Abstract. – OBJECTIVE: Despite its evident renal toxicity, vancomycin is considered an effective glycopeptide antibiotic against life-threatening positive bacterial contagions. The current study aimed to investigate the potential protective effects of carvacrol as well as its underlying mechanism against vancomycin-induced nephrotoxicity.

MATERIALS AND METHODS: The animals were randomly classified into four groups (8 rats per group). Group I, which served as a control group, received only vehicles. Group II received a single i.p. injection of 50 mg/kg of carvacrol for seven days. Group III received vancomycin (200 mg/kg, i.p.) as a singular daily dose for seven days. Carvacrol was administered to Group IV seven days prior to the daily vancomycin dose.

RESULTS: The results revealed that carvacrol minimized vancomycin-induced renal injury as evidenced by lower serum cystatin C levels and kidney injury molecule-1 (KIM-1), in addition to a decline in renal damage caused by vancomycin as indicated in histopathological assessment. Furthermore, carvacrol significantly attenuated oxidative stress parameters and inflammatory mediators. Moreover, it downregulated Keap1, mitogen-activated protein kinase (p38MAPK), and nuclear factor kappa B (NF-kB) genes and proteins, along with controlling the NF-κB inhibitory protein (IkBα) and nuclear factor erythroid 2-related factor 2 (Nrf2) genes and proteins observed through streaming its genes. A molecular docking technique was also used to investigate the potential interactivity between carvacrol and proteins involved in regulating oxidative injury and inflammatory responses.

CONCLUSIONS: The current study findings revealed that carvacrol administration before vancomycin could be a promising therapeutic approach for maceration of renal damage stimulated by vancomycin via controlling IkBα/p38MAPK and Keap1/Nrf2 signaling molecules.

Key Words: Nephrotoxicity, Carvacrol, Vancomycin, MAPK, IkBα, Keap1.
Abbreviations

Introduction

Vancomycin is one of the most commonly utilized tricyclic glycopeptide antibiotics in hospital infections, sepsis, pneumonia cases, and soft tissue abscesses. Interestingly, it is a unique glycopeptide that is prescribed for patients hypersensitive to penicillin and cephalosporin. It acts by inhibiting bacterial peptidoglycan biosynthesis, thus preventing the second stage of cell wall synthesis of the anaerobic and aerobic pathogenic cocci. Hypersensitivity, fever, phlebitis, hypotension, tachycardia, lacrimation, and thrombocytopenia are the most prevalent side effects of vancomycin.

The most common side effect of vancomycin is nephrotoxicity, which limits its effectiveness, dosage, and duration of treatment. Cystatin C is a marker of glomerular filtration rate, which is one of the most sensitive indicators of glomerular filtration rate (GFR). Likewise, kidney injury molecule-1 (KIM-1) expression was significantly elevated in kidney injury, playing a vital role in macrophage and cytokine activation via the mitogen-activated protein kinase (MAPK) pathway.

The mechanisms of vancomycin-induced kidney injury are complicated and multifactorial, with the major pathways including renal oxidative stress, apoptosis, and inflammation. Under normal conditions, oxidants and antioxidants are in balance within the cell. Cellular stress disrupts mitochondrial activity with increased production and reactive oxygen species (ROS) aggregation, followed by corrosion of cell membrane lipid components, denaturation of proteins, and enzymatic inactivation.

Nuclear factor erythroid 2-related factor 2 (Nrf2) is an influential regulator of cellular oxidative strain and inflammation, and it plays an integrative role in inducing the expression of genes encoding enzymes involved in antioxidant production and the reduction in pro-oxidants, such as heme oxygenase-1 (HO-1) that represents an essential effect in the protective impacts of oxidative and apoptotic damages. Aside from apparent vancomycin cell poisoning, the prominence of inflammatory signs in the emergence of vancomycin nephrotoxicity is gradually achieved. Immunoregulatory cytokines play a substantial role in several inflammatory and contagious morbidities, and their stimulation highly depends on ROS.

Nuclear factor-kappa B (NF-κB) is a ubiquitous transcriptional factor induced by numerous stimuli leading to catalyzing of assorted gene series implicated in immune, inflammatory, and cell propagation behaviors. It stimulates the expression of inducible nitric acid synthase (iNOS) that affects protein-encoding manipulated in the inflammatory controlling and cell defense mechanisms. Mitogen-activated protein kinase is invigorated by cytokines and cellular tension, leading to the production of inflammatory signaling molecules, including (IL-1β) and neutrophil gelatinase-associated lipocalin (NGAL), which is considered a precursor protein of inflammatory conditions.

Carvacrol is a prevalent phenolic monoterpenoid derivative found in aromatic plants of the family Labiatae involving Salviae, Thymbra, Origanum, Thymus, pepperwort and Coridothymus species. It revealed numerous biological and pharmacological activities, including antioxidant, anti-inflammatory, anticancer, antimicrobial, anxiolytic, anti-depressant, and hepatoprotective effects. Similarly, carvacrol is utilized in the recent production of dosage forms for anti-aging, beauty supplements, and health beverages, conserving the nervous system and cardiovascular care.

Although carvacrol has been shown to have a variety of physiological activities, its relationship to nephroprotection or the reduction of renal injury has never been investigated. Subsequently, the main objective of the current work was to investigate the potential nephroprotective effects of carvacrol against vancomycin-induced nephrotoxicity in rats, as well as the prospective underlying mechanisms.

Materials and Methods

Experimental Animals

Male Wistar rats with an average weight (200-210 g) were obtained from the National Research Center, Cairo, Egypt. Animals were housed in...
clean plastic cages in a standard laboratory facility with free access to food and water. In addition, they were left seven days before the onset of the experiments to acclimate.

**Drugs and Chemicals**
Vancomycin was purchased from Mylan (Saint-Priest, Lyon, France), whereas carvacrol, DMSO, and buffered formalin were purchased from Sigma Aldrich (St. Louis, MO, USA). Creatinine and BUN serum kits were obtained from BioAssay Systems, (Corporate Place, Hayward, USA) (DICT014, DIUR021). Serum Cystatin C and HO-1 kits were purchased from Enzo Life Sciences, (Saint-Priest, Lyon, France) (CSB-E08385r, ADI-EKS-810A). Reduced glutathione (GSH) kit (E02G0367) was purchased from Shanghai Blue Gene Biotech Co., (Songjiang District, Shanghai, China). The lipid peroxidation kit (STA-832) was purchased from Cell Bio-labs Inc., (Arjons Dr, San Diego, CA, USA). Interleukin-1β, NGAL, and iNOS kits (CSB-E08055r, CSB-E09409r, CSB-E08325r), respectively, were obtained from Cusabio Technology (Fannin St, Houston, TX, USA). An NF-κB kit (MBS722386) was obtained from BioSource, (Dorval, QC H9S 5J9, Canada). The PCR primers for NF-κB, IκBα, Nrf2, keap1, and HO-1 were purchased from Qiagen RNeasy, (Qiagen Str., Hilden, Germany) (205311). RNA extraction and cDNA synthesis kits, antibodies of p65 NF-κB, IκBα, MAPK, Nrf2, and HO-1, were obtained from Bio Basic Inc., (Konrad Crescent, Markham, Canada).

**Experimental Design**
The animals were randomly allocated into four groups (8 rats per group), and the experimental design was constructed as follows: Group I received only vehicles and served as a normal control group. Group II was injected with 50 mg/kg carvacrol in a single i.p. dose for seven consecutive days. Carvacrol was dissolved in 5% DMSO and administered to animals at 50 mg/kg, i.p., for seven successive days. Vancomycin (200 mg/kg, i.p.) was given to Group III as a singular daily dose for seven successive days. Group IV received a daily dose of carvacrol for seven days before the vancomycin.

**Blood Sample Collection and Kidney Tissue Pretreatment**
When the experimental course was terminated, blood samples were collected after fasting for 12h by the retro-orbital sampling and then centrifuged at 1.957 xg for 10 min. The clear separated serum used for the assessment of creatinine, blood urea nitrogen (BUN), cystatin C, kidney injury molecule-1 (KIM-1), reduced glutathione (GSH), malondialdehyde (MDA), heme oxygenase-1 (HO-1), inducible nitric oxide synthase (iNOS), interleukin 1β (IL-1β), neutrophil gelatinase-associated lipocalin (NGAL) and nuclear factor-kappa B (NF-κB).

Subsequently, animals were euthanized, and the kidney tissues were enucleated and blotted between two filter sheets after being soaked in ice-cold saline. One part of the tissues was soaked in 10% neutral buffered formalin for histopathological and immunohistochemical evaluations of iNOS, P38MAPK, and NF-κB, whereas the other part of the renal specimen was used for molecular biomarkers using quantitative real-time polymerase chain reaction (qRT-PCR) and western blotting including Keap1, Nrf2, HO-1, IκB, NF-κB, and MAPK.

**Evaluation of biomarkers for renal performance**
Creatinine and blood urea nitrogen levels in serum were evaluated using a commercially available colorimetric kit from BioAssay Systems (USA)27-28. Both levels were measured using the same unit mg/dL. In addition, serum cystatin C level was evaluated using quantitative sandwich commercially available enzyme-linked immunosorbent assay (ELISA) Enzo Life Sciences kit29. Values were expressed as ng/mL. Furthermore, the serum level of KIM-1 was determined using the Cusabio Technology ELISA kit (USA)30, and values were expressed as ng/mL.

**Assessment of serum oxidative overwork biomarkers (GSH, MDA, and HO-1)**
Serum glutathione was assessed using the commercially available ELISA kit (Shang Hai Blue Gene Biotech Co. China)31. GSH levels were calculated as nmol/mL. Malondialdehyde level was measured colorimetrically (Cell Bio-labs Inc. USA) as lipid peroxidation indicator in serum and as nmol/mL32. Furthermore, the Enzo Life Sciences ELISA kit (UK) allows for detecting and quantifying serum HO-1 level33. Values were expressed as ng/mL. Additionally, serum iNOS level was evaluated by Cusabio Technology kit (USA) using quantitative sandwich enzyme immunoassay technique34. Serum synthase levels were evaluated as IU/mL.
Assessment of serum level of inflammatory cytokines

The levels of proinflammatory cytokines, interleukin (IL-1β), and neutrophil gelatinase-associated lipocalin (NGAL) were determined in serum samples using commercially available Cusabio Technology ELISA kits. Both levels were measured as pg/mL and ng/mL, respectively. Furthermore, Serum nuclear factor-kappa B (NF-kB) activity was determined in serum using a commercially available sandwich ELISA kit obtained from My BioSource.com (Canada) and estimated as pg/mL.

Histopathological assessment of kidney tissue

Autopsy samples were rinsed with distilled water after being removed from a 10% formalin solution. Renal specimens were then dehydrated by exposing them to increased alcohol concentrations. Then, the dehydrated renal sections were fined in xylene, embedded in paraffin, then sliced into 4 μm-thick slices. The obtained tissue slices were deparaffinized and stained with hematoxylin and eosin for investigation with the light electronic microscope. A blinded histopathologist examined all sections for distinctive histopathological modifications. Histopathological lesions were scored as follows: normal appearance (−), mild (+), moderate (++), and severe (+++) (Table I).

Investigation of renal iNOS, MAPK, and NF-κB

Kidney segments from various groups were plated at 70°C overnight before being de-waxed in xylene. Endogenous peroxidase activity was restricted by culturing renal sections in a 3% H₂O₂ solution for 15 min then treated with 2% trypsin with buffer solution and washed with PBS. Renal sections were incubated in a solution of 3% H₂O₂ for 15 min to inhibit endogenous peroxidase activity. In these sections, primary antibodies against iNOS, p38 MAPK, and p65 NF-B were incubated overnight at 4°C. After being rinsed in PBS, all tubes were preserved in a secondary antibody. Afterward, hematoxylin is used to counterstain all segments and analyzed under a light microscope.

qRT-PCR investigation of renal NF-κB, IKB, Nrf2, Keap1, and HO-1 mRNA transcription

Total RNA was isolated using a Qiagen RNeasy Mini Kit (Hilden, Germany), and qRT-PCR was used to assess the effect of carvacrol on the vancomycin-stimulated alteration of gene transcription profiles of NF-κB, IKB, Nrf2, Keap1, and HO-1 in rat renal tissue, using β-actin as the standard gene. The heated samples underwent denaturation for 15 min at 95°C and 1 min of annealing at 54-58 °C for 45 cycles. Melting analysis was performed starting at 60°C up to 90°C with a gradual increase in temperature by 0.5 °C every 10 min for nonspecific product screening. Finally, the relative mRNA expression of target genes was estimated by normalization to the control group and β-actin level.

Detection of NF-κB, IKB, MAPK, Nrf-2, and HO-1 protein levels in renal samples using Western blotting

After removing kidney tissue from -80°C and homogenizing it in a Radio-immunoprecipitation assay (RIPA) lysis buffer (Bio Basic Inc., Canada), BCA determined total protein concentrations.

Table I. Injury and lesion index for kidney histopathological features.

<table>
<thead>
<tr>
<th>Pathological features</th>
<th>Lesion scores</th>
<th>Normal</th>
<th>Carvacrol (50mg/kg)</th>
<th>Vancomycin (200mg/kg)</th>
<th>Vancomycin + Carvacrol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vacuoles formation</td>
<td></td>
<td>-</td>
<td>-</td>
<td>+++</td>
<td>++</td>
</tr>
<tr>
<td>Renal deterioration</td>
<td></td>
<td>-</td>
<td>-</td>
<td>+++</td>
<td>++</td>
</tr>
<tr>
<td>Cell shedding</td>
<td></td>
<td>-</td>
<td>-</td>
<td>+++</td>
<td>++</td>
</tr>
<tr>
<td>Cortical plugging</td>
<td></td>
<td>-</td>
<td>-</td>
<td>+++</td>
<td>+</td>
</tr>
<tr>
<td>Cells oozing</td>
<td></td>
<td>-</td>
<td>-</td>
<td>+++</td>
<td>+</td>
</tr>
</tbody>
</table>

Where (-) there is no alteration, (+) there is a slight alteration, (++) there is a considerable alteration, and (+++) there is a substantial alteration.
Table II. Primer sequence for mRNA expression qRT-PCR.

<table>
<thead>
<tr>
<th>Target Gene</th>
<th>Sequence</th>
</tr>
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</table>
| NF-KB p65   | F: 5-TCCCCAAGCCAGCACCACCCAGC-3  
             | R: 3-GGCCCAAGCTTCATCACAGC-5       |
| IKB-α       | F: 5-GACGAGGATTACGAGCAGAT-3   
             | R: 3-CCTGGTAGGTTACTCTGTTG-5        |
| Nrf2        | F: 5-TGGCCTGTGGTGCAAGTGC-3   
             | R: 3-GGTCGGTTACCGTCCTGC-5         |
| Keap1       | F: 5-TGCCCTGTGGTGCAAGTGC-3   
             | R: 3-GGTCGGTTACCGTCCTGC-5         |
| HO-1        | F: 5-GTAATGCAGTGTTGGCCCC-3   
             | R: 3-ATGTCCAGGCATCTCCTTC-5        |
| β-actin     | F: 5-TGCTGTCCTGTATGCCCTCT-3  
             | R: 3-TTGGATGTACGCACGATT-5         |

The protein sample was isolated using sodium dodecyl sulphate polyacrylamide gel electrophoresis and then transferred to a nitrocellulose membrane. Subsequently, tissues were treated for 1h with a 5% buffered saline tween, and the cells were then incubated at 4°C overnight with primary antibodies against p65 NF-κB, IKB, MAPK, Nrf2, HO-1, and β-actin (1: 3000). At room temperature, HRP-conjugated secondary antibodies (1: 5000) were implemented to determine the primary antibodies, and the intensity of protein bands was assessed using a computerized densitometer42.

**Docking estimation at the molecular level**

The docking investigations and assessment of carvacrol binding affinities with HO-1, Keap1, NF-κB, and p38MAPK were carried out using the Autodock vina 1.5.6 software6. The crystal structures of HO-1 with its inhibitor (PDB ID: 3HOK), Keap1 with its inhibitor (PDB ID: 4L7B), and NF-κB (PDB ID: 1VKX), as well as p38MAPK with its inhibitor (PDB ID: 3ZS5), were retrieved from Protein Data Bank. Based on prior relevant studies, the interaction residues of the active site for each protein involved in docking experiments were discovered. The polar hydrogens were introduced to the crystalline structure after all the water molecules and ligands were eliminated, and the pdbqt templates were formed appropriately44-47. The lowest energy docking average energy docking was used to predict the binding affinities of carvacrol with the target protein. The best-scored conformation was analyzed and visualized using Chimera 1.12 software.

**Statistical Analysis**

All the data was graphed as mean ± SD. The one-way analysis of variance was used to determine whether there was a significant difference in group means, along with the Tukey-Kramer test. The statistical package for social sciences (SPSS) computer program was used to stratify the statistical analysis and visualize findings (version 22 - IBM Corp., Armonk, NY, USA). The level of statistical significance was set at a p-value<0.05.

**Results**

**Carvacrol Treatment Ameliorated Kidney Function Tests in Vancomycin-Induced Nephrotoxicity**

The effect of carvacrol on vancomycin-induced renal impairment is illustrated in (Table III). Vancomycin induced a significant elevation in renal bio-signs recognized by a substantial increase in serum creatinine and blood urea nitrogen (BUN) levels. This increase in renal parameters confirmed the induction of nephrotoxicity in the vancomycin group. However, the administration of carvacrol markedly prevented the vancomycin-induced increase in serum creatinine and BUN levels. Additionally, vancomycin-treated rats caused a significant elevation in serum cystatin C level, matching with the normal control group signalizing lowering glomerular filtration rate. Interestingly, carvacrol significantly ameliorated serum cystatin C level elevation due to vancomycin-induced renal injury demonstrating crucial protection against protein catabolism and tubular dysfunction. Furthermore, rats receiving vancomycin caused a significant rising in serum KIM-1 levels compared to the normal control group indicating toxic kidney injury. Interestingly, carvacrol significantly ameliorated serum KIM-1 level el-
Carvacrol mitigates vancomycin-induced nephrotoxicity

All these results indicate the nephron-protective effect of carvacrol against kidney deterioration stimulated by vancomycin.

**Carvacrol Treatment Significantly Reduced Oxidative Stress and Improved Antioxidant Enzymes Activity**

In the current investigation, vancomycin injection resulted in a significant decrease in serum levels of GSH and HO-1 compared to the control group. On the contrary, a significant increase in MDA and iNOS levels in serum was observed in parallel with the normal control group. Conversely, co-treatment with carvacrol significantly restored glutathione and HO-1 to normal levels and significantly decreased the elevation of serum malondialdehyde and iNOS levels as matched to vancomycin-treated rats (Table IV).

In addition, vancomycin administration caused a remarkable decrease in HO-1 mRNA and protein expression compared with the normal control group. Compared to the vancomycin-treated group, the carvacrol treatment further upregulated HO-1 mRNA and protein expression (Figure 1 A-B). The observed alleviation in oxidative strain and refinement of the antioxidant defense technique could be accountable for the reno-protective outcomes of carvacrol against vancomycin-agitated renal deterioration.

**Carvacrol Diminished Oxidative Overwork Via Coordination of Renal Keap1/Nrf2 Pathway of Vancomycin-Treated Rats**

Evaluation of renal mRNA expression levels of keap1/Nrf2 and protein phosphorylation of Nrf2 revealed that vancomycin induced a considerable

<table>
<thead>
<tr>
<th>Treatment regimen</th>
<th>Control</th>
<th>Carvacrol (50 mg/kg)</th>
<th>Vancomycin (200 mg/kg)</th>
<th>Vancomycin + Carvacrol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biomarker</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creatinine (mg/dl)</td>
<td>0.58±0.016</td>
<td>0.58±0.030</td>
<td>2.55±0.067&lt;sup&gt;a&lt;/sup&gt;</td>
<td>1.13±0.049&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>BUN (mg/dl)</td>
<td>29.16±0.30</td>
<td>29.3±0.21</td>
<td>69.33±0.84&lt;sup&gt;a&lt;/sup&gt;</td>
<td>43.33±1.02&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>Cystatin C (ng/ml)</td>
<td>45.58±0.17</td>
<td>45.46±0.16</td>
<td>168.2±1.25&lt;sup&gt;a&lt;/sup&gt;</td>
<td>115.06±1.74&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>KIM-1 (ng/ml)</td>
<td>2.40±0.15</td>
<td>2.47±0.13</td>
<td>13.28±0.27&lt;sup&gt;a&lt;/sup&gt;</td>
<td>8.33±0.14&lt;sup&gt;a,b&lt;/sup&gt;</td>
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</tbody>
</table>

Each finding revealed the standard error of the mean of eight experimental rats (S.E.M). One-way analysis of variance (ANOVA) was applied for statistical analysis, accompanied by Tukey’s post-hoc comparison test. <sup>a</sup>At p<0.05, there was a significant difference between the normal control group. <sup>b</sup>At p<0.05, there was a significant difference vancomycin group.

<table>
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<th>Treatment regimen</th>
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<th>Vancomycin (200 mg/kg)</th>
<th>Vancomycin + Carvacrol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biomarker</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>GSH (μmol/ml)</td>
<td>3.47±0.14</td>
<td>3.2±0.15</td>
<td>0.91±0.037&lt;sup&gt;a&lt;/sup&gt;</td>
<td>1.7±0.09&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>HO-1 (ng/ml)</td>
<td>7.7±0.27</td>
<td>7.8±0.29</td>
<td>1.31±0.0076&lt;sup&gt;a&lt;/sup&gt;</td>
<td>3.99±0.11&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>MDA (mol/ml)</td>
<td>11.7±0.17</td>
<td>11.5±0.01</td>
<td>29.7±0.2&lt;sup&gt;a&lt;/sup&gt;</td>
<td>17.5±0.05&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
<tr>
<td>iNOS (IU/ml)</td>
<td>4.18±0.07</td>
<td>4.15±0.09</td>
<td>24.71±1.49&lt;sup&gt;a&lt;/sup&gt;</td>
<td>12.13±0.47&lt;sup&gt;a,b&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

Each finding revealed the standard error of the mean of eight experimental rats (S.E.M). One-way analysis of variance (ANOVA) was applied for statistical analysis, accompanied by Tukey’s post-hoc comparison test. <sup>a</sup>At p<0.05, there was a significant difference between the normal control group. <sup>b</sup>At p<0.05, there was a significant difference vancomycin group.
reduction in Nrf2 mRNA and protein expression levels. Compared to the normal group, renal Keap1 mRNA expression levels increased dramatically. In contrast, co-treatment with carvacrol significantly increased Nrf2 mRNA and protein expression levels, even though Keap1 mRNA expression levels revealed a noticeable lowering as matched to the vancomycin-treated group (Figure 2 A-C), indicating the regulation of Keap1/Nrf2 pathway might be one of the emphasized techniques in protection against vancomycin-agitated nephrotoxicity.

**Treatment with Carvacrol Mitigates Vancomycin-Induced Inflammatory Response**

The current detections illustrated that vancomycin fundamentally elevated IL-1β, NGAL, NF-κB in serum in the normal group. In contrast to the vancomycin-treated group, pretreatment with carvacrol revealed noticeable mitigation in serum levels of IL-1β, NGAL, and NF-κB (Figure 3 A-C). These findings substantiate carvacrol’s anti-inflammatory potential, which might be responsible for its nephron protective impacts against vancomycin-induced renal deterioration.

**Carvacrol Inhibits Inflammatory Response via Influencing Ikbα/NF-kb/MAPK Activity in Vancomycin-Treated Rats**

In comparison to the normal control group, vancomycin administration significantly decreased IKB mRNA and protein expression levels while significantly increasing p65 NF-B mRNA and protein expression levels and elevating p38 MAPK.

![Figure 1](image-url)

**Figure 1.** Impact of carvacrol on renal HO-1 mRNA (A) and protein expression in vancomycin-injected rats (B). Each finding revealed the standard error of the mean of eight experimental rats (S.E.M). In regard to β-actin, the proportion of mRNA and phosphorylated protein levels was recorded. One-way analysis of variance (ANOVA) was applied for statistical analysis, accompanied by Tukey’s post-hoc comparison test. a: At p<0.05, there was a significant difference between the normal control group. b: At p<0.05, there was a significant difference vancomycin group.
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Protein phosphorylation. Compared to the vancomycin-treated group, these impacts were reversed by co-administration of carvacrol, where it upregulated mRNA and protein expression levels of IKBα and downregulated the mRNA and protein expression levels of p65 NF-κB and reduced p38 MAPK protein phosphorylation (Figure 4 A-E).

**Carvacrol Alleviates Vancomycin-Agitated Histopathological Abnormalities in the Kidney**

The histopathological examination of kidney sections was performed to estimate vancomycin-agitated renal deterioration and the potential of carvacrol to safeguard renal tissues against this abrasion. The normal control and carvacrol-treated rats demonstrated no histopathological change and the normal histological structure of the glomeruli and tubules at the cortical and cortico-medullary portion, as depicted in (Figure 5 A-B).

In the interior layer of tubular epithelium in the cortical area of the kidneys of vancomycin-treated rats, histopathological examination indicated gradual, often irreversible degradation and necrosis and the cortico-medullary segment in the medullary section of the tubular lining epithelium. There was also considerable degradation and erosions (Figure 5 C-D). These pathological changes in kidneys were alleviated by carvacrol, where the tubular lining epithelium at the cortex demonstrated slight degradation and erosions. The tubular lining epithelium had minimal tubular congestion in the cortico-medullary region, and the tubular lining epithelium had fewer deteriorating changes (Figure 5 E-F).

**Impact of Carvacrol on Immunohistochemical Modulations in Kidney Tissues**

Notably, kidney sections obtained from normal rats demonstrated no expression of iNOS, p38-MAPK, and p65-NF-κB immunostaining within the renal lining epithelium of proximal tubular cells (Figure 6 A-C). In contrast, immunohisto-
chemical examination of kidney sections from rats treated with vancomycin revealed significantly reduced the immunoreactivity of iNOS, MAPK, and NF-κB in renal cells compared to the control group (Figure 6 D-F). Interestingly, rats pretreated with carvacrol showed significant amelioration in the vancomycin-induced overexpression of iNOS, MAPK, and NF-κB in renal cells compared with the vancomycin-treated group (Figure 6 G-I).

Carvacrol Docking with HO-1, Keap1, NF-κB, and MAPK at the Molecular Level

Carvacrol demonstrated promising binding affinities with HO-1, Keap1, NF-κB, and MAPK with the binding energy of docking -6.61±0.19, -5.98±0.30, -5.84±0.32, and -7.31±0.30 kcal/mol, respectively. Carvacrol demonstrated a well-fitted structure in the small cleft between the prosthetic-heme group and the binding site of HO-1 through hydrophobic interaction with S142, V146, and L147 (Figure 7A). At the dimeric boundary of Keap1, carvacrol showed a variety of non-covalent engagement. It has a hydrogen bond with S363’s side chain, and its aromatic ring has π-π interaction with Y334’s aromatic ring (Figure 7 B). Carvacrol forms two hydrogen bonds with H364 and G365 in the active binding peptide of NF-κB (Figure 7 C). Carvacrol demonstrated the highest binding affinity with p38MAPK compared to other target proteins. This promising binding affinity could be attributed to the hydrophobic interaction with the hydrophobic pocket of p38MAPK that include V38, K53, T106, and F169. In addition, it forms a hydrogen bond with T106 (Figure 7D).

Figure 3. Carvacrol impact on serum levels of IL1β, NGAL, NF-κB in vancomycin-injected rats. (A-C) Each finding revealed the standard error of the mean of eight experimental rats (S.E.M). One-way analysis of variance (ANOVA) was applied for statistical analysis, accompanied by Tukey’s post-hoc comparison test. a: at p<0.05, there was a significant difference between the normal control group. b: at p<0.05, there was a significant difference vancomycin group.
Carvacrol mitigates vancomycin-induced nephrotoxicity

Figure 4. Impact of carvacrol on mRNA and protein expression levels of renal [IκBα]-NF-κB/ MAPK cascade in vancomycin-injected rats. (A-F) Each finding revealed the standard error of the mean of eight experimental rats (S.E.M). In regard to β-actin, the proportion of mRNA and phosphorylated protein levels was recorded. One-way analysis of variance (ANOVA) was applied for statistical analysis, accompanied by Tukey’s post-hoc comparison test. a: at \( p<0.05 \), there was a significant difference between the normal control group. b: at \( p<0.05 \), there was a significant difference vancomycin group.
Discussion

Away from the conventional strategies in treating vancomycin renal injury, the current investigation investigates the carvacrol impact on suppressing oxidative load and inflammatory processes, as well as its relationship to the survival systems IκB-p65 NF-κB/p38 MAPK and Keap1-Nrf2/HO-1, in mitigating vancomycin-induced renal toxicity. The present study substantiated vancomycin-induced impairment in kidney function by substantial elevation in serum creatinine and urea levels. In the same regard, a previous study showed that vancomycin administration reduced creatinine and BUN levels\(^4^8\). Additionally, our results revealed decreased glomerular filtration rate as indicated by the increased expression of cystatin C in vancomycin exposed group\(^4^9\). Cystatin C is a well-known proteinase inhibitor and was previously thought to be primarily responsible for buffering the extracellular inflammatory leukocytes and regulating proteolytic activity in various inflammatory pathways in the renal cell\(^5^0\). In the current investigation, carvacrol played a critical role in protecting against protein catabolism and tubular dysfunction, as evidenced by the absence of vancomycin-induced increases in serum creatinine, BUN, and cystatin C levels. This effect could be attributed to carvacrol’s antioxidant properties\(^5^1\).

On the contrary, kidney injury molecule-1 (Kim-1) is a phosphatidylinerine transmembrane protein rarely found in healthy kidney tissue...
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but is elucidated at elevated concentrations in epithelial cells of the proximal tubule, especially in ischemic or toxic cases. It arranged the engulfment of apoptotic cells and oxidized molecules. In addition, KIM-1 overexpression can promote the migration and proliferation of renal tubular epithelial cells by activating the MAPK signaling pathway. In context, the current work demonstrated a substantial increase in Kim-1 serum levels in vancomycin-treated rats. This outcome was particularly evident in carvacrol-protected animals.

Many in vivo and in vitro studies revealed that vancomycin induced ROS generation, which is considered one of the essential mediators for its nephrotoxic activity. Meanwhile, these free radicals could cause lipid peroxidation as demonstrated by increased malondialdehyde (MDA) production and depletion of the antioxidant system are well known to cause protein denaturation, membrane lipid peroxidation, and cellular injury. In the current research, oxidative injury due to vancomycin was found to deplete protective cellular antioxidants such as serum reduced glutathione (GSH), heme oxygenase-1 (HO-1), and serum MDA. The combination of carvacrol and vancomycin significantly reduced the oxidative damage caused by the antibiotic, as evidenced by the recovery of serum GSH and HO-1 levels and the decrease of serum MDA levels. It is possible to attribute carvacrol’s antioxidant effects at least to its free radical scavenging feature, which is due to the presence of the phenolic OH group linked to the aromatic ring in its structure.

Furthermore, it serves as a hydrogen donor for the peroxy radicals formed during the lipid oxidation step, protecting the kidney from the adverse effects of ROS generation.

In addition, Heme oxygenase-1 is the only rate-limiting enzyme implicated in heme retrogression, converting heme into carbon monoxide, iron, and biliverdin. The anti-oxidative, anti-inflammatory, anti-apoptosis, signaling, and immune controlling mechanisms of the previously metabolites validate HO1 to supply widespread tissue protection. In the current investigation,
Carvacrol restored HO-1 activity besides the cellular thiol pool, demonstrating extensive protection against vancomycin-induced oxidative stress. Due to the presence of the phenolic OH group linked to the aromatic ring in its structure, the antioxidant effects of carvacrol could be attributed at least to its free radical scavenging feature. Furthermore, it serves as a hydrogen donor for the peroxyl radicals formed during the lipid oxidation step, protecting the kidney from the detrimental effects of ROS generation.

Cells normally refuse to be exposed to potentially harmful oxidizing lesions; they attempt to protect themselves by orchestrating the intracellular antioxidant systems. One of these defenses is the Keap1-Nrf2/HO-1 pathway. Revitalizing Nrf2 and catalyzing the expression of HO-1 elucidated a sensitive marker of a cellular response versus oxidative strain. In situations accompanied by oxidative workover, the Keap1-Nrf2/HO-1 pathway is usually prompted, causing dissociation of Nrf2 from Keap1 and its migration to the nucleus stimulating the transcription of antioxidant genes. Here, the vancomycin-treated rats revealed a considerable suppression in both the protein and mRNA expression levels of Nrf2 and HO-1 with the exhaustion of the serum HO-1 level. Nevertheless, the mRNA expression level of Keap1 was significantly increased. The vancomycin-induced toxicity results in the enormous generation of ROS and RNS that overruns the physiological amplitude of the antioxidant enzymes, such as HO-1. Consequently, these enzymes are depleted, and their efficiencies are attenuated. In the rats protected with carvacrol, a significant elevation in both the protein and mRNA expression levels of Nrf2/HO-1 and serum HO-1 level was observed with a significant increase in the mRNA expression level of Keap1. Therefore, the nephroprotective effect of carvacrol may be attributed to its ability to mitigate the vancomycin-induced activation Keap1-Nrf2/HO-1 signaling pathway.

The pathological procedure of vancomycin-agitated renal cell injury is associated with the release of several inflammatory cytokines and mediators, including IL-1β, IL-6, TNF-α, iNOS, and NO. Interleukin-1β (IL-1β) is a proinflammatory cytokine linked to a variety of inflammatory diseases, as well as increased vascular permeability and hyperalgesia. Interestingly, the present investigation demonstrated that carvacrol has a conclusive mechanism to slow down the inflammatory process induced by vancomycin by lowering IL-1β and NGAL serum levels. Neutrophil Gelatinase Associated Lipocalin is considered the essential protein responsible for a series of alterations in plasma protein levels during inflammatory prompting, agitated at most by the impacts of IL-1β. Furthermore, it has been reported that the nephroprotective effect of carvacrol treatment may be provided by attenuating the overproduction of IL-1β and NO in macrophages cells, improving or preventing the destructive ef-

**Figure 7.** Carvacrol docking with HO-1, Keap1, NF-κB, MAPK at molecular level. Carvacrol exhibited hydrophobic interaction with S142, V146 and L147 of HO-1 (A). Carvacrol forms a hydrogen bond with the side chain of S363 and π-π interaction with the aromatic ring of Y334 of Kelch-like ECH-associated protein 1 (Keap1) (B). Carvacrol forms a pair of hydrogen bonds with H364 and G365 of NF-κB (C). Carvacrol exhibited hydrophobic interaction with the hydrophobic pocket of mitogen-activated protein kinase (p38MAPK) V38, K53, T106 and F169 and forms a hydrogen bond with T106 (D). Blocks reflect all the interaction residues of the identified proteins with carvacrol.
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Vancomycin was found to initiate its renal apoptotic effect via NO, which reacts with superoxide anion and produces peroxynitrite radical, a more potent oxidant and cytotoxic agent implicated in lipid peroxidation of vancomycin-induced nephrotoxicity. It was also found that vancomycin administration increased the activities of iNOS in kidney tissues. Furthermore, NO acts as a neurotransmitter and vasodilation inducer, promoting an elevation of the macrophage’s activity to reinforce the secretion of proinflammatory signaling molecules. The present data demonstrated that carvacrol considerably declined the mRNA expression level of iNOS. In addition, the current immunohistochemical study revealed that carvacrol eliminated the vancomycin-induced iNOS expression observed, supporting the assumption that carvacrol minimized NO generation by inhibiting the transcription of the iNOS genes explaining the anti-nitrosative effect of carvacrol.

Among all the intracellular signaling systems involved in regulating the levels of proinflammatory cytokines and inflammatory mediators, nuclear factor-kappa B (NF-B) is of particular interest. A series of inhibitory proteins known as nuclear factor of kappa light polypeptide in the cytoplasm, termed IKBa, and IKBα in the NF-B signaling pathway were assessed. The current finding revealed that the protein phosphorylation and mRNA expression levels of IKBa were lowered by vancomycin while NF-κB protein and mRNA expression levels exceeded the normal group. Carvacrol supplementation restored these changes to their normal level, resulting in IKB activation and NF-B inhibition. As a result, the current findings suggest that the protective effects of carvacrol on vancomycin-agitated rat renal injury may be linked to the suppression of NF-κB initialization.

Subsequently, the current outcomes illustrated that the protective impacts of carvacrol on vancomycin-agitated rat renal injury might be linked to the suppression of NF-B initialization.

To further clarify the restrained role of carvacrol on cytokine induction and signaling molecule generation, the recent study also confirmed its impact on the MAPK pathway, which plays a critical role in the inflammatory responses. The expression and initialization condition of the essential components of the p38 MAPK/NF-κB axis were firmly established and positively connected to each other. These results demonstrated that phosphorylation of p38 MAPK was confirmed after vancomycin treatment. However, the phosphorylation and mRNA expression of p38 MAPK was significantly inhibited in carvacrol-treated groups. The previous findings indicated that carvacrol suppressed the initialization of proinflammatory signaling molecules by prohibiting the invigoration of NF-κB and MAPK signaling pathways.

Vancomycin-treated rats had progressive, often irreversible deterioration and necrosis of the tubular lining epithelium in the cortical section, as well as degradation and erosions of the tubular lining membrane in the medullary fraction, according to the histopathological examination of kidney sections in the current study. These changes in vancomycin were equivalent to the alterations affirmed by Kandemir et al., who elucidated histological abrasions of rat kidneys after vancomycin treatment performed acute tubular necrosis emphasizing irreversible deterioration. Kidney sections from rats pretreated with carvacrol demonstrated less renal changes with mild degeneration in the tubular lining epithelium compared to the vancomycin group. This finding further supports the biochemical findings of the present investigation.

Otherwise, the use of a molecular docking technique to predict the binding ability of experimental drugs with their target proteins is prevalent in drug discovery. This approach can also be used to investigate the regulatory role of the drugs in different disease pathways. In the current study, this approach was utilized to investigate the potential binding of carvacrol with the crucial proteins that regulate the oxidative stress and inflammation pathways. Interestingly, carvacrol demonstrated promising binding affinities with the target proteins. The high affinity of carvacrol with the target proteins is due to the monoterpenoid phenol structure that allows it to form various non-covalent interactions through its polar phenolic-OH group and the aromatic ring. The docking findings strongly confirmed the modulatory impact of carvacrol in oxidative strain and inflammation cascades and its ther-
apeutic potential against vancomycin-induced nephrotoxicity.

**Conclusions**

The current research has revealed the protective effects of carvacrol versus vancomycin-agitated kidney injury. Carvacrol protected the rat kidney from the oxidative strain and inflammation stimulated by vancomycin by alleviating kidney deterioration. This effect could be attributed to the regulation and controlling of the following signaling cascades IkBα/MAPK and Keap1/Nrf2, suggesting its role in the protective effect of carvacrol versus vancomycin-prompted kidney damage. Notably, carvacrol could be considered a reno-protective agent against vancomycin-induced nephrotoxicity. Further clinical studies are required to confirm our findings.

**Conflict of Interest**

The authors state that they have no recognized conflicting economic interests or personal connections that could have impacted the work.

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**Authors’ Contributions**

Marwa M. Khalaf, Samar M. Hassan, and Amira M. Abo-Youssef conceived and designed the experimental protocol. Samar M. Hassan conducted the experiments. Marwa M. Khalaf supervised the experimentation. Marwa M. Khalaf, Samar M. Hassan, and Amira M. Abo-Youssef performed statistical data analysis. Ahmed M. Sayed performed the molecular docking. Samar M. Hassan and Marwa M. Khalaf wrote the paper draft. Ahmed M. Sayed and Amira M. Abo-Youssef revised the manuscript. All authors contributed significantly to the research and have reviewed and confirmed the work for publishing.

All data were generated in-house, and no paper mill was used. All authors agree to be accountable for all aspects of work, ensuring integrity and accuracy.

**Ethics Approval**

All experiments and animal care procedures were carried out in accordance with the guidelines of the Ethics Committee for Animal Experimentation (Institutional Animal Care and Use Committee of Beni-Suef University, Faculty of Pharmacy (Reference Number: 020-121), which are based on the requirements proposed by the National Institutes of Health (NIH) Guide for Care and Use of Laboratory Animals.

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