Ameliorative effects of L-carnitine as an antioxidant against testicular toxicity induced by AICI, in male albino rats

F. ALHARBI

Department of Biology, College of Science, Qassim University, Buraydah, Saudi Arabia

Abstract. – **OBJECTIVE:** The goal of this study was to investigate the potential protective effect of L-carnitine (20 mg/kg bw, 1/20 LD 50) against aluminum chloride (AICl₃) on the quality of the male rats' testicles and sperm, as well as to determine whether or not the effects of AICl₃ could be counteracted by using L-carnitine as an antioxidant.

MATERIALS AND METHODS: Six groups of 36 adult male albino rats (n=6) were randomly formed. In Group I (Gp I), saline injection was given orally as a control. Group II (Gp II) was injected orally with 75 mg/kg body weight of L-carnitine. Group III (Gp III) was given a high dose of L-carnitine (150 mg/kg body weight) orally, while Group IV (G IV) was given a low dose of AICI, (20 mg/kg body weight). Group V (Gp V) was given an oral injection of AICI₃ (20 mg/kg) and L-carnitine (75 mg/kg body weight). Group VI (Gp VI) was given AICI, at a dose of 20 mg/kg and L-carnitine at a dose of 150 mg/kg body weight for 60 days. The reproductive capacity of each group was assessed. Thus, in addition to histopathological analysis and the comet assay to evaluate sperm DNA deterioration, final body weight, testicular weight change, and sperm analysis were carried out.

RESULTS: The findings revealed that Al-Cl₃ caused a significant decrease in final body weight, relative weight of sex organs, sperm concentration, motility and viability, serum testosterone concentration, and a significant increase in sperm abnormalities. Furthermore, Al-Cl₃ caused visible changes in the histological structure of the testis.

CONCLUSIONS: L-carnitine treatment alleviated the harmful effects of AlCl₃, as evidenced histopathologically by a noticeable improvement in testis tissues. When it comes to treating AlCl₃-induced reproductive toxicity in male rat testes, L-carnitine shows promise.

Key Words:

L-carnitine, AICI₃, Male rats, Testis dysfunction.

Introduction

Over the last few decades, there has been a global decline in the quality of human sperm. Many factors can affect male fertility; one theory for the downward trend in fertility is that sperm quality is declining due to lifestyle choices and occupational and/or environmental factors¹. It has been shown¹ that several factors can impede the regular progression of spermatogenesis, leading to a significant reduction in the quantity and/or quality of spermatozoa, which can result in infertility. Oxidative stress, which dramatically impairs sperm function and germ cell development, is one of the most harmful elements and a primary cause of male infertility. In humans, drinking water, consuming fruit juices, or consuming citric acid can all lead to aluminum absorption and accumulation. These approaches dramatically raise urinary excretion and gastrointestinal absorption of aluminum in healthy individuals². Due to its widespread distribution in nature, aluminum (Al) poses a risk of toxic harm to human tissues and organs³.

Food additives, toothpaste, water-purifying agents, phosphatic binders, antidiarrhea, and antacids are a few examples of pharmaceutical aluminum compounds in use^{4,5}. It has been demonstrated^{6,7} that the bloodstream, seminal plasma, testes, liver, kidneys, lungs, and brain all produce reactive oxygen species (ROS) and inhibit antioxidant enzymes when exposed to aluminum chloride (AlCl₃). Moreover, ROS participate in lipid peroxidation (LPO), which modifies the function of mitochondria and increases their permeability⁸. AlCl₃ consumption disrupts the oxidative/ antioxidative equilibrium, induces LPO, and decreases the antioxidant enzyme activities, leading to oxidative damage, cell death, and toxicity^{9,10}. Oxidative stress in sperm is caused by an excess of reactive oxygen species (ROS) and is the cause of infertility¹¹. Additionally, AlCl, was found¹² to have an impact on the mice's ventral prostate, seminal vesicles, deferential canal, and epididymis. Moreover, testicular development and testosterone synthesis were observed¹³ to be altered in laboratory animals exposed to AlCl₂. The amino acid L-carnitine (LC), also referred to as β -hydroxy-y-trimethylamino-butyric acid, is produced when methionine and lysine are combined. LC helps to stabilize cell membranes by promoting the oxidation of long-chain fatty acids and participating in the metabolism of branched-chain amino acids¹⁴. Humans get it primarily from exogenous sources found in animal diets, with smaller amounts coming from the brain, kidney, and liver for methionine or lysine¹⁵. Through its ability to facilitate the transport of long-chain fatty acids into mitochondria, it makes a significant contribution to the metabolism of cellular energy¹⁶. Research^{17,18} has demonstrated that it functions as an antioxidant by scavenging reactive oxygen species (ROS). It might also stabilize damaged cell membranes and stop mitochondrial oxidative stress caused by apoptosis and mitochondrial damage in various cell types. High amounts of L-carnitine, which is necessary for metabolism, sperm development, and maturation, are found in the epididymis¹⁸. It might be protective against cardiotoxicity because of its antiapoptotic and antioxidant qualities¹⁹. According to its profile of activities, this molecule might be able to lessen the harmful side effects of some pesticides²⁰. Reactive oxygen species (ROS) are produced when endogenous processes or exogenous agents react with cells; the endogenous cellular antioxidant defense system prevents this from happening. When the cellular endogenous antioxidant defense system's capacity is surpassed by the production of ROS, oxidative stress occurs²¹. ROS can harm macromolecules found in biochemistry. such as proteins, lipids, and nucleic acids. These ROS actions will disrupt the normal motility, viability, and count of the sperm as well as their ability to fertilize the oocyte, thereby damaging the DNA and sperm membrane's structure and function^{22,23}.

Spermatogenesis and steroidogenesis are highly susceptible to damage even in the presence of low oxygen tension and poor intratesticular vascularization, owing to the elevated levels of reactive oxygen species (ROS) produced in the testis²⁴. Finally, it should be noted that the testis is extremely susceptible to exogenous agents, including a variety of pharmaceutical treatments, which may harm spermatogenesis, sperm parameters, and reproduction²⁵. The purpose of this study is to examine the possible protective effect of L-carnitine (20 mg/kg bw, 1/20 LD 50) against aluminum chloride (AlCl₃) on the quality of the testicles and sperm of male rats. Additionally, the study aims to determine whether or not L-carnitine can be used as an antioxidant to mitigate the effects of AlCl₂.

Materials and Methods

Experimental Animals

A total of 36 male albino rats in good health, weighing between 150 and 155 g, were collected. All the animals were given two weeks to acclimatize. The animals were housed in plastic cages with a 12-hour light/dark cycle and a temperature of 25°C. Every day, the health of the animals was examined, and they were provided with conventional food and water without limits. Every attempt has been made to minimize animal suffering and to use as few animals as possible to generate trustworthy scientific data. This study was approved by the Committee of Health Research Ethics, Deanship of Scientific Research, Qassim University, with Ethical Committee approval IP (IRP No. 23-41-14).

The source of aluminum chloride $(AlCl_3)^{26}$ was provided by Sigma Chemical Co. (St. Louis, MO, USA). The Arab company for pharmaceutical and medicinal plants (MEPACO), located in Cairo, Egypt, provided the L-carnitine. Each capsule contains 350 mg of L-carnitine. The L-carnitine powder was dissolved in distilled water and then given orally *via* a stomach tube every day at doses of 75 and 150 mg/kg of body weight per day. L-carnitine (75 and 150 mg/kg) was given orally to rats on a daily basis, as reported by Kim et al²⁷.

Experimental Protocol

The following six groups of thirty-six rats were created: Group I consisted of rats receiving saline; Group II consisted of rats receiving 75 mg/kg of L-carnitine; and Group III consisted of rats receiving 150 mg/kg of L-carnitine. Group IV received an oral injection of AlCl₃ (20 mg/kg), while Group V received an oral injection of 75 mg/kg L-carnitine and 20 mg/kg AlCl₃. Additionally, rats in Group VI were given 150 mg/kg of L-car-

nitine and 20 mg/kg of AlCl₃. For two months^{28,29}, AlCl₃ and L-carnitine were given to all groups once a day.

Sample Collection and Testosterone Analysis

Blood samples were taken, rats were decapitated, and they were given anesthesia. The samples were stored at 4°C for the entire night to allow them to clot. The serum was extracted from the samples the following day and stored at -20°C after they had been centrifuged for 15 minutes at 9,000 g. The testosterone-coated-tube radioimmunoassay kits used to measure serum testosterone had a lower limit of detection of 0.04 ng/ml.

Testosterone assay determination

The Ismail method³⁰ was utilized to estimate the serum testosterone level.

Measurement of Body and Testicular Weight and Gonadosomatic Index

Each rat's weight was determined at the beginning of the study, and throughout the experiment, the rat's body weight was noted once a week. Once the experiment's sixty days were up, the weights of the right and left testicles were recorded. From there, the gonadosomatic index (GSI), which is determined by dividing the testes' weight by the animal's body weight, was determined.

Sperm Analysis

The epididymis was then taken out and put in a preheated petri dish with 0.2 ml of calcium and magnesium-free Hank's solution for 15 minutes at 37°C. The sperm motility, viability, count, and anomalies were assessed in the epididymis.

Sperm Motility

Sperm motility was measured by covering a microscope slide with a cover slip and adding two drops of sperm solution, as per Ekaluo et al³¹. In order to calculate the percentage, the total number of spermatozoa counted under lenses (40 X) was divided by the number of progressively motile cells.

Sperm Viability

The viability of the sperm was assessed using Eosin-Nigrosin staining³². A portion of the sperm suspension was combined with an equal volume of Eosin-Nigrosin to create each sample, which was then air-dried on a glass slide before being stained. The slides' viability was expressed as a

percentage. Normal, healthy sperm cells appeared whitish, while dead sperm cells took up satin and looked reddish. The percentage viability was calculated as the number of viable sperm cells out of the total number of cells found.

Sperm Count

The epididymal sperm count was obtained using the upgraded Neubauer hemocytometer, and the heads were manually counted under a light microscope. The data was represented by the total number of sperm/ml³³.

Sperm count = (No. of spermatozoa × Dilution factor × Depth factor) \div No. of areas counted.

Sperm Abnormality

Inside the glass sliding privies, the proportion of sperm abnormalities (head, mid-piece, and tail) in every 200 spermatozoa seen on a slide for a given sample was calculated. The proportion of abnormal sperm heads was calculated according to Ekaluo et al³⁴.

Histological Examination

The entire left testis and samples of the right testis were preserved in 10% neutral buffer formalin and then processed using a rotary microtome to create paraffin sections that were 4-6 μ m thick. These sections were then stained with hematoxylin and eosin and examined under a light microscope³⁵.

Comet Assay

With a few minor adjustments, the comet assay was used to assess DNA damage as defined by Singh et al³⁶. The comet assay protocol was applied to all samples, albeit with a few small adjustments from the method described by Enciso et al³⁷. A fraction of the total semen was defrosted and washed three times in saline buffered with phosphate. Then, 25 µl of this mixture was mixed with 50 µl of 1% low-melting-point agarose (Sigma Aldrich, St. Louis, MO, USA) in distilled water. Sperm cells were diluted to contain 10 x 10⁶ spermatozoa/ml. To encourage gel adhesion, two separate slides were pre-treated with 1% lowmelting-point agarose and then quickly filled with 15 μ l of the mixture. After that, coverslips were placed over the slides, and they were placed on a cold plate to gel for five minutes at 4°C. The slides were carefully stripped of their coverslips and then submerged in comet lysis solutions (Halotech, Madrid, Spain) for half an hour. Subsequently, they were thoroughly cleaned in Tris bo-

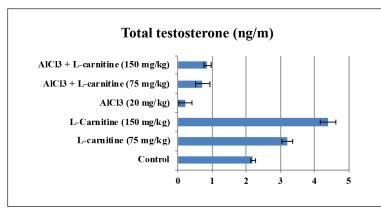


Figure 1. Photographs of total free testosterone hormone (ng/m) in different treated groups. All values were expressed as mean \pm SE (n=6).

rate EDTA (TBE), which contains 0.01 M EDTA, 0.445 M Boric acid, and 0.445 M Tris-HCL. After 12 minutes and 30 seconds of electrophoresis in the TBE buffer at 20 V (1 V/cm), a 2-minute wash in 0.9% NaCl was performed. The slides were incubated for 5 minutes in the neutralizing solution (0.4 M Tris-HCL, pH 7.5), for 2 minutes in TBE, and for 2 minutes in a series of ethanol concentrations of 70, 90, and 100% to dehydrate them. For every comet assay sample, at least 400 spermatozoa were counted. The samples were then stained with DAPI SlowFade® Gold antifade (Invitrogen, Eugene, OR, USA) and examined under an Olympus AX70 fluorescence microscope. There were two types of sperm cells: fragmented and non-fragmented. Different levels of DNA damage were depicted in sperm cells. An automated image analysis technique collected images, computed integrated intensity profiles for every cell, estimated the comet cell's constituent parts, and evaluated the range of generated parameters. Subsequently, the software calculated the tail moment (TM). The amount of DNA damage was determined by measuring the distance between the comet's genetic material in the nucleus (the comet head) and its tail. The amount of DNA damage was determined by measuring the tail length (TL), tail DNA%, and tail moment (TM). The length of DNA migration, or TL, is directly correlated with the size of the DNA fragment and is measured in micrometers. It was calculated from the center of the cell out.

Statistical Analysis

All data from this study were collected and statistically analyzed using the IBM SPSS Statistics software version 27.0 (IBM Corp., Armonk, NY, USA) for Windows. The Shapiro-Wilk test was used for the test of data normality. For normally distributed data, the one-way ANOVA test was used to compare more than 2 independent groups, and the Duncan test was used to detect pair-wise comparison. For non-normally distributed data, the paired sample *t*-test was used to compare 2 paired groups and the Kruskal-Wallis test to compare more than 2 groups. Mann-Whitney test was used to detect pair-wise comparison. The significance of the results was done using a 0.05 level of significance. Results are presented as mean \pm SEM or mean rank. After conducting an ANO-VA test, significant letters ranging from "a" to "f" represented the significant mean values obtained from the Post Hoc Tests (Duncan).

Results

Total Testosterone Analysis

The results in Figure 1 show a highly significant decrease in total testosterone in the AlCl₃ (20 mg/kg) group for 60 days when compared to the control and L-carnitine (75 and 150 mg/kg/day) groups, which showed a significant increase. However, when compared to the AlCl₃ group, the animals' total testosterone showed a significant improvement following an injection of AlCl₃ and treatment with L-carnitine (75 and 150 mg/kg/day).

Body and Testicular Weight and Gonado-Somatic Index (GSI)

As indicated in Table I, the body weights were measured on the first day of the experiment and 60 days later. When compared to the control and L-carnitine (75 and 150 mg/kg/day) groups, which demonstrated significant increases in their body weight gain percent by 27.91%, 27.51, and

	HEV group (n=116)	HBV group (n=198)	HEV-HBV group (n=86)	Healthy group (n=117)	P
Delivery mode, n (%)					
Eutocia	29 (25.0)	91 (46.0)	16 (18.6)	64 (54.7)	< 0.001
Cesarean	76 (65.5)	107 (54.0)	68 (79.1)	53 (45.3)	< 0.001
Infant body weight (g)	3,200 (2,880-3,475)	3,265 (3,000-3,545)	3,202 (2,900-3,552)	3,230 (2,990-3,530)	0.068
Breech delivery	2 (1.7)	6 (3.0)	9 (10.5)	2 (1.7)	< 0.001
Fetal macrosomia	5 (4.3)	6 (3.0)	6 (7.0)	4 (3.4)	0.466
Obstetric complications, n (%)					
Oligohydramnios	25 (21.6)	22 (11.1)	19 (22.1)	10 (8.6)	< 0.001
Postpartum hemorrhage	11 (9.5)	10 (5.1)	7 (8.1)	1 (0.9)	< 0.05
Premature rupture of membranes	23 (19.8)	20 (10.1)	18 (20.9)	12 (12.3)	< 0.05
Meconium contamination	17 (14.7)	35 (17.7)	19 (22.1)	5 (4.3)	< 0.01
Adverse perinatal outcomes, n (%)					
Spontaneous abortions	10 (8.6)	0 (0)	1 (1.2)	0 (0)	< 0.001
Low birth weight infant	14 (12.1)	8 (4.0)	14 (16.3)	2 (1.7)	< 0.001
Premature delivery	24(20.7)	13 (6.6)	9 (10.5)	3 (2.6)	< 0.001
Fetal distress	22 (19.0)	20 (10.1)	17 (19.8)	3 (2.6)	< 0.001
Neonatal asphyxia	13 (11.2)	10 (5.1)	10 (11.6)	0 (0)	< 0.01
Admitted to NICU	10 (8.6)	2 (1.0)	3 (3.5)	0 (0)	< 0.001
Stillbirth	1 (0.9)	0 (0)	2 (2.3)	0 (0)	0.098
Maternal death	0	0	0	0	/

Table III.	Maternal-neonatal	outcomes in	various	research groups.

HEV, hepatitis E virus; HBV, hepatitis B virus; NICU, neonatal intensive care unit.

29.55, male rats injected with AlCl₃ (20 mg/kg) for 60 days showed a slightly non-significant increase in their body weight gain% by 18.46%. However, there was a noticeable improvement

in the percentage of body weight gain following AlCl₃ injection. Animals treated with 75 and 150 mg/kg/day of L-carnitine showed a significant increase in the percentage of body weight gain by

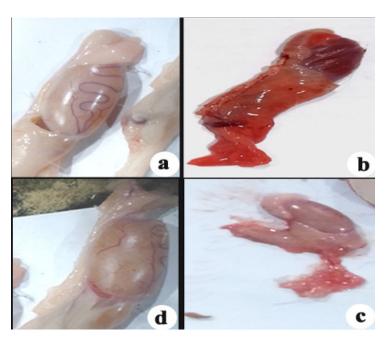


Figure 2. Whole testis in rats. **a**, Control and L-carnitine (75 and 150 mg/kg) groups, (**b**) $AlCl_3$, (**c**) $AlCl_3$ and treated with L-carnitine (75 mg/kg), (**d**) $AlCl_3$ (20 mg/kg) then treated with L-carnitine (150 mg/kg) for 60 days.

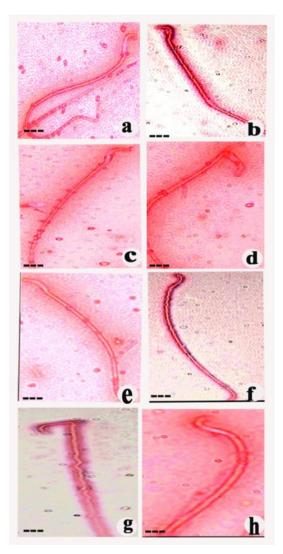


Figure 3. Photographs of sperm abnormalities. **a**, Unstained live sperm, (**b**) stained dead sperm, (**c**) hookless sperm, (**d**) hammer head, (**e**) short and with banana shape head, (**f**) amorphous head, (**g**) hammer and abnormal mid-piece, (**h**) hookless and bent mid piece, $20 \mu m$.

20.82% and 24.61% when compared to the ${\rm AlCl}_{\rm 3}$ injected group.

Rat tests revealed a significant drop in weight in the AlCl₃-injected group (5.066) when compared to the L-carnitine and control groups (6.56, 6.44, and 6.56), respectively. Rats treated with 75 and 150 mg/kg/day of L-carnitine after receiving AlCl₃ injections, on the other hand, showed increases in testis weight of 5.43 and 5.70, respectively, which were similar to those of the control group (Table II and Figure 2). Rats administered L-carnitine following AlCl₃ injection exhibited a noteworthy reduction in the percentage of gonad somatic index (GSI) (0.028) in contrast to the control group (0.033) and the L-carnitine groups (0.033 and 0.033), respectively. The AlCl₃ group also demonstrated an ameliorative effect by increasing GSI (0.029) and (0.030), respectively (Table II).

Sperm Analysis

Sperm count

In comparison to groups treated with L-carnitine (75 and 150 mg/kg) and the control (61, 67.5, and 68.1 x 10^{6} /ml), it was found that rats given an injection of AlCl₃ (20 mg/kg) had significantly lower epididymal sperm counts (49.6 x 10^{6} /ml). When compared to the AlCl₃-treated group, rats given L-carnitine at 75 and 150 mg/kg had signi-

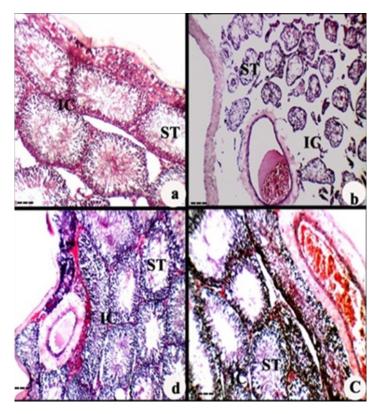


Figure 4. Transverse sections of the testis. **a**, Control, (**b**) $AlCl_3$ injected group, (**c**) L-carnitine (75 mg/kg) treated group after $AlCl_3$ injection, (**d**) L-carnitine (150 mg/kg) treated group after $AlCl_3$ injection. Seminiferous tubule (ST), Interstitial connective tissue (IC). H&E 20 μ m.

ficantly higher sperm counts, reaching 58.4 and 61.1×10^{6} /ml, respectively (Table III).

Sperm motility

The outcomes showed that rats given 75 and 150 mg/kg of L-carnitine following an AlCl₃ injection had higher percentages of motile sperm (68.1 and 68, respectively). Rats injected with AlCl₃ only had a significantly lower percentage of motile sperms (40.6%) than the control group (70) and the L-carnitine group (71.2 and 71) (Table III).

Sperm viability

Sperm smear analysis revealed that while dead sperm were obtained and appeared pinkish, normal live sperm appeared whitish and unstained (Figures 3a and b). The sperm viability of the mice was toxic to the injection of AlCl₃, as Table III demonstrates. This was in contrast to the control group's 71.6% and the L-carnitine-treated group's 70.8% sperm viability. However, after receiving an AlCl₃ injection, treatment with L-carnitine (75 and 150 mg/kg) together improved sperm viability to 69.1 and 68.7%.

Sperm abnormalities

The sperm tail, mid-piece, and head differences between the abnormal sperm in the AlCl₃-injected group and the normal sperm are shown in Figure 3 and Table IV. The percentages and table of total sperm abnormalities revealed a highly significant increase (p<0.01) in the AlCl₃ (20 mg/ kg) group (25.64%) compared to the L-carnitine (75 and 150 mg/kg) (6.04% and 5.2) and control (8.3%) groups. Nevertheless, rats administered 75 and 150 mg/kg of L-carnitine following 20 mg/ kg/day of AlCl₃ demonstrated a noteworthy rise in the quantity of normal sperm and the incidence of sperm abnormality (20.23% and 18.6%).

Histological Examination

Transverse sections through the testicles of male rats given varying doses of L-carnitine (75 and 150 mg/kg) for 60 days revealed a histological

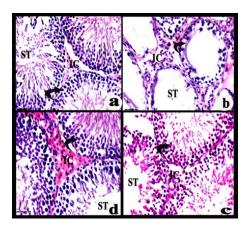


Figure 5. Photomicrographs of transverse sections in the testis. **a**, Control, (**b**) AlCl₃ injected group, (**c**) L-carnitine (75 mg/kg) treated group after AlCl₃ injection, (**d**) L-carnitine (150 mg/kg) treated group after AlCl₃ injection. Seminiferous tubule; (ST), Interstitial connective tissue (IC). H&E 10 μ m.

architecture resembling that of untreated control mice (Figures 4a and 5a). The testis of the rats given L-carnitine treatment and the rats given no treatment are comprised of many seminiferous tubules, round, oval, or elongated, and have multiple layers of spermatocytes, secondary spermatocytes, spermatids, and spermatozoa, as well as an outer membrane (tunica albuginea) composed of connective tissue, including blood vessels. The interstitial cells (Leydig cells) in the intertubular connective tissue are representative of the endocrine portion of the testis. These cells have a dark stain and are tiny and polygonal in shape (Figure 4). The outermost layer of seminiferous tubule cells is called spermatogonia, and they are tiny, spherical cells with spherical nuclei. There are pyramid-shaped Sertoli cells located in between these cells (Figures 4 and 5).

When the testes of the AlCl₃-injected group were examined under a microscope, many degenerated and deformed seminiferous tubules filled with primary spermatogonia alone were visible. These tubules were devoid of sperm formation because the spermatogenic cells had shed their pyknotic nuclei. In the center of the seminiferous tubules, there was an accumulation of the shed cells. Additionally, in certain locations, the germinal epithelium was displaced and positioned erratically on the irregular basement membrane. Furthermore, compared to the normal control rats, the interstitial tissue displayed an edematous stroma containing small groups of Leydig cells. In addition, there was widespread bleeding and dilated, clogged blood vessels in the interstitial tissue. Each of these dose-dependent lesions is shown in a figure based on how frequently they occur (Figures 4b and 5b).

The germinal epithelium of the seminiferous tubules and interstitial tissue, as well as most of the previously mentioned lesions, had improved when the testis of rats given L-carnitine for 60 days following an AlCl₃ injection was examined under a microscope. With almost normal histological architecture and spermatogenic cells

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Treatments	lnitial body weight (g)	Final body weight (g)	Body weight change (g)	Body weight change %
Control	151.2±7.09	193.4±8.08	42.2±2.52	27.91±1.04
L-carnitine (75 mg/kg)	151.2±5.00	192.8±5.13	41.6±1.15	27.51±0.55
L-carnitine (150 mg/kg)	151.6±1.53	196.4±3.06	44.8±4.36	29.55±1.79
AlCl ₃ (20 mg/kg)	151.6±14.89	179.83±16.32	28±1.71	18.46 ± 0.41
AlCl ₃ +L-carnitine (75 mg/kg)	151±11.67	182.44±19.60	31.44±12.78	20.82 ± 4.78
AlCl ₃ +L-carnitine (150 mg/kg)	151.2±6.22	188.4±6.14	37.2±1.87	24.60±0.87
Sig.	0.999	0.748	0.033	0.046

Table I. Mean ± standard deviation (SD) values of initial and final weight, and the percent of body weight changes of male rats..

Mean values were significantly different at $p \leq 0.05$.

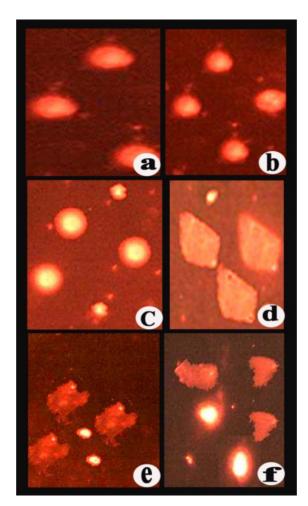


Figure 6. Photographs of comet assay of testis showing DNA damage induced in male rats' testes in different treated groups. **a**, Control, (**b**) L-carnitine 75 mg/kg/day, (**c**) L-carnitine (150 mg/kg/day), (**d**) AlCl₃ injected group (20 mg/kg/day), (**e**) AlCl₃ and L-carnitine (75 mg/kg/day) treated group, and (**f**) AlCl₃ and L-carnitine (150 mg/kg/day).

Table II. Mean \pm SD values of left, right, total testis weights, final body weights and Gonadosomatic index % of male rats.

Treatments	Left testes weight (g)	Right testes weight (g)	Total testes weight (g)	Final body weight (g)	Gonadosomatic index %
Control	3.3±0.16	3.33±0.16	6.56±0.16	193.4±8.08	0.034±0.001
L-carnitine (75 mg/kg)	3.2±0.06	3.23±0.16	6.4±0.15	192.8±5.13	0.033±0.02
L-carnitine (150 mg/kg)	3.3±0.10	3.33±0.06	6.56±0.09	196.4±3.06	0.033±0.03
AlCl ₂ (20 mg/kg)	2.5±0.66	2.56±0.53	5.07±0.59	179.83±16.32	0.028±0.02
AlCl ₃ +L-carnitine (75 mg/kg)	2.63±0.25	2.80 ± 0.08	5.43±0.15	182.44±19.6	0.029 ± 0.08
AlCl,+L-carnitine (150 mg/kg)	2.67±0.26	2.83±0.3	5.71±.18	188.4±6.14	0.031±0.07
Sig.	0.030	0.027	0.010	0.748	0.434

Mean values were significantly different at $p \le 0.05$.

(spermatogonia, primary and secondary spermatocytes) arranged normally between Sertoli cells, the majority of seminiferous tubules appeared. They also had mature spermatozoa filled in their lumina. Although some cells remain detached and atrophied, L-carnitine's repairing effects against $AlCl_3$ are noteworthy (Figures 4c-d and 5c-d).

Table III. Mean \pm SD values of sperm count (X 10⁶/mm³) and motility of male rats of traits as affected by AlCl₃ individually or co-administered with L-carnitine.

		Progressive		
Treatments	Countx10 ⁶	Motility %	Viability %	
Control	66.1±1.53ª	70.0 ± 2.08^{b}	71.6±6.66ª	
L-carnitine (75 mg/kg)	67.5±2.08ª	71.2±1.53ª	71.7±2.52ª	
L-carnitine (150 mg/kg)	68.1±1.0ª	71.0±1.53ª	70.8±1.53 ^b	
AlCl ₂ (20 mg/kg)	49.6±8.02°	40.6 ± 4.349^{d}	41.6±3.87 ^d	
AlCl ₃ + L-carnitine (75 mg/kg)	58.4±4.40°	68.1±4.113°	69.1±4.65 ^b	
AlCl ₃ + L-carnitine (150 mg/kg)	61.1±6.76 ^b	68.0±3.834 ^b	68.7±4.32°	
Sig.	0.0001	0.0001	0.0001	

Mean values with superscript letters in the same column were significantly different at $p \le 0.05$. The letters (a: the highest to d: the lowest) represent the significant mean values obtained from the Post Hoc Tests (Duncan).

Table IV. Mean \pm SD values of sperm abnormality types in male rats.
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	Head abnormality %			Mid-piece	Tail	Total	
Treatments	Hookless	Haammer	Banana	Amorphous	abnormality %	abnormality %	abnormality sperm %
Control	1.1±0.577	1.1±0.58	1.0±1.0	1.0±0.577	2.10±0.100 ^d	2.1±0.58	8.4±2.08
L-carnitine (75 mg/kg)	2.5±0.577	$0.0{\pm}0.0$	1.0 ± 0.58	$0.0 {\pm} 0.0$	1.20±0.10 ^e	2.1±0.58	6.8±0.58
L-carnitine (150 mg/kg)	1.1 ± 0.000	$0.0{\pm}0.0$	$0.0{\pm}0.0$	1.0 ± 0.58	$1.00{\pm}0.10^{f}$	2.8±0.58	5.9±0.58
AlCl, (20 mg/kg)	4.6±2.160	3.1±0.58	4.0±0.82	3.2±1.50	5.60±0.08ª	4.6±0.58	25.14±2.63
AlCl ₃ + L-carnitine (75 mg/kg)	3.4±1.155	3.5±0.58	2.0±0.58	3.1±0.82	4.10±0.08°	4.1±0.50	20.23±2.22
AlCl + L-carnitine (150 mg/kg)	3.0±1.095	3.0±0.55	2.0±0.71	3.1±0.84	4.26±0.11b	2.7±0.45	18.1±2.39
Sig.	0.002	0.002	0.005	0.005	0.0001	0.145	0.002

Mean values with superscript letters in the same column were significantly different at $p \le 0.05$. The letters (a: the highest to f: the lowest) represent the significant mean values obtained from the Post Hoc Tests (Duncan).

Table V. Mean \pm SD values of comet assay	y in the s	perm of male albino rats.
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Treatments	Comet %	Tail length	Tail moment
Control	13.20 ± 0.20^{d}	7.60±0.21 ^{b,c}	1.77±0.07 ^b
L-carnitine (75 mg/kg)	13.10 ± 0.21^{d}	7.20±1.36 ^{b,c}	1.07±0.27 ^b
L-Carnitine (150 mg/kg)	11.60±0.30 ^e	7.0±2.82°	0.97 ± 0.01^{b}
AlCl ₃ (20 mg/kg)	22.0±0.64ª	9.30±0.10 ^a	2.92±0.12ª
AlCl ₂ +L-carnitine (75 mg/kg)	19.50±0.55 ^b	$8.50{\pm}0.61^{a,b}$	1.90±0.14 ^b
AlCl ₊ +L-carnitine (150 mg/kg)	17.40±0.26°	7.90±0.68 ^{b,c}	1.88 ± 0.19^{b}
Sig.	0.001	0.010	0.021

Mean values with small superscripts in the same column were significantly different at $p \le 0.05$. The letters (a: the highest to c: the lowest) represent the significant mean values obtained from the Post Hoc Tests (Duncan).

Comet Assay

The length of DNA migration and the percentage of migrated DNA in the testicles of rats in each group were used to quantify and qualitatively assess the degree of DNA damage in the cells. Three comet parameters were the tail moment, the olive tail moment, and the percentage of tail DNA used to quantify each comet. AlCl₃ caused a statistically significant (p<0.05) and highly significant (p<0.01) increase in the average comet percent in the control and L-carnitine groups, from 13.2 and 13.1 and 11.6, respectively, to 22.1, according to the comet assay.

In contrast, groups that received an AlCl₃ injection (20 mg/kg) and then L-carnitine treatment (75 and 150 mg/kg) demonstrated improvements in comet percent (19.5 and 17.4). While the co-administered groups L-carnitine (75 and 150 mg/kg) after AlCl₃ injection showed significant change in comparison with the control (8.5 and 7.9), the tail length of the AlCl₃ injected group increased significantly (9.3) compared to the control

and L-carnitine groups (7.6, 7.2, and 7.0). In contrast to the control group (1.77) and the L-carnitine groups (1.07 and 0.97), the percentage of DNA in the comet tail increased significantly in the AlCl₃ injected group (2.92); however, the L-carnitine (75 and 150 mg/kg) treated groups after AlCl₃ injection demonstrated a significant change (1.9 and 1.88) in comparison with the AlCl₃ group (Table V and Figure 6).

Discussion

Excessive consumption of aluminum causes accumulation in target organs and has been linked to harming the tissues of the testicles in both humans and animals³⁸. Lately, with L-carnitine and its derivatives have been proposed as a candidate for treating male infertility, and several published human and animal studies³⁹ suggest that carnitine may have some utility. L-carnitine is widely found in nature, and people are becoming aware of its possible health advantages. It was discovered that only L-carnitine was bioactive, that it could speed up lipid metabolism, and that it shuttles activated long-chain fatty acids into the mitochondria. It is a tiny, water-soluble molecule crucial to the metabolism of fat in mammals⁴⁰. L-carnitine and its derivatives exhibit a wide range of biological activities, including an anti-peroxidative effect on several tissues and antioxidant and anti-inflammatory effects on various pathophysiological conditions^{41,42}. L-carnitine has been demonstrated to be effective in treating varicocele, a major cause of male infertility, and in preventing oxidative damage to sperm, thereby improving sperm quality^{43,44}. In this study, rats administered varying dosages of L-carnitine alone exhibited a noteworthy rise in their body weight gain when juxtaposed with the control cohort. These findings are consistent with research conducted by Coşkun et al45, which showed that male albino rats given a cisplatin injection and then given acetyl L-carnitine treatment experienced a decrease in body weight.

When compared to the control group in the current study, the AlCl₃-injected group did not exhibit a significant increase in weight gain. These findings are consistent with the findings of Entissar et al⁴⁶, who used 80 mg/kg of AlCl₃ for 60 days. Previous studies⁴⁷ have reported a significant decrease in serum testosterone levels in rats treated with AlCl₃, which is in line with our investigation. FSH and LH levels significantly decreased after oral administration of AlCl₃ (100 mg/kg

wt) for eight weeks in male rats, as reported by Ige and Akhigbe⁴⁸, indicating that male rats exposed to AlCl, were rendered infertile. The findings demonstrated that aluminum chloride significantly decreased the average body weight. In the current study, rats given AlCl, injections had significantly lower testis weights and gonadosomatic indices. The findings of Entissar et al⁴⁶ are consistent with this one. They discovered that rats treated with aluminum chloride at a dose of 80 mg/kg experienced a significant decrease in testicular size and weight, as well as a significant decrease in sperm counts and the percentage of live sperm, along with a significant increase in the percentage of morphologically abnormal sperm. Additionally, male rats exposed to AlCl, experienced a marked decrease in body weight along with a significant reduction in the weight of their relative genital organs, such as the testis and epididymis^{38,49}. Rats treated with AlCl, showed decreased sperm count and motility, which is consistent with earlier findings^{38,50,51}. Furthermore, as several studies^{47,52,53} have shown in the past, giving rats AlCl, causes the spermatogenic cells to degenerate and the seminiferous tubules to atrophy.

Conversely, the current findings demonstrated that after receiving an AlCl₃ injection, animals treated with 75 and 150 mg/kg of L-carnitine exhibited significant improvements in all sperm parameters. Similarly, L-carnitine was found to significantly suppress changes in sperm properties observed in mice exposed to cisplatin and gamma irradiation, indicating a decrease in sperm abnormalities and an increase in sperm motility and count^{54,55}. Additionally, rats were administered 500 mg/kg b.w. L-carnitine intraperitoneally for 16 days to prevent cadmium-induced reproductive toxicity demonstrated an increase in caudal epididymis sperm viability and quantity⁵⁶. Additionally, Yaman and Topcu-Tarladacalisir⁵⁷ observed that rats treated with L-carnitine prior to prepubertal cisplatin injection had increased epididymal sperm count and viability during the adult period. Similar to this, Khushboo et al⁵⁸ employed oral administration of 50 and 100 mg/kg L-carnitine dissolved in 0.9% saline water for 30 days in male albino rats. This prevented the detrimental effects of prolonged copper consumption on sperm quality, including concentration, viability, motility, and morphology. Indeed, it has been proposed⁵⁹ that low carnitine levels are a contributing factor to sperm disorders like asthenospermia and azoospermia. Similar to this, numerous studies⁴⁵ have shown that in rats treated with cisplatin and sacrificed after 72 hours, the amount, motility, and maturity of spermatozoa are influenced by the free carnitine levels in the epididymis.

For example, during sperm metabolism, the spermatozoa utilize the energy supplied by carnitine and acetylcarnitine, which has a beneficial effect on the entire spermatogenic process. In line with these findings, Adewoyin et al⁶⁰ reported that regular carnitine and acetylcarnitine consumption improves sperm quality and function. Furthermore, a prior investigation conducted by Banihani et al⁶¹ demonstrated that human spermatozoa motility was significantly enhanced by an L-carnitine dosage of 0.5 mg/mL (5x10⁶ cells/ mL). Actually, the capacity of high doses of L-carnitine to bind to Ca_2^+ , an essential ion required for sperm motility, may be the primary cause of their deleterious effects⁶¹. From what has been said thus far, it is evident that L-carnitine and its esters, acetyl-L-carnitine and propionyl-L-carnitine, are useful in improving sperm parameters, especially total and progressive motility, lowering ROS levels in seminal fluid, and potentially enhancing semen quality. Therefore, the use of these molecules, either separately or in combination, is a sensible and successful therapeutic approach for treating male infertility. Nevertheless, given the evidence of L-carnitine's calcium chelator activity, which may determine cell damage and lower serum calcium levels, clinical benefits should not be obtained at high doses⁶². The testis from rats given an AlCl₂ injection underwent microscopical analysis, which revealed that the treatment resulted in testicular damage in the form of atrophied seminiferous tubules, focal disorganization of seminiferous tubules, and a notable reduction in the populations of spermatogenic cells. Several of the seminiferous tubules showed signs of tubular luminal exfoliation of the damaged spermatocytes and spermatids. Additionally, the intertubular connective tissue became clogged and displayed a relative decrease in Leydig cells, which are interstitial cells. When compared to the AlCl₂-treated group in our study, the testicular histoarchitecture of the animals treated with L-carnitine and AlCl, improved. This is in line with the findings of Coşkun et al45, who discovered that administering L-carnitine showed protective effects against radiation-induced damage and mitigated the reduction in germ cell numbers and morphological damage in testicular tissues. This apoptosis may also be facilitated by the anti-apoptotic effect(s) of carnitine in the testis⁴⁵. The advantages of the comet assay include its sensitivity in identifying

even minute amounts of DNA damage, its small cell count requirement, its flexibility, affordability, ease of use, and quick experiment completion⁶³. Since a higher percentage of tail DNA was seen in the treated L-Carnitine (75 and 150 mg/kg) after AlCl, injection groups in the current study than in the control and L-Carnitine groups, there was evident DNA degradation in the nuclei. Conversely, animals that received AlCl, and L-carnitine at the same time had better DNA integrity. Similarly, Lewis et al⁶⁴ reported that L-carnitine may protect spermatozoa against oxidative DNA and membrane damage by reducing singlet oxygen and the detrimental effects of lipid peroxidation on sperm. It has been shown⁶⁵ that L-carnitine improves antioxidant status, lowers oxidant production during stress, and protects cells against free radicals and mitochondria-induced nuclear DNA damage.

Carnitines protect the sperm and cell membrane from ROS-induced DNA fragmentation and apoptosis in this way⁶⁰. Acetyl L-carnitine has been demonstrated⁶⁵⁻⁶⁷ to improve mitochondrial functions by reducing stress-mediated DNA damage through reducing the production of oxidants and enhancing antioxidant status, as well as protecting cells against nuclear DNA damage caused by free radicals and mitochondria. Numerous investigations^{68,69} have shown that the amount, motility, and maturity of spermatozoa are influenced by the free carnitine levels in the epididymis.

Conclusions

The current study's findings unequivocally show that male rats exposed to AlCl₃ experienced reproductive toxicity. Treatment with L-carnitine alleviated these symptoms, suggesting that L-carnitine is an antioxidant that guards against AlCl₃-induced male reproductive toxicity. Therefore, a thorough investigation of the molecular and metabolic mechanisms connected to AlCl₃ is necessary. To assess the protective or preventive effects of various antioxidants against the reproductive toxic effect of AlCl₃, more research utilizing different parameters, such as antioxidant measurements, is advised. Consuming foods high in L-carnitine is necessary to lessen the negative effects of AlCl₃.

Conflict of Interest

The author declares that there is no conflict of interest.

Informed Consent

Not applicable ...

Ethics Approval

This study involving animal participants was approved by the Committee of Health Research Ethics, Deanship of Scientific Research, Qassim University, with ethical committee approval IP (IRP No. 23-41-14).

ORCID ID

Fawiziah Alharbi: 0009-0004-3048-201X.

Authors' Contributions

FA- designed study protocol, writing the manuscript. The author approved the final version of the article to be published.

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Availability of Data and Materials

All data generated or analyzed during this study are included in this published article.

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