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The Effect of *Trans*-Resveratrol on The Viability of Human Trabecular Meshwork Cells.

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ABSTRACT

In vitro models using cell culture are frequently used to investigate cellular effects of trans-resveratrol as it has been shown to possess chemotherapeutic, anti-aging, neuroprotective, anti-apoptotic, and antioxidant properties. Since trans-resveratrol was shown to lower intraocular pressure in oculonormotensive rats and rats with steroid-induced oculohypertension, use of normal and steroid-treated human trabecular meshwork cells (HTMCs) will provide a useful in vitro model for further studies. However, the effect of transresveratrol on the viability of HTMC has not been investigated. Therefore, the present study investigated the concentration- and time-dependent effect of trans-resveratrol on viability of HTMCs. HTMCs were treated with trans-resveratrol (3.125-50 μ M) for 2, 5 and 7 days in the presence and absence of dexamethasone. The viability was assessed using MTS assay and the 50% cytotoxic concentration (CC50) was calculated using a regression analysis. A significant decrease in cell viability was observed when cells were treated with 50 µM trans-resveratrol, both in the presence or absence of dexamethasone. This effect of trans-resveratrol was independent of the duration of treatment. The CC₅₀ of trans-resveratrol in the presence of dexamethasone was 1.47, 1.60 and 1.47 folds higher compared to that in the absence of dexamethasone. In conclusion, this study demonstrated that incubation of HTMCs with trans-resveratrol up to a concentration of 25 µM does not affect the viability but at 50 μ M, it significantly reduces viability both in the presence or absence of dexamethasone. This effect of trans-resveratrol on the viability of HTM cells is dose-dependent but not time-dependent. Keywords: CC₅₀, cell viability, human trabecular meshwork cells, MTS assay, trans-resveratrol

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INTRODUCTION

Resveratrol (3,4',5 tri-hydroxystilbene) is a polyphenol naturally found in grapes, peanuts, berries and chocolates. It exists as *trans*- and *cis*- resveratrol. Between the two, *trans* isoforms is more biologically active compared to *cis* isoform and has been shown to possess chemotherapeutic, anti-aging, neuroprotective, and anti-oxidant properties [1-3]. Hence, its therapeutic applications in several diseases have been investigated.

We earlier reported that topical application of *trans*-resveratrol reduces intraocular pressure (IOP) in oculonormotensive rats and rats with steroid-induced ocular hypertension [4-5]. However, the mechanisms underlying the IOP lowering effect of *trans*-resveratrol remain unclear. Elevated IOP is a major risk factor in the pathogenesis of glaucoma [6], a leading cause of irreversible blindness worldwide [7]. Maintenance of normal IOP depends on the critical balance between the inflow and outflow of aqueous humor from the anterior chamber of eye. Increased resistance to aqueous outflow particularly in the trabecular meshwork (TM) has been implicated in primary open angle glaucoma (POAG), the most common type of glaucoma. TM forms the major outflow pathway for the drainage of aqueous humor from the anterior chamber of eye and the focus of investigation. Therefore, *in vitro* studies using human TM cells (HTMCs) are most appropriate to investigate involvement of molecular pathways underlying the changes in TM tissue of glaucomatous eyes.

Normal HTMCs have been widely used in glaucoma-related research. The activity of several molecular pathways, however, may differ in glaucomatous TM compared to that in normal TM. Hence, to induce glaucomatous changes in HTMC *in vitro*, treatment with steroids such as dexamethasone has been widely used [8-10]. Steroid-treated HTMCs are a direct representation of steroid-induced glaucoma in human. Since changes in TM seen in steroid-induced glaucoma largely resemble those seen in POAG, steroid-treated HTMCs are also a useful model for POAG-related investigations [11].

Accordingly, to investigate the mechanisms underlying the IOP lowering effect of *trans*-resveratrol, normal as well as steroid-treated HTMC are appropriate *in vitro* model. However, the effects of treatment with different concentrations of *trans*-resveratrol up to different time points on the viability of HTMC are not known. Hence, the objective of this study was to evaluate the dose- and time- dependent effects of *trans*-resveratrol on the morphology and viability of HTMC in the presence and absence of dexamethasone.

EXPERIMENTAL

Cell culture

Primary HTMCs from ScienCell Research Laboratories (CA, USA) were maintained in Dulbecco's Modified Eagles's Medium (DMEM) supplemented with 10% fetal bovine serum (FBS) and 1% penicillinstreptomycin (Life Technologies, CA, USA). Cell cultures were maintained at 37 °C in a humidified atmosphere with 5% CO₂. After the cells became 80% confluent sub-culturing was done. Cells from 5th passage were used for this study. In a 96 well plate, 2×10^3 cells were seeded and they were divided into 4 groups. In group 1, cells were maintained in DMEM. The group 2 was further subdivided into 5 groups that were cultured in media containing *trans*-resveratrol (Sigma Aldrich, Missouri, USA) dissolved in 0.1% dimethyl sulfoxide (DMSO) (Sigma Aldrich, Missouri, USA) at concentrations of 3.125, 6.25, 12.50, 25.00 and 50.00 µM, respectively. Similarly cells in group 3 were subdivided into 5 groups that were incubated in media containing 5 concentrations of *trans*-resveratrol along with 100 nM dexamethasone (Enzo Life Science, New York, USA). The stock solution of *trans*-resveratrol was prepared at 500 µM in 0.1% (DMSO) and stored at -20°C, protected from light. Cells in group 4 and 5 were incubated in DMEM containing 100 nM dexamethasone and 0.1% DMSO, respectively. Incubation was done for 2, 5 and 7 days. At the end of each time point, cells were examined for morphological changes using light microscope and MTS assay was done to estimate the cell viability. All experiments were repeated 3 times and for each set of experiment estimations were done in triplicate.

MTS assay

MTS assay (Promega, Wisconsin, USA) was done based on manufacturer's instructions. Briefly, after each time point, 20 μ L of CellTiter 96® AQ_{ueous} One Solution Reagent was added into each well containing the cells in 100 μ L of culture medium. After incubation at 37°C for 1 hour, the absorbance was recorded at 490 nm



using a 96-well plate reader. The data were expressed as the percentage of viable HTM cells. Subsequently, CC₅₀ of *trans*-resveratrol was calculated using linear regression.

RESULTS

Effect of *trans*-resveratrol on HTM cell morphology

The cell cultured with dexamethasone (100 nM) appeared elongated in shape with thickened margins compared to those cultured in DMEM or DMSO whereas the cells in DMSO group were morphologically similar to those in DMEM group. This effect was visible after 2 days of incubation and was more prominent after 7 days of incubation. In all resveratrol treated groups also cells were elongated in shape compared to those cultured in DMEM of DMSO (Figures 1a, 1b and 1c).

Figure 1(a) Representative images of cells after 2 days treatment with i. DMEM; ii. DMSO (0.1%); iii. dexamethasone (100 nM); iv, v, vi, vii, viii. Increasing concentrations of *trans*-resveratrol (3.125-50 μM); ix, x, xi, xii, xiii. Co-treatment of 100 nM dexamethasone and increasing concentrations of *trans*-resveratrol (3.125-50 μM).



Figure 1(b) Representative images of cells after 5 days treatment with i. DMEM; ii. DMSO (0.1%); iii. dexamethasone (100 nM); iv, v, vi, vii, viii. Increasing concentrations of trans-resveratrol (3.125-50 μM); ix, x, xi, xii, xiii. Co-treatment of 100 nM dexamethasone and increasing concentrations of trans-resveratrol (3.125-50 μM).

IV		vi	vii	VIII
ix .	×	xi	xii	xiii



Figure 1(c) Representative images of cells after 7 days treatment with i. DMEM; ii. DMSO (0.1%); iii. dexamethasone (100 nM); iv, v, vi, vii, viii. Increasing concentrations of *trans*-resveratrol (3.125-50 μM); ix, x, xi, xii, xiii. Co-treatment of 100 nM dexamethasone and increasing concentrations of *trans*-resveratrol (3.125-50 μM).



Effect of trans-resveratrol on HTM cell viability

Effect of *trans*-resveratrol on the viability of HTMCs was estimated by using MTS assay. The viability of cells treated with dexamethasone remained close to 100% at all 3 time points as was also the case with DMSO treated group. Cells that were incubated with 3.125 -25 μ M *trans*-resveratrol both in the presence and absence of dexamethasone also showed close to 100% viability after 2, 5 and 7 days of incubation. However, at 50 μ M concentration *trans*-resveratrol significantly reduced HTM cell viability. In the absence of dexamethasone, cell viability in 50 μ M *trans*-resveratrol treated group was 1.86, 1.93 and 1.89 folds lower compared to DMEM group after incubation for 2, 5 and 7 days. In the presence of dexamethasone, cell viability in 50 μ M *trans*-resveratrol treated by 1.44, 1.43, and 1.45 folds compared to DMEM group at the same time points (Figures 2a, 2b and 2c).







Figure 2b. Effect of trans-resveratrol in the presence and absence of dexamethasone on the viability of HTMC after 5 days of incubation. *p<0.001 vs DMEM; #p<0.001 vs DMSO; @p<0.001 vs Dexa; \$p<0.0001 vs corresponding R 3.125, 6.25, 12.5 and 25. R: *trans*-resveratrol; Dexa: dexamethasone



Figure 2c. Effect of trans-resveratrol in the presence and absence of dexamethasone on the viability of HTMC after 7 days of incubation. *p<0.001 vs DMEM; #p<0.001 vs DMSO; @p<0.001 vs Dexa; \$p<0.0001 vs corresponding R 3.125, 6.25, 12.5 and 25. R: *trans*-resveratrol; Dexa: dexamethasone



Determination of CC_{50} by linear regression showed that *trans*-resveratrol produces cytotoxicity at relatively lower concentration when incubation was done in the absence of dexamethasone. The CC_{50} of *trans*-resveratrol in the presence of dexamethasone was 1.47, 1.60 and 1.47 folds higher compared to that in the absence of dexamethasone (Table 1).

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Duration of treatment	Treatment		
(days)	Trans-resveratrol (µM)	Trans-resveratrol (μM) +	
		Dexamethasone (100 nM)	
2	57.76	85.19	
5	58.20	93.23	
7	59.07	86.78	

Table 1. The CC $_{50}$ values (μ M) for trans-resveratrol on HTM cells in the presence and absence of dexamethasone

DISCUSSION

This study evaluated the effect of various concentration of *trans*-resveratrol on the morphology and viability of HTMCs after 2, 5 and 7 days of incubation in the presence and absence of dexamethasone using MTS assay. We observed morphological changes in HTMCs incubated with 100 nM dexamethasone as early as 2 days of incubation. These morphological changes persisted up to 7 days with continued treatment with dexamethasone. Despite the morphological changes, the HTMCs viability remained unchanged. Similar effects of 100 nM dexamethasone have been observed on other cells such as KYSE150 esophageal squamous cell carcinoma cells [12]. Treatment with dexamethasone induces stress fiber rearrangement in HTMC [13] and Raghunathan et al. have reported that treatment with DEX for 3 days results in a 2-fold increase in HTM cell stiffness [14]. Treatment of HTMCs with dexamethasone has also been shown to cause reorganization of actin filaments at the cellular periphery [15]. These observations in previous studies correlate with the elongated cell shape and thickened margins observed in our study.

For the first time, this study demonstrated the effect of *trans*-resveratrol on the viability of HTMCs in the absence and presence of dexamethasone. Resveratrol at concentrations of 25 μ M or below did not produce any significant decrease in cell viability when incubated up to 7 days, which is in accordance with previous studies [16]. However, at 50 µM concentration, we observed significantly reduced cell viability both in the presence and absence of dexamethasone compared to corresponding controls. This is in agreement with another study, which showed that 50 µM resveratrol significantly reduces the viability of cultured primary orbital fibroblasts after 24 hours of treatment [2]. In activated hepatic stellate cell model, treatment with resveratrol 50 µM significantly reduced cell survival as early as 24 hours and this was associated with increased lipid peroxidation [17]. Resveratrol 50 µM has been shown to induce apoptosis and reduce cell viability of cancer cells as well, by inhibiting NFkB-STAT3 signaling pathways [18], inducing release of Ca⁺² [19] and inhibiting glucose metabolism [20]. In contrast to these observations, one of the previous studies demonstrated absence of cytotoxic effect of resveratrol on HTMCs at or below 100 µM concentration [21]. The differences may be attributed to the difference in assay method used. In our study, MTS assay was used that measures cell viability by measuring the metabolic activity of live cells whereas the assay used by Luna et al. measured the lactate dehydrogenase released by lysed cells [21]. It is likely that at 50 µM concentration the metabolic activity of HTMC is inhibited by resveratrol but the extent of inhibition remains insufficient to cause significant cell lysis. .Effects of resveratrol on cellular morphology observed in this study may be attributed to its effects on metabolic and other cellular pathways.

One of the important observations made in this study was that CC_{50} for resveratrol was higher in the presence of dexamethasone, compared to that in the absence of dexamethasone. Previous studies showed that dexamethasone could reduce the sensitivity of cancer cells to cytotoxic drug therapy, such as cisplatin [22]. It prevents cell death in response to cytotoxic drug, by enhancing the cellular adhesion to extracellular matrix [23]. In another study, treatment of primary cultures of human and rat hepatocytes with dexamethasone increased cell viability and inhibited apoptosis by reducing caspase-3 activity and increasing expression of anti-apoptotic Bcl-2 and Bcl-xL proteins [24]. In the current study, it is likely that at 50 μ M concentration, cellular effects of *trans*-resveratrol overwhelm the apoptosis preventing effect of dexamethasone, hence resulting in reduced HTMCs viability. Further mechanistic studies, however, are needed to fully understand the mechanisms of these effects of *trans*-resveratrol.

In conclusion, this study demonstrated that incubation of HTMCs with *trans*-resveratrol up to a concentration of 25 μ M does not affect the viability but at 50 μ M, it significantly reduces viability both in the presence or absence of dexamethasone. This effect of *trans*-resveratrol on the viability of HTM cells is



independent of the duration of treatment. The findings of this study will provide a guide for future studies investigating the mechanisms of antiglaucoma effects of *trans*-resveratrol using normal and steroid-treated HTMCs.

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REFERENCES

- [1] Abu-Amero KK, Kondkar AA, Chalam KV. Resveratrol and ophthalmic diseases Nutrients 2016; 8: 200.
- [2] Kim CY, Lee HJ, Chae MK, Byun JW, Lee EJ, Chae MK, et al Therapeutic effect of resveratrol on oxidative stress in Graves' orbitopathy orbital fibroblasts. Invest Ophthalmol Vis Sci 2015; 56: 6352-61.
- [3] Siddiqui MA, Saquib Q, Ahamed M, Ahmad J, Al-Khedhairy AA, Abou-Tarboush FM et al. Effect of trans-resveratrol on rotenone-induced cytotoxicity in human breast adenocarcinoma. Toxicol Int 2011; 18(2): 105-110.
- [4] Razali N, Agarwal R, Agarwal P, Kumar S, Tripathy M, Vasudevan S, et al. Role of adenosine receptors in resveratrol-induced intraocular pressure lowering in rats with steroid-induced ocular hypertension. Clin Experiment Ophthalmol 2015; 43(1):54-66.
- [5] Razali N, Agarwal R, Agarwal P, Tripathy M, Kapitonova MY, Kutty MK, et al. Topical trans-resveratrol ameliorates steroid-induced anterior and posterior segment changes in rats. Exp Eye Res 2016; 143: 9-16.
- [6] Agarwal R, Gupta SK, Agarwal P, Saxena R, Agrawal SS. Current concepts in the pathophysiology of glaucoma. Indian J Ophthalmol 2009; 4:257-66
- [7] Tham YC, Li X, Wong TY, Quigley HA, Aung T, Cheng CY. Global prevalence of glaucoma and projections of glaucoma burden through 2040: a systematic review and meta-analysis. Ophthalmology 2014; 121(11):2081-90.
- [8] Pattabiraman PP, Rao PV. Hic-5 Regulates Actin Cytoskeletal Reorganization and Expression of Fibrogenic Markers and Myocilin in Trabecular Meshwork Cells. Invest Ophthalmol Vis Sci 2015; 56(9):5656-69.
- [9] Matsuda A, Asada Y, Takakuwa K, Sugita J, Murakami A, Ebihara N. DNA Methylation Analysis of Human Trabecular Meshwork Cells During Dexamethasone Stimulation. Invest Ophthalmol Vis Sci 2015; 56(6):3801-09.
- [10] Ding QJ, Zhu W, Cook AC, Anfinson KR, Tucker BA, Kuehn MH. Induction of trabecular meshwork cells from induced pluripotent stem cells. Invest Ophthalmol Vis Sci 2014; 8;55 (11):7065-72.
- [11] Razali N, Agarwal R, Agarwal P, Kapitonova MY, Kannan Kutty M, Smirnov A, et al. Anterior and posterior segment changes in rat eyes with chronic steroid administration and their responsiveness to antiglaucoma drugs. Eur J Pharmacol 2015; 15(749):73-80.
- [12] Yamawaki C, Takahashi M, Takara K, Kume M, Hirai M, Yasui H, et al. Effect of dexamethasone on extracellular secretion of cystatin C in cancer cell lines. Biomed Rep 2013; 1(1):115-118.
- [13] Yuan Y, Call MK, Yuan Y, Zhang Y, Fischesser K, Liu CY, et al. Dexamethasone induces cross-linked actin networks in trabecular meshwork cells through noncanonical wnt signaling. Invest Ophthalmol Vis Sci 2013; 3;54(10):6502-9.
- [14] Raghunathan VK, Morgan JT, Park SA, Weber D, Phinney BS, Murphy CJ, et al. Dexamethasone Stiffens Trabecular Meshwork, Trabecular Meshwork Cells, and Matrix. Invest Ophthalmol Vis Sci 2015; 56(8):4447-59.
- [15] Liu X, Wu Z, Sheibani N. Low dose latrunculin-A inhibits dexamethasone- induced changes in the actin cytoskeleton and alters extracellular matrix protein expression in cultured human trabecular meshwork cells. Exp Eye Res 2003; 77(2): 181–188.
- [16] Chan C, Huang C, Li H, Hsiao C, Su C, Lee P et al. Protective effects of resveratrol against UVA-induced damage in ARPE19 cells. Int J Mol Sci 2015; 16: 5789-5802

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- [17] Martins LA, Coelho BP, Behr G, Pettenuzzo LF, Souza IC, Moreira JC, et al. Resveratrol induces prooxidant effects and time-dependent resistance to cytotoxicity in activated hepatic stellate cells. Cell Biochem Biophys 2014; 68(2):247-57.
- [18] Duan J, Yue W, E J, Malhotra J, Lu SE, Gu J, et al. In vitro comparative studies of resveratrol and triacetylresveratrol on cell proliferation, apoptosis, and STAT3 and NFκB signaling in pancreatic cancer cells. Sci Rep 2016; 19;6:31672.
- [19] Chang HT, Chou CT, Chen IL, Liang WZ, Kuo DH, Huang JK, et al. Mechanisms of resveratrol-induced changes in [Ca(2+)]i and cell viability in PC3 human prostate cancer cells. J Recept Signal Transduct Res 2013; 33(5):298-303.
- [20] Gomez LS, Zancan P, Marcondes MC, Ramos-Santos L, Meyer-Fernandes JR, Sola-Penna M, et al. Resveratrol decreases breast cancer cell viability and glucose metabolism by inhibiting 6phosphofructo-1-kinase. Biochimie 2013; 95(6):1336-43.
- [21] Luna C, Li G, Liton PB, Qiu J, Epstein DL, Challa P, et al. Resveratrol prevents the expression of glaucoma markers induced by chronic oxidative stress in trabecular meshwork cells. Food Chem Toxicol 2009; 47(1):198-204.
- [22] Ge H, Ni S, Wang X, Xu N, Liu Y, Wang X, et al. Dexamethasone reduces sensitivity to cisplatin by blunting p53-dependent cellular senescence in non-small cell lung cancer. PLoS ONE 2012; 7(12).
- [23] Chen Y, Wang Y, Fu C, Diao F, Song L, Li Z, et al. Dexamethasone enhances cell resistance to chemotherapy by increasing adhesion to extracellular matrix in human ovarian cancer cells. Endocrine-related Cancer 2010; 17: 39-50
- [24] Bailly-Maitre B, de Sousa G, Boulukos K, Gugenheim J, Rahmani R. Dexamethasone inhibits spontaneous apoptosis in primary cultures of human and rat hepatocytes via Bcl-2 and Bcl-xL induction. Cell Death Differ 2001; 8(3):279-88.