with 1 L of ethyl acetate. The EtOAc fraction (95 g) was
19 chromatographed on silica gel using mixtures of hexane and EtOAc of increasing polarity as

1 eluents and further purified with HPLC. **ST1** (5.4 g) was eluted with 10% EtOAc in hexane,
2 and recrystallization with EtOH (Shao et al., 2008).

3

4 2.4. Animal Treatment.

5 6-8 weeks male imprinting control region (ICR) mice were obtained from the BioLASCO
6 Taiwan Co., Ltd. The animals were kept in plexiglass cages at a constant temperature of 22
7 $\pm 1^{\circ}\text{C}$, and relative humidity of $55 \pm 5\%$ with 12 h dark-light cycle for at least 2 week before
8 the experiment. They were given food and water *ad libitum*. Animal studies were conducted
9 according to the regulations of the Instituted Animal Ethics Committee and the protocol was
10 approved by the Committee for the Purpose of Control and Supervision of Experiments on
11 Animals. Mice were randomly divided into six groups of six animals each ($n = 6$). Mice in the
12 normal control and negative control groups were administered with distilled water. The
13 positive control group was administered with silymarin (25 mg/kg in 1% carboxymethyl
14 cellulose about 10 mL, i.p.) once daily for 7 days. In the three experimental groups, the mice
15 were pretreated with **ST1** (2.5, 5, and 10 mg/kg in 1% carboxymethyl cellulose, i.p.) once
16 daily for seven consecutive days. One hour after the last treatment, all the mice, except for
17 those in the normal control, were treated with CCl_4 (1.5 mL/kg in olive oil, 20%, i.p.). 24 h
18 after the CCl_4 treatment, animals were anesthetized with ethyl ether and blood samples were

1 collected through their carotid arteries. The mortality rate and body weight were recorded
2 daily.

3

4 *2.5. Assessment of Liver Functions.*

5 The blood was centrifuged at 1700×g (Beckman GS-6R, Germany) at 4°C for 30 min to
6 separate serum. ALT and AST were analyzed. Liver tissues collected from the animals were
7 fixed at 10% formalin for histopathological studies. Also, liver tissues were kept under -80°C
8 for further analysis of their enzyme levels. The biochemical parameters were analyzed by
9 using clinical test kits (Roche Cobas Mira plus, Germany).

10

11 *2.6. Histopathological Examination.*

12 Small pieces of liver, fixed in 10 % buffered formalin were processed for embedment in
13 paraffin. Sections of 4-5 µm were cut and stained with hematoxylin and eosin, and then
14 examined for histopathological changes under the microscope (Nikon, ECLIPSE, TS100,
15 Japan). Images were taken with a digital camera (NIS-Elements D 2.30, SP4, Build 387) at
16 original magnification of ×200.

17

1 2.7. *Antioxidant Enzyme Activity Measurements.*

2 The following biochemical parameters were analyzed to check the hepatoprotective
3 activity of **ST1** by the methods given below.

4 Total superoxide dismutase (SOD) activity was determined by the inhibition of
5 cytochrome *c* reduction (Flohe and Otting 1984). The reduction of cytochrome *c* was mediated
6 by superoxide anions generated by the xanthine/xanthine oxidase system and monitored at
7 550 nm. One unit of SOD was defined as the amount of enzyme required to inhibit the rate of
8 cytochrome *c* reduction by 50%. Total catalase (CAT) activity estimation was based on that of
9 Aebi (Aebi, 1984). In brief, the reduction of 10 mM H₂O₂ in 20 mM of phosphate buffer (pH
10 7) was monitored by measuring the absorbance at 240 nm. The activity was calculated using a
11 molar absorption coefficient, and the enzyme activity was defined as nanomoles of dissipating
12 hydrogen peroxide per milligram protein per minute. Total GPx activity in cytosol was
13 determined as previously reported (Paglia and Valentine, 1967). The enzyme solution was
14 added to a mixture containing hydrogen peroxide and glutathione in 0.1 mM Tris buffer (pH
15 7.2) and the absorbance at 340 nm was measured. Activity was evaluated from a calibration
16 curve, and the enzyme activity was defined as nanomoles of NADPH oxidized per milligram
17 protein per minute.

18

19 2.8. *Measurement of Hepatic GSH Level.*

1 Hepatic GSH levels were determined by the method of Ellman with slight modification
2 (Ellman, 1959). Briefly, 720 μ L of the liver homogenate in 200 mM Tris-HCl buffer (pH 7.2)
3 was diluted to 1440 μ L with the same buffer. Five percent TCA (160 μ L) was added to it and
4 mixed thoroughly. The samples were then centrifuged at 10,000 \times g for 5 min at 4°C.
5 Supernatant (330 μ L) was taken in a tube and 660 μ L of Ellman's reagent (DTNB) solution
6 was added to it. Finally the absorbance was taken at 405 nm.

7

8 *2.9. Lipid Peroxidation Intermediates.*

9 Thiobarbituric acid reactive substances (TBARS), in particular malondialdehyde (MDA),
10 are products of the oxidative degradation of polyunsaturated fatty acids, Lipid peroxidation
11 was assayed by the measurement of MDA levels via absorbance at 535 nm on the basis of
12 MDA reacting with thiobarbituric acid, according to as previously reported (Tatum & Chow,
13 1996). Briefly, 0.4 mL of the treated cell or liver extract was mixed with 0.4 mL
14 thiobarbituric acid reagent (consisting of 0.4% thiobarbituric acid (TBA) and 0.2% butylated
15 hydroxytoluene (BHT). The reaction mixture was placed at 90°C water for 45 min, cooled,
16 added the equal volume of n-butanol, centrifuged and then the absorbance of the supernatant
17 was recorded at 535 nm. A standard curve was obtained with a known amount of 1, 1, 3,
18 3-tetraethoxypropane (TEP), using the same assay procedure.

1

2 2.10. *Total Protein Assay.*

3 Protein content in each sample was determined by a bicinchoninic acid (BCA) protein
4 assay kit (Pierce).

5

6 2.11. *Measurement of Serum TNF- α Level by ELISA.*

7 Serum levels of TNF- α were determined using a commercially available enzyme linked
8 immunosorbent assay (ELISA) kit (Biosource International Inc., Camarillo, CA) according to
9 the manufacturer's instruction. TNF- α was determined from a standard curve. The
10 concentrations were expressed as pg/mL.

11

12 2.12. *Measurement of Nitric Oxide/Nitrite Level.*

13 NO production was indirectly assessed by measuring the nitrite levels in serum
14 determined by a calorimetric method based on the Griess reaction (Recknagel, Glende &
15 Britton, 1991). Serum samples were diluted four times with distilled water and deproteinized
16 by adding 1/20 volume of zinc sulfate (300 g/L) to a final concentration of 15 g/L. After

1 centrifugation at 10,000×g for 5 min at room temperature, 100 μL supernatant was applied to
2 a microtiter plate well, followed by 100 μL of Griess reagent (1% sulfanilamide and 0.1%
3 *N*-1-naphthylethylenediamine dihydrochloride in 2.5% polyphosphoric acid). After 10 min of
4 color development at room temperature, the absorbance was measured at 540 nm with a
5 Micro-Reader (Molecular Devices, Orleans Drive, Sunnyvale, CA). By using sodium nitrite
6 to generate a standard curve, the concentration of nitrite was measured by absorbance at 540
7 nm.

8

9 2.13. *Western Blot Analysis.*

10 Liver tissues were homogenized in lysis buffer (0.6% NP-40, 150 mM NaCl, 10 mM
11 HEPES (pH 7.9), 1 mM EDTA, and 0.5 mM PMSF) at 4°C. Fifty micrograms of protein was
12 fractionated on 10% SDS-polyacrylamide gels and transferred onto nitrocellulose membranes
13 (Millipore, Bedford, MA, USA). Membranes were incubated with primary antibodies
14 overnight at 4°C using 1:1000 dilution of goat polyclonal anti-rabbit iNOS, COX-2 and
15 β-actin antibodies. The membranes were washed three times and the immunoreactive proteins
16 were detected by enhanced chemiluminescence (ECL) using hyperfilm and ECL reagent
17 (Amersham International plc., Buckinghamshire, U.K.). The results of Western blot analysis
18 were quantified by measuring the relative intensity compared to the control using Kodak

1 Molecular Imaging Software (Version 4.0.5, Eastman Kodak Company, Rochester, NY) and
2 represented in the relative intensities.

3

4 2.14. *Statistical Analysis.*

5 All data were presented as mean \pm standard deviation (SD) from three independent
6 experiments. Means of triplicates were calculated. Student's *t* test was used for comparison
7 between two treatments. A difference was considered to be statistically significant when $p <$
8 0.05, $p < 0.01$ or $p < 0.001$.

9

10 **3. Results**

11 3.1. *Effect of ST1 on hepatotoxicity in CCl₄-treated mice.*

12 Several hepatic enzymes in serum such as AST and ALT were used as the biochemical
13 markers for the early acute hepatic damage. The levels of AST and ALT were measured in the
14 serum to evaluate hepatic tissue damage (Fig. 1B and 1C). CCl₄ administration resulted in
15 significant ($p < 0.001$) rise in the levels of AST and ALT when compared with the control
16 group. Intraperitoneal pre-administrations of **ST1** at three different doses (2.5, 5 and 10 mg/kg)
17 significantly prevented the increased serum levels of ALT and AST. Silymarin (a
18 positive control) at a dose of 25 mg/kg also prevented the elevation of ALT and AST. **In this**

1 study, mice treated with CCl₄ developed significant hepatic damage as manifested by a
2 significant increase in activities of AST and ALT that are indicators of hepatocyte damage
3 and loss of functional integrity.

4

5 3.2. Histopathology of the liver.

6 Fig. 2 showed that that CCl₄ could induce histological changes including increased
7 degeneration, necrosis, hepatitis and portal triaditis. All mice except those in the control group
8 exhibited the ballooning degeneration in the centrilobular zone and the necrosis of
9 hepatocytes (Fig. 2). The CCl₄-induced damage suffered more severely than other groups
10 pretreated with **ST1**. It seems likely that CCl₄ administration cause oxidative stress in liver
11 via the generation of free radicals whereas **ST1** ameliorates the liver injuries by scavenging of
12 free radicals, which is further confirmed by the reduced amount of histopathological injury.

13

14 3.3. Effect of ST1 on antioxidant enzymes activities in CCl₄-treated mice liver.

15 The hepatic antioxidant enzyme activities (SOD, CAT and GPx) are shown in Fig. 3.
16 The activities of SOD, CAT and GPx were significant decreased in CCl₄-treated mice,
17 comparing to the control. Mice pretreated with **ST1** at 2.5, 5 and 10 mg/kg showed significant

1 increase in SOD when compared to CCl₄ group. Mice pretreated with **ST1** at 10 mg/kg
2 showed significant increase in CAT when compared to CCl₄ group. Mice pretreated with **ST1**
3 at 10 mg/kg showed significant ($p < 0.001$) increase in GPx when compared to CCl₄ group.
4 Silymarin-treated mice (The group of reference protective drug) also showed significant
5 increase in SOD, CAT, and GPx when compared to CCl₄ treated mice.

6

7 *3.4. Effect of ST1 on lipid peroxidation in CCl₄-treated rat liver.*

8 As shown in Fig. 4A, hepatic levels of TBARS were assessed as an indicator of lipid
9 peroxidation in the tissue. CCl₄ treatment significantly increased the level of TBARS in the
10 liver. CCl₄ alone treated mice was observed a significant increase ($p < 0.001$) in tissue
11 TBARS level. CCl₄-induced elevation of tissue TBARS concentration was lowered
12 significantly by the *i.p.* pre-treatment of the mice with **ST1**. **ST1** at 2.5, 5 and 10 mg/kg
13 significantly prevented the increase in TBARS level when compared to CCl₄ group; Silymarin
14 also protected the liver from elevating TBARS levels and kept TBARS levels in normal
15 values.

16

17 *3.5. Effect of ST1 on cellular GSH levels in CCl₄-treated mice.*

1 The CCl₄-treatment caused significant ($p < 0.001$) decrease in the level of GSH in liver
2 homogenate when compared with control group (Fig. 4B). The pretreatment of **ST1** at the
3 dose of 2.5, 5 and 10 mg/kg resulted in significant increase of GSH content when compared to
4 CCl₄ treated mice. Silymarin (25 mg/kg) treated mice also showed significant ($p < 0.001$)
5 increase in GSH level in liver compared with CCl₄ group.

6

7 *3.6. Effect of ST1 on the serum level of TNF- α and NO in CCl₄-treated mice.*

8 As shown in Fig. 5A, the level of serum TNF- α was 87.45 ± 4.88 pg/mL in the control
9 group. The CCl₄-treatment caused significant ($p < 0.01$) increase in the level of TNF- α in the
10 serum when compared with control group. The pretreatment of **ST1** at the dose of 2.5, 5 and
11 10 mg/kg resulted in significant decrease of TNF- α level when compared to CCl₄-treated mice.
12 Silymarin (25 mg/kg) treated mice also showed significant ($p < 0.05$) decrease in TNF- α level
13 in serum compared with CCl₄-treated mice. As shown in Fig. 5B, the production of NO in
14 mice serum was significantly increased in CCl₄-treated mice comparing to the control group.
15 However, pretreatment of **ST1** reduced the NO production in CCl₄-treated mice. For example,
16 NO production in the control group was 3.18 ± 0.34 μ M, while it was 9.44 ± 0.79 μ M with
17 CCl₄ treatment. However, the NO production in the CCl₄-treated mice was significantly ($p <$
18 0.001) decreased from 6.28 ± 0.63 , 4.66 ± 0.91 to 3.61 ± 0.66 μ M with 2.5, 5, and 10 mg/kg

1 **ST1** pretreatment, respectively. Silymarin (25 mg/kg) treated mice also showed significant (p
2 < 0.05) decrease of NO production in serum compared with CCl₄ group.

3

4 *3.7. Effect of ST1 on activities of iNOS and COX-2 in CCl₄-treated mice liver.*

5 We investigated the changes of the activation of iNOS and COX-2 by **ST1** in
6 CCl₄-treated mice (Fig. 6). The relative intensities of bands obtained from Western blot were
7 calculated with the use of the Kodak Molecular Imaging Software (Tokyo, Japan). The results
8 showed that CCl₄ treatment stimulates to increase activation of iNOS and COX-2. For
9 example, in CCl₄ treatment group, the relative intensity of iNOS and COX-2 band was
10 increased by 2.84- and 1.95-fold, compared to the control. However, the treatment of **ST1**
11 decreased the iNOS and COX-2 expression in CCl₄-induced mice. Namely, the relative
12 intensities of bands about iNOS and COX-2 expressions were reduced by 1.24- and 1.16-fold
13 at 10 mg/kg of **ST1**, respectively, compared to CCl₄ treatment alone.

14

15 **4. Discussion**

16 **In this manuscript**, we strongly speculated that **ST1** can protect against diseases which
17 are caused by ROS, because it has a radical scavenging activity. The results of the present
18 study demonstrate that the pre-administration of **ST1** effectively protected mice against

1 CCl₄-induced acute liver damage. Administration of CCl₄ to mice markedly increases serum
2 ALT and AST levels. This increase commonly reflects the severity of liver injury (Lin, Yao,
3 Lin, & Lin, 1996). The leakage of large quantities of enzymes into the blood stream was
4 associated with massive centrilobular necrosis, ballooning degeneration and cellular
5 infiltration of the liver. In the present work, substantial increases in serum ALT and AST were
6 observed after administration of CCl₄, however, the increased levels of enzymes were
7 considerably reduced by pre-treatment with **ST1**, implying that **ST1** tended to prevent
8 damage and suppressed the leakage of enzymes through cellular membranes. The dry matter
9 of fermented filtrate (DMF) from submerged cultures of AC and aqueous extracts from
10 fruiting bodies of AC have been reported to possess hepatoprotective activity against liver
11 diseases induced by CCl₄ (Song & Yen, 2003). Both of them could reduce GSH-dependent
12 enzymes (GPx, GSH reductase and GSH-S-transferase), and the GSH/GSSG ratio was
13 significantly improved by the oral pretreatment of rats with DMF. Also, scientific research
14 showed that both the fruiting bodies and mycelia of AC possessed protective activity against
15 liver hepatitis and fatty liver induced by acute hepatotoxicity of alcohol (Dai et al., 2003).
16 Using acute ethanol-intoxicated rats as an experimental model, we compared the
17 hepatoprotective effects of AC, a traditional Chinese fungi drug for liver diseases, on liver
18 injury induced by ethanol (Liu et al., 2007). Treatment with AC notably prevented the
19 ethanol-induced elevation of levels of serum aspartate aminotransferase (AST), alanine

1 aminotransferase (ALT), alkaline phosphatase (ALP) and bilirubin to an extent that was
2 comparable to the standard drug silymarin.

3 Many studies have shown that the hepatoprotective effects may be associated with an
4 antioxidant capacity to scavenge reactive oxygen species (Sabis & Rocha, 2008). Antioxidant
5 enzymes (SOD, CAT and GPx) offer protection against oxidative tissue damage. Although in
6 the antioxidant paradox, CCl₄ may cause oxidative stress and the consequent up-regulation of
7 antioxidant enzymes, to rendering cells more resistant to subsequent oxidative damage
8 (Halliwell & Gutteridge, 1990), we did not observed this phenomenon. Our results indicated
9 decreased SOD, CAT, and GPx levels in mice liver in response to CCl₄ treatment, while **ST1**
10 pre-treatments kept levels of all three antioxidant enzymes (Fig. 3) to the normal ones. This
11 may be due to the inhibitory effects on cytochrome P₄₅₀ and/or promotion of its
12 glucuronidation, both related to the early stage in CCl₄-induced liver injury. GSH constitutes
13 the first line of defense against free radicals and is a critical determinant of the tissue
14 susceptibility to oxidative damage. It has been reported that GSH plays a key role in
15 detoxifying the reactive toxic metabolites of CCl₄ and that liver necrosis begins when the
16 GSH stores are depleted (Williams, & Burk, 1990). In this study, CCl₄ treatment decrease the
17 hepatic GSH levels and **ST1** pre-treatments also restored the hepatic GSH levels to the normal
18 ones (Fig.4). The effect could be due either to the *de novo* synthesis of GSH, its regeneration,
19 or both.

1 The liver is a major inflammatory organ, and inflammatory processes contribute to a
2 number of pathological events after exposure to various hepatotoxins. Kupffer cells release
3 pro-inflammatory mediators either in response to necrosis or as a direct action by the
4 activated hepatotoxins, which are believed to aggravate CCl₄-induced hepatic injury (Badger,
5 et al., 1996). TNF- α , a pleiotropic pro-inflammatory cytokine, is rapidly produced by
6 macrophages in response to tissue damage. While low levels of TNF- α may play a role in cell
7 protection, excessive amounts cause cell impairment. An increase in the TNF- α level has been
8 directly correlated with the histological evidence of hepatic necrosis and the increase in the
9 serum aminotransferase levels (Brucoleri et al., 1997). DeCicco *et al.* (1998) have reported
10 the stimulation of TNF- α production in both serum and liver following CCl₄ administration,
11 and it is suggested that CCl₃· activates Kupffer cells to release TNF- α . TNF- α also stimulates
12 the release of cytokines from macrophages and induces the phagocyte oxidative metabolism
13 and nitric oxide production (DeCicco et al., 1998). Nitric oxide is a highly reactive oxidant
14 that is produced through the action of iNOS, and plays a role in a number of physiological
15 processes, such as, vasodilation, neurotransmission, and nonspecific host defense (Yen, Lai, &
16 Chou, 2001). Nitric oxide can also exacerbate oxidative stress by reacting with reactive
17 oxygen species, particularly with the superoxide anion and forming peroxynitrite. This study
18 confirmed a significant increase in the serum TNF- α protein expression after CCl₄
19 administration. These alterations were attenuated by **ST1** pre-treatment (Fig. 5), which

1 suggests that **ST1** suppresses TNF- α protein secretion and/or enhances its degradation.

2 **ST1** blocked the reduction of serum NO level in CCl₄-treated mice. There are two
3 possible explanations for the observed decrease in NO levels after CCl₄ treatment in our study.
4 First, gene expression of nitric oxide synthase (NOS) was reduced. Second, the NOS system
5 (enzyme protein, substrates, or cofactors) was damaged, thus decreasing the NO production.
6 Third, NO usage increased after CCl₄ treatment. It is possible that another mechanism of
7 protective action of **ST1** against CCl₄ induced hepatotoxicity is due to the increased NO
8 production. Several studies have found that NO protected against CCl₄-induced liver injury
9 using a NOS knockout mice or a NOS inhibitor (Wink, et al., 1996). The mechanism
10 underlying the protective effects of NO in CCl₄-induced hepatotoxicity has not been
11 elucidated and may be related to its antioxidant properties. NO has also been shown to
12 interfere directly with the progression of lipid peroxidation, which may contribute to its
13 protective actions in the present work. NO is a short-lived signaling molecule capable of
14 regulating many physiological and pathological processes. Neuronal NOS (nNOS) and
15 endothelial NOS (eNOS) are constitutively expressed; iNOS is triggered in many cell types by
16 cytokines such as TNF- α or interferon- γ . Endogenous NO, produced by an early and transient
17 activation of constitutive NOS, protects both hepatocytes and endothelial cells against
18 reperfusion injury in the liver (Liu et al., 2007). However, iNOS expression usually occurs
19 after inflammatory responses. INOS has been implicated as a mediator of cellular injury at

1 sites of inflammation, including liver ischemia/reperfusion injury. Under this circumstance,
2 NO reacts with superoxide and generates reactive nitrogen species (ROS), thereafter
3 modifying bioorganic molecules. ROS leads to extracellular matrix (ECM) degradation and
4 the leukocyte migration across ECM proteins.

5 In conclusion, **ST1** protects the liver from CCl₄-induced oxidative stress and tissue
6 injuries, which might be due to the antioxidant properties and the inhibition of the
7 inflammatory response. It's possible role as a promising therapeutic in human oxidative stress
8 and inflammatory liver disease deserves consideration. The potential for using **ST1** in
9 experimental designs and practical applications should be examined further.

10

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