تقييم فعالية GOT في مصل دم الانسان بتأثير الفلاجيل Metronidazole

Asst.Instructor.Ragaa K. Baker College Education Ibn Al-Haitham University Baghdad

**Evalution of Serum Glutamic Oxaloacetic Transaminase activity by Metronidazole** 

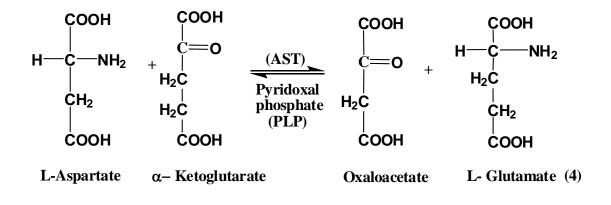
Abstract

This study has done <u>in vitro</u> to know the effect of different concentration of metronidazole on (SGOT) activity. The result revealed adepression of (SGOT) activity by metronidazole. The (SGOT) activity drop and reaches to zero in all concentration, of the drug under considuration.

Introduction

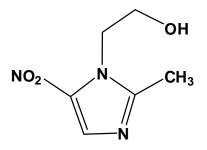
Serum Glutamte oxaloacetate transaminase (SGOT). Also called aspartae trans aminase (AST) present in high concentration in the heart, liver, skeletal muscle, kindney and eryhrocyes, damage to any of these tissue, cancer or other diseases may increase plasma GOT activity (1) (2) Very high values > 500 units /L, usually suggest hepatitis or other kinds of hepato cellular necrosis but can also be found with large necrosis tumors, other types of necrosis extensive hypoxia, congertive of failure, and shock. (3)

**GOT Catalyase the following reaction** 



#### Metronidazole

The chemical name 2-Methyl-5-nitromidazole -1-ethanol Structural Formuls



Molecular Formula: C<sub>6</sub>H<sub>9</sub>N<sub>3</sub>O<sub>3</sub>

Molecular Weight: 171.15

Physical form: white to pale yellow crystal or crystalline powder.

Solubility: sparingly solublein water and in alcohol, slightly soluble in ether and in chloroform

рКа: 2.6

PH: 5.8 (saturated solution)

Melting point: 159-163°C (5)

Metronidazole, antiroimidazole antimicrobial agent, was first used for treatment of systemic anaerobic infections by Tally etal (6) subsequent studies have shown metronidazole

to possess excellent <u>in vitro</u> activity against the common anaerobic pathogens (7,8,9)

and pharmacology metronidazole Action clinical is anaerobic bacteria. bactericidal against it exerts trichomonacidal activity and is also active against Gigrdia Iamblia and Entamoeba Hislolytica. Its exact mechanism of action has not been entirely determined as yet. It has been proposed that an intermediate in the reduction of metronidazole, produced only in anaerobic bacteria and protozoa is bound to deoxyribonucleic acid and electron transport proteins, inhibits subsequent nucleic acid synthesis.(5)

At present the mechanism by which topical metronidazole reduces the lesions and erythema associated with aone rosacea is not precisely know despite the established antimicrobial effects of metronidazole, there is no evidence that the suppression of bacteria or parasitic mites harbored.(5)

in the skin is directly responsible for its beneficial effects in rosacea. In vitro and in vivo studies indicate that metronidazole has direct anti inflammatory activity and effects neutrophil chemotaxis and cell – mediated immunity. An antioxidant action via inhibition of neutrophil has also generated reactive oxgen species been demonstrated, this action is believed to underlie its anti inflammatory effect. It has been proposed that the reduction in rosace a lesions and erythema is the result of anti immunosuppressive inflammatory actions or of metronidazole. (5)

The aim of the study

Glutamate oxaloacetate transaminase (GOT) (EC2.6.1.1) is one of the enzymes studied in liver function test and since liver is the sile of detaxifcation of all drugs so this study focused on the effect of Metronidazole using different concentration of the drug.(10)

Materials and Methods

- **1. serum (from healthy people)**
- 2. GOT (BIOMERIEUX/France)
- 3. Metronidazole (Ankle shwar India)
- 4. Spectrophotometer (spectrosc) Labo Medinc. wave length 505 nm

Colorimetric method used for determination of Glutamic – oxaloacetic transaminase (GOT) in serum.

The effect of different concentration of the drugs were tested on GOT activity in serum with (10<sup>-2</sup>, 10<sup>-3</sup>, 10<sup>-4</sup>, 10<sup>-5</sup>, 10<sup>-6</sup>, 10<sup>-7</sup>) Molar of Metronidazole according to the method (Reimananl Frankel, 1957)(10) as follows:

α- oxoglut + L- aspartate GOT L- glutamate + oxaloacetate

**Results and Discussion** 

The drug used in this study was liquid the stock solution  $(10^{-2})$  was the drug without dilution. Stock solution (1 ml) was diluted to 10 ml in volumetric flask to give  $(10^{-3})$  M then  $10^{-4}$ ,  $10^{-5}$ ,  $10^{-6}$ ,  $10^{-7}$  M from  $10^{-3}$ ,  $10^{-4}$ ,  $10^{-5}$ ,  $10^{-6}$  M were prepeared respectively. The enzyme activity was measured according to the method (11).

In the first experiment, the velocity of unihibitd enzyme was established, in the second experiment, a constant amount of inhibitor used thought out the study, different concentrations of substrate were used. Different substances have the ability to reduce or eliminate the catalytic activity of specific enzyme. (12)

Figure (1) showed the Calibration curve of (SGOT) concentration by plotting absorbance against concentration. The influence of each dilution of the drug were tested on SGOT activity, they are shown in table. (1)

All concentration caused depression of SGOT activity which fail to zero. Metronidazole may interfere with certain types of determinations of serum chemistry values. Such as aspartate amino transferase(13) (14)

Like other amino transferase SGOT contain the prosthetic group pyridoxal phosphate (PLP), which is derived from pyridoxine (vitB6), which is covalently linked to the  $\varepsilon$ -amino

acid group of specific lysine residue at the active site of the enzyme Amino trans ferases act by transfering the amino group of an amino acid to the pyridoxal part of the coenzyme to generate pyridoxamine phosphate.

The pyridoxamine form of the coenzyme reacts with an  $\alpha$  – keto acid to form an amino acid, at the same time regenenerate the original aldhyde form of the coenzyme. (15) (16)

In clinical trials during metronidazole therapy the SGOT decreased progressively, reaching anadir of zero IU. (17)

So in our mind that any substance that interfer with the mechanism action of SGOT might inhibit or diminish the activity of the enzyme as in the present study.

References

- 1. Zilve JF, pannal PR and May ne PD Clinical chemistry in Diagnosis and Treatment 6<sup>th</sup>, Edward Arnold, London, 1998, P.302.
- 2. www. Date First published 2004, 5-28.
- 3. Rej R, "Aminotrans fera sein Disease", Clin Lab Med, 1989, 9 (4):667-87.
- 4. www. Diwan, "Molecular Biochemistry" Disease of liver, P.P. 1-2 (2005).
- 5. Metronidazole (Antibacterial Antiprotozoal) product monograph, sanofi – avent is Canada Inc. September 27, 2007.
- 6. Tally.F.P.,V.L. Sutter, and S.M. Finegold 1972 Metronidazole verus an erobes. In vitro data and initial clinical observations, calif.Med. 117:22-26.
- 7. chow, A.W.,D. Bed norz, and L.B. Guse. 1977. susceptibility of obligate anerobes to metronidazole. Anextended study of 1,054 clinical is -292 Excerpta Mediea – Princeton, Lawren ceville, N.J.
- 8. Sutter, V.L., and S.M. Finegold, 1976. susceptibility of anerobic bacteria to 23 antimicrobial agents. Antimicrrob. Agents chemother. 10:736-752.

- 9. Wust, J. 1977. Suceptibility of anerobic bacteria to metronidazole, ornidazole, and tinidazole and routine susceptibility testing by standardized methods. Antimicrob. Agents chemother. 11:631-637.
- 10. Mayne,P.D.(2002): clinical chemistry in Diagnosis and treatment, 6<sup>th</sup> ed.PP:301-312,ARNOLD.LONDON.
- 11. Reitmans and Frankel S: Determination of Glutamic oxaloacetic Transaminase and Glutamic pyruvate transaminase by monitoring the concentration of hydrazone derivatives formed with 2,4 dinirophenyl hydrazine, Amer Jelin path, 92,60-67 (1957).
- 12. Satyan rayana V "Biochemistry" 2<sup>nd</sup> Book and Allied (P) Ltd, India 2003, PP. 91-94.
- 13. Proposed standard: PSM-11- Proposed Reference Dilution Procedure for Antimicrobic Susceptibility Testing of Anaerobic Bacteria, National Committee for Clinical Laboratory Standards; and Sutter, et al.: Collaborative Evaluation of a Proposed Reference Dilution Method of Susceptibility Testing of Anaerrobic Bacteria, Antimicrob. Agents Chemother. 16:495-502 (Oct.) 1979; and Tally, et al.: In Vitro Activity of Thienamycin, Antimicrob. Agents Chemother. 14:436-438 (Sept.) 1978.
- 14. Jensen JC, Guglar R. Interaction between metronidazole and drugs eliminated by oxidative metabolism. clin pharmacol Ther 1985; 37:407-410.
- 15. Murry,R.K,Granner, D.K.,Rodwell, V.W (2006) "Harper's I llust rated Biochemistry",27<sup>th</sup> e.ed, Mc Graw Hill Companies,Inc.
- 16. Champe, P.C., Harvey, R.A., and Ferrier, D.R., (2008) "Lippin cott's I llust rated Reviews Bio chemistry",4<sup>th</sup>.ed.Lippincott Williams and Wilkins, Philadelphia.
- 17. J.PETER RISSING, CHERYL NEWMAN, AND WILLIML. MOORE, JR. ANTIMICROBTAL AGENTS AND CHEMOTHER APY, Oct. 1978, P 636-638.

| Compound Conc.   | % Activity |
|------------------|------------|
| 10-2             | Zero       |
| 10 <sup>-3</sup> | Zero       |
| 10-4             | Zero       |
| 10 <sup>-5</sup> | Zero       |
| 10-6             | Zero       |
| 10-7             | Zero       |

Table (1) The effect of each dilution of the drug on SGOT activity.

