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## Erythropoietin ameliorates gentamicin-induced renal toxicity: A biochemical and histopathological study

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**Background:** Investigations have attempted to modify the outcome of tubular injury by either ameliorating renal tubular damage or promoting tubular regeneration in the case of acute tubular necrosis.

**Objectives:** We investigated the protective effect of Eprex an erythropoietin analogue on tubular injury induced by gentamicin (GM).

**Materials & Methods:** Forty male Wistar rats were randomly divided into 4 groups. In group 1, rats were served as a sham group. In group 2, rats were injected intraperitoneally with 100 mg/kg of GM for 10 consecutive days (positive control group) and then were sacrificed. In group 3, rats received GM for 10 days then Eprex 100 U/kg was injected intraperitoneally for the next 10 days and then they were sacrificed at the day 20th. In group 4, rats were injected a combination of GM (80 mg/kg) and Eprex 100 U/kg intraperitoneally for 10 days and then were sacrificed.

**Results:** The results indicated that, Eprex prevented the increase in serum creatinine (Cr) and blood urea nitrogen (BUN). The effect of Eprex on damage score, showed that co-administration of GM and Eprex (group 3 and 4) reduced the kidney tissue damage compared to positive control group ( $P < 0.05$ ). This result indicates that Eprex potentially can reduce or prevent the kidney tissue damage.

**Conclusions:** Ameliorative effect of Eprex when the drug was given in combination with GM and also when the drug was applied after GM-induced tubular damage, revealed the renoprotective potency of Eprex. Eprex is a promising drug to prevent or attenuate tubular damage induced by GM or other nephrotoxic agents which act through the same mechanisms as gentamicin.

### Biography

Fatemeh Ghaed Amini Asadabadi has completed her GP from Shahrekord University and now is Resident of Gyn. and Obs. in Shahid Beheshti University of Medical Science in Tehran/Iran. She has published more than 20 articles in nephrology field.

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