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Spectrophotometric determination of progesterone and dopamine in breast cancer serum

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الملخص:

الدوبامين هو احد اهم النواقل العصبية في الجهاز العصبي المركزي في دماغ الأنسان و يلعب دور اساس في وظيفة الجهاز (الكلوي، الهرموني و الوعائي القلبي). ان الإفراز غير الطبيعي للهرمون يؤدي الى امراض مثل الزهايمر ومرض باركنسون، لهذا إزدادت اهمية تقدير الدوبامين في مجال تشخيص الأمراض السريرية وبحوث الوظائف الفسيولوجية.

البروجستبرون له دور اساسي في التطوير والتنظيم الدوري لإستجابة الأنسجة كالثدي والقنوات اللبنية للهرمون ، ففي الثدي يعمل مع الأستروجين لتطوير التكاثر والمحافظة على بقاء برامج الجين كما ان للبروجستبرون دور في سرطان الثدي. يوضح هذا البحث الطريقة الطيفية لتقدير الدوبامين والبروجستيرون في نماذج مصل الدم حيث جمعت 56 عينة دم وريدي لكل من مرضى سرطان الثدي واخرى للأصحاء. اوضحت النتائج التحليلية التي توفرت بأستخدام جهاز المطياف الضوئي عند الطول الموجي الأعظم (250،266) نانوميتر وخطية ضمن المدى (2.0-0.5 و 2.0-5.1) للدوبامين والبروجستيرون على التوالي. معامل الإمتصاص المولاري ، معامل الارتباط وحد الكشف

 $(0.57 \cdot 0.64 \)$ و $(0.9995 \cdot 0.9979 \)$ ، (1 سم $^{-1}$) ، ($4.1935 \times 10^{6}, \, 2.5156 \times 10^{6})$

للدوبامين والبروجستيرون على التوالي اوضحت النتائج وجود اختلافات معنوية بين تركيز الدوبامين والبروجستيرون في مجموعة مرضى سرطان الثدي ومجموعة السيطرة وهي طريقة طيفية سريعة وحساسة ويمكن الوثوق بها واستخدامها عند التقدير الكمي لنماذج بيولوجية معقدة

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Abstract

Dopamine (DA) is one of the most important catecholamine neurotransmitters in the human central nervous system in the brain and plays a key role in the functioning of the renal, hormonal, and cardiovascular systems. Abnormal release of DA will contribute to some diseases such as Alzheimer's and Parkinson's disease. Therefore, the sensitive determination of DA becomes increasingly significant in the field of clinical disease diagnosis and the research of physiological functions.

Progesterone is an essential for the development and cyclical regulation of hormone responsive tissues including the breast and reproductive tract. In the breast, progesterone acts in concert with estrogen to promote proliferative and pro-survival gene programs. Progesterone has actions in breast cancer.

This paper shows a spectrophotometric method for determination dopamine and progesterone concentration in serum samples, fifty six veins blood samples collected from healthy control and breast cancer The analytical data obtained by using UVpatient groups. Spectrophotometer ($\lambda_{\text{max}} = 250$, 266 nm), linearity (0.5 - 2.0, 0.25 - 1.5 ng/ml) for dopamine, progesterone respectively. The molar absorptivity (E), correlation coefficient (R²) and limit of detection (LOD) for dopamine, progesterone ($\epsilon = 2.5156 \times 10^6$, 4.1935×10^6 L.mol⁻¹ cm⁻¹). $(R^2 = 0.9979, 0.99957)$ and (0.64, 0.57 ng/ml) respectively. The results show significant differences between the concentrations of dopamine and progesterone in control and breast cancer patient groups (p<0.05). It is fast, sensitive, selective and reliable quantification spectrophotometric method used in complex biological samples.

Keywords: dopamine, progesterone, spectrophotometric, breast cancer.

1. Introduction

Dopamine (DA), 2-(3,4-dihydroxyphenyl) ethylamine, is a kind of neurotransmitter which plays an important role in the function of

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mammalian central nervous, renal, hormonal and cardiovascular systems. It is one of the most crucial catecholamines and belongs to the family of excitatory chemical neurotransmitters. It is derived from tyrosine and is the precursor to norepinephrine and epinephrine.

The hydrochloride salt of DA.HCl as shown in Figure-1 can be supplied as a medication in the treatment of shock, which may be caused by trauma, heart attack, open heart failure, kidney failure and severe bacterial infections of the blood. Excess amounts of DA in the brain often cause pleasurable, rewarding feelings, and sometimes even euphoria, while the deficiency of DA in the brain could cause a few central nervous system disorders, such as Alzheimer's and Parkinson's disease [1-5].

The most frequent spectral methods for dopamine determination such as, ultraviolet-visible absorption [6-17], fluorescence [18-24], and chemiluminescence [25]. Electroanalytical methods, namely, voltammetry [26-29], amperometry [30], and polarography [31, 32], were also described in the literature.

Figure-1 Dopamine hydrochloride structure

Recently, great efforts were done in this direction with a lot of long, expensive, and sophisticated procedures using, for example, monolayer of triazole on gold electrodes [33], using gold nanoparticles [34-36], using modified glassy carbon electrode [37, 38] and using silver nanoparticles [39]. Fast and simple isocratic HPLC method for the determination of DA, 3,4-dihydroxyphenylacetic acid (DOPAC),

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norepinephrine (NE), and serotonin (5-HT) in homogenate samples of mouse striatum employing the direct fluorescence of the neurotransmitters [40].

Effective derivatization method followed by high-performance liquid chromatography (HPLC) coupled to electrochemical ionization mass spectrometry to measure the levels of serotonin (5-hydroxyltryptamine, 5-HT), DA, 3,4-hydroxyphenylacetic acid (DOPAC), 3- methoxytyramine (3-MT) and homovanillic acid (HVA) simultaneously [41].

Steroids belong to a group of substances with a structural core formed by cyclopenta perhydrophenanthrene and they play an important role in human physiology. Some steroids, such as progesterone as shown in Figure-2, act like sex hormones, responsible for sexual characteristics and supports for reproduction [42-44]. Steroids analyses in different matrices have been possible through analytical separation techniques such as liquid chromatography (HPLC) [45, 46], capillary zone electrophoresis (CZE) [47], micellar electrokinetic chromatography (MEKC) [48], and capillary electrochromatography (CEC) [49, 50].

A separation technique in liquid medium that has gained significant interest in recent years is the CEC, which combines some characteristics of both HPLC and capillary electrophoresis (CE) [51].

Progesterone is a steroid hormone that is produced primarily by the corpus luteum in the ovaries during the second half of the menstrual cycle or luteal phase. Progesterone is also produced, to a lesser extent, in the adrenal glands and, during pregnancy, the placenta. Thus, cyclical hormone exposure beginning at menarche and ending in menopause occurs monthly and regulates the growth and differentiation of specialized tissues within the reproductive tract and breast tissues[52] pregnancy interrupts this process and is characterized by high progesterone levels, which are required for fetal development, breast development for lactation, maintenance of uterine/placental integrity, and myometrial quiescence [53]. In the present study, serum levels of dopamine and progesterone hormones were measured spectrophotometric method in breast cancer patient and control groups.

Figure-2 Progesterone structure

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2. Materials and methods

2.1 Instrumentation

All absorbance readings were measured using UV-2800 Laborned Spectrophotometer connected to hp Laser jet-1300 printer with quartz cell.

2.2 Preparation of solutions

2.2.1 Stock solution of dopamine hydrochloride (DA.HCl)

A weight of 0.0125 g of dopamine HCl (sigma-aldrich) dissolved in ethanol, transferred into volumetric flask (50 ml), diluted with ethanol to the mark and mixed (0.250 mg/ml).

2.2.2 Stock solution of progesterone

A weight of 0.0125 g of progesterone (sigma-aldrich) dissolved in chloroform, transferred into volumetric flask (50 ml), diluted with chloroform to the mark and mixed (0.250 mg/ml).

2.2.3 Standard solution of dopamine hydrochloride

Transferred 4 μ L by the micropipette from the stock solution (0.250 mg/ml) to volumetric flask (10 ml), diluted with ethanol to the mark, working solution (100 ng/ml) has been prepared. The following volumes (0.05, 0.1, 0.15 and 0.2 ml) transferred from the working solution (100 ng/ml) to four volumetric flasks (10 ml) respectively, diluted with ethanol to the mark, standard solutions (0.5, 1.0, 1.5 and 2.0 ng/ml) were prepared.

2.2.4 Standard solution of progesterone

Transferred $4\mu L$ by the micropipette from the stock solution (0.250 mg/ml) to volumetric flask (10 ml), diluted with chloroform to the mark, working solution (100 ng/ml) has been prepared. The following volumes (25, 50, 100 and 150) μL transferred from the working solution (100

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ng/ml) to four volumetric flasks (10 ml) respectively, diluted with chloroform to the mark, standard solutions (0.25, 0.5, 1.0 and 1.5 ng/ml) were prepared.

2.3 Preparation of samples

Twenty eight female patients, with histopathological diagnosis of breast cancer, aged 26–62 years were selected from Al-sader public hospital in Misan- Iraq. Twenty eight matched healthy women who attended routine health examination in the same hospital were selected from the same area with no history of any tumor or breast disease. Ten ml of venous blood without using anticoagulant samples were collected from patients and healthy volunteers in plain screw cap specimen bottles and then left for 30 min for retraction after, which centrifugation was carried out at 3000 rpm for 5 min and the supernatant serum was aspirated by using pasteur pipette into another plain bottle. The collected supernatant was then pooled and stored at -20° C until the time of analysis. Serum samples was diluted with deionized water and homogenized before analysis.10 μ L collected from each single serum sample of the patients and healthy by micropipette, 90 μ L of deionized water added to each one for analysis.

3. Results and discussion

3.1Dopamine spectrum

A 50 ml dopamine solution (10.5 ng/ml) prepared by serial dilution of the working solution, quartz cell (1cm) used for λ_{max} determination (200 - 400 nm), ethanol used as a blank, as shown in Figure-3.

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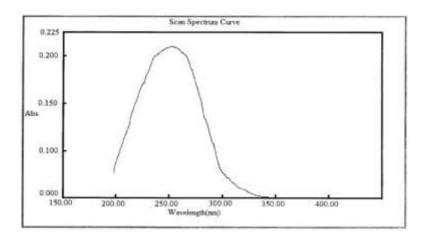


Figure-3, Dopamine absorption spectrum (ng/ml)

3.2 Progesterone spectrum

A 50 ml progesterone solution (3.5 ng/ml) prepared by serial dilution of the working solution, quartz cell (1cm) used for λ_{max} determination (200 - 400 nm), chloroform used as a blank, as shown in Figure-4.

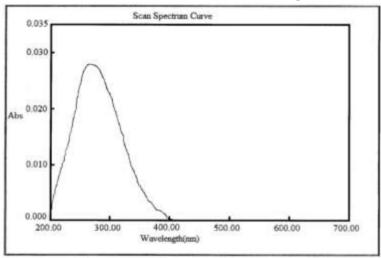


Figure-4, Progesterone absorption spectrum (ng/ml)

3.3 Calibration curve of dopamine

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The absorbance of the following standard solutions (0.5, 1.0, 1.5, and 2.0 ng/ml) measured at the obtained λ_{max} (250 nm), ethanol used as a blank, standard calibration curve built up by excel Microsoft-2007 as shown in Figure -5.

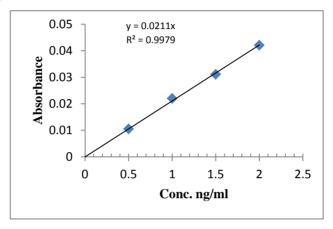
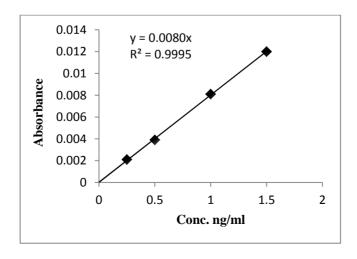


Figure-5, Dopamine standard calibration curve

3.4 Calibration curve of progesterone

The absorbance of the following standard solutions (0.25, 0.5, 1.0, and 1.5 ng/ml) measured at the obtained λ_{max} (266 nm), chloroform used as a blank, standard calibration curve built up by excel Microsoft (2007) as shown in Figure -6.



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Figure-6, Progesterone standard calibration curve 3.5 Statistical Analysis

The data was subjected to statistical analysis using the student t-test for comparison of hormones levels in patient and control groups. All the data were expressed as mean and standard deviation of the mean. The calibration graph follows the straight line equation $Y = a \times C + b$; where the C is the concentration of the analyte, Y is measured absorbance or peak height and a & b are constants. By substituting the corresponding experimental data substituted in the above equation, the calibration calculated for dopamine, were progesterone $A_{266}=0.008\times C$, $A_{250}=0.0211\times C$ respectively as shown in Figure-5, Figure-6.Further Beers law is obeyed in the ranges of (0.5 - 2.0, 0.25 -1.5 ng/ml) for dopamine, progesterone respectively, the molar absorptivity, correlation coefficient (R²), limit of detection (LOD) for dopamine, progesterone are ($\varepsilon = 2.5156 \times 10^6$, 4.1935×10^6 L.mol⁻¹ cm⁻¹ 1), (R= 0.9979, 0.99957) and (0.64, 0.57 ng/ml) respectively as showinTable1. The mean and the standard deviation of dopamine method for twenty eight determinations for control and patient groups are $(10.8673 \pm 3.6353 \text{ ng/ml})$, $(6.8212 \pm 1.6871 \text{ ng/ml})$ respectively as shown in Table-2. The mean and the standard deviation of progesterone method for the same twenty eight determination samples for control and patient groups are $(5.4598 \pm 2.6597 \text{ ng/ml})$, $(7.0625 \pm 1.6049 \text{ ng/ml})$ respectively as shown in table-3. The mean concentration of dopamine and progesterone in control and patient groups are (10.8673, 6.8212) ng/ml), (5.4598, 7.0625ng/ml) respectively as shown in Figure-6.

Table-1 Optical characteristics and validation parameters of dopamine and progesterone

Parameter	Dopamine	Progesterone
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	T		
λ_{\max} nm	250	266	
Beer's law limits, ng/mL	0.5-2.0	0.25-1.5	
Molar absorptivity, l/mol.	4.1935×10 ⁶	2.5156×10 ⁶	
Regression equation	$A = 0.0211 \times C$	A=	
		0.008×C	
Correlation coefficient (R ²)	0.9979	0.9995	
LOD limit of detection	0.64 ng/ml	0.57 ng/ml	
Slop (b)	0.0211		
		0.0080	

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Hormone	Group n	n	Mean ± SD	Min.	Max.	p-value
			(ng/ml)	(ng/ml)	(ng/ml)	
Progesterone	Control	28	5.4598 ± 2.6597	3.750	9.750	P < 0.05
	Patient	28	7.0625 ± 1.6049	2.750	13.625	
Dopamine	Control	28	10.8673 ± 3.6353	5.238	17.857	P < 0.05
	Patient	28	6.8212 ± 1.6871	4.028	10.900	

Table-2 Statistical analysis of progesterone and dopamine

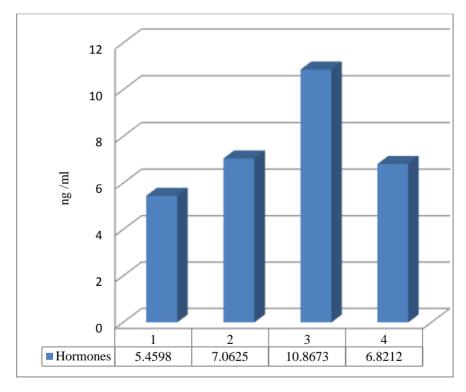


Figure-6 Mean concentrations of groups, 1. progesterone control,

2.progerterone patient, 3.dopamine control, 4. dopamine patient

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3.6Conclusion

The dopamine and progesterone concentrations were expressed as mean \pm standard deviation (SD) and range (minimum-maximum). The associations between serum levels of dopamine and progesterone in control and patient groups were determined by Pearson's correlation. P values less than 0.05 were considered statistically significant and all statistical tests were two-sided. Pearson's correlation analyses revealed significant correlations between the levels of dopamine and progesterone in control and patient groups as shown in table-2.

The results shows that the mean concentrations of dopamine in control group is higher than the patient group (10.8673, 6.8212 ng/ml) as shows in Figure-6, maybe related to the psychology reasons, there is a significant difference between the patient and control groups at level p<0.05.

Furthermore results shows that the mean of progesterone concentration in patient group is higher than the control group (7.0625, 5.4598 ng/ml) as shown in Figure-6, so the increasing of the mean concentration of progesterone in patient group than the control group will activate the growth of the cancer cells in the breast. There is a significant difference between the patient and control groups at level p< 0.05.

In general the mean concentrations of dopamine were lower and progesterone higher in breast cancer patient group than the control group. That means these two hormones can be considered as a biomarkers in breast cancer diagnostic methods. This paper presents a spectrophotometric evaluation of dopamine and progesterone in serum which absorbs maximally at about 250,266 nm for dopamine and progesterone respectively. The proposed method is simple, precise and accurate for the determination of dopamine and progesterone in hospitals.

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