基础研究

表没食子儿茶素没食子酸酯对大鼠脊髓损伤后 神经功能恢复的影响

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【摘要】目的:研究经蛛网膜下腔给予表没食子儿茶素没食子酸酯(epigallocatechin gallate,EGCG)对大鼠脊髓 损伤(spinal cord injury,SCI)后神经功能恢复的影响及其作用机制。方法:成年雌性 SD 大鼠 40 只,随机分为 4 组,每组10只,假手术组(A组)仅切除椎板;对照组(B组)SCI后,蛛网膜下腔注射同体积载体溶液;10mg/kg EGCG 治疗组(C组)SCI 后经蛛网膜下腔注射 EGCG 10mg/kg;20mg/kg EGCG 治疗组(D组)SCI 后经蛛网膜下 腔注射 EGCG 20mg/kg。改良 Allen 法(40g·cm)制作 T10 节段 SCI 模型,L4 水平蛛网膜下腔注射 EGCG 或载体 溶液。术前、术后 1d、术后 3d 及术后 1、2、3、4 周进行盲法 BBB 评分、斜板试验;术后 4 周时处死大鼠,病理学 检查(Luxol fast blue 染色)观察脊髓损伤部位残余髓鞘情况;免疫组化及 Western blot 法检测胶质细胞源性营 养因子(GDNF)、脑源性神经营养因子(BDNF)、Bcl-2 和 Bax 的表达水平。 结果: A 组术前及术后各时间点 BBB 评分均为 21 分,斜板试验角度无明显变化;术后各时间点 $B \subset B$ 组和 D 组 BBB 评分及斜板试验角度均小于 A组(P<0.05);术后 1d、3d 时、B、C 组和 D 组 BBB 评分以及斜板试验角度无统计学差异(P>0.05);术后 1、2、3、4 周时,C,D组的BBB评分及斜板试验角度均大于B组(P<0.05),C组的BBB评分及斜板试验角度与D组比较 均无统计学差异(P>0.05)。术后 4 周时, $B \subset X$ 包 组大鼠脊髓损伤部位的髓鞘残余面积均小于 A 组(P<0.05), $C \subset X$ D 组明显大于 B 组(P<0.05),在损伤脊髓中心 D 组明显大于 C 组(P<0.05)。术后 4 周时免疫组化检查, B_xC_xD 组的 BDNF、GDNF、Bel-2 和 Bax 的阳性表达强于 A 组, C、D 组的 BDNF、GDNF 和 Bel-2 的阳性表达强于 B 组,Bax 的阳性表达弱于 B 组。术后 4 周时 Western blot 法检测,B、C、D 组的 BDNF、GDNF、Bcl-2 和 Bax 的表 达高于 A 组(P<0.05); C 、D 组的 BDNF 和 GDNF 表达明显高于 B 组(P<0.05), C 组与 D 组无统计学差异(P> 0.05); C、D 组的 Bcl-2 表达明显高于 B 组 (P<0.05), C 组与 D 组比较无统计学差异 (P>0.05); C 组和 D 组的 Bax 表达明显低于 B 组(P<0.05), D 组明显低于 C 组(P<0.05)。结论: EGCG 可有效促进大鼠 SCI 后的神经功能 恢复,其机理可能与髓鞘的丢失减少、神经营养因子 BDNF 和 GDNF 的表达上调及细胞凋亡被抑制等有关。

【关键词】脊髓损伤;表没食子儿茶素没食子酸酯;神经营养因子;凋亡;大鼠

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The therapeutic effect of epigallocatechin gallate on the neurological recovery after spinal cord injury in rat/HAN Xiaoguang, TIAN Wei, LIU Bo, et al//Chinese Journal of Spine and Spinal Cord, 2013, 23 (11): 998–1005

[Abstract] Objectives: To investigate the therapeutic effects and underlying mechanism of epigallocatechin gallate(EGCG) administered by subarachnoid injection in spinal cord injury(SCI) in rats. Methods: 40 adult Sprague–Dawley rats were randomly divided into four groups with 10 in each group as follows: sham group (group A), laminectomy only; control group(group B), after SCI, subarachnoid injection of same volume of control solution; 10mg/kg EGCG–treated group(group C), after SCI, 10mg/kg EGCG was given by subarachnoid injection; 20mg/kg EGCG–treated group(group D), after SCI, 20mg/kg EGCG was given by subarachnoid injection. SCI was induced by using the modified weight–drop method (10g×4cm) at T10 level. EGCG (10 or 20mg/kg) was administered by subarachnoid injection at lumbar level 4 immediately after SCI. At 1d, 3d, 1w, 2w, 3w and 4w of post–operation, the locomotor functional recovery was assessed by using open–field locomo-

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tor tests and inclined-plane tests. At 4 weeks of post-operation, the segments of spinal cord encompassing the injury site were removed for histopathological analysis. Immunohistochemical and Western blot analyses were performed to observe the expressions of: the brain-derived neurotrophic factor(BDNF), glial cell line-derived neurotrophic factor(GDNF), B cell CLL/lymphoma-2(Bcl-2) and Bcl-2-associated X protein(Bax). Results: In group A, the BBB score and inclined plate test angle did not change much after operation. While at 1d, 3d, 1w, 2w, 3w and 4w after operation, the BBB scores and inclined pate test angles of group B, C and D were significantly lower than those in group A (P<0.05). At 1d and 3d after operation, the BBB scores and inclined-plated angles of group B, C and D did not show significantly difference (P<0.05). At 1w, 2w, 3w and 4w after operation, the BBB scores and inclined plated test angles in group C and D were significantly higher than those in group B(P<0.05). There were no differences between group C and D in the BBB scores and inclined plated test angles(P>0.05). At 4w of post-operation, the LFB staining in group B, C and D shows less myelin distribution compared with group A(P<0.05). Group C and D have more myelin distribution compared with group B (P<0.05). Further, in the center of the injured cord, there was more myelin in group D than group C(P<0.05). Immunohistochemistry result showed that the positive expressions of BDNF, GDNF, Bcl-2 and Bax in group A were weaker than those in group B, C and D. The positive expression of BDNF, GDNF and Bcl-2 in group C and D were higher than those in the group B, while, the expression of Bax was weaker. Western blot results showed that expressions of BDNF, GDNF, Bcl-2 and Bax in group B, C and D were much higher than those in the group A (P<0.05). The expressions of BDNF and GDNF in group C and D were higher than group B (P<0.05). There was no difference between group C and D. The expression of Bcl-2 in group C and group D was higher than group B(P<0.05). The expressions of Bax in group C and D was lower than that in group B(P<0.05). Moreover, the expression of Bax in group D was lower than that in group C(P<0.05). Conclusions: EGCG administered by subarachnoid injection can significantly improve locomotor recovery, and this neuroprotective effect may be related to the up-regulation of BDNF and GDNF, and the inhibition of apoptosis-related proteins.

[Key words] Spinal cord injury; Epigallocatechin gallate; Neurotrophic factor; Apoptosis; Rat [Author's address] Department of Spine Surgery, Beijing Jishuitan Hospital, Medical Center, Tsinghua University, Beijing, 100035, China

脊髓损伤(spinal cord injury,SCI)导致损伤平面以下感觉和运动功能不可逆性丧失,致残率高,严重危害人类健康和社会生产。目前临床缺乏有效的治疗方法。大剂量激素冲击治疗的治疗窗窄,效果并不明显,且常伴有严重并发症。寻找有效治疗 SCI 的方法成为目前研究的热点。表没食子儿茶素没食子酸酯(epigallocatechin gallate,EGCG)是绿茶的主要成分,是重要的天然抗氧化剂,能透过血脑屏障,减少氧自由基所致的细胞损伤,保护神经细胞,具有潜在治疗神经损伤疾病的价值[2-5]。但 EGCG 对 SCI 后神经功能恢复的影响及可能的作用机理。

1 材料与方法

1.1 实验动物与实验器材

成年健康雌性 SD 大鼠 48 只,体重 250~300g,购自北京大学医学部实验动物部。EGCG (纯度 95%,杭州禾田生物技术有限公司);胶质细胞源性神经营养因子 (gial cell line-derived neurotrophic factor,GDNF) 抗体和脑源性神经营养因子(brain derived neurophic factor,BDNF)抗体购自 Abcam 公司;B cell CLL/lymphoma -2 (Bcl-2)抗体和 Bcl-2-associated X protein(Bax)抗体购自 Santa Cruz;重物坠落 SCI 打击器(江苏瑞华器械厂),倒置显微镜(Leica,德国),红外荧光扫描仪(Bio-Rad,美国)。

1.2 模型制作及动物分组

先造模,随后随机分组,经蛛网膜下腔注射药物。将实验大鼠随机分为4组:假手术组(A组),仅行椎板切除;对照组(B组),SCI大鼠,蛛网膜下腔注射同体积载体溶液;10mg/kg EGCG治疗组(C组),大鼠SCI后蛛网膜下腔注射EGCG溶

液 10mg/kg;20mg/kg EGCG 治疗组(D 组),大鼠 SCI 后蛛网膜下腔注射 EGCG 溶液 20mg/kg。将 EGCG 溶于 0.9% 生理 盐水溶液, 终浓度为 0.5mg/μl。

用 1%的戊巴比妥钠腹腔注射麻醉大鼠,俯卧位固定,常规备皮、消毒、铺巾。以 T10 棘突为中心作后正中切口,长约 2.0cm,充分暴露并切除 T9、T10 棘突和椎板。改良 Allen 法制作 T10 节段 SCI 模型^[5]:直径为 2.5mm 垫板放于暴露脊髓处,以质量为 10g 的砝码从 4.0cm 高处自由落下,撞击硬膜囊,打击势能为 $40g \cdot cm$,迅速移去砝码,避免二次打击。认真止血后逐层关闭创口。随后在 L4 水平行椎板部分切除,微量注射器进行蛛网膜下腔注射 EGCG (10mg/kg,20mg/kg)或单纯载体溶液,缓慢注射,注射后留针 $2\sim3min$ 。制作 SCI 大鼠 38 只,为保证模型统一标准,造模后进行行为学检查,选取行为学评分<1 分大鼠 30 只,连同 10只假手术大鼠纳入正式实验,每组 n=10。

1.3 行为学评分

根据文献报道及我们前期的方法[6-9],分别于术前、术后 1d、术后 3d 及术后 1、2、3、4 周进行大鼠 BBB 评分:将动物置于宽阔活动场地自由活动5min,观察其后肢运动情况,左右两侧肢体分别评分,取平均值为每只大鼠的功能得分。在相同时间点,进行斜板试验:将大鼠置于一长方形木制斜板上,大鼠身体纵线与斜板纵轴垂直放置,逐渐升高斜板高度,致大鼠在斜板上停留 5s 的最大角度为功能值,每只动物测 5次,取其平均值为最终测定角度。由不参与动物分组与治疗但熟悉评分标准的 2 位观察者同时独立进行评分,取平均值。

1.4 病理学观察

术后 4 周时,每组取 6 只大鼠进行病理学观察,用过量戊巴比妥钠腹腔注射深度麻醉大鼠,经左心室灌注冰生理盐水至流出澄清液,再用 4%的多聚甲醛约 200ml 灌注固定后,以损伤中心区为中点取 1cm 左右脊髓组织,4%多聚甲醛溶液固定 6~8h,30%蔗糖溶液脱水,随后进行 OCT 包埋。行脊髓组织横切片,片厚 20μm,每 100μm 进行切片,每只获取切片 40 张,切片中残存面积最小处设定为损伤中心,包括损伤中心在内,腹侧、头侧每 500μm 取 1 张切片,各取 4 张,共计 9 张切片行 Luxol Fast Blue(LFB)特殊染色^[8](其余切片用于免疫组化染色),显微镜下观察、摄影,利用数字

图像分析仪定量分析每张切片残存髓鞘 (LFB 着色部位)的面积。

1.5 免疫组化检查

每组抗体染色时,每只大鼠随机选取 5 张距 损伤中心(脊髓损伤组)或相应部位(假手术组) 0.5cm 内的切片,用 PBS 溶液洗涤,5%山羊血清 封闭 30min,一抗 4°过夜,一抗分别为兔抗 BDNF (1:100),兔抗 GDNF (1:100),兔抗 Bcl-2 (1:250) 和兔抗 Bax (1:250)。用 PBS 充分洗涤,加入山羊 抗兔二抗,室温孵育 30min,PBS 充分洗涤,DAB (diaminobenzidine)染色 3min,甘油封片后,倒置显微镜下观察切片中阳性表达(棕色)的部位及强弱程度。

1.6 Western blot 法检查

术后 4 周时,每组取 4 只大鼠过量麻醉腹腔注射处死,脊髓损伤组取包含损伤部位在内(假手术组取相应部位)的 1cm 脊髓组织,获取脊髓蛋白,根据蛋白浓度进行等量上样、电泳、转膜、洗膜,封闭,4°C 一抗过夜,一抗分别为抗 BDNF(1:250),抗 GDNF(1:250),抗 Bcl-2(1:250)和抗 Bax (1:250),洗膜,室温下荧光二抗孵育 1h,充分洗膜,Odyssey 红外成像系统观察、照相,并定量分析条带灰度。

1.7 统计学处理

采用 SPSS 18.0 进行数据处理,数据用均数±标准差表示。各组 BBB 评分、斜板试验角度、残存髓鞘面积及 Western Blot 灰度值通过单因素方差分析(ANOVA)及 LSD 法进行统计学处理,P<0.05表示差异有统计学意义,同组不同时间点未进行统计学分析。

2 结果

2.1 行为学结果

入选正式实验的 40 只大鼠均纳入分析,无死亡,未发现药物毒性反应。术前及术后各时间点 4 组大鼠的 BBB 评分及斜板试验角度见表 1。脊髓损伤后双后肢均全瘫。术后各时间点 B C D 组 BBB 评分及斜板试验角度均小于 A 组(P<0.05);术后 1 3 d 时,B 组、C 组和 D 组 BBB 评分及斜板试验角度无统计学差异(P>0.05);术后 1 2 3 4 周时,C 组和 D 组的 BBB 评分及斜板试验角度均大于 B 组 (P<0.05),C 组与 D 组比较无统计学差异(P>0.05)。

2.2 病理学观察

术后 4 周,损伤脊髓部位(B、C、D 组)及 A 组相应部位切片经 LFB 染色后,髓鞘呈现蓝色,灰质为红色(图 1)。B、C、D 组大鼠脊髓损伤部位的髓鞘残余面积与 A 组比较明显减少(P<0.05);C、D 组明显大于 B 组(P<0.05);在损伤脊髓中心,D 组的残余髓鞘面积明显大于 C 组(P<0.05,表 2)。

2.3.1 免疫组化检查 术后 4 周,B、C、D 组的脊髓损伤部位及 A 组相应部位切片 DAB 染色后阳性细胞表现为棕色。B、C、D 组的 BDNF、GDNF、Bel-2 和 Bax 的阳性表达强于 A 组;C、D 组的BDNF、GDNF和 Bel-2 的阳性表达强于 B 组,Bax的阳性表达弱于 B 组。在 B 组大鼠脊髓损伤中心,BDNF表达较弱,但在 C 组和 D 组大鼠损伤脊髓的神经细胞胞浆中可见大量 BDNF 的阳性表

表 1 4 组大鼠不同时间点的 BBB 评分和斜板试验结果

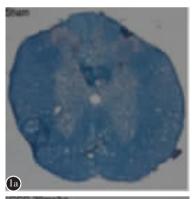
 $(\bar{x}\pm s, n=10)$

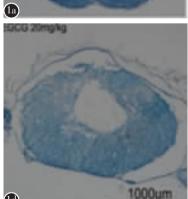
Table 1 The result of BBB score and inclined plane test in 4 groups

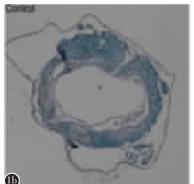
	BBB评分(分) BBB score				斜板试验角度(°) Inclined plate test			
	A组 Group A	B组 Group B	C组 Group C	D组 Group D	A组 Group A	B 担 Group B	C组 Group C	D组 Group D
术前 Preoperation	21	21	21		80.0±2.4	81.6±3.8	82.2±4.1	83.1±3.8
术后 Postoperation								
1d	21	$0\pm0^{\scriptsize\textcircled{\tiny\dag}}$	$0\pm0^{\odot}$	0±0 ^①	81.9±2.5	31.1±2.4 ^①	35.2±2.8 ^①	$36.3 \pm 3.2^{\text{①}}$
3d	21	$1.6 \pm 0.8^{\odot}$	$3.7 \pm 1.6^{\odot}$	$3.9 \pm 1.4^{\text{①}}$	83.8±2.8	34.2±2.3 ^①	39.8±3.1 ^①	$45.3 \pm 3.6^{\odot}$
1 w	21	$7.4 \pm 1.9^{\odot}$	9.9±2.0 ^{①②}	10.8±1.8 ^{①②}	82.7±3.8	41.5±3.8 ^①	49.7±3.6 ^{①2}	53.3±4.5 ^{①②}
2w	21	9.5±1.9 ^①	13.4±2.3 ^{①②}	14.2±2.1 ^{①②}	83.3±3.4	48.9±4.1 ^①	57.4±4.1 ^{①2}	60.2±4.9 ⁽¹⁾⁽²⁾
3w	21	11.0±2.4 ^①	13.9±2.1 ^{①②}	14.8±1.9 ^{①②}	81.3±4.6	51.1±3.9 ^①	62.1±4.7 ^{①②}	65.7±5.1 ^{①②}
4w	21	11.2±2.5 ^①	14.2±2.1 ^{①②}	15.1±2.1 ^{①②}	82.4±4.9	52.2±4.4 ^①	63.2±4.6 ^{①②}	66.4±5.2 ^{①②}

注:①与 A 组比较 P<0.05;②与 B 比较 P<0.05

Note: ①Compared with group A, P<0.05; ②Compared with group B, P<0.05







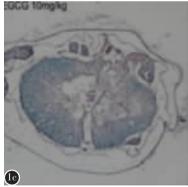


图 1 脊髓损伤组的损伤脊髓组织或假手术组相应部位脊髓组织 LFB 染色,髓鞘呈现蓝色(\times 20) a 假手术组(A组),髓鞘组织完整 b 对照组(B组),空腔面积较大,仅周边残余少量髓鞘 \mathbf{c} 、d 分别为 EGCG 10mg/kg(C组)与 EGCG 20mg/kg(D组)治疗组,空腔面积较小,残余髓鞘面积较大

Figure 1 The characteristic LFB staining in the injured spinal cord of the SCI groups or the corresponding spinal cord of the sham group, the meylin is blue(×20) a Sham group(group A), the myelin tissue was intact b Control group(group B), there was a big cavity in the center, only few spared meylin in the surrounding c, d EGCG 10mg/kg(group C) and EGCG 20mg/kg(group D) group respectively, there were small cavity in the center, a big spared meylin in the surrounding

达(图 2)。同样,在 C 组和 D 组损伤脊髓的神经细胞胞浆中,GDNF 的表达明显高于 B 组(图 3)。 B 组损伤脊髓处的神经细胞胞浆可见较强 Bax 表达,而 C 组和 D 组表达较弱(图 4)。B 组损伤脊髓处 Bcl-2 表达较弱,C 组和 D 组损伤脊髓处的神经细胞胞浆可见大量的 Bcl-2 表达(图 5)。

2.3.2 Western blot 检测 A 组的 BDNF、GDNF、

表 2 术后 4 周脊髓损伤组大鼠损伤部位及假手术组相应部位脊髓残余髓鞘的面积 $(\bar{x}_{\pm 8}, n=6, mm^2)$

Table 2 The spared myelin areas of the injured spinal cord in the SCI groups and the corresponding spinal cord in the sham group at 4 weeks post-operation

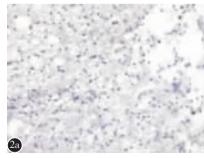
距损伤中 心的距离 Distance from center	A组 Group A	B组 Group B	C组 Group C	D 组 Group D
-2.0mm	65.4±2.3	60.3±4.6 ^①	61.1±3.8 ^①	62.4±3.2 ^①
-1.5mm	67.1±2.1	56.2 ± 3.3 ①	$59.2 \pm 3.2^{\text{①}}$	60.3 ± 3.4 ^①
-1.0mm	63.2±2.5	44.1±2.7 ^①	54.1±2.6 ^{①②}	$56.2 \pm 2.7^{\odot 2}$
-0.5mm	67.2±1.9	$35.4 \pm 2.3^{\text{①}}$	43.8±2.3 ^{①②}	$46.7 \pm 2.5^{\odot 2}$
0mm	66.2±2.5	$28.8 \pm 3.7^{\odot}$	34.9±3.2 ^{①2}	$40.3\pm2.7^{\odot23}$
0.5mm	65.2±1.9	$37.1 \pm 4.0^{\odot}$	43.3±4.1 ^{①②}	48.3±3.1 ^{①2}
1.0mm	67.9±2.3	47.2 ± 3.1 ^①	55.1±4.3 ^{①②}	57.1±3.7 ^{①②}
1.5mm	66.4±3.2	54.5±3.4 ^①	60.1±3.5 ^①	62.0±3.7 ^①
2.0mm	68.5±2.8	57.1±2.5 ^①	62.4±3.6 ^①	64.2±4.1 ^①

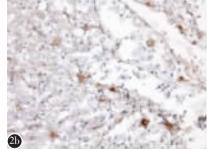
注:①与A组比较 P<0.05;②与 B 组比较 P<0.05;③与 C 组相比 P<0.05 Note: ①Compared with group A, P<0.05; ②Compared with group B, P<0.05; ③Compared with group C, P<0.05

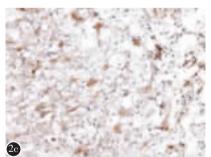
Bcl-2 和 Bax 表达均较弱,与 B、C 和 D 组有明显差异(P<0.05)。C 组和 D 组的 BDNF 和 GDNF 表达明显高于 B 组 (P<0.05),C 组与 D 组比较无明显差异;C、D 组的 Bcl-2 表达明显高于 B 组 (P<0.05),C 组与 D 组比较无统计学差异 (P>0.05)。C、D 组的 Bax 表达明显高于 B 组 (P<0.05),D 组明显低于 C 组(P<0.05,表 3,图 6)。

3 讨论

近年来药物干预成为治疗 SCI 的重要手段。 EGCG 属于黄烷醇类,是一种天然抗氧化剂,以绿 茶中含量最高,长期应用安全[10,11]。研究发现 EGCG 具有神经保护作用, 其作用机制为消除自 由基、抑制炎症反应、调节细胞生存/凋亡基因和 细胞传导通路等[3,4,10,11]。但 EGCG 对 SCI 后神经 功能恢复的影响鲜见报道。Khalatbary 等[12,13]的研 究发现 EGCG 可以减少炎症反应和神经细胞的 凋亡,促进 SCI 后大鼠神经功能的恢复,但其作用 机理尚不明确,且其研究为系统给药。相比较于系 统给药,局部给药由于直接作用于损伤部位,可能 会有更明显的治疗效果,在临床中,蛛网膜下腔注 射给药是一种成熟、简洁的给药方式[14.15]。我们在 以往的实验中发现蛛网膜下腔给予辛伐他汀治疗 可有效促进 SCI 大鼠运动功能的恢复, 无明显药 物副作用[16]。因此本研究亦采用蛛网膜下腔注射







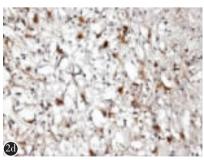


图 2 术后 4 周时,脊髓损伤组的脊髓损伤部位或假手术组相应部位脊髓 BDNF 染色($\times 200$),棕色为阳性表达 a 假手术组(A 组)大鼠 BDNF 染色阳性表达较弱 b 对照组 (B 组)BDNF 染色可见部分细胞表达阳性 $\mathbf{c}_{\times}\mathbf{d}$ 分别为 10 mg/kg EGCG 治疗组(C 组)和 20 mg/kg EGCG 治疗组(D 组)大鼠的 BDNF 染色,可见大部分细胞表达强阳性

Figure 2 The BDNF immunohistochemistry results of injured spinal cord in the SCI groups or corresponding spinal cord in the sham group at 4 weeks post-operation (×200). The brown is the positive expression **a** The BDNF staining of sham group (group A), there was a low expression **b** The BDNF

staining of control group(group B), there was some positive expression in some cells **c**, **d** The GDNF staining of EGCG 10mg/kg(group C) and EGCG 20mg/kg(group D) respectively, there were a strongly positive expression in most cells

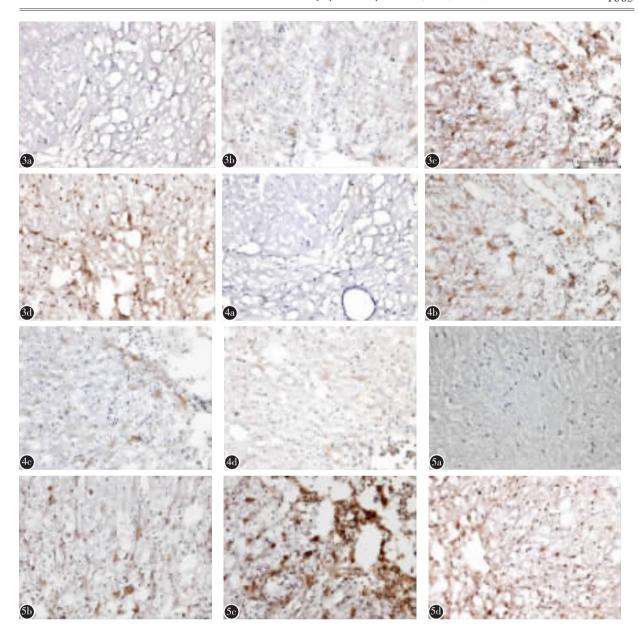


图 $3 \sim 5$ 术后 4 周脊髓损伤组大鼠的脊髓损伤部位或假手术组相应部位免疫组化结果(×200),阳性表达为棕色 图 3 GDNF 染色 a A 组大鼠 GDNF 染色,阳性表达较弱 b B 组 GDNF 染色,部分细胞表达阳性 c d 分别为 C 组和 D 组大鼠的 GDNF 染色,大部分细胞表达强阳性 图 a Bax 染色 a A 组大鼠 Bax 染色,阳性表达较弱 b B 组 Bax 染色,大部分细胞表达强阳性 c d 分别为 C 组和 D 组大鼠的 Bax 染色,只有部分细胞表达阳性 图 a B a A 组大鼠 B a

Figure 3–5 The immunohistochemistry results of injured spinal cord in the SCI groups or corresponding spinal cord in the sham group at 4 weeks post-operation (×200). The brown is the positive expression. Figure 3 GDNF staining a The GDNF staining of group A, there was a low expression b The GDNF staining of group B, there was some positive expression in some cells c, d The GDNF staining of group C and D respectively, there were a lot of positive expression Figure 4 Bax staining a The Bax staining of group A, there was a low expression b The Bax staining of group B, there was a strongly positive expression in most cells c, d the Bax staining of group C and D respectively, there were some positive expression in some cells Figure 5 Bcl-2 staining a The Bcl-2 staining of group A, there was a low expression b The Bcl-2 staining of group B, there there were some positive expression in some cells c, d The expression of group C and D respectively, there were strongly positive expression in most cells

表 3 术后 4 周脊髓损伤组大鼠的脊髓损伤部位或假 手术组相应部位 Westen blot 法检测灰度值 $(\bar{x}\pm s, n=4)$

Table 3 The Western blot result of injured spinal cord in the SCI groups or corresponding spinal cord in the sham group

		0		
	A组 Group A	B组 Group B	C组 Group C	D组 Group D
BDNF/β-actin	11.9±3.2	18.3±6.1 ^①	61.5±7.2 ^{①②}	70.2±5.6 ^{①2}
GDNF/β-actin	11.5±3.9	24.9±4.3 ^①	58.7±6.4 ^{①②}	40.8±7.1 ^{①2}
$\mathrm{Bel-2/\beta-actin}$	12.8±2.5	29.9±3.1 ^①	86.6±4.2 ^{①②}	83.7±4.8 ^{①2}
Bax-2/β-actin	18.1±3.4	40.1±4.1 ^①	37.8±2.4 ^{①②}	24.1±3.2 ^{①23}

注:①与A组比较 P<0.05;②与B 组比较 P<0.05;③与C 组比较 P<0.05

Note: ①Compared with the group A, P<0.05; ②Compared with the group B, P<0.05; ③Compared with the group C, P<0.05

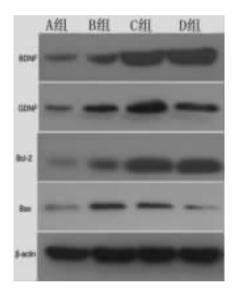


图 $\mathbf{6}$ 4 组大鼠脊髓组织 Western blot 检测结果,A 组为假 手术组,B 组为对照组,C 组为 EGCG 10mg/kg 组,D 组为 RGCG 20mg/kg 组。C、D 组 BDNF、GDNF 和 Bcl-2 的灰度 表达明显高于 B 组,而 Bax 表达低于 B 组

Figure 6 The Western blot results of the spinal cord in the different groups. A is the sham group. B is the control group. C is the EGCG 10mg/kg group. D is the EGCG 20mg/kg group. The expression of BDNF, GDNF and Bcl-2 in groups C and D were higher than that in group B. The expression of Bax in groups C abd D were lower than that in group B

的方法。

SCI可导致髓鞘的损伤,进而导致下肢运动功能的丧失,运动功能的恢复与髓鞘的残余有着密

切的关系。在自发性脑脊髓炎实验中,应用 EGCG 治疗可以明显缓解脱髓鞘程度,促进大鼠运动功能恢复^[17]。在本研究中,我们同样发现应用 EGCG 治疗可以明显缓解髓鞘丢失,进而促进大鼠运动功能恢复。

近年来研究发现、SCI 后神经功能的不可逆 性丢失并不是由于神经元或轴突无法再生, 而是 因为损伤后中枢神经系统缺乏再生的微环境間。 因此,增加神经营养因子分泌,改善微环境可以有 效促进神经功能的恢复。BDNF 是神经营养因子 家族中最具有活性的一种,对很多神经元轴突及 髓鞘的再生具有促进作用,能诱导神经突起定向 生长,还具有运动神经营养活性,保护脊髓运动神 经元,在 SCI 后减少脊髓运动神经元的凋亡[19]。在 神经系统疾病中,儿茶酚治疗可以明显促进 BD-NF 的表达和神经功能的恢复[20]。本研究发现应用 EGCG 治疗可明显促进大鼠 SCI 后 BDNF 的表 达。GDNF 是转化生长因子β家族的成员,可以促 进运动神经元的存活。SCI后,GDNF可以减少运 动神经元的退变,促进轴突再生和再髓鞘化,进而 促进运动功能恢复[21]。在本研究中,我们发现应用 EGCG 治疗组大鼠 SCI 后,运动功能的恢复可能 与 BDNF 和 GDNF 的高表达有关。

SCI 可分为原发性损伤和继发性损伤,原发性损伤在损伤当时产生,具有不可逆性,因此有效抑制继发性损伤是治疗 SCI 的重点。细胞凋亡是继发性损伤的重要病理基础,因此抑制神经细胞凋亡可有效减少继发损伤,促进神经功能恢复[^{22]}。Bcl-2 蛋白在细胞凋亡通道起重要作用,Bax 是重要的凋亡前蛋白。Bax 和 Bcl-2 的比值决定细胞的命运,Bcl-2 高表达可以促进细胞的存活,而Bax 可以诱导细胞的凋亡^[23]。文献报道 EGCG 可以减少 Bax 的表达,促进 Bcl-2 的表达,进而减少细胞凋亡^[5,12]。在本研究中,我们发现 SCI 后导致Bax 高表达,Bcl-2 下调表达,EGCG 治疗可以抑制这些反应,促进抗凋亡蛋白 Bcl-2 的高表达,下调前凋亡蛋白 Bax 的表达,进而减少继发损伤的进一步发生。

总之,经蛛网膜下腔注射 EGCG 可以有效促进大鼠 SCI 的修复,其机制可能与 EGCG 促进神经营养因子 BDNF 和 GDNF 的高表达、减少髓鞘丢失、抑制神经细胞凋亡的发生有关。

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