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Dietary supplement containing plant sterols exerts a positive effect on inflammatory markers in a chronic colitis murine model ⁺

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Abstract: Plant sterols (PS) have reported benefits in alleviating colitis in mice, but the mechanisms 14involved require further investigation. The study aimed to evaluate the effect of a dietary supple-15 ment containing PS (PS-DS) on inflammation biomarkers in a mice model of chronic ulcerative co-16 litis induced by dextran sulfate sodium (DSS). C57BL/6J mice (n = 34) were exposed to 1.5% DSS in 17 drinking water for three 5-day periods, with 10-day rest intervals in between. The mice received 18 daily PS-DS (35 mg PS/kg) or placebo by oral gavage, either simultaneously (treatment) or 30 days 19 prior (pre-treatment) to DSS exposition. After euthanasia, myeloperoxidase (MPO) activity and the 20 levels of pro- (TNF- α and IL-6) and anti-inflammatory cytokines (IL-10) in the colonic tissue were 21 analyzed. PS-DS treatment reduced (vs. DSS + placebo) myeloperoxidase (MPO) activity (2.6 ± 0.2 22 $vs. 2.1 \pm 0.1$ -fold change) and levels of TNF- α (85 ± 11 $vs. 39 \pm 7$ pg/mg protein) and IL-6 (214 ± 26 vs.23 128 ± 18 pg/mg protein), increasing the levels of IL-10 ($46 \pm 5 vs$. 136 ± 16 pg/mg protein). PS-DS pre-24 treatment provided a greater inhibition (vs. treatment) of MPO activity ($2.1 \pm 0.3 vs. 1.3 \pm 0.1$ -fold 25 change) and a greater increase in IL-10 levels (50 ± 9 vs. 178 ± 30 pg/mg protein). These findings 26 suggest that PS-DS has the potential to alleviate colitis in mice by modulating the inflammatory 27 response and reducing oxidative stress. However, studies in humans are required to validate and 28 fully understand its anti-inflammatory effect. 29

Keywords: cytokine; myeloperoxidase; phytosterols; ulcerative colitis

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Ulcerative colitis (UC), a classic phenotype that falls under inflammatory bowel dis-33 ease, represents a challenge for healthcare systems worldwide due to its high incidence 34 [1]. Despite advances in medical management, a significant proportion of UC patients 35 continue to experience inadequate symptom control, underscoring the need for innova-36 tive therapeutic approaches. In recent years, natural bioactive compounds have emerged 37 as promising candidates to address the unmet clinical needs in chronic UC management. 38 Among these, plant sterols (PS), phytochemicals widely recognized for their cholesterol-39 lowering properties, stand out for their potential anti-inflammatory effects [2]. In this 40 sense, PS at doses between 10–150 mg/kg have shown positive results in animal models 41 of colitis induced by oxazolone [3], trinitrobenzene sulfonic acid (TNBS) [3,4], dextran 42 sulfate sodium (DSS) [5,6] or high-fat diet [7,8], attenuating symptoms, colon shortening 43 and histopathological damage in colon. However, it is unknown whether PS are effective 44 in combating colitis when administered before its onset, which would help to elucidate its 1 preventive capacity. From this perspective, it is reasonable to consider that bioactive com-2 pounds possessing anti-inflammatory potential might not only aid in the recovery from 3 existing damage but could also supply defense mechanisms to a healthy intestine, safe-4 guarding it against the effects of inflammation-inducing agents. This exploration could 5 offer information about the potential of PS as valuable therapeutic adjuncts in UC, as well 6 as to identify its role in the prevention of inflammatory disorders in the gastrointestinal 7 tract. 8

The objective of this study was to investigate the anti-inflammatory effect of PS in a 9 mice model of DSS-induced chronic ulcerative colitis, exploring their suitability for both 10 alleviating established colitis (treatment) as well as preventing the development of the 11 inflammation in colon (pre-treatment). This study provides a quantitative comparison be-12 tween therapeutic and preventive approaches for the first time, aiming to identify the 13 most advantageous strategy for reducing inflammation. In addition, this preliminary re-14 search seeks to determine whether PS could serve as a viable dietary approach for miti-15 gating complications linked to UC, thereby laying the groundwork for a subsequent study 16 involving patients in the remission phase of the condition. 17

2. Materials and Methods

2.1. Preparation of dietary supplements of plant sterols

Dietary supplement of PS (PS-DS) is a powdered product (Lipophytol® P Dispersa-20 ble, Lipofoods) that contains PS extracted from tall oil to which excipients are added to 21 promote its solubility in aqueous media. The product that contains only excipients (i.e., 22 placebo) was used as a control. The PS profile was determined following the established 23 protocols [9], yielding the subsequent composition (g/100 g): β -sitosterol, 60.7 ± 0.8; sito-24 stanol, 15.9 ± 0.7 ; campesterol, 6.7 ± 0.3 ; campestanol, 2.0 ± 0.1 ; Δ^7 -stigmastenol, 0.51 ± 0.02 ; 25 stigmasterol, 0.48 ± 0.02 ; Δ^7 -avenasterol, 0.33 ± 0.01 ; $\Delta^{5,24}$ -stigmastadienol, 0.247 ± 0.003 ; Δ^5 -26 avenasterol, 0.085 ± 0.004 ; and total PS, 86.8 ± 1.8 . An aqueous suspension of PS-DS was 27 prepared to provide a daily dose of 35 mg PS/kg body weight following a previous study 28 [10]. 29

2.2. Animals and chronic ulcerative colitis model

Female C57BL/6J mice (8 weeks old, 18-20 g body weight) were placed in a controlled 31 conditions set at 22°C, 60% relative humidity, and a 12/12 light/dark cycle. After the accli-32 matization period (7 days), mice were randomized into different groups. Controls groups 33 (3 mice/group) were not exposed to DSS and recived daily via intragastric gavage placebo 34 or PS-DS. The remaining groups (7 mice/group) were exposed to 1.5% (w/v) DSS in drink-35 ing water for three 5-day periods, with 10-day rest intervals in between, and recived pla-36 cebo or PS-DS either simultanously (treatment) or began 30 days prior to the DSS exposure 37 (pre-treatment). 38

2.3. Myeloperoxidase activity

Neutrophil infiltration in colon was indirectly assased by measurement of myelop-40eroxidase (MPO) activity. Colons were homogenized using 80 mM sodium phosphate 41 buffer (pH 5.4) with 0.5% (w/v) hexadecyltrimethylammonium bromide. After centrifu-42 gation of homogenates (12,000 × g, 4°C for 15 min), MPO activity was measured by deter-43 mining spectrophotometrically (630 nm) the oxidation of 3,3',5,5'-tetramethylbenzidine as 44 previously described [10]. 45

2.4. Cytokine determination

Cytokines were extracted from colon using the RIPA lysis buffer. Homogenates were 47 clarified (15,000 × g, 4°C for 15 minutes) and total protein was quantified by Bradford's 48

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method. Cytokines (TNF- α , IL-6 and IL-10) were determined by ELISA kits (Invitrogen)

2.5. Stastical analysis

and normalized to total protein content.

Results were expressed as mean \pm standar desviation (n = 3 or 7, in control or DSS 4 group, respectively). One-way analysis of variance (ANOVA), followed by post-hoc HSD 5 Tukey test, was applied to determine statistically significant differences (p < 0.05) between 6 groups using Statgraphics Plus 5.1 software.

3. Results and discussion

3.1. Plant sterols inhibit neutrophil infiltration in colon mice

As shown in Figure 1, DSS exposure induced neutrophil recruitment in colon, as in-10 ferred from the significant (p < 0.05) increase in MPO activity compared to non-DSS ex-11 posed mice. 12



Figure 1. Fold-change over control (placebo) of myeloperoxidase activity (mean ± standard devia-14 tion) in colon tissue of control (i.e., non-DSS exposed mice) (3 mice/group) and dextran sulfate so-15 dium (DSS) groups (7 mice/group) receiving daily placebo or plant sterol dietary supplement (PS-16 DS, 35 mg PS/kg body weight). DSS exposed mice received placebo or PS-DS simultaneously (treat-17 ment) or 30 days before (pre-treatment) the exposure to DSS. Different letters (a-c) indicate statisti-18 cally significant difference (p < 0.05) between the groups. 19

Although PS-DS treatment reduced MPO activity by 15%, pre-treatment resulted in 20 complete inhibition of neutrophil infiltration, as control values were reached. It was pre-21 viously reported that oral administration of β -sitosterol (10-20 mg/kg) reduced MPO ac-22 tivity (28-43%) in mouse models of intestinal inflammation induced by TNBS [4] or high-23 fat diet [7], results that were confirmed in the present study. However, the novel finding 24 of this study was that PS, when administered before the disease is established, provides 25 defense mechanisms that protect against the subsequent induction of inflammation, thus 26 revealing the preventive role of PS, beyond therapeutic one. 27

3.2. Effect of plant sterols on cytokine expression in colon mice

As expected, DSS induced a significant increase (vs. healthy groups, p < 0.05) in co-29 lonic levels of the pro-inflammatory cytokines (TNF- α and IL-6), in turn reducing IL-10 30 levels (Table 1). PS-DS treatment attenuated (vs. DSS + placebo, p < 0.05) TNF- α and IL-6 31 increase (55 and 40%, respectively), increasing IL-10 expression 2.9-fold. In addition, PS-32 DS pre-treatment provided greater benefits in the regulation of cytokine expression, since 33 the increase in IL-10 levels (3.5-fold) was higher (p < 0.05) compared to PS-DS treatment. 34 These results were consistent with previous studies, in which oral administration of β -35 sitosterol (20 mg/kg body weight) attenuated TNF- α (45-48%) or IL-6 (56-60%) increase 36 induced by TNBS [4] or a high-fat diet [7]. In addition, stigmasterol (added to the basal 37

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diet at 0.4%) was reported to inhibit the DSS-induced TNF- α increase (58%) without affecting colonic levels of IL-6, although β -sitosterol had no protective effect [6].

Table 1. Levels (pg/mg protein) of pro- (TNF- α and IL-6) and anti-inflammatory (IL-10) cytokines 3 in mice colon.

Groups	TNF-α	IL-6	IL-10
Control + placebo	8.1 ± 1.1^{a}	18.6 ± 1.7^{a}	281.1 ± 45.7^{a}
Control + PS-DS	6.5 ± 0.6^{a}	21.2 ± 1.8^{a}	$246.8\pm19.5^{\rm a}$
DSS + placebo (treatment)	85.1 ± 11.1^{b}	213.7 ± 25.6^{b}	46.2 ± 5.0^{b}
DSS + PS-DS (treatment)	$38.5 \pm 6.8^{\circ}$	$127.9 \pm 17.6^{\circ}$	$135.8 \pm 15.7^{\circ}$
DSS + placebo (pre-treatment)	$55.7 \pm 7.8^{\circ}$	$145.5 \pm 19.6^{\circ}$	50.3 ± 8.9^{b}
DSS + PS-DS (pre-treatment)	20.8 ± 0.7^{d}	83.2 ± 9.7^{d}	178.2 ± 30.1 ^c

Control (*i.e.*, non-DSS exposed mice) (3 mice/group) and dextran sulfate sodium (DSS) groups (7 5 mice/group) receiving daily placebo or plant sterol dietary supplement (PS-DS, 35 mg PS/kg body 6 weight). DSS exposed mice received placebo or PS-DS simultaneously (treatment) or 30 days before 7 (pre-treatment) the exposure to DSS. Different letters (a-d) indicate statistically significant difference 8 (p < 0.05) between the groups in the same cytokine. Data are shown as mean ± standard deviation. 9

Again, the results of this study confirm that PS administration improves cytokine 10 expression, as demonstrated by other investigations. However, the most relevant finding 11 of the present study shows that PS administration before disease onset provides greater 12 regulation of cytokine expression. This suggests that during those 30 days of pre-treat-13 ment, the PS reinforce the antioxidant and anti-inflammatory defenses of the colonic tis-14sue, making it more resistant to the colitogenic effect of DSS. The finding of the preventive 15 role of PS-DS in mice model of intestinal inflammation opens avenues for further research 16 and paves the way for possible clinical applications, especially in people at risk of devel-17 oping intestinal inflammation or with a history of such conditions, *i.e.*, PS-DS could be 18 considered as a prophylactic agent in such cases. 19

4. Conclusion

This study demonstrates the potential of PS-DS to alleviate inflammation in a mice 21 model of chronic UC. The greater effect of pre-treatment, both in the inhibition of neutro-22 phil infiltration and in the regulation of cytokine balance, suggests that PS-DS could not 23 only hold promise as a therapeutic intervention for UC, but also provide a prophylactic 24 effect, contributing to reduce the risk of inflammatory bowel disorders. 25

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