

Hesperidin and quercetin modulate carbon tetrachloride (CCl₄) induced hepatotoxicity in male rats

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Abstract. Ekpo GI, Eteng OE, Ekam VS, Onyemaizu MU, Ofonime N, Blessing OE, Uduak OL, Robert AE, Ufot S, Eyong U. 2024. Hesperidin and quercetin modulate carbon tetrachloride (CCl₄) induced hepatotoxicity in male rats. *Asian J Nat Prod Biochem* 22: 19-26. Quercetin and hesperidin are bioactive chemicals that have shown considerable promise in both conventional and herbal medicine due to their significant impact on treating various human diseases. Oxidative stress is linked to the etiology of many liver disorders. Quercetin-containing foods and fruits include kale, onions, berries, apples, cherries, and other citrus fruits like grapefruit, oranges, lemons, and mandarins. The purpose of this study is to examine the potential therapeutic benefits of quercetin and hesperidin on oxidative stress-induced hepatotoxicity using male rats treated with carbon tetrachloride (CCl₄). A total of (30) male rats weighing 160-180 g were divided into 5 groups (n = 6). For twenty-one days, rats were gavaged with quercetin and hesperidin (2.4 and 2.4 mg/kg each) after being exposed to CCl₄ (0.5 mg/kg). Samples were taken to evaluate several biochemical markers. Nitric oxide (NO), Hydrogen peroxide (H₂O₂), and Malonaldehyde (MDA) levels were assayed for oxidative damage. The enzymes alanine transferase (ALT) and alkaline phosphatase (ALP) activity were estimated to represent liver function. Glutathione peroxidase (GPx), Catalase (CAT), and Glutathione (GSH) levels were evaluated for antioxidants, and histopathology was also assessed. CCl₄ increased significantly (P < 0.05) the concentration of MDA, NO, H₂O₂, SOD, CAT, GPX, GSH, and also, the activities of ALT, ALP, and AST in serum. Following treatment with quercetin and hesperidin, significantly (P < 0.05) reduced MDA, NO, H₂O₂, ALT, AST, and ALP activities and modified SOD, CAT, GPX, GSH, in rats substantially (P < 0.05). Hepatotoxicity caused by carbon tetrachloride (CCl₄) was protected by quercetin and hesperidin treatment. This study concludes that by recovering from ROS-mediated oxidative stress, the injection of quercetin and hesperidin helps to offset the damage that CCl₄-induced hepato-renal ailments generate. Hence, quercetin and hesperidin supplements may be recommended as an adjunctive natural therapy because they can scavenge free radicals and prevent hepato-renal damage.

Keywords: Antioxidant, carbon tetrachloride (CCl₄), hepatotoxicity, oxidative damage

INTRODUCTION

The condition known as hepato-renal syndrome (or toxicity) is linked to the development of kidney failure as well as severe liver damage when exposed to carbon tetrachloride (CCl₄) by multiple routes such as ingestion, inhalation, and cutaneous absorption (Khan et al. 2012). This disorder is frequently observed in people who have severe liver failure. Symptoms include weight gain, jaundice, confusion, delirium, nausea, vomiting, dementia, reduced urine output, dark urine, swollen abdomen, and decreased antioxidant-mediated body defense (Tabeshpour et al. 2020). The severity of this condition is thought to be caused by decreased urine production, which leads to the buildup of nitrogenous waste materials. These materials then help to produce reactive oxygen species, which interact with macromolecules to cause organ damage (Low et al. 2015). Enhancing the body's antioxidant capacity, which comes from natural sources like fruits and

vegetables, has also been demonstrated to help lessen the effects of hepatorenal syndrome (Douglas et al. 2020). Although it is well known that nutrition can prevent a wide range of diseases, including infectious ones, it seems that modern medicine, especially when treating infectious diseases, has overlooked or undervalued this aspect of health care (Aune et al. 2018)

Over the years, research has evaluated the role and possible mechanisms by which most chemical agents induce tissue damage, especially in the liver and kidney, which are directly responsible for the metabolism and excretion of chemicals following exposure (El-Boshy et al. 2017). Among the compounds mentioned is carbon tetrachloride (CCl₄), one of the principal xenobiotics that have been demonstrated to produce both acute and chronic tissue damage with a well-established hepatotoxicity (Xu et al. 2010). Douglas et al. (2020) state that quercetin is a polyphenolic flavonoid component widely found in red wine, tea, onions, berries, apples, broccoli, cherries, and

red grapes. According to Douglas et al. (2020), quercetin's high solubility, bioavailability, and capacity to form complexes or combine to generate certain unique preparations utilized for human health care contribute to its medicinal value. According to Tabeshpour et al. (2020), hesperidin (HSP), a pharmacologically active subclass of flavonoids (flavonoid aglycone), is widely distributed in citrus species, including blood orange, orange, lemon, and lime. According to Tabeshpour et al. (2020), it is a disaccharide derivative that has hesperidin substituted by a 6-O-(alpha-L-rhamnopyranosyl)-beta-D-glucopyraosyl moiety at position 7 by a glycosidic linkage with a diphenol structure with the molecular formula C₂₈H₃₄O₁₅. According to the paper by Zanwar et al. (2018), it has been shown that flavanone exhibits various of pharmacological activities such as anti-inflammatory antioxidant, analgesic, anticarcinogenic, antiviral, and anti-coagulant. It is utilized in herbal formulations. Recent studies on the protective effects of hesperidin have shown that, as a major dietary polyphenol, its ability to guard against organ damage is well known (de Aja et al. 2020). It is used as a supplemental agent in complementary therapy protocols with success because of its biological and pharmacological properties, which are effective in lowering lipid levels, scavenging free radicals, and acting as powerful antioxidant, anti-inflammatory, anti-carcinogenic, and anti-hypertensive agents (Sedky et al. 2017). Hesperidin's antioxidant properties protect the testicles from cadmium poisoning and regulate the hepatic synthesis of cholesterol by blocking the action of 3-hydroxy-3-methyl-glutaryl-CoA (HMG-CoA) reductase, as per a study by Saleh et al. (2022). The vital roles that bioactive chemicals from plants play in combating various human diseases have led to their widespread usage in conventional and botanical medicine. Calas, onions, berries, apples, red grapes for quercetin, and a variety of citrus fruits, including oranges, lemons, mandarins, and grapefruit for hesperidin, are excellent sources of them (Low et al. 2015). They have higher antioxidant activity due to their high solubility and bioavailability. Examples of this activity include their effect on glutathione (GSH), enzymatic activity, signal transduction pathways, and the elimination of Reactive Oxygen Species (ROS) brought on by chemical and environmental toxicological factors, such as the CCl₄ used in this study. Therefore, the study aimed to clarify how hesperidin and quercetin can work in concert to lessen the harmful effects of CCl₄.

MATERIALS AND METHODS

Chemicals and reagents

Pfizer International (NY, USA) provided the CCl₄ that was used. Randox Laboratories Limited (Admore, Crumlin, Co-Antrim, UK) produced the alanine transaminase (ALT), aspartate transaminase (AST), alkaline phosphatase (ALP), gamma-glutamyl transferase (-GT), and total protein kits. Cayman Chemical (Ann Arbor, Michigan, USA) supplied

the Griess reagent kit, Potassium persulfate (K₂S₂O₈), dipotassium hydrogen phosphate (K₂HPO₄), potassium dihydrogen phosphate (KH₂PO₄), potassium chloride (KCl), sodium nitroprusside (C₅FeN₆Na₂O), hydrogen peroxide (H₂O₂), butylated hydroxytoluene, 2-deoxy-D-ribose, 2-thiobarbituric acid (TBA), and Aldrich Sigma Chemical Company (St. Louis, MO, USA) provided Ellman's reagent. Randox Laboratories Limited (Crumlin, UK) biochemical test kits were used instead of Lab Kit Biochemical Kits (Barcelona) to estimate urea, uric acid, and creatinine. All other chemicals and reagents, except those noted otherwise, were of the analytical grade and were bought from British Drug Houses in Poole, UK.

Animal model

Male albino test subjects In the Animal House of the Department of Biochemistry at the University of Calabar, Nigeria, Wistar rats were produced artificially. The weight of the rats varied between 150 and 200 grams. They were housed in a plastic hanging cage with standard 12-hour light/12-hour dark cycles in a rat housing that was appropriately ventilated and maintained at 25°C. Fresh water and standard pellet meal were provided to the rats without restriction. The animals were allowed to acclimate for two weeks before the start of the tests. The National Academy of Science's (NAS) "Guide for the Care and Use of Laboratory Animals" by National Research Council (2010), provided guidelines that all of the animals were treated with care. The institution has accepted the researcher's experiment under number 17/042144175.

Experimental protocol

Therefore, according to their treatments, 30 rats were randomly divided into five (n = 6) groups. Before testing, hesperidine and quercetin were added to the vehicle, sweetened condensed milk diluted 1:6 in water. For 14 days consecutively, the animals consecutively were given oral aliquots containing doses of hesperidin and quercetin (2.4, 2.4, and 1.4 mg/kg bw) every day between 8.00 and 9.00 AM. These different doses of quercetin and hesperidin have been demonstrated to shield rats against oxidative stress, inflammation, and liver damage (Seema et al. 2021). The vehicle was given to the rats that were CCl₄ alone and the normal control, as indicated in Table 1. Except for normal control group I, which just received sterile injection water, all of the groups (II - 6) were subsequently given an intraperitoneal (i.p.) injection of CCl₄ (0.5 mg/kg) formulated in sterile injection water.

Preparation of serum

At the end of the experiment, precisely 24 hours after the CCl₄ administration, the animals were slaughtered under light ether anesthesia, meaning the CCl₄ would have fully metabolized by then. After piercing the heart, blood samples were taken using basic centrifuge tubes. Serum was created by centrifuging it at 3000 g for 10 minutes using an MSE bench centrifuge. The clear supernatant was used to estimate serum enzymes.

Table 1. Treatment protocols

Groups (n = 6)	Treatment
I	Control (administered vehicle)
II	CCl ₄ (0.5 mg/kg b.wt., respectively)
III	Hesperidin (2.4 mg/kg b.wt.)
IV	Quercetin (2.4 mg/kg b.wt.)
V	Hesperidin (1.2 mg/kg b.wt.)

Preparation of tissue

The livers and kidneys of the sacrificed rats were quickly removed. A portion was dried using filter paper, weighed, and rinsed with ice-cold 1.15 percent KCl. To create 10% homogenates, the liver and kidney were chopped with scissors in 9 vol of ice-cold potassium phosphate buffer (0.1 M, pH 7.4). Next, a Teflon pestle homogenizer was used to homogenize the kidney and liver. (Thomas Scientific, Swedesboro, NJ, US). An aliquot of the homogenate was centrifuged at 12,000 g at 4°C for 15 minutes in a TGW16 Micro Centrifuge (Tingtai, China). This process produced the Post-Mitochondrial Fractions (PMF). We kept the supernatant at 20°C until we needed it for biochemical testing.

Biochemical assays

The manufacturer's instructions for the kit are available here. Total bilirubin, total protein, urea, uric acid, and creatinine were measured using spectrophotometry at 546 nm, while the interaction between cupric ions and protein peptide bonds in an alkaline medium to form a colored complex was observed.

Determination of liver integrity biomarkers

Measurement of ALT (alanine transaminase) activity in the blood and liver. ALT catalyzes the transamination of L-alanine to pyruvate, which subsequently combines with 2,4-dinitrophenylhydrazine (DNPH) to produce a brown-colored complex, pyruvate-2,4-dinitrophenylhydrazone (PDNPHO) in alkaline medium (L-alanine + α -oxoglutarate \rightarrow L-glutamate + pyruvate; + DNPH \rightarrow PDNPHO), the intensity of the brown colored complex, PDNPHO at 340 nm is proportional to the activity of ALT, as described by Reitman and Frankel (1957). Units/mg protein was used to express the ALT-specific activity. The generation of reactive species – H₂O₂ and nitric oxide (NO) – was estimated according to the methods of Junglee et al. (2014). Oxidative degradation of lipids and proteins was assessed as malondialdehyde (MDA), and MDA was determined according to the method of Buege and Aust (1978) as thiobarbituric acid reactive substances (TBARS).

Determination of serum and hepatic aspartate transaminase (AST) activity.

A combination of malate and NAD⁺ is produced by the combination of AST-catalyzed transamination of aspartate to oxaloacetate and L-glutamate + oxaloacetate; + NADH malate + NAD⁺, according to Reitman and Frankel (1957). The AST-specific activity was expressed in units/mg of protein.

Determination of serum and hepatic alkaline phosphatase (ALP) activity

ALP catalyzes the hydrolysis of p-nitrophenyl phosphate to p-nitrophenol, a yellow chromogen, at a wavelength of 405 nm, according to Akamo et al. (2015) technique. The activity of ALP, quantified in units per milligram of protein, is directly correlated with the intensity of yellow chromogen.

Determination of antioxidants

The liver homogenate's 12,000 g post-mitochondrial fraction was tested for antioxidant content.

Determination of reduced glutathione (GSH) concentration

The GSH concentration was determined spectrophotometrically at 412 nm by tracking the rate of production of the chromophoric product 2-nitro-5-thiobenzoate (TNB) after Ellman's reagent DTNB [5,5-dithiobis(2-nitrobenzoic acid)] was reduced. The method of Jollow et al. (1974) indicates that the intensity of the yellow-colored complex formed is directly proportional to the amount of -SH groups. by the reduced glutathione's free sulphhydryl group (2GSH + DTNB TNB + GSSG). The GSH data were expressed as GSH/mg protein using a GSH molar extinction value (ϵ) of 9.6 0.017 mM 1 cm 1.

Determination of superoxide dismutase (SOD) activity

SOD activity was measured spectrophotometrically at 420 nm by measuring the suppression of autoxidation of pyrogallol, a superoxide-reacting indicator molecule (SRIM) that rivals SOD for its interaction with superoxide in an alkaline media. Applying the method (pyrogallol/SOD + O₂ • + 2H⁺ H₂O₂ + O₂) described by Marklund and Marklund (1974). The units/mg protein or pyrogallol auto-inhibition/min/mg protein was calculated using the pyrogallol molar extinction coefficient (ϵ) of 8.0 105 M 1 cm 1 to express the specific activity of SOD.

Determination of catalase (CAT) activity

The method of Hadwan and Abed (2016) involved measuring the rate of hydrogen peroxide (2H₂O₂.2H₂O + O₂) oxidation at 374 nm was used to quantify catalase activity spectrophotometrically. The specific activity of catalase was expressed as Units/mg protein or mmol H₂O₂ degraded/min/mg protein using the H₂O₂ molar extinction value (ϵ) of 43.6 M 1 cm 1.

Determination of glutathione peroxidase (GPx) activity

Using GSH as a co-factor (H₂O₂ + 2GSH \rightarrow 2H₂O + GSSG), the remaining GSH content during the breakdown of hydrogen peroxide was measured Spectrophotometrically at 420 nm to quantify the GPx activity, following the methodology of Mohandas et al. (1984). Using a GSH molar extinction coefficient (ϵ) of 9.6 0.017 mM⁻¹ cm⁻¹, GPx-specific activity was reported as Units/mg protein or nmol of residual GSH/min/mg protein.

Histopathological examinations

Dr. Kris Uko, a consultant pathologist at the University of Calabar Teaching Hospital in Nigeria, conducted the

histological analysis of the liver and kidney samples. Small pieces of liver tissue were gathered in 10% neutral buffered formalin for the proper fixing. These tissues were processed and embedded in paraffin wax. Sections of 5 mm thickness that had been cut, mounted, and stained were stained with hematoxylin and eosin. After that, the slices were examined under a light microscope.

Statistical analysis

Data were expressed as the mean \pm Standard Deviation (SD) of five replicates in each group. Analysis of Variance (ANOVA) was conducted to test for the level of homogeneity among the groups. Where heterogeneity occurred, the groups were separated using the Duncan Multiple Range Test (DMRT). A p-value of less than 0.05 was considered statistically significant. All the statistics were carried out by SPSS (Statistical Package for Social Sciences) software for Windows version 20 (SPSS Inc., Chicago, Illinois, USA). Graphs were plotted using Graph Pad Prism 8 Software (Graph Pad Software Inc., San Diego, USA).

RESULTS AND DISCUSSION

Quercetin and hesperidin pre-treatment preserved hepatic integrity

It was found that quercetin and hesperidin may reduce CCl₄-mediated liver injury by assessing the activities of ALT, AST, and ALP in the serum (Figure 2). Therapy with CCl₄ markedly ($p < 0.05$) raised the activities of serum ALT (Figure 2), AST (Figure 2.B), and ALT. The findings of comparing each serum's ALP, AST, and ALT levels to the corresponding negative control (normal) group are displayed in Figures 2.C, 2.D, and 2.E, respectively.

In contrast to the corresponding negative control (normal) group, the function and activity of the hepatic liver enzymes were considerably ($p < 0.05$) decreased following the administration of CCl₄. When quercetin and hesperidin were administered to the CCl₄-intoxicated group at doses of 2.4, 2.4, and 1.4 mg/kg, they significantly ($p < 0.05$) reduced the altered activities of ALT, AST, and

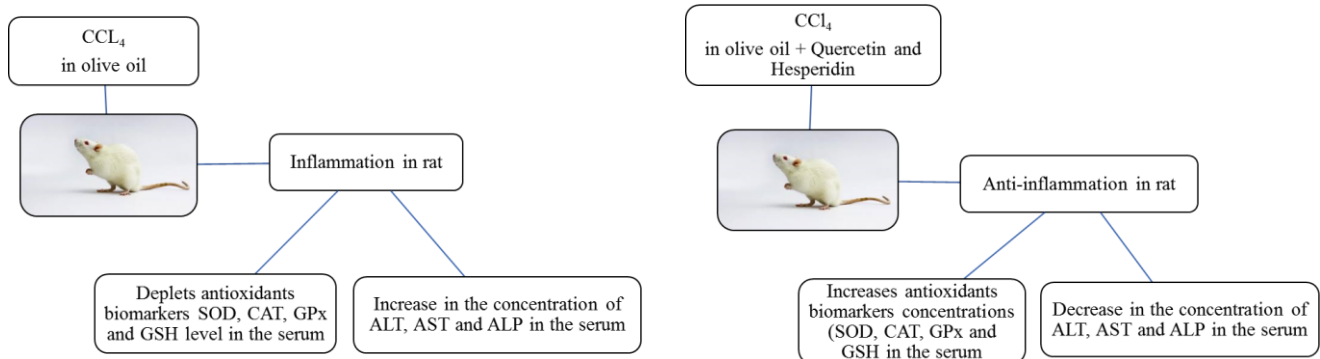
ALP that were released into serum as a result of CCl₄-mediated liver injury. By increasing their hepatic activities compared to the CCl₄ alone treated groups, the various doses of quercetin and hesperidin also significantly ($p < 0.05$) increased the hepatic functional activities of ALT, AST, and ALP. In the two compartments, quercetin and hesperidin exhibited a concentration-dependent protective effect against hepatotoxicity generated by CCl₄.

Quercetin and hesperidin pre-treatment prevents the alterations of the oxidative stress markers induced by CCl₄ in rat organs

The effects of a single dose of 0.5 mg/kg CCl₄ were measured on the levels of reduced glutathione and the liver's activities of glutathione-S-transferase, superoxide dismutase, catalase, and glutathione reductase after pre-treatment with 2.4, 2.4, and 1.4 mg/kg quercetin and hesperidin for 21 days in a row (Figure 1). After CCl₄ injection, intracellular GSH levels were considerably ($p < 0.05$) lower than in the healthy control group (Figure 3.A). Conversely, CCl₄-induced decreases in the activities of glutathione reductase (Figure 3), glutathione peroxidase (Figure 3), and catalase (Figure 3) were seen in comparison to the healthy control group. Glutathione-S transferase and superoxide dismutase activities were significantly ($p < 0.05$) increased by CCl₄-intoxication compared to the healthy control group. The oral administration of the rats with quercetin and hesperidin to varying degrees significantly ($p < 0.05$) reverses the CCl₄-mediated changes in the oxidative stress markers.

Histopathological changes in the liver

Even though there were no reported deaths in any of the groups during this experiment, some of the liver tissues from group A (0.4% DMSO) showed a conserved architecture with a noticeable modification observed in the liver and kidney tissues of the CCl₄ exposed groups (Figure 4). After pre-treatment with Q and H, the liver and kidney tissues are clearly repaired, suggesting that the histopathological study indicates a little increase in nucleated cells.



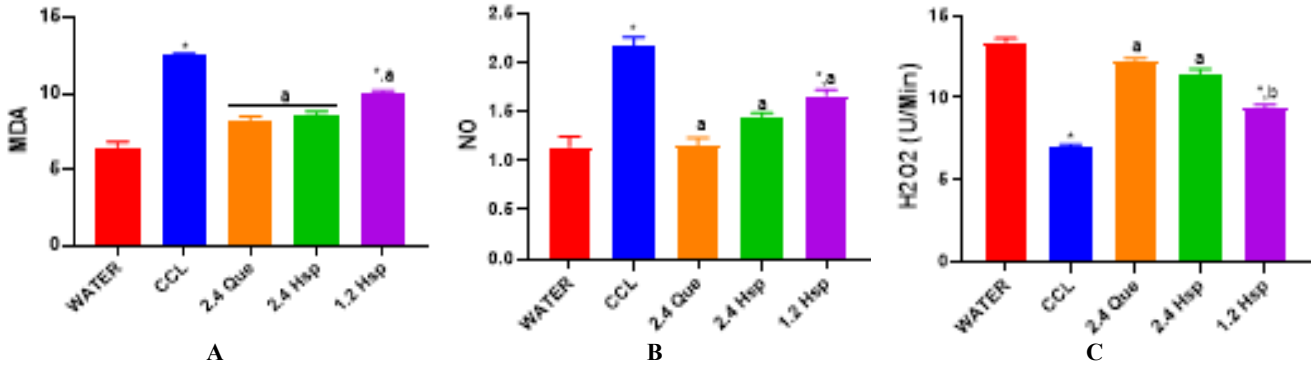


Figure 1. Effects of quercetin and hesperidin pretreatment on CCl₄ mediated increased in oxidative stress markers in rats on kidney parameters. A. MDA level, B. Nitric oxide, C. Hydrogen peroxide. Bars represent mean ± SEM (n=5). Bars with different letters are significantly different at P < 0.05

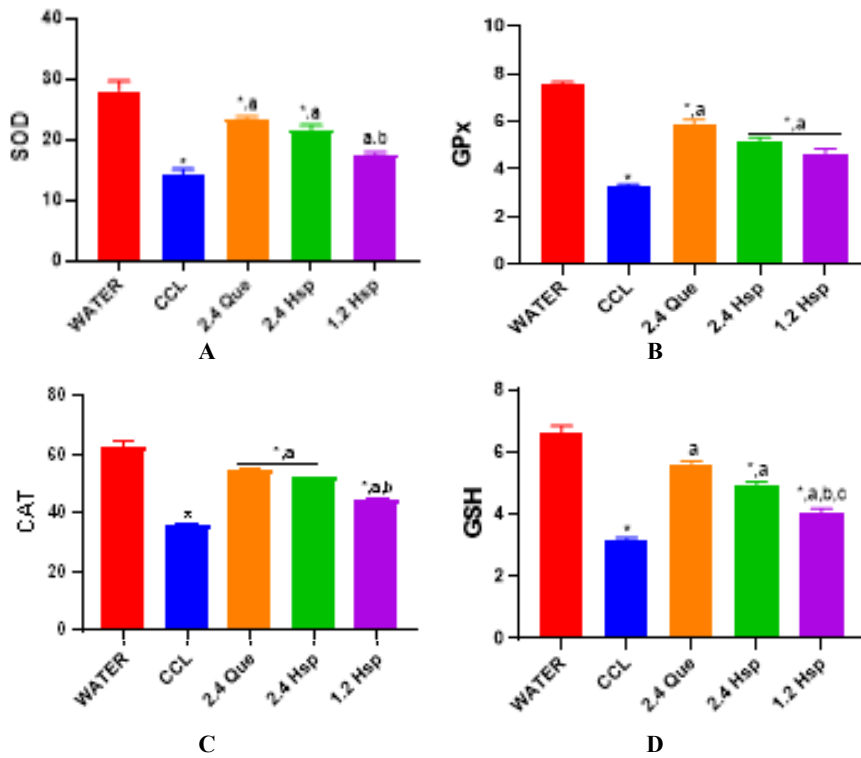


Figure 2. Effects of quercetin and hesperidin pretreatment on CCl₄ mediated increase in antioxidant markers in rats on kidney parameters. A. SOD, B. CAT, C. GPx, D. GSH. Bars represent mean ± SEM (n=5). Bars with different letters are significantly different at P < 0.05

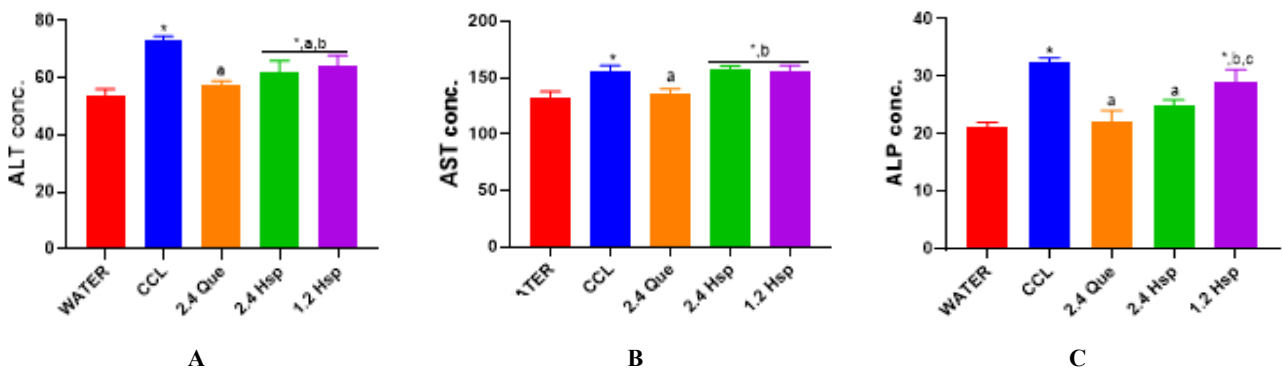


Figure 3. Effects of quercetin and hesperidin pretreatment on CCl₄ mediated increase in liver enzymes markers in rats on kidney parameters. A. AST, B. ALT, C. ALP. Bars represent mean ± SEM (n=5). Bars with different letters are significantly different at P < 0.05

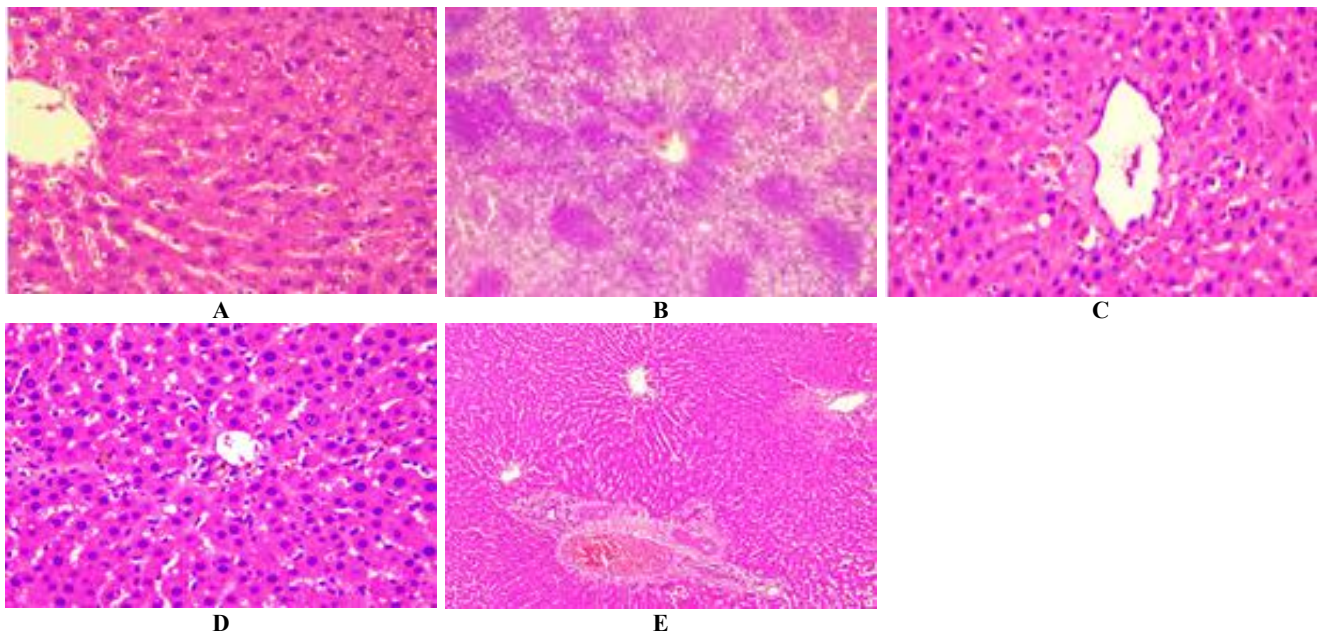


Figure 4. Liver histology of control and CCL₄-exposed rats treated with quercetin and hesperidin. Group A: 0.4% DMSO, Group B: CCL₄; 0.5 mg/kg, Group C: Quercetin (2.4 mg/kg), Group D: Hesperidin (2.4 mg/kg), Group E: Hesperidin 1.4 mg/kg). Photomicrograph of the liver section showing arrays of hepatocytes (black arrows) severe diffused fatty degeneration (#) with both a mixed microvesicular (mi), macrovesicular (ma) steatosis and hepatocellular ballooning degeneration (asterisk). Also seen was a congested blood vessel (V) necrotic liver cell (Red arrow). Haematoxylin and Eosin (H&E) Stain. X100 and x400 magnification on the CCL₄ mediated group upon treatment with quercetin and hesperidin changes showed hepatocytes (black arrows), Central Vein (CV) and average-sized sinusoidal spaces (Thin Blue arrow). No pathological lesion was seen. H&E stain. x400 magnification

Discussion

Reactive Oxygen Species (ROS) produced by a biological system are not balanced with the system's capacity to detoxify the reactive intermediates or repair the damage that results in the impacted tissues quickly (El-Boshy et al. 2017). This imbalance is known as oxidative stress. According to a study by Medline (2022), this led to the accumulation of oxidative stress indicators and a notable decrease in antioxidant indicators.

The current study's findings demonstrated that the injection of CCl₄ resulted in an imbalance in the level of oxidative stress indicators tested, as seen by differences between the CCl₄ and the water groups. According to El-Boshy et al. (2017), peroxides and free radicals, which harm all parts of the cell, including proteins, lipids, and DNA, are produced when there is a disruption in the normal redox state of cells. According to the results of this investigation, CCl₄ administration was able to cause damage to cellular components, increase the generation of reactive oxygen species, and entirely reduce their clearance from the system. These reported damages may help to explain them. However, other results showed that serum CCl₄ poisoning led to a considerable decrease in antioxidant levels, including SOD, CAT, GPx, and GSH. On the other hand, CCl₄ injection and liver and kidney homogenates cause an increment in AST, ALT, ALP, SOD, and CAT activities. Therefore, a high level of ALT may indicate liver damage, which could be brought on by toxic chemicals or certain drugs that restrict blood supply to the liver. While ALP levels are reported to be a sign of liver

disease or specific bone disorders, AST is directly linked to heart issues that are associated with damage to the kidneys or liver (Medline 2022). The current study's results corroborate the earlier report since exposure to CCl₄, which has a well-documented history of hepatorenal toxicity, led to a rise in the levels of these enzymes. All live cells include the enzyme superoxide dismutase (SOD), which aids in the breakdown of potentially hazardous oxygen molecules within the cells and guards against cellular damage. Because it plays a part in detoxifying harmful produced O₂ in the system, its concentration has been found to increase in excessive accumulation of reactive oxygen species. According to (Biju et al. 2014), one of the host defense mechanisms facilitating a quick rise in oxygen uptake may be the protective and adaptive mechanisms against oxidative stress that are developing in the tissue, which could explain the increase in SOD. This report is consistent with the findings in liver and kidney homogenates from the current study, which indicated that the system produced more SOD and its activity to protect itself and promote O₂ clearance from the system as a result of the damage caused in the tissues by CCl₄; this resulted in low substrate in the serum and reduced SOD activity. Similar decreases in serum levels of catalase (CAT) were also observed; they have been linked in earlier studies to CAT gene mutations, and the decreases encourage the accumulation of hazardous levels in specific cells Medline (2022). CAT is responsible for maintaining an optimal amount of the molecule in the cell, which is linked to crucial cellular signaling pathways, by using hydrogen

peroxide, a non-radical ROS, as its substrate and neutralizing it by breakdown (El-Boshy et al. 2017). However, the rise in CAT activity observed in the tissues in this study may result from the body's attempt to correct the disruption in the antioxidant levels and reduce the negative effects of reactive species and their byproducts. CAT is essential for reducing oxidative stress to a great degree since they break down cellular hydrogen peroxide to create oxygen and water. The present study's observation of elevated CAT activity indicates the deleterious consequences of administering CCl₄.

The present study indicate that serum levels of glutathione peroxidase (GPx), a family of peroxide-active enzymes whose primary biological function is to protect the body from oxidative damage by reducing lipid hydroperoxides to their corresponding alcohols and free hydrogen peroxide to water, were decreased. This study suggests that CCl₄ toxicity caused a reduction in GPx concentration, which may indicate disease condition, but higher concentrations of GPx were recorded in the tissues. El-Boshy et al. (2017) also reported a similar reduction and stated that the measured reduction may contribute to vitiligo and most other disease conditions, including diabetes. As stated in the study by Dibal et al. (2018), reducing oxidative stress, which can exacerbate symptoms of various chronic illnesses, including autoimmune disease, is one of the potential health benefits of boosting GPx concentration. The rise in this study could be attributed to a systematic process used by the system to counteract the tissue-damaging effects of CCl₄. Glutathione (GSH), which is known as the body's master antioxidant because of its function in cell protection, is another significant antioxidant that is of interest in the current investigation. The report claims that it immediately quenches radical centers on DNA and other biomolecules, as well as other free radicals with oxygen centers and reactive hydroxyl centers. This enzyme's decrease has been linked to long-term exposure to pollutants, alcohol, chemicals, cadmium, and other medical conditions. This could account for the serum result that showed a decrease, indicating that the administration of CCl₄ induced a medical state, including liver illness. Glutathione plays a role in detoxifying endogenous and xenobiotic substances and the excretion of oxidative molecules. This could explain the rise in tissue homogenate seen in the current study. Nonetheless, dietary antioxidants support the antioxidant activity of cells (El-Boshy et al. 2017). By scavenging active oxygen and free radicals and neutralizing lipid peroxides, antioxidants and anti-inflammatory drugs play a crucial role in the fight against CCl₄ intoxication. This raises antioxidant levels, restores the structural integrity of injured organs, and improves ameliorative effects. This was observed in both the liver and kidney but not in the serum for SOD, CAT, GPx, and GSH; it was also shown in a dose-dependent manner in the hesperidin groups. The groups treated with 2.4 mg/kg quercetin showed substantial results. According to a study by Dibal et al. (2018), elevated levels of AST, ALP, and ALT in the liver indicate a dysfunctional liver condition with an unbalanced level of oxidative stress markers. nevertheless, most research indicates that this

outcome could result from a disordered lipid profile in the liver. Furthermore, the results should support the findings of Dibal et al. (2018), which showed that quercetin has the potential to significantly reduce ALT, AST, and ALP activity in hepatorenal injury; similarly, Apaydin et al. (2018) reported hesperidin's ability to ameliorate chemically induced hepatorenal toxicity. Treatment with plant extracts should also be able to restore these effects, particularly in the groups treated with 2.4 mg/kg quercetin.

In conclusion, this current study concludes that by recovering from ROS-mediated oxidative stress, the injection of quercetin and hesperidin helps to offset the damage that CCl₄-induced hepato-renal ailments generate. The quercetin and hesperidin supplements may be recommended as an adjunctive natural therapy because they can scavenge free radicals and prevent hepato-renal damage.

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