

Ain Shams University

The Egyptian Journal of Medical Human Genetics

www.ejmhg.eg.net www.sciencedirect.com



# **ORIGINAL ARTICLE**

# Assessment of DNA damage by panmasala, gutkha chewing and smoking in buccal epithelial cells using alkaline single cell gel electrophoresis (SCGE)

Smita Jyoti<sup>a</sup>, Saif Khan<sup>b</sup>, Falaq Naz<sup>a</sup>, Rahul<sup>a</sup>, Fahad Ali<sup>a</sup>, Yasir Hasan Siddique<sup>a,\*</sup>

<sup>a</sup> Section of Genetics, Department of Zoology, Aligarh Muslim University, Aligarh 202002, UP, India

<sup>b</sup> Department of Periodontics and Community Dentistry, Dr. Z.A. Dental College, Aligarh Muslim University, Aligarh 202002, UP, India

Received 8 June 2013; accepted 31 July 2013 Available online 4 September 2013

#### **KEYWORDS**

Comet assay; DNA damage; Gutkha; Pan masala; Buccal epithelial cells **Abstract** In the present study the comet assay was performed in buccal epithelial cells to evaluate DNA damage among pan masala or gutkha chewers and smokers. The assay is a rapid, suitable and sensitive method for detecting various forms of DNA damage at individual cell level. The study comprises 300 individuals of which 50 individuals were gutkha chewers along with smoking, 50 individuals were pan masala chewers along with smoking, 50 individuals were gutkha chewers, 50 individuals were pan masala chewers, 50 individuals were smokers and 50 individuals were non-users (control) or not having any addiction. Comet tail length was observed to measure the extent of DNA damage. In all groups a significant increase in the tail length was observed as compared to the non-users (control). The highest tail length was observed among gutkha chewers along with smoking ( $36.9 \pm 3.60$ ). The results of the present study suggest that the panmasala and gutkha are genotoxic agents and induce DNA damage.

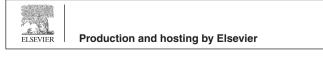
© 2013 Production and hosting by Elsevier B.V. on behalf of Ain Shams University.

## 1. Introduction

Gutkha and pan masala are popular among all age groups in India. Various studies have shown that the chewing of tobacco

\* Corresponding author. Tel.: +91 9410060564.

E-mail address: yasir\_hasansiddique@rediffmail.com (Y.H. Siddique). Peer review under responsibility of Ain Shams University.



with lime or betel quid with tobacco and areca nut causes cancer in humans [1]. These dry products generate reactive oxygen species (ROS) in the buccal cavity of chewers [2]. These smokeless products are related to the genotoxicity affecting the DNA repair pathways [3]. DNA repair mechanism plays an important role in the maintenance of DNA integrity and prevention of cancer. If DNA remains unrepaired, it will lead to mutagenesis, genetic instability and ultimately cell death [4]. Single-cell gel electrophoresis (SCGE) or comet assay is used to monitor genotoxicity in the exposed population [5]. It detects different kinds of DNA alterations, single strand breaks,

1110-8630 © 2013 Production and hosting by Elsevier B.V. on behalf of Ain Shams University. http://dx.doi.org/10.1016/j.ejmhg.2013.07.004

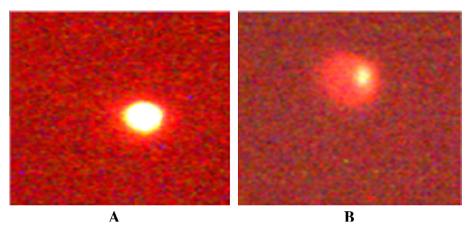


Figure 1 (A) Normal undamaged DNA of buccal epithelial cells in healthy individuals and (B) damaged DNA of the buccal epithelial cell of Gutkha chewers along with smoking.

Groups	Number of individuals	Age range	Age (mean ± SE)	Comet tail length (mean $\pm$ SE)
Control	50	22-69	$29.7 \pm 1.41$	$3.41 \pm 0.41$
Smokers	50	23-65	$40.1 \pm 1.71$	$14.9 \pm 0.79^{\rm a}$
Pan masala chewers	50	26-58	$30.0 \pm 1.42$	$29.3 \pm 3.41^{a,b}$
Gutkha chewers	50	21-62	$32.5 \pm 1.63$	$31.6 \pm 3.52^{a,b}$
Pan masala + smoking	50	23-56	$32.2 \pm 1.18$	$33.6 \pm 3.59^{a,b}$
Gutkha + smoking	50	20-67	$37.7 \pm 1.50$	$36.9 \pm 3.60^{a,b}$

<sup>a</sup> Significant as compared to control (p < 0.05).

<sup>b</sup> Significant as compared to smokers (p < 0.05).

double strand breaks, alkali-labile sites, cross-links and incomplete repair sites [6,7]. This assay can be applied to proliferating cells, like buccal cells and nasal cells that are susceptible to carcinogenic and mutagenic agents [8]. In the comet assay for buccal cells, the cells are embedded in agar gel and cell membranes are removed by using a lysing solution, and the DNA is allowed to unwind by performing electrophoresis at alkaline pH. DNA loops around strand breaks are in a relaxed state, and are pulled towards the anode, giving a comet tail like appearance. Undamaged DNA remains in the nucleoid or comet head [9,10]. The aim of the present study is to make individuals aware about the consequences of pan masala or gutkha chewing as well as smoking that can cause DNA damage leading to oral submucosis fibrosis (OSMF).

#### 2. Subjects and methods

#### 2.1. Study design and sample

The study comprises of 300 individuals (50 gutkha chewers, 50 gutkha chewers along with smoking, 50 pan masala chewers, 50 pan masala chewers along with smoking, and 50 smokers and 50 controls). A written consent was taken from each individual, and the samples were taken from the Department of the Ziauddin Ahmad Dental College and Hospital, A.M.U., Aligarh, UP. The period of the study was almost 8 months.

## 2.2. Single cell gel electrophoresis (SCGE)

Buccal epithelial cells were collected from subjects by using a soft bristle tooth brush gently from the oral mucosa of the cheeks. The brush was then swirled into a tube containing cold phosphate buffered saline (PBS) and centrifuged at 2000 rpm for 10 min. The supernatant was removed and 300 µl of trypsin solution (0.25% trypsin, 1 mM EDTA in PBS) was added to the buccal cells and incubated for 30 min at 37 °C. The cells were centrifuged and the supernatant was discarded. The cells were then washed thrice by centrifugation at 2000 rpm for 10 min in cold PBS. About 40 µl of cell suspension and 60 µl of 0.5% low melting agarose (LMA) were mixed and placed on frosted slides previously coated with 1% normal melting agarose. To the solidified agarose, a third layer of 1% low melting agarose was applied and the slides were dipped in freshly prepared cold lysing solution (2.5 M NaCl; 100 mM EDTA; 10 mM Trizma base; 1% Triton X; 10% DMSO) for 24 h. [7] Then the slides were subjected to electrophoresis (300 mM NaOH/1 mM EDTA) (pH > 13), followed by neutralization (0.4 M Tris–HCl) and stained with ethidium bromide (20  $\mu$ g/ ml) [11]. Three slides were prepared per individual and a total of 50 randomly captured comets per slide, under a fluorescence microscope were analysed for scoring comet tail length by using comet score 1.5 software (TriTek corporation).

# 2.3. Statistical analysis

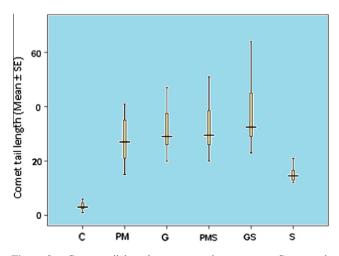
Statistical analysis was carried out by the Student's 't' test and regression using commercial software Statistica Soft Inc.

Groups	Duration of addiction (years) (mean ± SE)	Cigarettes/day (mean ± SE)	Gutkha/day (mean ± SE)	Pan masala/day (mean $\pm$ SE)
Control	-	-	_	_
Smokers	$9.0 \pm 0.60$	$7.06 \pm 0.14$	-	_
Pan masala chewers	$9.04 \pm 0.46$	-	-	$8.52 \pm 0.08$
Gutkha chewers	$9.80 \pm 0.62$	-	$8.76 \pm 0.09$	_
Pan masala + smoking	$9.58 \pm 0.63$	$5.92~\pm~0.28$	-	$8.32 \pm 0.06$
Gutkha + smoking	$9.62~\pm~0.58$	$5.86\pm0.27$	$9.16~\pm~0.09$	_

 Table 2
 Frequency of cigarette, gutkha and pan masala intake by various groups.

# 3. Results and discussion

The effect of gutkha and pan masala chewing along with and without smoking was studied in buccal epithelial cells using single cell gel electrophoresis (SCGE) (Fig. 1). A total of 300 subjects corresponding to 50 for each group were recruited for this study. Table 1 represents the mean of the age and tail length. The mean values for the duration of addiction of chewing/smoking, as well as pan masala, gutkha and cigarettes taken per day are presented in Table 2. The mean tail length in smokers (14.9  $\pm$  0.97), pan masala chewers (29.3  $\pm$  3.41), pan masala + smoking  $(33.6 \pm 3.59)$ , gutkha chewers  $(31.6 \pm 3.52)$ , and gutkha chewers + smoking  $(36.9 \pm 3.60)$ was significantly higher (p < 0.05) as compared to non-users (control)  $(3.41 \pm 0.41)$  (Table 1, Fig. 2). The mean duration of addiction is almost the same in all the studied groups (Table 2) and the highest tail length was observed in the gutkha + smoking group (Fig. 2). We correlated the mean age and tail length and found that the tail length is not related with the age (r = 0.11790; p < 0.8162). Hence the addiction is directly related to the tail length. The highest DNA migration was found among gutkha chewers with smoking habit. The increase in the mean comet tail length was observed as: Nonusers < smokers < pan masala chewers < gutkha chewers < pan masala + smoking < gutkha + smoking (Fig. 2). The regression analysis shows the value of  $R^2$  (0.138) (Fig. 3). SCGE or Comet assay in buccal epithelial cells is easier and a safe method to detect DNA damage among humans



**Figure 2** Comet tail length among various groups. C, control; PM, pan masala; G, gutkha; PMS, pan masala with smoking; GS, gutkha with smoking; S, smoking.

[12]. When the amount of ROS generated in cells increases from the capacity of the normal detoxification system then oxidative stress leads to cellular damage, along with the DNA damage [13]. DNA damage can occur as single-stranded (ss) breaks or doublestranded (ds) breaks [14]. The main objective of the study was to evaluate the extent of the DNA damage due to various addictions. In the present study the higher values in comet tail length were observed among gutkha chewers along with smoking. The tobacco present in cigarette/beedi induces DNA adducts and oxidative DNA damage in human tissues. The formation of carcinogens may lead to DNA mutation and by disturbing the protein function may lead to cancer [15,16]. The tobacco-specific nitrosamines can induce miscoding in the DNA that could result in the tumourigenic process in the oral cavity [17]. Pan masala or smokeless tobacco causes genotoxicity that affects DNA repair pathways [3]. In smokers, comet tail length was found to be more as compared to the non-users (control) group which may be due to oxidative stress in smokers. This causes an imbalance between the formation of reactive oxygen species (ROS) and the ability to neutralize ROS [18]. The formation of the DNA adduct is the initiating step in the process of carcinogenesis. Pan masala and gutkha also contain various irritating substances that make the skin lose its elasticity [19]. The main carcinogens in gutkha are derived from their ingredients (arecanut, catechu, and tobacco). A high level of nitrite and nitrate reductase activity has been reported in the saliva of gutkha chewers [20,21]. There are reports for the generation of ROS by the aqueous extract of arecanut and catechu leading to the genotoxic damage in buccal epithelial cells [22]. The occurrence of oral cancer has been well documented independently in association with oral habits such as smoking, betel quid chewing and tobacco chewing [23,24]. These oral habits have also been associated with DNA damage. Comet assay is used for the

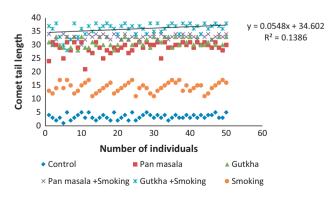


Figure 3 Comet tail length among individuals of different groups and regression analysis.

biomonitoring study and the tail length has been the most commonly used parameter for DNA damage measurement [25]. In our present study the highest DNA damage was observed among the gutkha + smoking group. Gutkha is a mixture of arecanut, catechu, lime, cardamom, unspecified flavouring agents, and tobacco. Arecanut is the main component of gutkha responsible for the oral submucosis fibrosis (OSMF) [26]. In our earlier studies the high frequency of micronucleus was found among gutkha users [27]. The high frequency of micronucleus was also found among OSMF patients (gutkha chewers) [28]. However, earlier studies have shown that the ROS produced by arecanut is responsible for the initiation of OSMF [29]. The aqueous extract of N-nitroso compounds related to arecanut, that is, 3-(methylnitrosamino) proprionitrile is highly cytotoxic and genotoxic in cultured human buccal epithelial cells, responsible for the induction of tumours among betel quid chewers[30].

# 4. Conclusion

Single cell gel electrophoresis (SCGE) is of potential value for human biomonitoring against the harmful agents such as pan masala or gutkha chewing and smoking. This study shows the genotoxic effect of panmasala or gutkha chewing and smoking. Gutkha chewing along with smoking are most dangerous for health, so it is important to increase the awareness programmes to make the people aware of the consequences and possible risks associated with these addictions.

#### Acknowledgements

The authors are thankful to the Council of Science and Technology (CST/D-3908), Lucknow, UP, for awarding the project titled "Genotoxicity assessment in exfoliated Mucosal cells of Pan Masala and Gutkha Chewers". We are also thankful to the Chairman, Department of Periodontics and Community Dentistry, for the support in providing the samples and the chairman, Department of Zoology for the laboratory facilities.

#### References

- Manikantan P, Balachandar V, Sashikala K, Mohanadevi S. Lymphocyte DNA damage in chewing tobacco users of Coimbatore, Tamil Nadu, by using comet assay. J Hum Ecol 2010;31:53–8.
- [2] Babu S, Sesikeran B, Bhat RV. Oral fibrosis among teenagers chewing tobacco, arecanut and pan masala. Lancet 1996;348:692.
- [3] Pershagen G. Smokeless tobacco. Brit Med Bull 1996;52:50-7.
- [4] Qiao Y, Spitz MR, Shen H. Modulation of repair of ultraviolet damage in the host-cell reactivation assay by polymorphic XPC and XPD/ERCC2 genotypes. Carcinogenesis 2002;23:295–9.
- [5] Valvarde M, Ostrosky-Wegman P, Rojas E. The application of single gel electrophoresis or comet assay to human biomonitoring studies. Salud Pública México 1999;41:109–13.
- [6] Wojewódzka M, Kruszewski M, Iwanenko T, Collins AR, Szumiel I. Application of the comet assay for monitoring DNA damage in workers exposed to chronic low-dose irradiation. I: Strand breakage. Mutat Res 1998;416:21–35.
- [7] Tice RR, Agrurell E, Anderson D. Single cell gel/comet assay: guideline for in vitro and in vivo genetic toxicology testing. Environ Mol Mutagen 2000;35:206–21.

- [8] Heepchantree W, Paratasilpin T, Kangwanpong D. A biological evaluation of DNA damage detected by comet assay in healthy populations residing in areas that differ in lung cancer incidence. J Toxicol Environ Health 2006;69:1071–82.
- [9] Collins AR. The comet assay: principles, applications, and limitations. Methods Mol Biol 2002;203:163–77.
- [10] Vincy WCW, Szeto YT, Collins AR, Benzie IFF. The comet assay: a biomonitoring tool for nutraceutical research. Curr Top Nutraceut Res 2005;3:1–14.
- [11] Hoffmann H, Speit G. Assessment of DNA damage in peripheral blood of heavy smokers with the comet assay and the micronucleus test. Mutat Res 2005;581:105–14.
- [12] Rojas E, Valverde M, Sordo M, Ostrosky-Wegman P. DNA damage in exfoliated buccal cells of smokers assessed by the single cell gel electrophoresis assay. Mutat Res 1996;370:115–20.
- [13] Speit G, Witton-Davies T, Heepchantree W, Trenz K, Hoffmann H. Investigation on the effect of cigarette smoking in the comet assay. Mutat Res 2003;542:33–42.
- [14] Katyal S, McKinnon PJ. DNA strand breaks, neurodegeneration and aging in the brain. Mech Ageing Dev 2008;129:483–91.
- [15] Hainaut P, Feifer GP. Patterns of G T transversions in lung cancers reflect the primary mutagenic signature of DNA damage by tobacco smoke. Carcinogenesis 2001;22:367–74.
- [16] Cooper CS. Smoking, lung cancers and their TP53 mutations. Mutagenesis 2002;17:279–80.
- [17] Hecht SS. Tobacco carcinogens, their biomarkers and tobaccoinduced cancer. Nat Rev Cancer 2003;3:733–44.
- [18] Halliwell B. Oxidative stress and neurodegeneration: where are we now? J Neurochem 2006;97:1634–58.
- [19] Grover S, Mujib ABR, Jahagirdar A, Telagi A, Kulkarni PG. A comparative study for selectivity of micronuclei in oral exfoliated epithelial cells. J Cytol 2012;29:230–5.
- [20] Nair UJ, Nair J, Mathew JB, Bartsch H. Glutathione Stransferase M1 and T1 null genotypes as risk factors for oral leukoplakia in ethnic Indian betel quid/tobacco chewers. Carcinogenesis 1999;20:743–8.
- [21] Kumar S. Pan masala chewing induces deterioration in oral health and its implications in carcinogenesis. Toxicol Mech Methods 2008;18:665–77.
- [22] Szeto YH, Benzie IFF, Collin AR. A buccal cell model comet assay: development and evaluation for human biomonitoring and nutritional studies. Mutat Res 2005;578:371–81.
- [23] Warnakulasuriya S. Significant oral cancer risk associated with low socioeconomic status. Evid Based Dent 2009;10:4–5.
- [24] Weinberg RA. Biology of cancer. London: Taylor and Francis Inc; 2006.
- [25] Mukherjee S, Ray JG, Chaudhuri K. Evaluation of DNA damage in oral precancerous and squamous cell carcinoma patients by single cell gel electrophoresis. Indian J Dental Res 2011;22:735–6.
- [26] Jyoti S, Khan S, Afzal M, Siddique YH. Micronucleus investigation in human buccal epithelial cells of gutkha users. Adv Biomed Res 2012;1:35.
- [27] Tilakaratne WM, Klinilkowski MF. Review on aetiology and pathogenesis. Oral Oncol 2005;42:561–8.
- [28] Jyoti S, Khan S, Afzal M, Naz F, Siddique YH. Evaluation of micronucleus frequency by acridine orange fluorescent staining in buccal epithelial cells of oral submucosus fibrosis (OSMF) patients. Egypt J Hum Genet 2013;14:189–93.
- [29] Jeng JH, Chang MC, Hahn LJ. Role of areca nut in betel quidassociated chemical carcinogenesis: current awareness and future perspectives. Oral Oncol 2001;37:477–92.
- [30] Chiu CJ, Chang ML, Chiang CP. Interaction of collagen related genes and susceptibility to betel quid induced oral submucosus fibrosis. Cancer Epidemiol Biomark Prev 2002;11:646–53.