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Toxicogenetic study of omeprazole and the modulatory effects of retinol palmitate and ascorbic acid on *Allium cepa*

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Toxicogenetic study of omeprazole and the modulatory effects of retinol palmitate and ascorbic acid on *Allium cepa*

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1 Abstract

Omeprazole (OME) is a proton pump inhibitor used for treatment of various gastric and 2 intestinal disease; however, studies on its effects on the genetic materials are still restricted. 3 4 The present study aimed to evaluate possible toxicogenic effects of OME in Allium cepa meristems with the application of cytogenetic biomarkers for DNA damage, mutagenic, toxic 5 and cytotoxic effects. Additionally, retinol palmitate (RP) and ascorbic acid (AA) were also 6 7 co-treated with OME to evaluate possible modulatory effects of OME-induced cytogenetic damages. OME was tested at 10, 20 and 40 µg/mL, while RP and AA at 55 µg/mL and 352.2 8 9 $\mu g/mL$, respectively. Copper sulfate (0.6 $\mu g/mL$) and dechlorinated water were used as positive control and negative control, respectively. The results suggest that OME induced 10 genotoxicity and mutagenicity in A. cepa at all tested concentrations. It was noted that 11 cotreatment of OME with the antioxidant vitamins RP and/or AA significantly (p < 0.05) 12 inhibited and/or modulated all toxicogenic damages induced by OME. These observations 13 demonstrate their antigenotoxic, antimutagenic, antitoxic and anticitotoxic effects in A. cepa. 14 This study indicates that application of antioxidants may be useful tools to overcome OME-15 induced toxic effects. 16

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18 Keywords: Antioxidants; omeprazole; vitamins; *Allium cepa*; cytogenotoxicity.

20 1. Introduction

Omeprazole (OME) is used for the treatment of gastrointestinal disorders such as dyspepsia, peptic ulcer, gastroesophageal reflux or *Helicobacter pylori* infection (Kosma *et al.*, 2016; Seoane *et al.*, 2017). It is a proton pump inhibitor (PPI) (Yanagihara *et al.*, 2015), that acts through irreversible blocking of the terminal phase of gastric acid secretion in the gut by inhibiting the H⁺/K⁺ ATPase proton pump in parietal cells. This in turn decreases the amount of acid in the stomach (Paroni Sterbini *et al.*, 2016; Seoane *et al.*, 2017).

Several studies reported that prolong use of OME may cause some abnormalities in the gastric mucosa including parietal cell hyperplasia, dilatation of the canaliculi in the fundus, body and antrum of the stomach, and projection of cytoplasmic protrusions into the lumen of the canaliculi (Kurman, 2013). It is also important to emphasize that at doses of 20 to 40 mg/day, OME can inhibit up to 90% of the 24-hour acid secretion in most patients, resulting in achlorhydria among many patients. This condition long term can lead to gastric cancer (Melbourne, 2013; Lima and Filho, 2014).

OME can also inhibit the gastric acid pump in the parietal cell when it is completely 34 metabolized in the liver releasing sulfone, sulfite and hydroxy-OME, compounds that can 35 generate oxidative damage and induce damage to the genetic materials (Brambilla et al., 36 2009; Downes and Foster, 2015). Thus, toxicogenic studies indicating primary damages that 37 may progress to the stages of carcinogenesis that are necessary for the identification of 38 39 potentially mutagenic chemical agents and to assess risks of genetic instability (Zeiger et al., 2015), including drugs (Lee et al., 2014). Kohler (Kohler et al., 2010) indicated that toxic 40 effectets mediated by chronic OME uses could be minimized using antioxidant therapy. 41 Herein, we planned to evaluate efficacy of two compounds namely retinol palmitate (RP) and 42 ascorbic acid (AA) in preventing the toxicity caused by OME treatment. Both of these 43

compounds are known antioxidant capable of neutralizing free radicals and oxidative stress
(Banala and Karnati, 2015; Shao *et al.*, 2016; Asaikkutti *et al.*, 2016).

Several tests can be used for the evaluation of genotoxic and mutagenic effects, 46 among which *Allium cepa* test is an important test system for the evaluation of cytotoxotoxic 47 effects of various substances that may affect genetic materials (Özkara et al., 2015). The 48 results are correlated with the responses obtained from the tests with mammalian systems 49 (Moura et al., 2016). The comet assay used to detect DNA damage can be applied in root 50 meristems of A. cepa for the evaluation of genotoxic effects of varieties of substances 51 52 (Tu"Rkog Lu 2012; Liman, 2013). We, therefore, set out to evaluate the toxicogenic effects of OME on A. cepa root meristems with the analysis of cytogenetic biomarkers of DNA 53 damage by the application of the comet test (alkaline version) along with its toxic/cytotoxic 54 and mutagenic effects of the micronucleous (MN) test, as well as the structural alterations of 55 chromosomes in the same test system. Beside this the possible effects of RP and/or AA on 56 OME-induced cytogenetic damage on this test system were also evaluated. 57

58

59 2. Materials and methods

60 2.1 Source of A. cepa

Fresh and medium size onions (*A. cepa*) were purchased from the local market in
Piaui, Brazil. The study was carried out at the Laboratory of Research in Toxicological
Genetics, Federal University of Piauí (UFPI), Teresina / PI - Brazil.

64

65 2.2 Reagents and chemicals

OME was purchased from a conventional pharmacy, a production of the Medley
Indústria Farmacêutica Ltd. and solubilized in distilled water to make the final concentrations
of 10, 20 and 40 μg/mL. The usual OME dosage of adult human being ranges from 60 mg to

69 maximum of 360 mg/day (maximum tolerated dose). This led the authors to select a OME concentration range of 10 to 40 µg/mL because this would be more meaningful in 70 extrapolating the results to human. Because the studies involving the use of OME in plant 71 72 systems are limited, the dose of OME was selected by applying various concentrations and subsequent analysis. Similar, even higher, concentration of OME was used for physiological 73 studies in tomato plant (Rouphael et al., 2018). Copper sulphate was purchased from the 74 Sigma-Aldrich (St. Louis, MO, USA) and diluted in distilled water to attain at the final 75 concentration of 0.6 µg/mL. Ascorbic acid (AA) and retinol palmitate (RP) were also 76 77 obtained from the Sigma-Aldrich (St. Louis, MO, USA) and solubilized in phosphate buffer (pH 6.8) and in 0.9% saline plus 10% DMSO to the final concentrations of 35.2 µg/mL and 78 79 55 µg/mL, respectively.

80

81 2.3 Comet assay with A. cepa

The test was performed with onions (five in each group) according to the method 82 described by Liman (2013). After treatment with carnoy solution, the meristematic regions of 83 84 the roots were cut into small pieces and treated with 0.4 M Tris-HCl (pH 7.5) overnight to obtain the nuclear extract. Then, by using 1% low melting point agarose (LMPA: 35 °C), the 85 nuclear extract was spread on the previously prepared slides (2.25 % normal melting point 86 agarose (NMPA: 50 °C) in phosphate buffered saline (PBS; pH: 7.4). The slides were then 87 dried in an oven at 37 °C for 1.5 h and the single gel electrophoresis was performed at 25 V, 88 300 mA for 15 min. The slides were dried as above and then fixed in carnoy solution for 10 89 min. After three baths in distilled water, the slides were stained and followed by the 90 91 photomicroscopic observation with magnification of 400X. The genotoxic profile was determined based on the level of DNA damage as described earlier (Paz et al., 2018). The 92 Index of Damage (ID) was obtained by evaluating the tail type, classified from 0 to 4 (50 93

cells per slide in duplicate) in an optical microscope with the magnification of 1000X. Intact 94 nuclei appear round (Class 0 - no damage), while in the damaged cells, the DNA migrates 95 from the nucleus towards the anode during the electrophoresis, showing a "tail" of 96 sedimented fragments, like a comet: Class 1 (minimum damage) to 4 (maximum damage). 97 Frequency of Damage (FD) was calculated by subtracting cells with zero damage from 100, 98 that is, based on the number of cells with damage vs those without damage. Mitotic Index 99 100 (MI) is a measure of the proliferation status of a cell population. It is the ratio between the number of cells in a population undergoing mitosis to the total number of cells in a 101 102 population. It is determined by analyzing micrographs and counting the relative number of mitotic cells versus non-dividing cells. It is noteworthy to mention that except microscopic 103 observation; the entire operation was performed in the dark. 104

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106 *2.4 A. cepa* test

The A. cepa test was performed according to procedure demonstrated by Islam and 107 coworkers (Islam et al. 2017). After purchasing, the onoins were washed with running tap 108 water; removed the old and dried roots, outer membrane, and central parenchyma of the 109 budding crown (making a small circular incision) to facilitate the absorption of the solutions 110 and the uniformity of budding and root growth. After this process, the onions were exposed 111 to each concentration of OME and/or RP and/or AA, and controls and were held for 48 h in 112 113 the dark at room temperature. After the incubation, the roots were removed and fixed in Carnov solution (methanol and acetic acid) for 24 h; the roots not evaluated immediately 114 were stored in 70 % ethanol for later analysis in the alkaline comet assay (as previously 115 discussed). For the preparation of the slides, the roots were washed with distilled water (3 116 baths of 5 min each) to remove the fix and hydrolyzed with 1 N HCl at 60 °C for 11 min. 117 Next, the roots were removed and washed with distilled water followed by drying at room 118

temperature and transferring to amber colored vials containing Schiff's reagent. Then roots were treated with Schiff's reagent for 2 h followed by washing in running water until complete removal of the dye. The roots were then placed on a slide where the meristematic region was separated, placing a drop of acetic carmine 2% on top and covering with coverslips. The photomicrography was done with an optical microscope at 1000X magnification.

125

126 2.5 Stastical analysis

127 Results are presented as mean \pm standard deviation (SD). The data were analyzed by 128 means of analysis of variance (ANOVA) followed by Tukey, Dunnet and Bonferroni's tests 129 by using GraphPad Prism (version 6.0), considering p < 0.05 with a confidence level of 95%. 130

131 **3. Results**

OME induced damage to the DNA of *A. cepa* root meristem cells at all concentrations tested by increasing the index (ID) and frequency of damage (FD) in comparisn to the negative control (NC) group. However, RP and/or AA co-treatment, as well as the combination of these two vitamins inhibited the damaging effects of OME 10 μ g/mL along with the modulation of 20 μ g/mL and 40 μ g/mL mM OME-induced damage effects in the test system (**Table 1**).

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The modulation of OME-induced genotoxic damage of RP was 18.4 to 27.9%, whereas that of AA was from 13.2 to 25.2%. However, the association of these two vitamins (RP + AA) increased the modulation from 26.7 to 43.7% (**Figure 1**).

[Table 1]

144	
145	[Figure 1]
146	
147	The genotoxic damage could not be repaired because several structural changes in
148	chromosomes in meristems of A. cepa were observed in anaphases, such as micronuclei
149	(MN), bridges, loose chromosomes, and in the delay, are the biomarkers of mutagenicity. The
150	photomicrograph profile of roots meristem cells shown in Figure 2 suggests the formation of
151	MN (A), breaks (B) or loss of chromosomes (C and F) observed in the concentration of OME
152	40 μ g/mL, while D and E indicating chromosomal delay separation.
153	
154	[Figure 2]
155	
156	Mutagenicity of OME and the modulatory effects of RP and/or AA in A. cepa was
157	evaluated in terms of chromosomal alterations (CA) (Figure 3A). Results shows that OME
158	caused dose-dependent (10 to 40 μ g/mL) increase in CAs. These observations are indicative
159	of the increased number of structural changes in chromosomes during the cell division
160	process in A. cepa meristems especially delayed chromosomal separation. Mitotic defects are
161	characterized by several potential outcomes including failed alignment of chromosomes
162	leading to mitotic arrest/delay enforced by the spindle checkpoint. Several such observations
163	are documented in the form of CAs. The co-treatment of A. cepa meristems with OME and
164	RP and AA individually, as well as the combination of OME with RP and AA, showed
165	significant dicrease in CAs (close to NC); howevere, the dose-dependence was not clear.
166	Similarly, the antimutagenic activities of RP and/or AA with OME were observed in A. cepa
167	meristems (Figure 3B). Results show that the co-treatment of OME and RP and AA
168	individually, as well as the combination of OME with RP and AA, showed significant

169	dicrease in mutagenic activity of OME. The percentage ratio for the inhibition of mutagenic
170	events by RP and /or AA varied from 64 to 74.5% as compared to OME.
171	
172	[Figure 3]
173	
174	OME induced toxicity at the two highest concentrations tested (20 and 40 mg/mL) in
175	A. cepa by inhibiting of the root growth (a macroscopic toxicity biomarker). However, in the
176	co-treatment with RP and/or AA, these toxic damages were totally modulated, especially at
177	20 μ g/mL concentration of OME. RP inhibited about 47 to 50% toxicity while AA by 15 to
178	44%. However, their association (RP + AA) modulated the OME induced toxic effects by 43
179	to 65% (Figure 4).
180	
181	[Figure 4]
182	
183	The cytotoxicity in the A. cepa is evaluated by means of the microscopic cell count
184	parameter in the cell division phases. OME induced cytotoxicity only at the highest tested
185	dose (40 μ g/mL) (Figure 5A). However, the cytotoxic effect of OME was modulated by the
186	RP and/or AA within the range of 16 to 28.8% (Figure 5B).
187	
188	[Figure 5]
189	
190	1 Discussion
	+. Discussion
191	Studies of DNA damage at the chromosome level are needed in toxicogenetic
191 192	Studies of DNA damage at the chromosome level are needed in toxicogenetic studies (Sharma <i>et. al.</i> , 2015). In our present study, OME induced genotoxicity by increasing

mutagenicity by changing in chromosoms. Moreover, OME also induced toxicity by inhibiting the root growth at the two highest concentrations, while cytotoxicity with highest concentration. OME can alter the bacterial flora of the gastrointestinal tract leading to malabsorption, enteric infections and cause acute or chronic lesions to the cells of the gastric gland, by the compensatory effect, in response to the decreasing of acid with thrombocytopenia, acute interstitial nephritis, nephrotoxicity and hepatotoxicity, anaphylactic reactions, gynecomastia and impotence (Thomson *et al.*, 2010).

In addition to these adverse effects, OME can cause destruction of gastric gland and persistent hypergastrinemia, better to be termed as 'atrophic gastritis' due to OME monotherapy in the context of *H. pylori* infection, has been associated with an increased risk of mucosal dysplasia and gastric cancers (Kohler *et al.*, 2010; Arai and Gallerani, 2011). OME monotherapy, in the context of *H. pylori* infection, increases the risks for mucosal dysplasia and gastric cancer due to the destruction of the gastric glands and persistent hypergastrinemia, denomination for atrophic gastritis (Kohler *et al.*, 2010).

OME can also induce hiccups or achlorhydria leading to the formation of N-208 nitosamines, which alter the genetic materials due to nuclear abnormalities such as MN, 209 picnoses and karyorrhexis (Novotna et al., 2014). It is evident that OME as well as 210 lansoprazole, pantoprazole, phenolphthalein, rabeprazole and sulfasalazine can cause 211 chromosomal damage (Brambilla et al., 2009), as observed in the present study of the 212 formation of MN, bridges, loose chromosomes and delays. Genotoxic damage is indicative of 213 mutagenic effects and is characterized by agents that cause genetic instability, including 214 chromosomal changes, thus the toxic effects (Adeyemo and Farinmade, 2013). 215

From this study, it is clear that OME induced genetic instability (GI) as it caused damage to DNA and the nuclear abnormalities of chromosomes in *A. cepa*. GI is one of the markers for cancer (Palmeira *et al.*, 2011) and its monitoring is important in therapeutics

especially by changes in chromosomes (Ferguson et al., 2015). Cell division processes often 219 show mistakes which generate changes in chromosome content. Chromosomal segregation 220 errors may produce CA like fragments of whole chromosomes and may lead to like aneuploid 221 or polyploid progeny cells. A major consequence of CA is change in the relative dosage of 222 products from genes located on the missegregated chromosomes (Potapova and Gorbsky, 223 2017). Chromosomal aberrations may cause mutations and initiate the process of 224 carcinogenesis (Burrell and Swanton, 2014) and the tumor progression (Asatryan and 225 Komarova, 2016) through multiple pathways including telomer damage, chromosome 226 227 amplification, epigenetic modifications, DNA damage (Ferguson et al., 2015) and changes in proteins such as DNA polymerase and cofactors and breaks of ribbons (Deshmukh et al., 228 2016). 229

Another consequence of GIs are the risks of cytotoxicity (by apoptosis), with the 230 consequent of inhibition of the mitotic index (MI). Substances that are cytotoxic may inhibit 231 the growth of vegetative organs in some plants (Yıldız et al., 2009). For example, A. cepa 232 (Herrero *et al.*, 2012), as observed in the OME studies at the highest concentration in *A. cepa*, 233 indicates that OME at this concentration may have a mitodepressive action (Sharma and Vig, 234 2012), characterized by the substances that interfere in the normal cell cycle with decreasing 235 in the number of cells. MI can reliably identify the presence of cytotoxic effects of a 236 substance. A 50% reduction in MI when compared to NC is a limiting value: <50% reduction 237 238 induces a sub-lethal effect and <22% causes a lethal effect (Mesi and Kopliku, 2013). A possible OME-mediated cytogenetic events has been shown in Figure 6. 239

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- 241

[Figure 6]

Studies have reported that OME increases apoptosis rates in the treatment of cells 243 together with paclitaxel in chemoresistant cells (HevA8-MDR, SKOV3-TR) and in clear cell 244 carcinoma (ES-2, RMG-1) (Lee et al., 2015). In human gastric cancer cells (HGC-27), OME 245 selectively inhibited cell proliferation (Zhang et al., 2013). In colon carcinoma in a 246 xenographic model, and in colon cells, with increased secretion of gastrin, OME can increase 247 expression of the X-1 immediate response gene (*IEX-1*), a stress-sensitive gene (Müerköster 248 et al., 2008). The apoptotic properties of OME were also suggested by the reduction of Bcl-2 249 (Al-Wajeeh et al., 2017), Bcl-xL and survivin (Patlolla et al., 2012), another antiapoptotic 250 251 protein (Müerköster et al., 2008) and p21 which plays an essential role in stopping the cell cycle after DNA damage (Patlolla et al., 2012). 252

From the above discussion, several mechanisms may be suggested for the genotoxic, 253 mutagenic, toxic and mitogenic effects of OME, however, studies show that OME can 254 amplify the oxidative stress inherent to gastritis, causing lesions in the gastric mucosa 255 (Kohler et al., 2010). These gastric lesions are also characteristic of chronic atrophic gastritis, 256 precancerous ulcers due to an increasing of oxidative stress in gastric pathologies associated 257 with H. pylori (Wadhwa et al., 2013). But there are reports that the drugs may contribute to 258 the elevation of the levels of oxidative stress (Herbet *et al.*, 2016) and that supplementation 259 with these antioxidants ensures the equilibrium of reactive oxygen species (ROS) with the 260 modulation of oxidative stress (Murphy-Marshman et al., 2017). 261

Thus, OME may cause DNA damage, possibly by unrepaired, while mutagenicity by changing the chromosomal structure observed in anaphases and cytotoxicity by interfering cell division. However, these toxicogenic changes were inhibited and/or modulated by the action of vitamins (RP and/or AA), demonstrating that these vitamins have antigenotoxic, antimutagenic, antitoxic and anti-toxic effects. In order to minimize these changes, there may

induce equilibrium mechanisms between the antioxidant and pro-oxidant effects and are ableto neutralize the ROS (Portantiolo *et al.*, 2014).

The RP has ROS neutralizing capacity as it reduces oxidative and nitrosative effects 269 (Moraes et al., 2016), decreases lipid peroxidation, stimulates antioxidant enzymes (Cha et 270 al., 2016), and it acts on the cell cycle (Shao et al., 2016), mitochondrial dysfunction and 271 cellular apoptosis (de Oliveira, 2015). Studies in clinical trials have shown that retinoids are 272 active in the reduction of some primary cancers, such as tumors of the digestive tract, lung 273 and hepatocellular carcinomas (Lee et al., 2010). Thus, despite many controversies, vitamin 274 A precursors such as retinol, RP and carotenoids may be applied in cancer therapies 275 (Felisbino et al., 2014; Rahal et al., 2014), due to its antiproliferative, antioxidant, pro-276 apoptotic and cell differentiation induction effects (Persaud et al., 2016) 277

Like RP, AA can interact with free radicals, sequester them and prevent oxidation and damage to DNA, as well as being able to modulate the enzymatic system that generates free radicals and increases SOD activity as a donor of electrons and reducing agent in various biological reactions in the body preventing the oxidation of lipids, proteins and DNA (González-Fuentes *et al.*, 2015; Estevinho *et al.*, 2016). There are reports of the use of AA for the treatment of *H. pylori* eradication in case of gastritis, may increase the effectiveness rate of treatment with PPIs and modulates oxidative effects of OME (Zojaji *et al.*, 2009).

However, the observed effects of RP and/or AA were more prominent with the modulation of up to 70% of OME-induced mutagenicity in *A. cepa*. There are reports that the association of vitamins has importance in the protection and inhibition of oxidative effects (Sun *et al.*, 2017) and prevention of risks for several types of cancer, such as adenomas (Xu *et al.*, 2013), colon (Heine-Bröring *et al.*, 2015), ovary (Koushik *et al.*, 2015), prostate (Tomasetti *et al.*, 2012) and especially for gastric cancer (Kong *et al.*, 2014).

292 **5.** Conclusions

OME in *A. cepa* induced genotoxic (DNA damage) and mutagenic (micronuclei, fragments, delays and chromosome losses) effects at all tested concentrations, while toxic by two largest concentrations and cytotoxicity with the highest concentration. Co-treatment with RP and/or AA inhibited and/or modulated the cytogenetics damages caused by OME, indicating these vitamins may have antigenotoxic, antimutagenic, antitoxic and anti-cytotoxic activities. These results suggest the prospects for preclinical and clinical cytogenetic studies with OME associated with vitamins.

To study the mutagenic effects of chemical compounds is an extremely important in the evaluation for the safety assessment, especially for the pharmaceutical products prior to the commencement of clinical trials.

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573	Conflicts of interest
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575	
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- Table 1. Genotoxicity of OME and modulatory effects of RP and/or AA on the meristematic
 cells of *A. cepa* (comet assay)
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Treatment groups	ID	FD
NC	48.0 ± 1.4	18.5 ± 0,7
РС	198.0 ± 3.7	91.0 ± 1.8
OME 10 µg/mL	100.0 ± 6.7^{ab}	45.5 ± 0.7^{ab}
OME 20 µg/mL	111.0 ± 2.0^{ab}	50.5 ± 3.5^{ab}
OME 40 µg/mL	149.5 ± 6.3^{ab}	65.0 ± 1.4^{ab}
OME 10 µg/mL + RP	81.4 ± 1.4 ^b	42.0 ± 1.4^{ab}
OME 20 µg/mL + RP	86.0 ± 2.6^{abc}	50.0 ± 1.4^{ab}
OME 40 µg/mL + RP	106.5 ± 5.6^{abd}	59.5 ± 2.1^{ab}
OME 10 µg/mL + AA	83.0 ± 4.2^{bc}	42.5 ± 0.7^{ab}
OME 20 µg/mL + AA	96.5 ± 10.6^{ab}	50.5 ± 2.1^{ab}
OME 40 µg/mL + AA	103.5 ± 6.3^{ad}	54.5 ± 3.5^{ab}
OME 10 µg/mL + RP + AA	73.0 ± 4.2^{bc}	38.5 ± 0.7^{ab}
OME 20 µg/mL + RP + AA	$78.5 \pm 4.9^{\rm bc}$	40.2 ± 1.4^{abc}
$OME 40 \ \mu g/mL + RP + AA$	84.0 ± 7.0^{bd}	52.0 ± 1.4^{abd}

Values are mean \pm SD (n = 5), ANOVA one-way and Bonferroni post-test, significant values p <0.05 when compared to the ^aNC; ^bOME 10 µg/mL; ^cOME 20 µg/mL and ^dOME 40 µg/mL; RP, retinol palmitate (55 µg/mL); AA, ascorbic acid (352.2 µg/mL); PC, positive control (copper sulphate at 0.6 µg/mL); NC, negative control (dechlorinated water).



Figure 1. Effects of RP and/or AA on OME-induced genotoxic damage to the meristematic
cells of *A. cepa* (comet assay) [Values are percentage modulation (n = 5), ANOVA one-way
Tukey post-test, significant values: p <0.05 when compared to the ^aOME 10 µg/mL, ^bOME 20
µg/mL and ^cOME 40 µg/mL].



Figure 2. Photomicrography of mutagenic effects of OME (40 μg/mL) on *A. cepa*meristematic cells. [Coloration with acetic Carmine, magnification at 400X under the optical
microscope. A: MN in prophase; B: chromosomal breaks in metaphase; C: c-metaphase; D:
chromosome bridge in anaphase; E: chromosomal delays; F: chromosome loss in anaphase].





Figure 3. Mutagenicity of OME and the modulatory effects of RP and/or AA in *A. cepa.* [Values are mean \pm SD and percentage, (n = 5), ANOVA one-way and Bonferroni post-test, significant values of p <0.05 when compared to the ^aNC, ^bPC, ^cOME 10 µg/mL, ^dOME 20 µg/mL and ^eOME 40 µg/mL; RP, retinol palmitate (55 µg/mL); AA, ascorbic acid (352.2 µg/mL); PC, positive control (copper sulphate at 0.6 µg/mL); NC, negative control (dechlorinated water).]

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Figure 4. Toxicity of OME and the effects of RP and/or AA in *A. cepa* [Values are mean \pm SD and percentage, (n = 5), ANOVA one-way and Bonferroni post-test, significant values of p <0.05 when compared to the ^aNC, ^bPC, ^cOME 10 µg/mL, ^dOME 20 µg/mL and ^cOME 40 µg/mL; RP, retinol palmitate (55 µg/mL); AA, ascorbic acid (352.2 µg/mL); PC, positive control (copper sulphate at 0.6 µg/mL); NC, negative control (dechlorinated water).]

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Figure 5. Cytotoxicity of OME and the effects of RP and/or AA in *A. cepa* root meristems [Values are mean \pm SD and percentage, (n = 5), ANOVA one-way and Bonferroni post-test, significant values of p <0.05 when compared to the ^aNC, ^bCP, ^cOME 10 µg/mL, ^dOME 20 µg/mL and ^eOME 40 µg/mL; RP, retinol palmitate (55 µg/mL); AA, ascorbic acid (352.2 µg/mL); PC, positive control (copper sulphate at 0.6 µg/mL); NC, negative control (dechlorinated water).]

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Figure 6. Possible cytogenetic events of OME in eukaryotic system based on A. cepa test. 663 [Omeprazole (OME) by inhibiting or delaying the cell cycle, damaging cell organelles and 664 cellular macromolecules such as carbohydrates, proteins, lipids may induce cytoxicity. 665 Moreover, by inducing reactive oxygen species (ROS), it may damage mitochondria, leading 666 to release cytochrome C and activates caspase 9/3, resulting apoptotic cell death. OME and 667 OME-induced oxidative stress can cause damage of the genetic materials (e.g. DNA and 668 RNA), inhibit the repair capacity, and cause spindle interference, result in genotoxic effects. 669 Furthermore, mutagenicity may occur by OME-induced chromosomal damage and gene 670 mutation in the host cells. Finally, the genotoxicity may turn to mutagenicity, eventually to 671 the carcinogenicity. Retinol palmitate (RP) and/or ascorbic acid (AA) may inhibit or interfere 672 overall cytogenetic processes caused by OME especially as antioxidants they can act against 673 ROS. However, both antioxidants can also modulate the cytogenetic damages caused by 674 675 OME. ID, index of damage; FD, frequency of damage; MN, micronuclei.]

Highlights

- > Omeprazole induced toxic, cytotoxic, genotoxic and mutagenic effects in *Allium cepa*.
- > Retinol palmitate and ascorbic acid inhibited/modulted omeprazole's activity.
- > Antioxidant vitamins during omeprazole-mediated toxicity.