Effect of *Azadirachta Indica* (neem) leaf aqueous extract on the functional parameters of human spermatozoa *in vitro*

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Summary

The neem leaf extract (NLE) has been reported to exhibit spermicidal and oocidal activities under *in vitro* cultured conditions but the effect of NLE on various sperm function parameters have not been studied. Therefore, in the present study we have assessed effect of different concentrations of NLE on various sperm functions characteristics to develop a water-based vaginal contraceptive. The human sperm (10 million sperm/mL), were exposed to different concentrations of NLE (3, 9, 15, and 30mg/mL) for 20 seconds at 37°C. Thereafter, sperm function characteristics such as motility, viability, hypo-osmotic swelling (HOS), nuclear decondensation (NDC), acrosome intactness (AI) and deoxyribonucleic acid (DNA) stability were analyzed. A dose-dependent inhibition of sperm motility was observed, while 15mg/mL dose immobilized 100% of spermatozoa. Whereas other sperm functional parameters like viability, DNA intactness, HOS, NDC and AI decreased from 94% to 9%, 71% to 29%, 77% to 25%, 62% to 29% and 53% to 25%, respectively. The data obtained in the present study reveal that treatment of NLE causes reduction in functional parameters to infertility range. Therefore, a preparation containing 15mg of NLE in 150 µl of 0.9% NaCl was tested in rat as a vaginal contraceptive, and the data revealed 100% efficacy in mating studies after 21 days of vaginal application. The findings indicate the potential use of NLE for developing water-based vaginal contraceptive.

Key words: Azadirachta indica, neem leaf extract (NLE), sperm function tests, DNA stability, vaginal contraceptive

Introduction

For contraceptive development many approaches, such as barrier, immunological and hormonal, were explored. Recently, considerable emphasis has been given to validate products of indigenous medicinal plants scientifically for their use in humans, using good study design with modern tools and techniques.

Neem plant (Azadirachta indica) has been extensively used in the Ayurvedic system of medicine for a long time. Various parts of this plant are used for the treatment of various diseases. The neem bark aqueous extract is reported to have therapeutic potential for controlling gastric hyper-secretion and gastro-duodenal ulcer (Bandopadhyay et al., 2004). A dental gel formulation containing neem extract has been reported to reduce oral infections, plaque index and bacterial count (Pai et al., 2004a; 2004b). The medicinal utilities have been described especially for neem leaf (Subapriya and Nagini, 2005). Neem leaf and its constituents are reported to exhibit immunomodulatory, anti-imflammatory, antihyperglycemic, antiulcer, antifungal, antibacterial, antimutagenic, anticarcinogenic, nematicidal, antimalarial, antiviral, insecticidal and antioxidant properties (Sharma et al., 2003; Wanderscheer et al., 2004; Udeinya et al., 2004; Siddiqui et al., 2004; Subapriya and Nagini, 2005; Sithisaran et al., 2005).

The role of neem products in male fertility regulation has been well studied. The ethereal extract of neem stem bark induced reversible reproductive endocrine malfunction in male rats (Raji et al., 2003). The ethanolic neem leaf extract (NLE) has been reported to induce abnormal head morphology and reduce mean sperm count in murine (Khan and Awasthi, 2003). The chloroform extract of neem oil inhibited spermatogenesis and sperm motility in mice (Yin et al., 2004). A single intra-vas administration of neem oil causes infertility in male rats' up to eight months without changing blood testosterone level and any inflammatory / obstructive changes in epididymis and vas deferens (Upadhyay et al., 1993). Volatile fraction of neem oil (NIM-76) inhibited spermatozoal activity in vitro and in vivo in rats, rabbits, monkeys and humans (Riar et al., 1990, 1991; Sharma et al., 1996). In vivo study in male rats with fresh green leaf extract caused reversible antifertility (Deshpande et al., 1980), while powdered neem leaves caused histological and biochemical changes in the testis (Joshi et al., 1996; Aladakatti et al., 2001). Aqueous leaf extract of Azadirachta indica caused reversible alterations in the male reproductive organs of Parkers strain of mice (Mishra and Singh, 2005). NLE is also reported to inhibit motility and viability of human spermatozoa treated in vitro (Khillare and Shrivastav, 2003).

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The neem products have also been studied for the regulation of female fertility. Neem oil is used as a vaginal contraceptive (Upadhyay et al., 1990) and its reversible antifertility effects have been reported in rats and bonnet monkeys (Upadhyay et al., 1990, 1994). A biologically active fraction of neem oil extract that has reversible antifertility effect was identified and characterized (Garg et al., 1998). Purified neem seed extract, called praneem, abrogates pregnancies (Mukharjee et al., 1996) and reduces progesterone levels in rats, baboons and monkeys (Talwar et al., 1997). Recently, it has been shown that neem oil inhibits total number of follicles and number of developing follicles in the rat ovary. It was hypothesized that the treatment of neem oil might have inhibited gonadotropin- dependent oocyte growth and maturation pathway, thereby reducing the number of developing follicles, degeneration of egg and inhibition of sperm-egg interaction (Juneja and Williams, 1993; Dhaliwal et al., 1998; Roop et al., 2005). A study by Chaube et al. (2006) indicated that neem leaf aqueous extract induced morphological and biochemical changes associated with apoptosis prior to degeneration of rat oocyte cultured in vitro. Another study by Gbotolorun et al. (2008) showed that administration of alocoholic extract of neem flower disrupted the estrous cycle in Sprague- Dawley rats and caused a partial block in ovulation and thus has the potential of being developed into a female contraceptive. Owolabi et al. (2008) revealed that the methanolic extract of neem leaves may affect fertility adversely by reducing serum levels of LH and, subsequently, the release of ova during ovulation.

Ability of sperm to fertilize the ovum is not only dependent on motility but also on other functional characteristics. Therefore, besides motility, other parameters such as viability (World Health Organizationm, 1999), hypo-osmotic swelling (Jayendran et al., 1994) and nuclear decondensation (Rodriguez et al., 1985) are now being increasingly assessed to predict successful outcome in IVF settings. The present study was thus designed to evaluate the different sperm function characteristics after *in vitro* exposure to NLE with the aim to develop a vaginal contraceptive.

Materials and Methods

All procedures conform to the stipulation of the Institutional Clinical Ethical Committee's norms.

Semen samples

Semen samples were collected from the normal male volunteers with proven fertility, after 2-4 days sexual

abstinence. After liquefaction for 30 minutes at 37° C, a basic semen analysis was performed. Samples having the semen volume e" 2 mL, motility e"50%, sperm concentration e" 15 million /mL, normal morphology e" 50%, viability e" 50%, and total leukocyte count < 1 million/mL were used.

Sample preparation

The highly motile spermatozoa were collected by swim-up technique in the Tyrode's solution (Sigma Chemical Co., St. Louis, MO, USA) with 3% BSA. The final sperm concentration was adjusted to 10 million sperm / mL.

Preparation of neem - leaf extract

The neem leaf extract was prepared as described by Khillare and Shrivastav (2003). The various amounts (3, 9, 15, 20 and 30 mg) of lyophilized NLE were added to the sperm suspension containing 10 million/mL and incubated at 37° C for 20 seconds. After 20 seconds of incubation various functional parameters of spermatozoa were checked.

Sperm motility

A drop of sperm suspension was examined at 400x in a phase-contrast microscope and per cent of spermatozoa with rapid linear progressive and sluggish linear progressive (a+b) type of motility was determined at every NLE treated concentration (Jayendran et al., 1994).

Sperm viability

Eosin-nigrosine staining (World Health Organization, 1999) was utilized for determining sperm viability in suspension. In brief, a drop of control or treated sperm suspension was mixed with two drops of 1% eosin Y. After 30 seconds three drops of 10% nigrosin were added and mixed well. A smear on a clean glass slide was made from the mixture and allowed to air-dry. Dead sperm took to pink while live sperm remained bluish fluorescent. The *per cent* live and dead spermatozoa were determined with each concentration of neem leaf extract using a phase-contrast microscope.

Hypo-osmotic swelling test (HOST)

A hypo-osmotic solution was prepared with 0.735% sodium citrate and 1.351% fructose in distilled water (Jayendran et al., 1994). To 1 mL of the pre-warmed hypo-osmotic solution 100 μ L of control or treated sperm suspension was added and incubated at 37° C for half an hour. The *per cent* spermatozoon with tail coiling was determined.

Nuclear chromatin decondensation test (NCDT)

Control and treated spermatozoa were pelleted by centrifugation at 400x for 15 minutes and resuspended in 0.05M borate buffer containing dithiothreitol (DTT, 2 mM). After 30 minutes at room temperature, 1% lauryl sulphate (SDS) was added and mixed gently. The mixture was diluted with equal volume of borate buffer (0.05 M) containing 2.5% glutaraldehyde. An aliquot of the mixture was stained with Rose Bengal (0.8%) and was examined under a phase-contrast microscope. The *per cent* of decondensed spermatozoa was determined (Rodriguez et al., 1985).

Acrosome intactness test (AIT)

The AIT was carried out as described by Gopalkrishnan et al. (1995). To perform AIT test glass slides were coated with 5% gelatin and stored at 4° C after fixing in 1% glutaraldehyde in PBS solution for two minutes. The control or treated sperm suspension was diluted 1:20 with PBS-D-Glucose and kept at 37° C for thirty minutes. A drop of control or treated sperm suspension was smeared on gelatin-coated slides at room temperature for 5-10 minutes to evaporate excessive moisture, and thereafter slides were kept in moist petridish at 37° C for 2 hours. Slides were examined in a phasecontrast microscope at 400x. *Per cent* of spermatozoa with halos of the diameter 10 mm around the heads was determined.

DNA stability test

Acridine orange test was carried out as described by Tajeda et al. (1984) to determine the DNA stability. In brief, control and treated spermatozoa were smeared on the clean slides and air-dried for twenty minutes. The smeared slides were dipped in Carnoy Solution (3:1 methanol: glacial acetic acid) for two hours. The slides were then dried for a few minutes at room temperature and stained with 1% aqueous solution of acridine orange containing 0.1M citric acid and 0.3 M disodium hydrogen phosphate for five minutes. Slides were washed with distilled water and observed in a fluorescent microscope using 490 nm excitation filter and 530nm barrier filter. *Per cent* green colored spermatozoa (double-stranded normal DNA) and red colored spermatozoa (single stranded DNA) were determined.

Neem as vaginal contraceptive

Four adult female rats with proven fertility were administered with 15mg of neem extract dissolved in 150 μ L of 0.9% NaCl into the vaginal cavity between 10-11 AM daily for 21 days. Equal no of female rats were

given 150 μ l of saline in a control group. Thereafter, rats in both the groups were kept for cohabitation with adult fertile males daily for five hours during this period. The mating behavior was observed throughout the study period. After the 21st day, the females were monitored for pregnancy.

Statistical analysis

The data are mean \pm standard deviation (SD) of six replicates. All percentage data are converted through Arch-sine Square root transformation and then analyzed by one way analysis of variance (one way ANOVA) using SPSS software (11.5 version), Chicago, USA. The significance was tested at 0.05 level.

Results

Effect of NLE on motility of spermatozoa

The NLE treatment inhibited motility of spermatozoa in a dose-dependent manner (one way ANOVA; F=208.924, p<0.0001), while 15 mg/mL NLE induced 100% spermatozoa to become immotile (Table 1).

Effect of NLE on viability of spermatozoa

The NLE treatment inhibited sperm viability in a dose-dependent manner (one way ANOVA; F=586.937, p<0.0001), while at 15 mg/mL dose of NLE only 10% viable spermatozoa were observed (Table 1).

Effects of NLE on hypo-osmotic swelling of spermatozoa

The NLE treatment significantly inhibited functional integrity of plasma membrane of human spermatozoa in a dose-dependent manner (one way ANOVA; F=107.423, p< 0.0001). However, at 15mg/mL dose of NLE, only thirty five percent spermatozoa showed the functional integrity (Table 1).

Effect of NLE on nuclear chromatin decondensation (NCD) of spermatozoa

The NLE treatment inhibited NCDT in a dosedependent manner (one way ANOVA; F= 51.518, p< 0.0001). At 15 mg/mL concentration about 44% spermatozoa showed NCDT suggesting that the NLE does not much affect the chromatin decondensation (Table 1).

Effect of NLE on acrosome intactness of spermatozoa

NLE inhibited acrosome intactness in a dosedependent manner (one way ANOVA; F=26.747, p<0.0001). However, the acrosome intactness at 15mg/mL dose of NLE was reduced to around 37% from initial 53%, suggesting that loss of motility is not related to acrosome intactness of spermatozoa (Table 1).

	0mg	3mg	9mg	15mg	20mg	30mg	ANOVA Test
% Motility	88.5±	51 ± 3	13 ± 2	0	0	0	F=208.924
\pm SD	8.5						p<0.0001
%Viability	94 ± 4.4	61 ± 2	24 ± 3.6	9.5 ± 1.7	4.5 ± 1.7	0.5 ± 0.9	F=586.937
\pm SD							p<0.0001
% HOST	77 ± 4	66.5 ± 3.8	52 ± 2	35 ± 4.7	33 ± 1.5	25 ± 5.7	F=107.423
\pm SD							p< 0.0001
% NDT	62 ± 2.5	56.5 ± 1.6	50.5 ± 6.8	44 ± 3	29 ± 4.2	29 ± 3	F=51.518
\pm SD							p< 0.0001
% AIT	53.5 ± 3	50.5 ± 1	41 ± 4.7	37.5 ± 4.6	32.5 ± 5.5	25.5 ± 6.8	F=26.747
\pm SD							p< 0.0001
%DNA	71 ± 8.7	51.5 ± 5.8	40 ± 3.4	29 ± 2.8	27 ± 4	18 ± 2.2	F=58.467
stability \pm SD							p<0.0001

Table1- Effect of various doses of neem leaf extract on the functional parameters of human spermatozoa after 20 seconds of incubation at 37° C (N=6). Values are expressed as mean (%) \pm SD of 4 replicates. Data analyzed by one way ANOVA followed by multiple t-test.

Effect of NLE on DNA stability of spermatozoa

NLE treatment induced DNA instability in a dosedependent manner (one way ANOVA; F=58.467, p<0.0001) as evidenced by a reduction in number of green colored spermatozoa (double-stranded). The 15 mg/mL dose of NLE induced reduction in number of green sperm from 70% to 30% suggesting that the NLE acts at the level of DNA (Table 1).

Neem as vaginal contraceptive

The NLE treatment completely inhibited pregnancy rate and none of the treated rats was pregnant during the course of treatment, while control rats had pregnancy rate with an average of (9 ± 2) litters per rat. The mating behavior during the course of treatment was found normal in treated as well as control rats.

Discussion

In the present study, we report specific alteration in sperm function parameters/characteristics after exposure to different doses of neem leaf aqueous extract. There is a dose-dependent reduction in sperm function characteristics like motility, viability, HOST, NDCT, AIT, and DNA stability. The parameter that was affected 100% at 15 mg dose was motility. Sperm, a type of specialized cells, were seen to be susceptible to relatively low doses of neem leaf aqueous extract. Loss of 100% forward and sluggish progressive motility, at the dose of 15 mg, within an hour, was observed. Sperm motility is directly dependent on the ATP supply from the sperm mitochondrial pool. It was reported that reactive oxygen species (ROS) action causes a decrease in the rate of glycolysis by inactivation of adenylate dehydrogenase and decrease in lactate content. Higher doses of ROS cause a decrease in intracellular ATP (Spragg et al., 1987) and the exhausted pool of ATP led to cell death (O' Donnell-Tormay et al., 1985) where in sperm motility decreased with time. It is, therefore, likely that the process of availability of ATP for metabolism was affected as a result of NLE treatment. This needs to be studied further to see the generation of ROS during NLE treatment or nonavailability of ATP molecules for metabolism.

Similarly, the viability was also reduced in a dosedependent manner; while at 15 mg dose the viability was only 9% in NLE-treated spermatozoa. This indicates that the biochemical pathway which is required for viability has been blocked after NLE treatment. The sperm plasma membrane integrity, as determined by the hypo-osmotic swelling test, decreased in a dose-dependent manner and only 35% spermatozoa responded to HOST. The other functional characteristics like NDCT, AIT and DNA stability were also affected in the order of 44%, 37%, and 29% respectively, at 15mg dose.

Application of 15 mg/day NLE for 21 days did not allow pregnancy in treated female rats, while control rats had 9 ± 2 pups per animal suggesting that this dose was sufficient to prevent conception in rats.

The data of the present study demonstrate that two sperm function parameters such as motility and viability were drastically affected, while other parameters such as HOST, NDT, AIT and DNA stability were not affected in a similar fashion but these functional parameters were brought down to infertility range when human spermatozoa were used *in vitro*. The same phenomenon might have occurred with rat spermatozoa due to intra-vaginal application of NLE and contributed to nil pregnancy in the present study. Further study is required to understand the molecular mechanisms underlying NLE-induced changes in sperm function parameters in human.

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