

SEPARATUM

EXPERIENTIA



REVUE MENSUELLE DES SCIENCES PURES ET APPLIQUÉES
MONATSSCHRIFT FÜR DAS GESAMTE GEBIET DER NATURWISSENSCHAFT
RIVISTA MENSILE DI SCIENZE PURE E APPLICATE
MONTHLY JOURNAL OF PURE AND APPLIED SCIENCE

Editores: R. MATTHEY, Lausanne · A. v. MURALT, Bern · L. RUZICKA, Zürich

Redactor: H. MISLIN, Basel · Mainz

Effect of Alkoxyglycerols on the Serum Ornithine Carbamoyl Transferase in Connection with Radiation Treatment

Astrid Brohult, J. Brohult and S. Brohult, Stockholm (Sweden)

Vol. 28 · 1972

BIRKHÄUSER VERLAG BASEL (SCHWEIZ)

Effect of Alkoxyglycerols on the Serum Ornithine Carbamoyl Transferase in Connection with Radiation Treatment

Alkoxyglycerols occur in small quantities in many natural products. In the haemopoietic organs of mammals, particularly the bone marrow, they are relatively abundant. They also occur in relatively high concentrations in

human mother's milk¹⁻⁴. They occur most abundantly in nature in the liver oil of certain species of shark^{3,4}. The general formula for alkoxyglycerols is $\text{CH}_2\text{OH} \cdot \text{CHOH} \cdot \text{CH}_2\text{O} \cdot R$, where R is a longchain aliphatic radical. The

Table I. S-OCT (nanomoles) increase after irradiation (Controls)

	Initial level 0	Days after start of radiation treatment			
		1	4	6	8
Arithmetic mean:	1.3	2.2	4.6	3.2	2.4
Range	0.4-3.6	0.3-9.9	0.3-26.0	0.6-12.5	0.4-10.9
Geometric mean:	1.1	1.2	2.7	2.2	1.3
S.D.	0.2	0.3	0.3	0.3	0.2

Table II. S-OCT (nanomoles) increase after irradiation and treatment with alkoxyglycerols

	Initial level 0	Days after start of radiation treatment			
		1	4	6	8
Arithmetic mean:	1.2	1.6	2.3	1.6	1.3
Range	0.3-3.0	0.1-11.0	0.2-12.9	0.4-3.8	0.1-2.3
Geometric mean:	1.0	1.0	1.4	1.4	1.0
S.D.	0.2	0.3	0.3	0.3	0.2

most common natural alkoxyglycerols are the saturated batyl and chimyl alcohols (with 18 and 16 carbon atoms, respectively, in the side chain) and the unsaturated selachyl alcohol with 18 carbon atoms in the side chain. The alkoxyglycerols occur most frequently as fatty acid esters¹.

The alkoxyglycerols have proved to be of medical interest. To some extent they prevent leucopenia and thrombocytopenia¹. The administration of alkoxyglycerols to patients with cancer of the uterine cervix results in higher survival rates than if radiation treatment alone is given^{1,5}. Furthermore the alkoxyglycerols act as growth factors: they promote the growth of *Lactobacillus lactis*¹.

In all experiments, preparations from the liver oil of Greenland shark have been used. These oils contain up to 50% of alkoxyglycerol esters (main component selachyl alcohol).

In this study we try to elucidate some of the effects of the alkoxyglycerols by performing ornithine carbamoyl transferase (OCT) analyses. OCT is synthesized in the liver, where it is involved in the synthesis of urea. It has been shown that OCT in serum (S-OCT) rises in connection with liver injury. However, S-OCT may also rise without such injury being present. Such a rise occurs in certain clinical states involving an increased breakdown of protein⁶. It has been shown that S-OCT is elevated in conjunction with radiation⁷. The OCT-activities were determined by the incubation of serum with citrulline carbamoyl ¹⁴C in arsenate buffer according to the modification of REICHARD⁸. 50 μ moles per 1 ml of incubation mixture were used. The results are expressed in nanomoles (nm) ¹⁴CO₂ liberated by 0.5 ml serum on 2 h incubation under standard conditions.

S-OCT analyses were made on 20 women with cancer of the uterine cervix in connection with the first radium implant. Analyses were performed immediately before the first implant and 1, 4, 6 and 8 days afterwards. The results are compiled in Table I. The most marked increase was observed on the 4th and the 6th day. As the S-OCT-values are exponentially distributed⁶, the standard deviations are calculated from the logarithms of the S-OCT-values.

Similar analyses have now been performed on 20 patients with cancer of the uterine cervix who, unlike the series above, were treated prophylactically with alkoxyglycerols for 8 days before the radiation therapy with 0.6 g/day. The results are given in Table II. It will be seen that the S-OCT values were lower when alkoxyglycerols had been given prophylactically than when the patients only received the radiation treatment. Taking the mean of the logarithms of the S-OCT values for the different days and forming the antilogarithms (i.e. the

geometrical means), it will be seen that these remain almost constant from day 0 to day 8 for the patients treated with alkoxyglycerols (Table II) and practically the same as the initial value, which is 1.2 nm.

Previous investigations have shown that alkoxyglycerols act as growth factors, promoting the growth of irradiated rats as well as the growth of *L. lactis*. One reason why S-OCT does not rise on radiation treatment of the alkoxyglycerol patients may be that the protein synthesis in the liver is stimulated, thereby compensating for the breakdown of proteins that occurs as a result of radiation treatment alone.

Résumé. L'ornithine carbamoyl transférase du sérum (S-OCT) augmente après un traitement aux rayons. L'augmentation la plus marquée a été observée le 4ème jour après le commencement de la radiothérapie. Nous n'avons toutefois observé qu'une petite augmentation de S-OCT lorsque des alkoxyglycérols ont été administrés prophylactiquement et pendant le traitement aux rayons.

ASTRID BROHULT⁹, J. BROHULT¹⁰ and
S. BROHULT¹¹

Radiumhemmet, Karolinska Sjukhuset,
S-104 01 Stockholm 60,
4th Medical Department, Södersjukhuset,
S-100 64, Stockholm 38, and
Royal Academy of Engineering Sciences,
P.O. Box 5073, S-102 42 Stockholm 5 (Sweden),
26 July 1971.

¹ A. BROHULT, Acta radiol. Stockholm Suppl. 223 (1963).

² B. HALLGREN and S. J. LARSSON, Lipid Res. 3, 31 (1962).

³ B. HALLGREN and S. J. LARSSON, Lipid Res. 3, 39 (1962).

⁴ H. N. HOLMES, R. E. CORBET, W. B. GEIGER, N. KORNBLUM and W. J. ALEXANDER, Am. chem. Soc. 63, 2607 (1941).

⁵ A. BROHULT, J. BROHULT and S. BROHULT, Acta chem. scand. 24, 730 (1970).

⁶ J. BROHULT, Opusc. med. Suppl. 12 (1969).

⁷ J. BROHULT, Acta med. scand. 785, 363 (1969).

⁸ H. J. REICHARD, Lab. clin. Med. 63, 1061 (1964).

⁹ Radiumhemmet, Karolinska Sjukhuset, Fack, S-104 01 Stockholm 60 (Sweden).

¹⁰ 4th Medical Department, Södersjukhuset, Fack, S-100 64 Stockholm 38 (Sweden).

¹¹ Royal Academy of Engineering Sciences, P.O. Box 5073, S-102 42 Stockholm 5 (Sweden).