Full Length Research Paper

Ultrastructure of extensor digitorum longus (EDL) muscle fibers of alloxan-diabetic rats

Suna Cebesoy*, Nesrin Özsoy and Nursel Gül

Ankara University, Faculty of Science, Department of Biology, 06500 Beşevler, Ankara, Turkey.

Accepted 9 April, 2008

The diabetic effects of alloxan (type I diabetes mellitus) were investigated in 40 Wistar albino rats (18 controls and 22 diabetics). Alloxan in sterile physiological saline was injected into the animals intravenously. The ultrastructure of type IIa, type IIb and type I fibers in extensor digitorum longus (EDL) muscle of normal and alloxan diabetic rats was studied. In diabetic animals, the mitochondria of type IIa and type I fibers showed a loss of cristae. There was also an increased number of lipid droplets. The shape of the nuclei was highly irregular in these fibers. The type IIb fibers showed some disorientation of the T-tubuler system. It is concluded that alloxan-diabetes has differential effect on the fine structure of the three fiber types in rat skeletal muscle.

Key words: Diabetes mellitus, skeletal muscle, alloxan, ultrastructure.

INTRODUCTION

Mammalian skeletal muscle fibers have been classified in many different ways, such as: types I, IIa, and IIb fibers, based on histochemical studies (Stein and Padykula, 1962); white, red and intermediate fibers based on ultrastructural and cytohemical characteristics (Gauthier, 1969); and fast -twitch -glycolytic (FG), fast -twitchoxidative –glycolytic (FOG), and slow-twitch-oxidative (SO) fibers respectively, based on their contractile properties and metabolic profiles (Peter et al., 1972).

Slow contracting, oxidative muscle cells are characterized by unique structural proteins. Slow isotype myosin heavy chains are involved in slow and sustained movements, whereas fast muscle cells are characterized by their fast isotype myosin heavy chains and by rapid response to stimulus (Francis-West et al., 2003).

Diabetes mellitus is a metabolic disorder of multiple aetiology characterized by chronic hyperglisemia with disturbances of carbohydrate, fat and protein metabolism resulting from defects in insulin secretion, insulin action, or both. The effects of diabetes include long-term damage, disfunction and failure of various organs (WHO, 1999). This disease may present with characteristic symptoms such as thirst, polyuria, blurring of vision, and

*Corresponding author. E-mail: cebesoy@science.ankara.edu.tr. Tel: 00 09 312 2126720/ 1128. Fax:00 09 312 2232395.

weight loss.

Many contractile, morphological and biochemical measures of muscle function are changed in experimantel diabetes. Thus, there have been reports of contraction prolongation in slow muscles and reduced tetanic tension in fast muscles (Grossie, 1982; Paulus and Grossie, 1983; Cotter et al., 1989). Histochemical and ultrastructural changes include a general differentiation of fast twitch fibers (Bestetti et al., 1981), and reduction in staining for mitochondrial enzymes (Balogh et al., 1988; Cebesoy et al., 2000). At the biochemical level, there is depressed protein synthesis and enhanced proteolysis (Pain and Garlick, 1974), falls in amino acid and glucose transport (Manchester, 1970), reduced Na⁺-K⁺-ATPase activity and pump density (Moore et al., 1983; Kjeldsen et al., 1987); changes in sarcoplasmic reticulum Ca⁺²-ATPase; (Ganguly et al., 1983; Eibschutz et al., 1984) and reductions in intracellular ATP concentration (Moore et al., 1983). Many of these contractile, morphological and biochemical changes are prevented or reserved by insulin.

The purpose of the present investigation was to study the ultrastructural alterations of skeletal muscle fibers in chronic alloxan-diabetic rats.

MATERIALS AND METHODS

Forty Wistar albino rats were obtained from the Animal Laboratories



Figure 1. Longitudinal section of type I fiber from control animal (x 7200).



Figure 3. Loss of cristae in mitochondria (M) and irregular shape of the nuclei in type I fiber from diabetic animal (x 7200).



Figure 2. Longitudinal section of type II fiber from control animal (x 7200).

of Ankara University. Alloxan with 55 mg/kg dissolved in sterile physioloogical saline was intravenously injected into 22 rats ranging in weight from 160-230 g (Reuterving et al., 1987).

Eighteen rats ranging in weight from 160-230 g were used as a control group. After 24 h administration of alloxan, glucose levels in urine were determined by Diastix test strips (Bayer, Germany). The alloxan-injected animals were kept under controlled conditions for 30 days. After 30 days, blood glucose concentrations were measured as > 400 mg dl⁻¹, determined with Glucostix strips (Bayer, Germany) from the cut tip of the tail of the alloxan-injected rats.

The animals were then decapitated under ether anaesthesia. Extensor Digitorum Longus (EDL) muscles were dissected free, cleaned of excess fascia, and blotted dry. Muscles were fixed in 2,5% phosphate-buffered glutaraldehyde, pH 7,2 and kept cold for 2 h. After rinsing several times in cold phosphate buffer, the tissues were postfixed in 1% osmium tetroxide solution for 2 h. Fixed tissues were dehydrated in a series of graded ethanol, placed into propylene oxide and embedded in araldite (Hayat, 1981). Ultrathin sections were stained with uranyl acetate and lead citrate and examined with transmission electron microscopy (TEM) (JOEL 100 CX 2) at 80 kv.



Figure 4. Loss of cristae in mitochondria and deformation of sarcoplasmic reticulum in type I fiber from diabetic animal (x 28500).

RESULTS

The different muscle fiber types were identified under the electron microscope on the basis of the frequency and location of their mitochondria, the development of the sarcotubular system, and the thickness of the Z lines.

In control animals, type I fiber has the highest mitochondrial content and the widest Z line (Figure 1), whereas type IIb fiber has the lowest mitochondrial content and the narrowest Z line (Figure 2). Type IIa fiber is intermediate in both characteristics. In type I fibers of the diabetic animals, the mitochondria contained fewer cristae and more granules than those in the control animals. A much greater number of lipid droplets of different sizes was observed. The shape of the nuclei was highly irregular in these fibers (Figures 3 and 4).

In the type IIa fibers from the diabetic animals, the mito-



Figure 5. Melting of mitochondrial cristae in type IIa fiber of diabetic rat (x 28500).



Figure 8. Irregular shape of the nuclei in type II a fiber and loss of chromatin material (x 8700).



Figure 6. Loss of cristae in mitochondria in type IIa fiber of diabetic rat (x 21000).



Figure 9. Irregular shape of the nuclei in type IIa fiber (x 15000).



Figure 7. Nucleus (N) of type IIa fiber was surrounded by numerous mitochondria (M) and few lipid droblets (L). The nucleus had irregular shape (x 8700).

chondrial cristae were less distinct and fewer in number than the controls (Figures 5 and 6). There were considerably more lipid droplets, usually in juxtaposition to the mitochondria or bulging out from underneath the sarcolemma (Figure 7). Irregular shape of the nuclei was seen in these fibers (Figures 8 and 9). The separation of a muscle nucleus with its adjacent sarcoplasm from a satellite cell was noticed in this fiber type of the diabetic rat (Figure 10).

The mitochondria in type IIb fibers of the diabetic rats seemed to be reduced in number; there were no apparent morphological changes. The extensive sarcotubular system was still well developed, but some disorientation of the T tubules and sarcomeres was observed (Figure 11). Relatively more lipid droplets were seen in these fibers than in the normal (Figure 12).



Figure 10. Formation of satellite cell in type IIa fiber of diabetic animal (x 10800).



Figure 12. Disorientation of Z lines (Z) and the mitochondria seemed to be reduced in number (M), showing increased number of lipid droplets (L) (x 21000).



Figure 11. Deformation of sarcoplasmic reticulum (SR) and disorientation of Z lines (Z) in type IIa fiber of diabetic animal (x 15000).

DISCUSSION

Slow and fast twitch muscles were differentially affected by diabetes. In the former, contractile speed was further slowed and oxidative capacity and fatigue resistance were impaired. Fast muscles showed preferential fast twitch -glycolytic (FG) fiber atrophy and reduced strength performance. Some of these deficits have been previously reported (Amstrong et al., 1975; Cotter et al., 1989; Paulus and Grossie, 1983; Baldwin et al., 1972). The reported findings indicate that fast-twitch skeletal muscle fibers are more dependent upon insulin for maintenance of their normal metabolic and morphological characteristics than slow-twitch fibers. In normal muscle slow-twitch-oxidative (SO) fibers posses a high capillary density (Cameron et al., 1990; Mai et al., 1970) and capacity for fatty acid (Baldwin et al.,1972) and ketone body oxidation (Kark et al., 1971). These factors suggest that SO fibers might adapt to the diabetic condition with minimal adverse metabolic effects. However, the fastwitch-oxidative-glycolytic (FOG) fibers have similar capabilities. In fact, FOG fibers in rat quadriceps muscle have a higher carnitine palmityl transferase activity and greater capacity for palmitate oxidation (Baldwin et al.,1972) than SO fibers, indicating the FOG fibers are better able to metabolize fatty acid.

The structural changes observed in muscle fibers of diabetic animals can be related to abnormal metabolism resulting from insulin deficiency. Previous histochemical and biochemical investigations in streptozotocin- diabetic rats suggest a greater loss in oxidative potential on the fast-twitch fiber population than in slow-twitch fibers (Amstrong et al., 1975; Cebesoy et al., 2000). Since the oxidative enzymes are located on the mitochondrial cristae, the altered mitochondrial morphology in FOG and SO fibers and the decreased number of mitochondria in FG fibers of diabetic animals seem to reflect this reduced oxidative potential.

The segregation of parts of FOG and SO fibers to form satellite cell in diabetic animals is interesting. Mononucleated satellite cells in normal adult muscles cover only 1-2% of the total nuclear population (Bischoff, 1974; Ontel, 1974). Their increase in FOG and SO fibers of diabetic animals is comparable to that occuring in denervated rat muscles (Ontel, 1974).

It is concluded that alloxan-diabetes has differential effects on the fine structure of the three fiber types in rat skeletal muscle.

ACKNOWLEDGEMENT

This study, number 2000.07.05.031, was supported by the Fund of Ankara University as a project.

REFERENCES

- Amstrong RB, Gollnick PD, Ianuzzo CD (1975). Histochemical properties of skeletal muscle fibers in streptozotocin diabetic rats. Cell Tissue Res, 162: 387-394
- Baldwin KM, Klinkerfusu GH, Terjung RL, Mole PA, Holoszy JO (1972). Respiratory capacity of red, white and intermediate muscles: adaptative response to exercise. Am. J. Physiol. 222: 373-378.
- Balogh I, Koltai MZ, Pogatza G (1988). Ultrastructural alterations in cardiac and skeletal muscles in experimental diabetes mellitus. Acta. Physiol. Hung. 71: 219-225.
- Bestetti G, Zemp C, Probst D, Rossi GL (1981). Neuropathy and myopaty in the diagram of rats after 12 months of streptozotocin induced diabetes mellitus. Acta. Neuropathol. 55: 11-20.
- Bischoff R (1974). Enzymatic liberation of myogenic cells from adult rat muscle. Anat. Rec. 180: 645-662.
- Cameron NE, Cotter MA, Robertson S (1990). Changes in skeletal muscle contractile properties in streptozotocin –induced diabetic rats and role of polyol patway and hypoinsulinemia. Diabetes, 39: 460-465.
- Cebesoy S, Özsoy N, Gül N, Ayvalı C, Kutlu İ (2000). Histochemical properties of skeletal muscle fibers in alloxan- diabetic rats. GU J. Sci. 13: 599-611.
- Cotter MA, Cameron NE, Lean DR, Robertson S (1989). Effect of longterm streptozotocin diabetes on the contractile and histochemical properties of rat muscles. J. Exp. Physiol. 74: 65-74.
- Eibschutz B, Lopaschuk GD, McNeil JH, Katz S (1984). Ca⁺² transport in skeletal muscle sarcoplasmic reticulum of the chronically diabetic rat. Chem. Pathol. Pharmacol. 45: 301-304
- Francis-West PH, Antoni L, Anakwe K (2003). Regulation of myogenic differentiation in the developing limb bud. J. Anat. 202: 69-81.
- Ganguly PK, Pierce GN, Dhalla KS, Dhalla NS (1983). Defective sarcoplasmic reticular calcium transport in diabetic cardiomyopathy. Am. J. Physiol. 244: 528-535.
- Gauthier GF (1969). On the relationship of ultrastructural and cytochemical features to color in mammalian skeletal muscle. Z Zellforsch, 95: 462-482.
- Grossie J (1982). Contractile and electrical characteristics of extensor muscle from alloxan-diabetic rats. Diabetes, 31: 194-202.
- Hayat MA (1981). Principles and Tecniques Electron Microscopy, Edward Arnold Ltd: London Biol. Appl. Vol 1.
- Kark RAF, Blass JP, Avigon J, Engel WK (1971). The oxidation of betahydroxy- butryric acid by small quantities of type-pure red and white skeletal muscles. J. Biol. Chem. 246: 4560-4566.

- Kjeldsen K, Braendgaard H, Sidenius P, Larsen JS, Norgaard A (1987). Diabetes decreases Na⁺-K⁺ pumb concerntration in skeletal muscles, heart ventricular muscle, and peripheral nerves of rat. Diabetes, 31: 194-202.
- Mai JV, Edgerton VR, Barnard RJ (1970). Capillarity of red, white and intermediate muscle fibers in trained and untrained guinea pigs. Experientia. 26: 1222-1223.
- Manchester KL (1970). The control by insulin of amino acid accumulation in muscle. J. Biochem. 117: 457-465.
- Moore RD, Munford JW, Pillsworth TJ (1983). Effects of streptozotocin diabetes andfasting on intracellular sodium and adenosine triphosphate in rat soleus muscle. J. Physiol. 388: 277-294.
- Ontel M (1974). Muscle satellite cells: A validated technique for light microscopic identification and quantitative study of changes in their population following denervation. Anat Rec. 178: 221-227.
- Pain VM, Garlick PJ (1974). Effect of streptozotocin diabetes and insulin treatment on the rate of protein synthesis in tissue of the rat *in vivo*. J. Biol. Chem. 249: 4510-4514.
- Paulus SF, Grossie J (1983). Skeletal muscle in alloxan-diabetes. A comparison of isometric contractions in fast and slow muscle. Diabetes. 32: 1035-1039.
- Peter JB, Bernard RJ, Edgerton VR, Gillespre CA, Stempel KE (1972). Metabolic profiles of three fiber types of skeletal muscle in guinea pig and rabbits. Biochem. 11: 2627-2634.
- Reuterving CO, Henriksson R, Holm J (1987). Salivary glands in longterm alloxan- diabetic rats. A quantitative light and electron microscopic study. Acta. Pathol. Microbial. Immunol. Scand Sec. 95: 132-136
- Stein JM, Padykula HA (1962). Histochemical classification of individual skeletal muscle fibers of the rat. Am. J. Anat. 110: 103-123.
- World Health Organization (WHO) (1999). "Definition, diagnosis and classification of Diabetes mellitus and its complications" report of a WHO Consultation, Geneva.