

EFFECT OF SOME ANTIMICROBIAL AGENTS ON MACROPHAGE FUNCTIONS

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ABSTRACT

six antimicrobials (azlocillin, ceftriaxone, clindamycin, cefodizim, norfloxacin and ofloxacin) were tested in vitro in concentrations equal to their therapeutic serum levels on three aspects of macrophage function, in order to evaluate phagocytosis of heat-killed Candida albicans, NBT reduction and macrophage production of migration inhibition factor. Clindamycin, cefodizim and ceftriaxone, in that order, exerted a significant stimulatory effect on macrophage phagocytosis. Clindamycin, ceftriaxone, cefodizim and ofloxacin were stimulatory to macrophage NBT reduction. Again, clindamycin was the antimicrobial with maximal stimulatory effect on MIF production by peritoneal mice macrophages, followed by cefodizim and ceftriaxone.

INTRODUCTION

From clinical experience, it is well known that, a functional host defense system is required or antimicrobial chemotherapy to be effective. Antimicrobials may have a significant bactericidal effect in vitro, but the effect in vivo may sometimes be disappointing. This is especially true in immunocompromised hosts.

Among specific host mechanisms of defense against infections, phagocytic cells provide a remarkable tool against a wide range of microorganisms. Polymorphonuclear leucocytes play a major role in the body's defense against acute infectious processes, while mononuclear phagocytes are concerned principally with the control of microorganisms which are able to survive intracellular residence and against which neutrophils are ineffective (Drutz and Mills, 1978). Antimicrobials may have a direct effect upon host cells including phagocytes, and it is im-

portant to understand the potential beneficial and deleterious effects of antimicrobials on the host's immune response.

AIM OF THE WORK

The aim of this work is to study the effects of six antimicrobial agents on macrophage functions by assessing the following tests:

1. Phagocytosis of heat-killed *Candida*.
2. Nitro-blue tetrazolium reduction test.
3. Migration inhibition test.

MATERIAL AND METHODS

Six antimicrobial agents, namely Azlocillin (Bayer), Norfloxacin (MSD), Ofloxacin (Hoechst), Ceftriaxone (Hoffmann La Roche), Cefodizim (Hoechst) and Clindamycin phosphate (Upjohn) were studied. The concentrations of these antimicrobials were adjusted to be the same

as their recommended therapeutic serum levels as follows:

Azlocillin	12.5 µg/ml.
Norfloxacin	2 µg/ml.
Ofloxacin	2 µg/ml.
gceftriaxone	125 µg/ml.
Cefodizim	5 µg/ml.
Clindamycin	15 µg/ml.

Macrophages were prepared from the peritoneal exudate of mice, according to the method described by Hamblin (1981).

1. PHAGOCYTOSIS OF HEAT-KILLED CANDIDA ALBICANS: (warren et al., 1967)

Materials:

1. Hank's solution pH 7.2.
2. Candida albicans suspension 5×10^6 cells/ml.
3. Peritoneal macrophage of mice in Hank's solution 2×10^6 cells/ml.
4. Antimicrobial solutions in their therapeutic serum levels.
5. Pooled normal sera.

Method:

1. To a duplicate set tubes we added:
 - a- 0.25 ml of macrophage suspension (2×10^6 cells/ml).
 - b- 0.25 ml of pooled normal human serum.
 - c- 0.25 ml of Hank's balanced salt solution.
 - d- 0.25 ml of heat-killed Candida suspension (5×10^6 cells/ml).
2. 0.25 ml of the tested antimicrobial agent at its therapeutic serum level was added to one set of tubes.
3. The tubes were then incubated at 37°C FOR 30 minutes and then centrifuged at 200 g for 5 minutes. The supernatant was removed, leaving a drop into which the sediment was resuspended.
4. Smears were prepared from the deposit, left to dry in air, and stained with May Grunwald-Giemsa.

5. 200 macrophages were examined, the number of ingested Candida associated with each cell was counted, and the mean particle number associated with each cell was calculated.

II. NITRO BLUE TETRAZOLIUM TEST: (wilkinson, 1981)

Materials:

1. Nitro-blue tetrazolium (British Drug Houses).
2. Macrophage suspension (5×10^6 /ml) in PBS.
3. The tested antimicrobial agents in their therapeutic serum levels.

Method: (Unstimulated NBT)

1. To a duplicate set of tubes, we added:
 - a- 0.5 ml of macrophage suspension in PBS (5×10^6 /ml).
 - b- 0.2 ml of the freshly-made-up 0.15% NBT solution.
2. To one set of tubes we added 0.2 ml of the tested antimicrobial agents at their therapeutic serum level.
3. The tubes were then incubated at 37°C for 20 minutes, spinned gently at 400 g for 3-4 min. and the supernatant was removed. A drop of PBS was added to resuspend the cells.
4. A film was made, fixed by gentle heating and counterstained with dilute carbol-fuchsin.
5. Using a 100x oil-immersion objective, 200 macrophages were counted, and the percentage of NBT-positive cells containing blue deposits was determined.

III. MIGRATION INHIBITION TEST: (Hamblin, 1981)

Materials:

1. Disposable migration plates with 12 chambers (sterilin).
2. Microcapillaries (Drummond «Micro-Caps» 20 µl).
3. P.H.A. Containing culture supernatants.

4. Culture medium containing serum (fetal calf serum).
5. Peritoneal macrophage of mice (3×10^7 cells /ml).
6. The tested antimicrobial agents at their therapeutic serum levels.
7. Culture supernatant containing M.I.F.

Method:

1. Microcapillaries were filled with a cell suspension (peritoneal macrophages in medium plus serum at suitable final cell concentration (3×10^7 cells /ml.).
2. The tested antimicrobial agent at its therapeutic serum level was added to the peritoneal cells suspension, and another sets of microcapillaries were filled with this suspension.
3. The microcapillaries were centrifuged at 300 g for 5 minutes at room temperature, and then the capillaries were scored at the cell-fluid interface using a diamond pen. The capillaries were then broken at the scoreline with forceps.
4. One capillary tube was then mounted in a migration chamber and the culture supernatant containing the M.I.F. was added to the well.
5. The migration chamber was covered with cover-slip ensuring an air-tight seal without bubbles.
6. The plate was then incubated at 37°C overnight (15- 18 h).
7. The areas of migrating cells were projected onto plain paper, and the outer margin of the migrating fan was drawn.
8. The area of migration was then determined by planimetry. The results were expressed as the mean migration area, or as the migration index (MI) as follows:

$$\text{MI} = \frac{\text{Mean area of migration in presence of antimicrobial agent}}{\text{Mean area of migration in control chambers}}$$

or as % of migration = M.I. X 100.

RESULTS

1. TESTS FOR MACROPHAGE PHAGOCYTOSIS OF HEAT-KILLED CANDIDA (Table 1)

a. Azlocillin ($12.5 \mu\text{g/ml}$) when added to macrophage suspension resulted in no significant effect on macrophage phagocytosis of Candida compared to the control test.

The phagocytic index (mean number of killed Candida phagocytosed by 200 macrophages) in the control test was 3.545 ± 0.23 Candida/cell, while in the azlocillin test it was 2.84 ± 0.43 Candida/cell. Applying the student t test to compare the results in the 2 groups, it was found that $t = 0.27$ $p > 0.05$ (insignificant).

B. Ceftriaxone. Two concentrations were tested:

1- At $125 \mu\text{g/ml}$ concentration, there was no increase in macrophage phagocytosis ($p > 0.05$).

2- At $250 \mu\text{g/ml}$ concentration, there was a highly significant enhancement of macrophage phagocytosis ($p < 0.01$).

c. Clindamycin phosphate $15 \mu\text{g/ml}$ showed a very highly significant enhancement ($P < 0.001$).

d. Cefodizim $5 \mu\text{g/ml}$ showed no significant enhancement on macrophage phagocytosis ($P < 0.05$).

e. Norfloxacin $2 \mu\text{g/ml}$ showed no significant enhancement on macrophage phagocytosis ($P > 0.05$).

f. Ofloxacin $2 \mu\text{g/ml}$ showed also no significant enhancement ($P > 0.05$).

Table (1): Effect of antimicrobials on macrophage phagocytosis of heat-killed *Candida*.

Anti-Microbial	Concentration µg/ml	Mean No. of killed <i>Candida</i> /macrophage «Phagocytic Index»	Student t test (Fiona, 1984)	P
Control	-	3.545	-	—
Azlocillin	12.5	2.84	0.27	> 0.05
Control	—	2.82	—	—
Ceftriaxone	125	3.05	10.05	> 0.05
Ceftriaxone	250	3.57	4.05	< 0.01
Control	—	2.594	—	—
Clindamycin	15	3.445	8.1	< 0.001
Control	—	2.574	—	—
Cefodizim	5	3.245	4.6	< 0.01
Control	—	2.614	—	—
Norfloxacin	2	2.615	0.9	> 0.05
Control	—	2.614	—	—
Ofloxacin	2	2.845	1.83	> 0.05

Table (2): Effect of antimicrobials on macrophage NBT reduction.

Anti-Microbial	Concentration µg/ml	Percentage No. of cells containing formazan granules	Z test (Fiona, 1984)	P
Control	-	20.9	-	-
Azlocillin	12.5	18	0.75	> 0.05
Control	-	20.9	-	-
Ceftriaxone	125	57	7.6	< 0.01
Control	-	24	-	-
Clindamycin	15	73	10.6	< 0.001
Control	-	24	-	-
Cefodizim	5	50	5.3	< 0.001
Control	-	24	-	-
Norfloxacin	2	19	1.2	> 0.05
Control	-	24	-	-
Ofloxacin	2	50	5.3	< 0.001

Table (3): Effect of antimicrobials on macrophage production of migration inhibition factor.

Anti-Microbial	Concentration $\mu\text{g/ml}$	Mean % of migration	Z test**	Significance
Azlocillin	12.5	137	- 1.87	Insignificant inhibition
Ceftriaxone	125	33.7	2.36	significant production
Clindamycin	15	13.7	2.36	Highly significant production
Cefodizim	5	22.2	2.36	Highly significant production
Norfloxacin	2	136	- 1.74	Insignificant inhibition
Ofloxacin	2	107.5	V- 0.498	Insignificant inhibition

*Mean % of migration =
Mean area of migration in antimicrobial plate

Table (4): summary of the effects of the six antimicrobials on the three tests performed.

Antimicrobial	Phagocytosis of heat-killed Candida	NBT test	Migration inhibition test
Clindamycin	++++	++++	++++
Cefodizim	+++	++	+++
Ceftriaxone 125 $\mu\text{g/ml}$	+	+++	+++
Ceftriaxone 250 $\mu\text{g/ml}$	++	N.D.	N.D.
Azlocillin	---	---	---
Norfloxacin	--	-	--
Ofloxacin	—	+	-

+ = Significant stimulatory effect.
- = Inhibitory effect.
N.D.= Not done.

II. TEST FOR MACROPHAGE NITRO - BLUE TETRAZOLIUM REDUCTION (NBT TEST) : (Table 2)

Azlocillin and norfloxacin showed an insignificant stimulatory effect in the NBT test ($P > 0.05$), all other chemobiotics tested showed a very highly significant stimulation of macrophage NBT reduction ($P < 0.001$) in this order : Clindamycin showed the most significant stimulatory effect, followed by ceftriaxone, then cefodizim, then ofloxacin.

III. TEST FOR MACROPHAGE MIGRATION INHIBITION : (Table 3)

Azlocillin, norfloxacin and ofloxacin showed an inhibitory effect on the production of migration inhibition factor (MIF) by peritoneal mice macrophages in the following order : Ceftriaxone (125 $\mu\text{g}/\text{ml}$) had a significant stimulatory effect on the production of MIF, cefodizim showed a highly significant stimulatory effect, while clindamycin phosphate showed the most statistically significant effect on MIF production.

Table (4) summarizes all the effects of the six antimicrobials studied on the three facets of macrophage function tested.

DISCUSSION

Traditionally, selection of an antimicrobial agent has been based on one criterion : the direct antimicrobial activity of the chemobiotic against the pathogen (expressed as MIC). Recent *in vitro* studies suggest that some antimicrobials may work to enhance the activity of certain components of the host's defense system as well as to weaken the pathogen's resistance to them. Antibiotic selection, therefore, should be based not only on the direct effect of the antibiotic

on the bacteria, but also on the relationship between the antibiotic and the host's defense mechanism.

Previous studies of the effects of antimicrobial agents and macrophage functions showed the following results :

1. Clindamycin phosphate : Preincubation of organisms with clindamycin phosphate led to an increase in phagocytosis and early intracellular killing by alveolar macrophages (Hand et al., 1984).
2. Cefodizim : Cefodizim interacts with NMRI mice peritoneal macrophages *in vivo* by increasing their secretory activity of acid hydrolases. Marked changes in the levels and distribution of the activities of the lysosomal enzyme were induced. There was an increase of secreted enzyme activity after intravenous and subcutaneous administration (Limbert et al., 1984).
3. Pefloxacin : Both low and high concentrations of pefloxacin significantly increased the phagocytic capacity and activity of alveolar macrophages (Desnottes et al., 1986).
4. Ceftrazidime : A subinhibitory concentration of ceftrazidime resulted in enhanced phagocytosis of bacteria by peritoneal mouse macrophages (Cuffini et al., 1982).
5. Cephalothin : After an initial 2 h incubation with alveolar macrophages, the growth of surviving intracellular staphylococcus aureus aureus was examined in the presence of subinhibitory concentrations of cephalothin. No inhibition of growth was seen (Elliott et al., 1982).
6. Aminoglycosides : Gentamycin and netilmicin were found to inhibit macrophage phagocytosis in different ways in high concentrations, while sisomicin did not affect the same function. Intracellular killing of *Candida albicans* by peptone-elicited macrophages was not affected by incubation with different aminoglyco-

sides (Lannello et al., 1982).

7. Penicillin : No inhibition of growth was seen in surviving intracellular *Staphylococcus aureus* examined in the presence of subinhibitory concentrations of penicillin (Elliott et al., 1982).

8. Nafcillin : Warran and Gray (1967) reported that the addition of nafcillin to the incubation medium enhanced *Staphylococcal* phagocytosis by mouse macrophages .

To date, there are no available studies concerning the effects of azlocillin, norfloxacin, ofloxacin and ceftriaxone on macrophage functions. Clindamycin phosphate and cefodizim were tested for their effects on other immune parameters. The results showed that, clindamycin potentiates opsonization of *Streptococcus pyogenes* (M - type 6) by human complement and subsequent phagocytosis by freshly isolated human PMN in vitro. It was found that the potentiation of phagocytic uptake was dependent on the length of time that the bacteria were in contact with the antibiotic (Gemmell et al., 1981). In another study, incubation of strains of group A *Streptococcus* or *S. pneumoniae* in subinhibitory concentrations of clindamycin reduced formation of the M and C antigens in the organisms. Treated organisms were phagocytosed and killed more readily (Gemmell et al., 1980) .

Forsgren et al. (1980), reported suppressed lymphocyte transformation to PHA with clindamycin, but only at a very high concentration (50 ug / ml) of the drug. As regards cefodizim, it was found that, lymphocytes from Bulb / C mice treated with 3 and 30 mg / g / day of cefodizim display increased responsiveness to B - cell mitogen and specific antigens. The amount of antigen - specific antibody producing plaque - forming cells was increased and was accompanied by a rise in the specific IgG hemagglu-

ination titer (Limbert et al., 1984) .

In this study, clindamycin showed the most statistically significant enhancement effect on the three performed tests. Cefodizim showed a statistically significant enhancement of both phagocytosis of killed *Candida* and macrophage migration inhibitor tests, but less stimulatory effect on NBT reduction .

Ceftriaxone showed a statistically significant enhancement effect on the NBT reduction test and to a less extent on both phagocytosis of killed *Candida* and macrophage migration inhibition tests . Its effect on the phagocytosis of killed *Candida* was dose - dependent i. e., a significant stimulatory effect was observed at a dose of 250 ug / ml, but not at 125 ug / ml .

On the other hand, azlocillin showed inhibitory effects on the three tests performed followed by norfloxacin .

Ofloxacin showed a slightly significant stimulatory effect on NBT reduction, and a slightly inhibitory effect on phagocytosis of killed *Candida* and macrophage migration inhibition tests .

Antimicrobials which stimulate phagocytosis may have a direct effect on phagocytic cells, or they may act by affecting the cell wall antigens of the organism, making them easily opsonized and phagocytosed by phagocytic cells .

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تأثير بعض المضادات الحيوية على وظائف الخلايا الأكلة

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تم فى هذا البحث اختبار ستة مضادات حيوية وهى الازلوسيلين والسيفتيراكزون والكلندا ما يسين والسيفودكسيم والنورفلوكسين والافلوكساسين بتركيزات تعادل مستواهم فى المصل فى الجرعات العلاجية على بعض وظائف الخلايا الاكلولة بفرض تقويم تأثير هذه المضادات الحيوية عليها . وقد وجد بالبحث ان كل من الكلندا ما يسين والسيفودكسيم والسيفتيراكزون والافلوكساسين لهم تأثيرات ايجابية على الخلايا الاكلولة بمعنى ان فى وجود احدهم تزداد قدرة الخلايا الاكلولة على التهام البكتريا . ووجد ايضا ان الكلندا ما يسين كان له اكبر الاثر فى زيادة انتاج المعامل المثبط لهجرة الخلايا الاكلولة فى الفيران ويأتى بعده السيفودكسيم ثم السيفتيراكزون .