

## 甲苯达唑、阿苯达唑和阿苯达唑亚砷对细粒棘球蚴糖原含量的影响<sup>1</sup>

肖树华、杨元清、郭惠芳、张超威、焦佩英、尤纪青 (中国预防医学科学院寄生虫病研究所, 世界卫生组织疟疾、丝虫病和血吸虫病合作中心, 上海 200025, 中国)

焦伟 (新疆地方病防治研究所, 乌鲁木齐 830002, 中国)

**Effects of mebendazole, albendazole and albendazole sulfoxide on glycogen contents of *Echinococcus granulosus* cysts in infected mice<sup>1</sup>**

XIAO Shu-Hua, YANG Yuan-Qing, GUO Hui-Fang, ZHANG Chao-Wei, JIAO Pei-Ying, YOU Ji-Qing (*Institute of Parasitic Diseases, Chinese Academy of Preventive Medicine; WHO Collaborative Centre for Malaria, Schistosomiasis and Filariasis, Shanghai 200025, China*)

JIAO Wei (*Xinjiang Institute for Endemic Disease Control and Research, Urumqi 830002, China*)

**ABSTRACT** Mice infected with protoscoleces of *Echinococcus granulosus* for 8-9 months were treated ig with mebendazole (Meb) 50 mg · kg<sup>-1</sup> · d<sup>-1</sup>, albendazole (Alb) 300 mg · kg<sup>-1</sup> · d<sup>-1</sup> or albendazole sulfoxide (AlbSO) 150 mg · kg<sup>-1</sup> · d<sup>-1</sup> for 1-7 d.

The glycogen contents of cyst wall in each drug groups were 1.0 ± 0.6 ~ 1.8 ± 0.9 mg/g, 1.1 ± 0.9 ~ 1.8 ± 0.8 mg/g and 0.8 ± 0.5 ~ 1.5 ± 0.9 mg/g, respectively, which were less than those 2.2 ± 1.3 ~ 2.8 ± 1.3 mg/g of corresponding control groups with respective glycogen reduction rates of 38-55%, 36-51% and 46-62%. After prolongation of treatment course to 10-14 d, the glycogen contents of cyst wall in Meb and AlbSO groups were further decreased, which resulted in glycogen reduction rates of 73% and 69%, respectively. No further decrease of glycogen contents in Alb groups was seen as the glycogen reduction rates sustained in 32%. Histochemical observation showed that the glycogen contents in germinal layer of the cysts decreased significantly or even disappeared during the treatment of Meb, Alb or AlbSO. The results suggested that the effects of Meb and AlbSO on mice infected with secondary cysts of *E granulosus* were superior to Alb as evaluated by glycogen reduction rate of cyst wall

**KEY WORDS** *Echinococcus*; glycogen; mebendazole; albendazole; albendazole sulfoxide

**提要** 感染细粒棘球蚴达 8-9 个月的小鼠 ig 甲苯达唑(Meb) 50 mg · kg<sup>-1</sup> · d<sup>-1</sup>、阿苯达唑(Alb) 300 mg · kg<sup>-1</sup> · d<sup>-1</sup> 或阿苯达唑亚砷(AlbSO) 150 mg · kg<sup>-1</sup> · d<sup>-1</sup> 连给 1-7 d 时, 各组囊壁的糖原含量均明显低于相应对照组的, 但各药物组间则无明显差别。当疗程增至 10 d 时, Meb 和 AlbSO 组的糖原减少率分别为 73% 和 69%, Alb 组的为 32%。Alb 组的糖原含量明显少于对照组的, 但却较 Meb 和 AlbSO 组的为高。组织化学观察的结果表明, 在用 Meb、Alb 或 AlbSO 治疗时, 蚴囊生发层的糖原含量明显减少, 或甚至消失。

**关键词** 棘球属; 糖原; 甲苯达唑; 阿苯达唑; 阿苯达唑亚砷

苯并咪唑类化合物甲苯达唑(mebendazole, Meb)和阿苯达唑(albendazole, Alb)已用于实验动物和临床治疗细粒棘球蚴病<sup>(1,4)</sup>, 但有关这些药物的抗虫作用机理的研究则不多。一些学者认为<sup>(5-7)</sup>, Meb 可破坏细粒棘球蚴的微管系统, 引起微毛破坏和皮层变性, 导致葡萄糖的摄入被阻断, 内源性糖原被耗竭, 而使虫死亡, 并认为这是某些苯并咪唑类化合物抗绦虫和吸虫的主要作用方式<sup>(8)</sup>。组织化学观察结果指出, 细粒棘球蚴的生发层含有丰富的糖原, 经 Meb 或 Alb 作用后, 可见到生发层的糖原含量减少。鉴于 Meb 对小鼠继发性细粒棘球蚴的疗效优于 Alb, 而 Alb 的代谢物阿苯达唑亚砷(albendazole sulfoxide, AlbSO)亦较 Alb 原药为好<sup>(9)</sup>, 故又进一步比较了 3 种药物对小鼠细粒棘球蚴囊糖原含量的影响。

### MATERIALS AND METHODS

**虫源** 原头节系从新疆自然感染的绵羊细

Received 1990 Feb 26 Accepted 1990 Aug 20

<sup>1</sup> Project supported by the Scientific Foundation of Public Health of Ministry of China No. 88109051

粒棘球蚴中采集含原头节的囊液,加入青霉素、链霉素各 500 IU/ml 和两性霉素 B 0.25  $\mu\text{g}/\text{ml}$  后, 4 $^{\circ}\text{C}$  中保存, 临用前用亨氏盐平衡溶液(Hanks' balanced salt solution)洗涤 5-8 次, 当活原头节达 95% 以上即可用以接种小鼠。

小鼠 取 NIH 小鼠, ♀性, 体重  $22.6 \pm \text{SD } 0.8 \text{ g}$ , 每鼠自腹腔接种原头节 2000 只, 8-9 个月后分组用 Meb, Alb 和 AlbSO 治疗, 并于治后不同时间剖杀取囊, 吸取囊液, 再用滤纸吸干即为囊壁, 称重后, 置  $-20^{\circ}\text{C}$  中备用。

药物 Meb 系由上海医药工业研究院合成、赠给, Alb 购自杭州制药厂, 而 AlbSO 则由本所合成。3 种药物均用重蒸水、吐温 80、阿拉伯胶和冷餐油等配制成乳化剂。Meb, Alb 和 AlbSO 的浓度分别为 5, 30 和 15  $\text{mg}/\text{ml}$ , 小鼠 ig 它们的等效剂量<sup>(9)</sup>, 即各为 50, 300 和 150  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$ 。

糖原的测定 感染小鼠分组, 同时用上述药物剂量治疗不同时间后, 以 2-3 鼠为一组剖取囊 5-10 只, 制备囊壁后测定其糖原含量, 每组试验重复 2-3 次。另取同批未治疗的感染小鼠体内的囊作对照。

1. 生化方法: 按文献<sup>(10)</sup>方法进行, 即取上述囊组织, 用 30% KOH 消化, 经 95% 乙醇沉淀糖原后, 在酸性条件下与蒽酮起颜色反应, 在光电比色计上用 650 nm 波长测定吸收率, 并参照葡萄糖标准管, 换算囊组织的糖原含量( $\text{mg}/\text{g}$ )。

2. 组织化学方法: 同批治疗小鼠于剖检时, 每次各组取囊 5 只, 用无水酒精固定, 制成厚 7-10 $\mu\text{m}$  的切片, 用 PAS 法显示糖原, 并用对照囊切片在同一染缸内染色, 各组每次观察 25 个切面, 根据糖原显色的浓、淡或消失, 评以, +++: 含有丰富的糖原; ++: 糖原含量有一些减少; +: 糖原含量减少; -: 糖原消失。

## RESULTS

### 3 种药物对细粒棘球蚴糖原含量的影响

感染小鼠 ig Meb 50  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$ , Alb 300  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$  或 AlbSO 150  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$ , 连给 1-7 d 时, 各组囊组织的糖原含量均显著低于对照组,  $P < 0.01$ ; 各组的糖原减少率虽互有高低, 但组间的囊平均糖原含量差别并不显著, 给药 10 d 后, Meb 和 AlbSO 组的糖原含量进一步减少, 糖原减少率分别为 73% 和 69%, 但 Alb 组的则未见进一步减少, 虽然囊的平均糖原含量与对照组的差别显著, 但明显高于 Meb 和 AlbSO 2 组的。3 种药物 ig 14 d 时, 结果与 10 d 组的相仿(Tab 1)。

Tab 1. Glycogen contents of secondary cysts of *Echinococcus granulosus* harbored in mice treated intragastrically with mebendazole (Meb), albendazole (Alb) or albendazole sulfoxide (AlbSO).  $n=30$ ,  $\bar{x} \pm \text{SD}$ . \*\* $P < 0.05$ , \*\*\* $P < 0.01$  vs corresponding control group.

Drug ( $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1} \times 7 \text{ d}$ )	Glycogen in cyst ( $\text{mg}/\text{g}$ )	Glycogen reduction (%)
Meb 50 $\times$ 1	1.8 $\pm$ 0.9***	38
Alb 300 $\times$ 1	1.8 $\pm$ 0.8***	36
AlbSO 150 $\times$ 1	1.5 $\pm$ 0.9***	46
Control -	2.8 $\pm$ 1.3	-
Meb 50 $\times$ 3	1.5 $\pm$ 1.0***	38
Alb 300 $\times$ 3	1.4 $\pm$ 1.1***	42
AlbSO 150 $\times$ 3	1.2 $\pm$ 0.6***	50
Control -	2.3 $\pm$ 1.1	-
Meb 50 $\times$ 7	1.0 $\pm$ 0.6***	55
Alb 300 $\times$ 7	1.1 $\pm$ 0.9***	51
AlbSO 150 $\times$ 7	0.8 $\pm$ 0.5***	62
Control -	2.2 $\pm$ 1.3	-
Meb 50 $\times$ 10	0.6 $\pm$ 0.4***	73
Alb 300 $\times$ 10	1.5 $\pm$ 1.0**	32
AlbSO 150 $\times$ 10	0.7 $\pm$ 0.4***	69
Control -	2.1 $\pm$ 1.5	-
Meb 50 $\times$ 14	0.5 $\pm$ 0.3***	73
Alb 300 $\times$ 14	1.2 $\pm$ 0.8**	37
AlbSO 150 $\times$ 14	0.7 $\pm$ 0.6***	65
Control -	1.9 $\pm$ 1.0	-

Meb 和 AlbSO 的比较 感染细粒棘球蚴的小鼠分组 ig 12.5, 25, 50  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$  或 AlbSO 50, 100, 150  $\text{mg} \cdot \text{kg}^{-1} \cdot \text{d}^{-1}$ , 连

给 7 d 后, 取囊测定糖原含量. 结果 Meb 12.5 和 25 mg · kg<sup>-1</sup> · d<sup>-1</sup> 组, 或 AlbSO 50 及 100 mg · kg<sup>-1</sup> · d<sup>-1</sup> 组的囊平均糖原含量均明显低于对照组的, 糖原减少率为 47-60%, Meb 与 AlbSO 各组间的囊平均糖原含量的差别均不显著. 但 AlbSO 剂量增至 150mg · kg<sup>-1</sup> · d<sup>-1</sup> 时, 囊的平均糖原含量明显高于 Meb 50 mg · kg<sup>-1</sup> · d<sup>-1</sup> 组的, 若将 2 批 AlbSO 150 mg · kg<sup>-1</sup> 7 d 组或 Meb 50 mg · kg<sup>-1</sup> 7 d 组的结果, 合并统计, 则两者的囊平均糖原含量分别为 721 ± 490 μg / g (n=44) 和 798 ± 592 μg / g (n=48), 差别不显著(Tab 2):

Tab 2. Effects of mebendazole (Meb) and albendazole sulfoxide (AlbSO) on glycogen content of secondary cysts of *Echinococcus granulosus* harbored in mice treated intragastrically with various doses  $\bar{x} \pm SD$ ; \*P>0.05, \*\*P<0.01 vs Meb corresponding group.

Drug		Cysts	Glycogen in cyst (mg / g)	Glycogen reduction (%)
AlbSO	50	20	0.6 ± 0.5*	59
	100	20	0.6 ± 0.3*	60
	150	14	0.5 ± 0.2***	69
Meb	12.5	20	0.8 ± 0.6	47
	25	10	0.6 ± 0.4	60
	50	18	0.2 ± 0.1	87
Control	-	24	1.5 ± 0.7	-

组织化学观察 感染小鼠 1 次 ig Meb 50 mg · kg<sup>-1</sup> · d<sup>-1</sup> 或 AlbSO 150 mg · kg<sup>-1</sup> · d<sup>-1</sup> 后 24 h, 生发层切面示糖原+++的%由对照组

的 64% 分别减少至 24% 和 32%, 而糖原示+和++的%则有较明显的增加, 连续给药 7-14 d 时, Meb 和 AlbSO 组生发层切面糖原示+++进一步分别减少至 8% 和 16%, 且各有 32-44% 和 16-28% 的切面糖原呈阴性. Alb 组给药 1d 后, 仅生发层切面示糖原+++的%稍有减少, 连续给药 7-14 d 后, 则生发层切面糖原示+++的%减少至 24%, 糖原示+的%明显增加, 但糖原呈阳性的为 4-8% (Tab 3)

DISCUSSION

我们测定的结果表明, 对照囊壁糖原含量的标准差较大, 这可能是由于接种至小鼠体内的细粒棘球蚴原头节, 其发育成囊的数量及速率很不均一, 即使在同一鼠体内, 囊的大小均可有很大的不同, 加之囊的生长部位和摄取营养的差异, 使囊壁的糖原含量有较大的波动. 即使这样, 初步结果表明, 无论是用生化方法测定, 还是用组织化学方法观察, 在等效剂量下, 均以 Meb 和 AlbSO 对细粒棘球蚴囊壁的糖原含量有较强的影响, 且 Meb 组稍优于 AlbSO 组, 而 Alb 组的较差. 但是, 用 Alb 治疗时, 囊壁的糖原含量未随疗程的延长而明显减少, 提示 Alb 抗细粒棘球蚴的作用不及 Meb 和 AlbSO 的稳定. 我们在用 Alb 治疗感染小鼠时, 虽疗程延长 1 倍, 但亦未见疗效有明显增加, 由于感染包虫病的绵羊与人用 Alb 治疗时, 均未能在血液、囊壁或囊液中查见 Alb

Tab 3. Histochemical observation on glycogen contents in germinal layer of secondary cysts of *Echinococcus granulosus* in mice treated intragastrically with mebendazole (Meb) 50, albendazole (Alb) 300 and albendazole sulfoxide (AlbSO) 150 mg · kg<sup>-1</sup> · d<sup>-1</sup> for 14 d, n=25.

Time of medication (d)	% of cyst sections showing glycogen contents															
	Control				Meb				Alb				AlbSO			
	+++	++	+	-	+++	++	+	-	+++	++	+	-	+++	++	+	-
1	64	28	8	0	24	52	24	0	60	32	8	0	32	44	24	0
3	60	36	4	0	20	44	36	0	48	24	28	0	28	24	48	0
7	76	24	0	0	20	28	44	8	40	24	36	0	24	28	40	8
10	60	28	12	0	12	20	36	32	28	20	48	4	24	40	20	16
14	72	28	0	0	8	32	16	44	24	16	52	8	16	24	32	28

+++ : rich in glycogen content. ++ : somewhat decrease. + : apparent decrease. - : disappearance of glycogen.

原药<sup>(11, 12)</sup>, 而主要是测得其主要代谢物 AlbSO 和阿苯达唑酮, 前者证明有抗原头节<sup>(13)</sup>和损害细粒棘球蚴囊生发层的作用。因此, 在用 Alb 治疗时, 实际上是 AlbSO 起作用, 故是否因个体对药物的吸收及代谢有差异, 从而影响药效, 尚待阐明。

#### REFERENCES

- 1 Davis A, Pawlowski ZS, Dixon H. Multicentre clinical trials of benzimidazole carbamates in human echinococcosis. *Bull WHO* 1986; 64 : 383
- 2 You JQ, Xiao SH, Jiao PY, Guo HF, Chai JJ, Zhang WL. Effects of mebendazole, albendazole and praziquantel on mice infected with secondary cysts of *Echinococcus granulosus*. *Endemic Dis Bull* 1989; 4 (3) : 16
- 3 Horton RJ. Chemotherapy of *Echinococcus* infection in man with albendazole. *Trans Roy Soc Trop Med Hyg* 1989; 83 : 97
- 4 Qiu JM, Luo CX, Chen HC, et al. Primary observation in the therapy of experimental mice and human hydatidosis with albendazole. *Endemic Dis Bull* 1988; 3 (3) : 19
- 5 Schantz PM, Van den Bossche H, Eckert J. Chemotherapy for larval echinococcosis in animals and humans : Report of a workshop. *Z Parasitenkd* 1982; 67 : 5
- 6 Verheyen A. *Echinococcus granulosus*: The influence of mebendazole therapy on the ultrastructural morphology of the germinal layer of hydatid cysts in humans and mice. *Z Parasitenkd* 1982; 67 : 55
- 7 Eckert J. Prospects for treatment of the metacestode stage of *Echinococcus*. In: Thompson RCA, ed. *The biology of Echinococcus and hydatid disease*. London : George Allen & Unwin, 1986 : 250-77
- 8 Van en Bossche H. Commentary. Peculiar targets in anthelmintic chemotherapy. *Biochem Pharmacol* 1980; 29 : 1981
- 9 Xiao SH, You JQ, Jiao PY, et al. Studies on the effects of mebendazole, albendazole and its metabolites in experimental therapy of mice infected with secondary cysts of *Echinococcus granulosus*. *Endemic Dis Bull* 1990; 5 (in press)
- 10 Tao IH, Ma LJ, Lin KH, Wu K. Chemical determination of the glycogen content of *Schistosoma japonica*. *Acta Biochim Sin* 1958; 1 : 218
- 11 Marriner SE, Bogan JA. Pharmacokinetics of albendazole in sheep. *Am J Vet Res* 1980; 41 : 1126
- 12 Marriner SE, Morris DL, Dickson B, Bogan JA. Pharmacokinetics of albendazole in man. *Eur J Clin Pharmacol* 1986; 30 : 705
- 13 Chinnery JB, Morris DL. Effects of albendazole sulphoxide on viability of hydatid protoscoleces *in vitro*. *Trans Roy Soc Trop Med Hyg* 1986; 80 : 815

中国药理学报 *Acta Pharmacologica Sinica* 1990 Nov; 11 (6) : 549-553

## 4-[4''-(2'',2'',6'',6''-四甲基哌啶氮氧自由基)氨基]-4'-去甲表鬼臼毒素 体外抗肿瘤作用

贾正平<sup>1</sup>、张培栋、梁重栋(兰州医学院药理教研室, 兰州, 730000 中国)

王彦广<sup>2</sup>、陈耀祖、田瑄、李景新(兰州大学化学系, 兰州, 730000 中国)

Antitumor activity of 4-(4''-(2'',2'',6'',6''-tetramethyl-1''-piperidinyoxy)amino)-4'-demethyl epipodophyllotoxin *in vitro*

JIA Zheng-Ping<sup>1</sup>, ZHANG Pei-Yan, LIANG Zhong-Dong (Department of Pharmacology, Lanzhou Medical College, Lanzhou 730000, China)

WANG Yan-Guang<sup>2</sup>, CHEN Yao-Zu, LI Jin-Xin, TIAN Xuan (Department of Chemistry, Lanzhou University, Lanzhou 730000, China)

Received 1989 Aug 25 Accepted 1990 Jul 12

<sup>1</sup> Now in Department of Clinical Pharmacology, General Hospital of Lanzhou Command of PLA, Lanzhou 730000, China

<sup>2</sup> Now in Department of Chemistry Tianjin University, Tianjin 300072, China

**ABSTRACT** The antitumor activity of a new podophyllotoxin spin-labeled derivative, 4-(4''-(2'',2'',6'',6''-tetramethyl-1''-piperidinyoxy)amino)-4'-demethylepipodophyllotoxin (GP-7) first syn-