

## Chloroquine Embryotoxicity in the Postimplantation Rat Conceptus In Vitro

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**ABSTRACT** The embryotoxicity of the antimalarial drug chloroquine (CQ) was evaluated in vitro using the rat whole embryo culture system. CQ was found to be embryotoxic and dysmorphogenic when added directly to the culture media containing gestational day (GD) 10 rat conceptuses. Twenty-six-hr exposure to CQ elicited dose-related decreases in embryonic crown-rump length, protein and DNA contents and increases in the incidence of morphologically abnormal embryos. At 30  $\mu$ M CQ, embryonic protein content was decreased to 67% and DNA content to 58% of control while the incidence of morphological abnormalities rose to 100%. Abnormal axial rotation, microphthalmia, and selective cephalic hypoplasia were the most common developmental abnormalities observed. Visceral yolk sac (VYS) vasculature and blood pigmentation were also decreased in a dose-dependent manner, as was VYS DNA content (80% of control at 30  $\mu$ M). VYS protein content, however, showed an alternate pattern of response, decreasing to 87% of control at 10  $\mu$ M CQ but increasing to 125% of control at 30  $\mu$ M. Histologic evaluation revealed that the cytoplasm of the VYS endoderm epithelium was distended due to vacuolization produced by CQ exposure. In the embryo proper, CQ inhibited cranial neural tube development and altered the morphology of cranial neural crest cells. These observations document the in vitro embryotoxicity of CQ and suggest altered VYS histiotrophic nutrition as well as direct embryonic effects as possible mechanisms of CQ embryotoxicity. © 1993 Wiley-Liss, Inc.

Chloroquine (CQ) has been used for more than forty years as an antimalarial drug and more recently in the treatment of rheumatoid arthritis (RA), systemic lupus erythematosus (SLE) and insulin resistant diabetes mellitus (Mackenzie, '83; Blazar et al., '84). The drug is able to cross the human placenta, having been found in human cord blood (Eissen and Afamefuna, '82). While some authorities recommend CQ as the drug of choice for malarial prophylaxis during pregnancy (Briggs et al., '90), limited epidemiologic data are not sufficient to exclude the possibility that prophylactic doses of CQ are teratogenic (Wolfe and Cordero, '85). Treatment of SLE and RA with CQ during pregnancy raises more concern regarding the potential for human embryotoxicity. Dosages for these conditions are typically higher than those used in malarial prophylaxis and high dose CQ exposure during pregnancy has been more directly asso-

ciated with human birth defects (Hart and Naunton, '64). Levy et al. ('91) also found a higher than normal rate of fetal loss, but no evidence of congenital malformations, among a small sample of women who had been treated with CQ for SLE, RA, or malarial prophylaxis during the first trimester of pregnancy. These authors recommended further studies to better assess the potential risk of CQ treatment during pregnancy, especially with regard to the possible cumulative effects of CQ administration throughout gestation.

Despite the widespread use of CQ and reports of human birth defects associated with

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Received December 7, 1992; accepted April 26, 1993.

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its usage, few studies have systematically investigated mechanisms of CQ embryotoxicity in animal models. Udalova ('67) found increased resorptions and ocular malformations in rats treated with CQ during early organogenesis. Long-term administration of CQ to pregnant rats has also been reported to be teratogenic, resulting in fetal growth retardation and various malformations including hepatomegaly, liquification of the brain and visceral organs and skeletal alterations (Sharma and Rawat, '89). The drug has been found to be embryo-lethal, teratogenic and capable of synergizing the teratogenicity of cholinomimetic drugs when injected into the yolk sacs of chicken embryos (Landauer, '78). Several studies have demonstrated the ability of CQ to modulate the embryotoxicity of other teratogenic agents. Yeilding et al., ('76) used an unspecified nonteratogenic dose of CQ to enhance the teratogenic effects of x-rays in mice, while Burkard and Fritz-Niggli ('87) found CQ protected mice from the teratogenic and transplacental carcinogenic effects of urethane. In the later study, however, only a single dose of CQ was given on gestational day 14, very late in organogenesis.

Ongoing studies, directed at understanding the relationship between chemical disruption of nutritional pathways and dysmorphogenesis, led us to evaluate the *in vitro* embryotoxicity of CQ because of its reported effects on cellular vacuolar systems. A number of studies have found that CQ and other related amines inhibit lysosomal hydrolases (Lie and Schofield, '73; Basu et al., '81; Nato et al., '82; Kaiser et al. '85; Shimizu and Kawashima, '89) and disrupt the endocytotic uptake and vacuolar sorting of external macromolecules (King et al., '80; Tietze et al., '80; Posner et al., '82; Merion and Sly, '83). These effects have most often been attributed to increased vacuolar pH and/or osmotic effects of these compounds, although Wibo and Poole ('81) determined that CQ could directly and reversibly inhibit cathepsin B1. CQ has also been found to inhibit endocytosis and lysosomal function in cultured GD 17 rat VYSs (Livesay, et al., '80). We hypothesize that CQ may be embryotoxic or embryo-lethal due to an inhibition of the nutritional function of the VYS during organogenesis. This process, known as histiotrophic nutrition, involves endocytosis and lysosomal degradation of maternal proteins by the VYS endoderm ep-

ithelium and the subsequent transfer of amino acids to the embryo proper for synthesis of new proteins (Freeman et al., '81; Freeman and Lloyd, '83). Disruption of VYS histiotrophic nutrition as a mechanism of chemical teratogenesis was first proposed by Beck et al., ('67) for the azo dye trypan blue. Since that time, the vital nutritive role played by the rat VYS prior to the establishment of the chorioallantoic placenta has been well documented and a number of chemical agents have been found whose embryotoxicity can be attributed to alterations of VYS histiotrophic nutrition (for review see Beckman et al., '90; Brent et al., '90; Freeman, '90; and Lloyd, '90). Thus, any chemical capable of inhibiting endocytosis and/or lysosomal function can be regarded as a potential *in vivo* rodent teratogen.

The objective of the current study was to assess the embryotoxicity and dysmorphogenic potential of CQ in rat whole embryo culture. This system allows us to focus on the conceptus as a direct target without the confounding factors of maternal toxicity and metabolism. To our knowledge the embryotoxicity of CQ has not previously been investigated *in vitro* during organogenesis. This report provides data which indicate that low doses of CQ are directly embryotoxic and effect embryonic and VYS morphology *in vitro*. The implications of these data with respect to the possible mechanisms of CQ teratogenicity are discussed.

## MATERIALS AND METHODS

### *Chemicals*

Chloroquine diphosphate (CQ) was obtained from Sigma Chemical Company (St. Louis, Mo.). All other reagents were purchased from various sources and were of the highest quality commercially available.

### *Animals*

Time-mated primigravida Sprague-Dawley rats were obtained from the Reproductive Sciences Program Small Animal Core Facility, the University of Michigan, on gestational days 7-9. The morning following copulation, as indicated by a sperm positive vaginal smear, was designated as gestational day zero. Pregnant animals were maintained on a 14-hr light/10-hr dark cycle and given free access to Purina Rat Chow (Ralston Purina) and water until the morning of explantation.

### Embryo culture

On the morning of GD 10, pregnant dams were anesthetized with ether and their blood collected from the abdominal aorta. The blood was centrifuged, the serum heat-inactivated and stored at  $-20^{\circ}\text{C}$  for subsequent use in culture media. Uteri were removed from the dams, placed in warmed Hanks balanced salt solution (HBSS, Gibco BRL, Gaithersburg, MD) and the implantation sites dissected free. Conceptuses were carefully removed from the decidual mass and Reichert's membrane was opened to allow the embryo to develop properly in culture. Conceptuses were placed in 125 ml roller bottles containing 33% heat-inactivated female rat serum in HBSS supplemented with penicillin G (100 IU/ml) and streptomycin (50  $\mu\text{g}/\text{ml}$ ). The media had been warmed to  $37^{\circ}\text{C}$  and gassed with 20%  $\text{O}_2/5\% \text{CO}_2/75\% \text{N}_2$  prior to addition of conceptuses. Less than ten conceptuses per bottle were cultured in a total volume of 15 ml culture media. The bottles were sealed and placed in a roller incubator overnight, then regassed with 95%  $\text{O}_2/5\% \text{CO}_2$  on the morning of GD 11. Morphological assessments took place at 1 PM on GD 11 after approximately 26 hr of culture.

### Exposure

Stock CQ solutions of 15 mg/ml were prepared fresh in sterile HBSS, pH 7.4. The stock or vehicle was added directly to the culture media just prior to addition of conceptuses on the morning of GD 10, and exposure was continuous throughout the culture period.

### Assessment

Following 26 hr in culture, conceptuses were removed from their culture bottles, rinsed with warm HBSS, and placed in dishes containing warm HBSS for assessment of viability (heartbeat and yolk sac circulation) and malformations. Assessments were performed using a Wild M8 dissecting microscope and conducted blind in order to minimize bias. Nonviable conceptuses were excluded from biochemical and histological analysis. Yolk sac morphology was scored numerically according to the criteria of Seegmiller et al. ('91), with 0 denoting a healthy VYS (extensive vitelline vasculature containing numerous pigmented blood cells and steady circulation) and

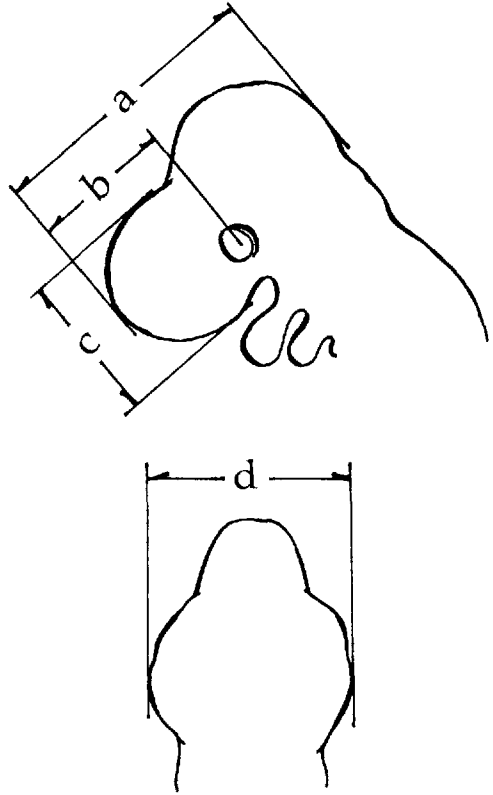


Fig. 1. Diagram of Embryonic Head measurements. **a:** Total head length—distance from the dorsal hindbrain to the rostral forebrain when viewed from the side. **b:** Prosencephalon length—distance from the optic cup midline to the rostral forebrain when viewed from the side. **c:** Prosencephalon height—distance from the caudal forebrain near the primitive mouth to the forebrain-midbrain junction. **d:** Total head width—distance between the widest points of the head when viewed from behind. This area is the lateral hindbrain region.

scores of 1–4 to VYS abnormalities of increasing severity (denoting diminished pigment, vasculature and circulation). A score of 4 indicates an avascular yolk sac without visible blood pigment or circulation. Yolk sacs were removed by dissection and measurements taken of crown-rump length and head size (Fig. 1) with the aid of an ocular micrometer. Embryos with frank alterations in axial rotation were excluded from the crown-rump measurements. The embryos were evaluated for neural tube closure, axial rotation and morphologic abnormalities. The embryos and yolk sacs were then placed separately in 1 ml of ice-cold sodium phosphate buffer (50 mM, pH 6.0)

TABLE 1. Chloroquine morphology study data

| Initial chloroquine concn | % Viability <sup>1</sup> | % Dysmorphic <sup>2</sup> | Crown-rump <sup>3</sup> (mm) | Yolk sac score <sup>3</sup> |
|---------------------------|--------------------------|---------------------------|------------------------------|-----------------------------|
| 0 (Control)               | 100 (47/47)              | 4 (2/47)                  | 3.4 ± 0.2                    | 0.0 ± 0.0                   |
| 10 µM                     | 100 (33/33)              | 24 (8/33) <sup>†</sup>    | 3.3 ± 0.2                    | 0.2 ± 0.4                   |
| 20 µM                     | 100 (35/35)              | 63 (22/35) <sup>†</sup>   | 3.2 ± 0.2*                   | 1.4 ± 0.8 <sup>†</sup>      |
| 30 µM                     | 88 (36/41)               | 100 (36/36) <sup>†</sup>  | 2.9 ± 0.2**                  | 2.6 ± 0.7 <sup>†</sup>      |

<sup>1</sup>Number of conceptuses possessing active heartbeat and yolk sac circulation at the end of the culture period/number cultured. Combined data from six experiments.

<sup>2</sup>Number of morphologically abnormal embryos at the end of the culture period/number cultured. Morphologic abnormalities consisted of any of the following singly or in combination; abnormal axial rotation, proencephalic hypoplasia, mesencephalic hypoplasia, anophthalmia, microphthalmia, craniofacial blisters, lateral protrusions in the hindbrain, cloacal extrophy.

<sup>3</sup>Mean ±SD.

\*Significantly different than control by Scheffe test,  $P < 0.05$ .

\*\*Significantly different than control by Scheffe test,  $P < 0.001$ .

<sup>†</sup>Significant at  $P < 0.05$  by Chi-square.

TABLE 2. Embryonic head measurements<sup>1</sup>

| Chloroquine concn | Total head length | Prosencephalon length | Prosencephalon height | Total head width |
|-------------------|-------------------|-----------------------|-----------------------|------------------|
| 0 (Control)       | 1.7 ± 0.1 (42)    | 0.6 ± 0.1 (42)        | 0.8 ± 0.1 (26)        | 1.3 ± 0.1 (41)   |
| 10 µM             | 1.7 ± 0.1 (33)    | 0.5 ± 0.1 (33)**      | 0.8 ± 0.1 (27)        | 1.3 ± 0.1 (26)   |
| 20 µM             | 1.5 ± 0.2 (32)**  | 0.4 ± 0.1 (32)**      | 0.7 ± 0.1 (25)**      | 1.3 ± 0.1 (25)   |
| 30 µM             | 1.3 ± 0.1 (36)**  | 0.4 ± 0.1 (29)**      | 0.6 ± 0.1 (22)**      | 1.3 ± 0.1 (30)   |

<sup>1</sup>Measurements were as described in Materials and Methods (see Fig. 1). Data are means ±SD of pooled samples (n) from six replicate experiments. All categories except total head width showed significant overall differences between treatments by one-way ANOVA. \*\*Significantly different than control,  $P < 0.001$  by Scheffe multiple comparison test.

containing 1 mM ethylenediaminetetraacetic acid (EDTA), ultrasonically disrupted, and frozen at  $-70^{\circ}\text{C}$  for subsequent protein and DNA determinations.

#### Protein and DNA assays

Protein content was determined by the method of Bradford ('76) using bovine gamma globulin standard and dye reagent supplied by BioRad (Richmond, Ca.). The assay was modified for microtiter plate assay as described by Stark et al. ('87). DNA content was determined by the method of Labarca and Paigen ('80) using bovine DNA as a standard.

#### Histology

Representative samples of control and CQ-treated conceptuses were prepared with the assistance of the University of Michigan Reproductive Sciences Program Morphology Core. Briefly, GD 11.5 embryos and yolk sacs were separated, rinsed in ice-cold 0.9% NaCl, and placed in Karnovsky's fixative. The fixed tissues were later dehydrated in a graded ethanol series, embedded in glycol methacrylate polymer, and cut in 3–5-µm transverse sections. Every fifth section was saved and stained with hematoxylin and

eosin (H&E). Examination and photography of the sections was performed by the authors at the University of Michigan Cell Biology Laboratories using a Leitz Orthoplan microscope with a Wild camera attachment.

#### Statistical analysis

The chi-square test was used to determine differences in discrete data (malformation rate and yolk sac score). The statistical software package Statview (Abacus Concepts, Inc. 1986) was used to analyze continuous data. One-way analysis of variance (ANOVA) was used to determine overall differences between treatment groups. This was followed by the Scheffe test for multiple comparison of individual treatment means ( $P < 0.05$  were considered significant).

#### RESULTS

Dose-response experiments (0–50 µM) indicated that CQ was embryotoxic and dysmorphicogenic when present in the culture media of gestational day 10–11 conceptuses grown in vitro. Addition of CQ to the culture media at concentrations greater than 50 µM produced 100% embryoletality when evaluated on day 11. CQ concentrations of 10–30 µM were chosen for our studies since

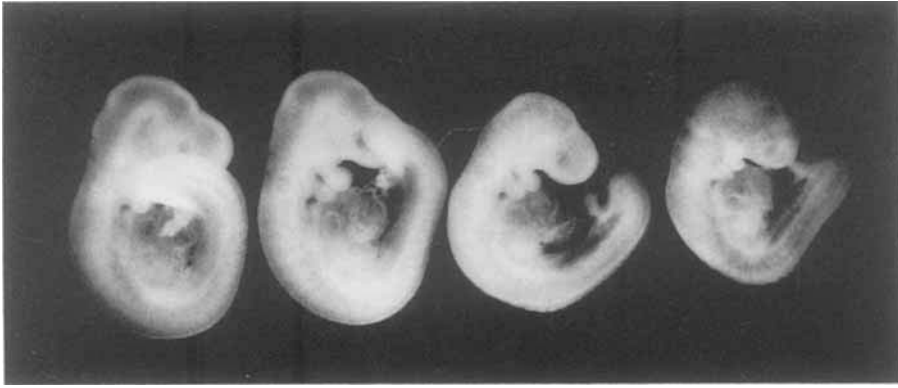


Fig. 2. Morphology of GD 11.5 embryos at the end of the 26-hr culture period Control (left), and embryos exposed to increasing concentrations of chloroquine in the culture media (10, 20, and 30  $\mu$ M from left to right). Note the dose-related increase in abnormal axial rota-

tion and hypoplasia in the cephalic region. Microphthalmia is evident in the embryo exposed to 30  $\mu$ M CQ. The extraembryonic tissues have been removed for photography.  $\times 11$ .



Fig. 3. GD 11.5 embryo exposed to 30  $\mu$ M CQ in the culture media for 26 hr. Note abnormal axial rotation, anophthalmia, blistering in the prosencephalon and lack of cranial neural tube development. This is an example of the more severe effects observed at this concentration of CQ.  $\times 37$ .

these concentrations were found to elicit dysmorphogenesis in vitro while retaining viability above 85%.

Table 1 shows that CQ concentrations in the range of 10–30  $\mu$ M caused significant

dose-dependent increases in VYS score (0.2–2.8) and incidence of abnormal development (25–100%); and decreases in embryonic crown-rump length (3.4–2.9 mm). CQ significantly reduced VYS vascularization and blood pigmentation as evidenced by the increased VYS score ( $P < 0.05$ ). Although all the embryos exposed to 30  $\mu$ M CQ possessed an active heartbeat, several were classified as nonviable due to a lack of VYS circulation. Both the VYS and amnion of treated conceptuses became opaque at the higher CQ concentrations. The most common morphologic abnormalities observed following CQ treatment were craniofacial dysplasia, microphthalmia and abnormal axial rotation. CQ-induced craniofacial dysplasia consisted of hypoplasia of the prosencephalon and protrusions in the lateral region of the hind-brain, in an area just rostral to the 1st branchial arch. These morphologic observations were confirmed by embryonic head measurements (Table 2), which showed a significant dose-related decrease in total head length and prosencephalon size in CQ exposed embryos, while total head width did not differ significantly from the control in any of the treated groups. As the incidence of morphologic abnormalities increased, so did the severity of the dysmorphogenesis observed (Fig. 2). At 10  $\mu$ M CQ, relatively few structural malformations were observed and their severity was limited. At 30  $\mu$ M, however, CQ was found to be 100% dysmorphogenic in the surviving conceptuses. The most severely affected embryos showed

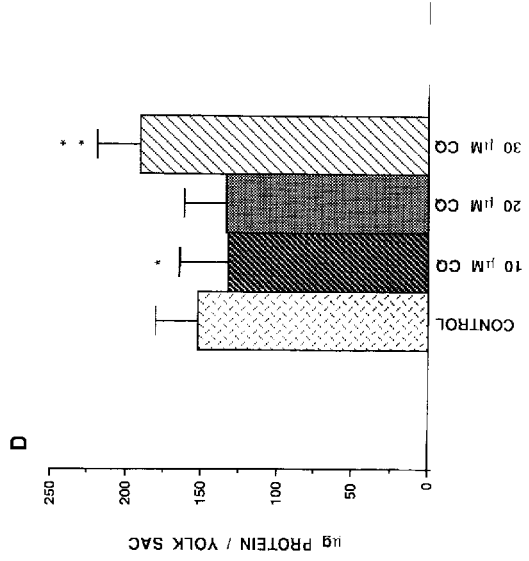
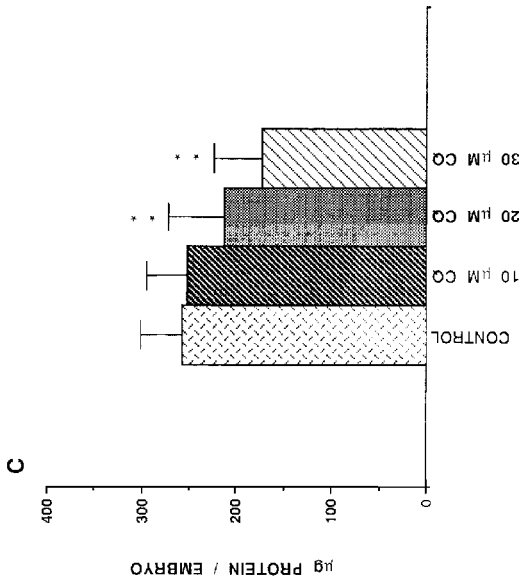
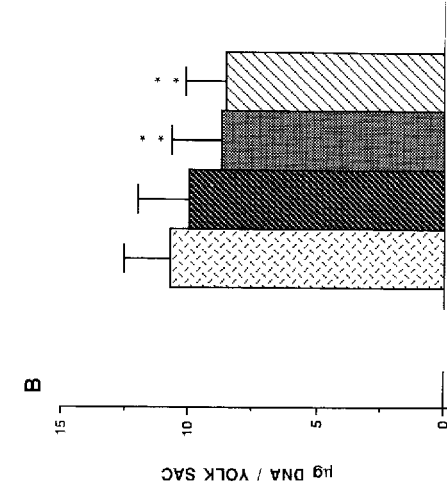
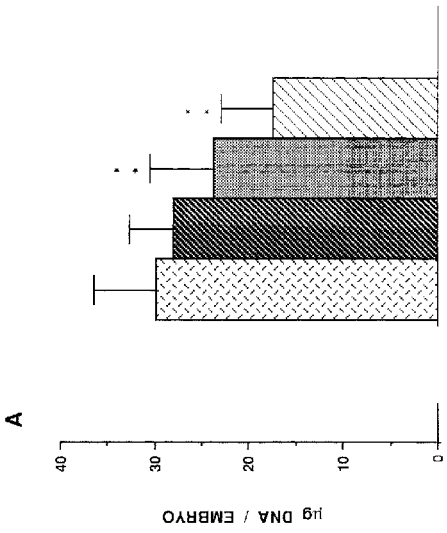


Fig. 4.

marked inhibition of axial rotation, anophthalmia, craniofacial blisters and necrosis in the trunk region (Fig. 3).

Biochemical growth parameters are presented in Figure 4. CQ treatment resulted in dose-dependent decreases in both protein (67% of control at the highest dose,  $P < 0.001$ ) and DNA content (58% of control at the highest dose,  $P < 0.001$ ) in the embryo proper. In the VYS, however, a similar pattern is only evident for DNA content (decreased to 80% of control with 30  $\mu\text{M}$  CQ,  $P < 0.001$ ). Compared to control, VYS protein content was significantly decreased in the 10  $\mu\text{M}$  group (87% of control,  $P < 0.05$ ), not significantly altered in the 20  $\mu\text{M}$  group and significantly increased in the 30  $\mu\text{M}$  treatment group (125% of control,  $P < 0.001$ ).

The most striking histologic changes resulting from CQ exposure were observed in the VYS, where the endoderm epithelium displayed a dose-dependent cytoplasmic vacuolization. Thirty  $\mu\text{M}$  CQ elicited extreme vacuolar swelling which distended the cytoplasm of these cells (Fig. 5). The swollen vacuoles were observed to contain eosinophilic material when stained with hematoxylin and eosin, and are believed to represent the site of protein accumulation in the VYS of conceptuses exposed to 30  $\mu\text{M}$  CQ. Vacuolization also occurred in the 10 and 20  $\mu\text{M}$  treatment groups (not shown) but was less severe than that seen in the 30  $\mu\text{M}$  group.

Transverse sections through the head region of representative control and 30  $\mu\text{M}$  treated embryos are shown in Figure 6. It is apparent that CQ delayed cranial neural tube development including the development of the optic cup. While the neural epithelium of the CQ-treated embryo appears to possess normal morphology, its thickness appears reduced, especially in the hindbrain (control neuroepithelium contained an average of five cell nuclei while the 30  $\mu\text{M}$  treated embryo had four). In addition, the

brain vesicles had not developed to the same extent as seen in the control. The forebrain of the control embryo had expanded and begun to develop into the telencephalon while the forebrain of the treated embryo was not expanded, and remained in a state resembling a late GD 10 rather than GD 11 forebrain. This lack of cephalic neural tube expansion, together with decreased mesenchymal extracellular space, results in marked hypoplasia in the cephalic region in general. An exception to generalized hypoplasia was observed in the lateral hindbrain region, where the primordia of the fifth cranial nerve is formed from neural crest cell derivatives. In the CQ-treated embryo, the mesenchyme in these areas contains aggregations of cells with a characteristic rounded morphology. The lateral protrusions observed externally in this region appear to result from these cell aggregates. These cells in the CQ-treated embryo correspond to the primordia of the fifth cranial nerve seen in the control section, although their location appears to be displaced slightly ventral with respect to the anterior cardinal vein. Higher magnification of these cells (Figs. 7, 8) reveals cytoplasmic vacuolization and a rounded morphology that was not evident in the corresponding control cells. It is also clear from these micrographs that the extracellular space surrounding much of the mesenchyme (especially near the forebrain) is reduced in the CQ-treated embryo.

#### DISCUSSION

The current study partially characterizes the in vitro embryotoxicity of CQ in rats. Relatively low concentrations of CQ cause growth retardation, dysmorphogenesis and embryo lethality when added directly to the culture media of day 10–11 rat conceptuses grown in vitro. Since CQ has been found to cross the placenta and accumulate in fetal tissues of mice (Ullberg et al., '70), our data imply that the in vivo rodent teratogenicity of CQ may be due to direct effects of the drug on the organogenesis stage conceptus, rather than to maternal toxicity alone.

CQ appears to preferentially affect rapidly developing tissues in the conceptus. In the VYS, CQ treatment dramatically reduced vascularization and blood pigmentation. An interesting, yet untested hypothesis, is that increases in vacuolar pH induced by CQ may inhibit the intracellular release

Fig. 4. DNA and protein contents of GD 11.5 embryos (A,C) and visceral yolk sacs (B,D) at the end of the 26-hr culture period. Note the differential pattern of response between the embryo and VYS protein contents. Bars represent means  $\pm$  SD from  $n = 42$  (Control); 33 (10  $\mu\text{M}$ ); 32 (20  $\mu\text{M}$ ); and 36 (30  $\mu\text{M}$ ) samples from six replicate experiments. \*Significantly different than control,  $P < 0.05$  by Scheffe multiple comparison test. \*\*Significantly different than control,  $P < 0.001$  by Scheffe multiple comparison test.

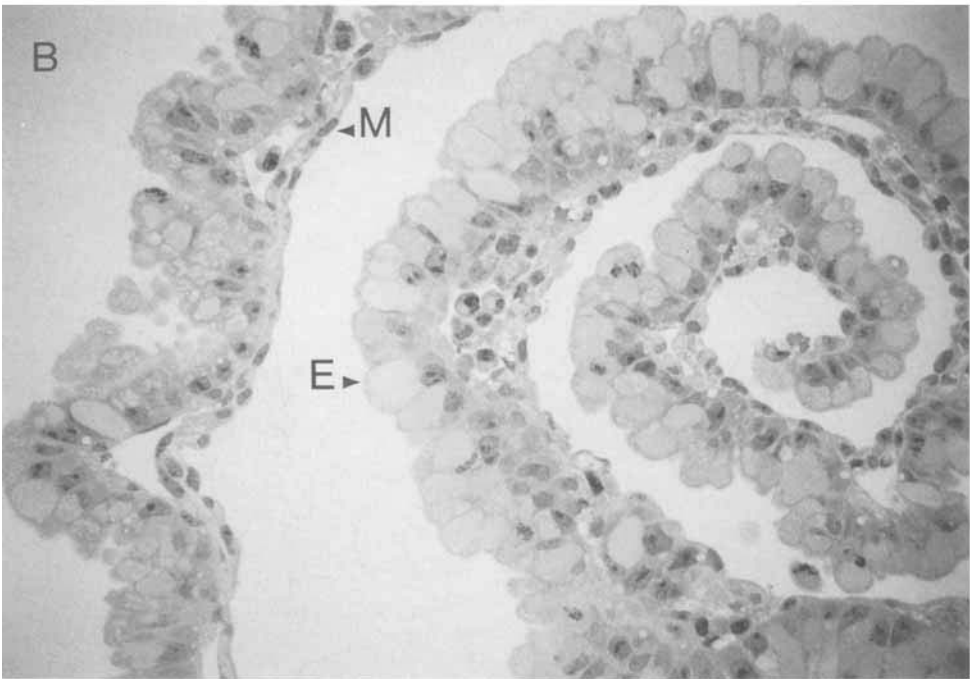
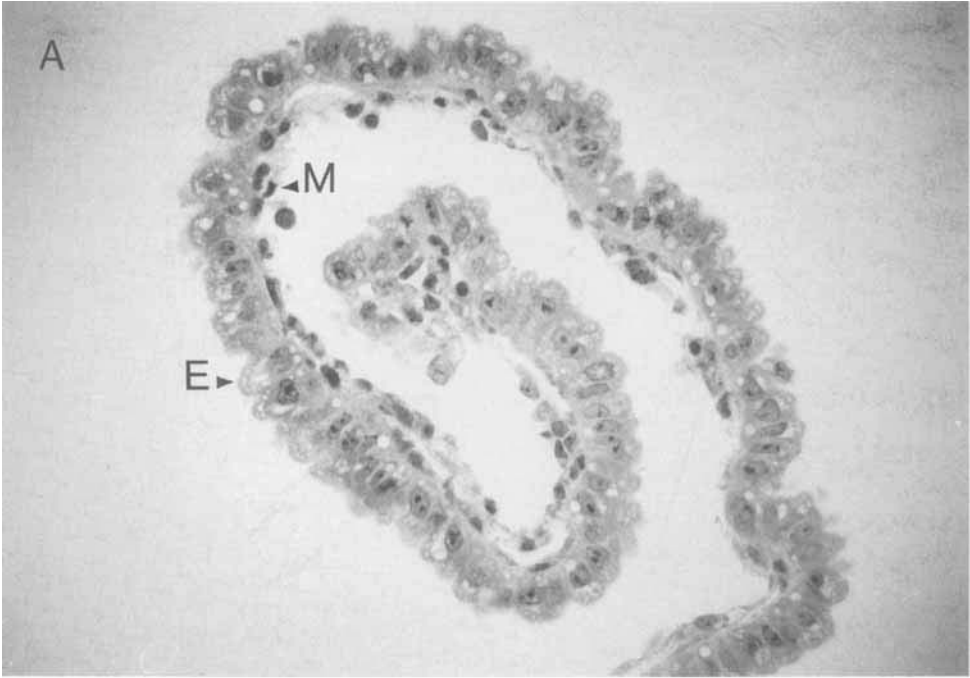


Fig. 5. Histologic appearance of GD 11.5 control (A) and 30  $\mu$ M CQ-treated (B) VYSs. The basic VYS architecture is not altered by CQ treatment; the endoderm epithelium (E) is supported by a thin mesothelium (M), and contains vitelline vessels. The control endoderm cells contain numerous absorptive vacuoles that do not stain with H&E. Note the enlarged vacuoles in the CQ-

treated VYS endoderm that distend the cytoplasm of these cells. These vacuoles contain eosinophilic material when stained with H&E and represent the presumptive site of increased protein content in the 30  $\mu$ M CQ-treated VYSs.  $\times 300$ , both micrographs (compare nuclear size).



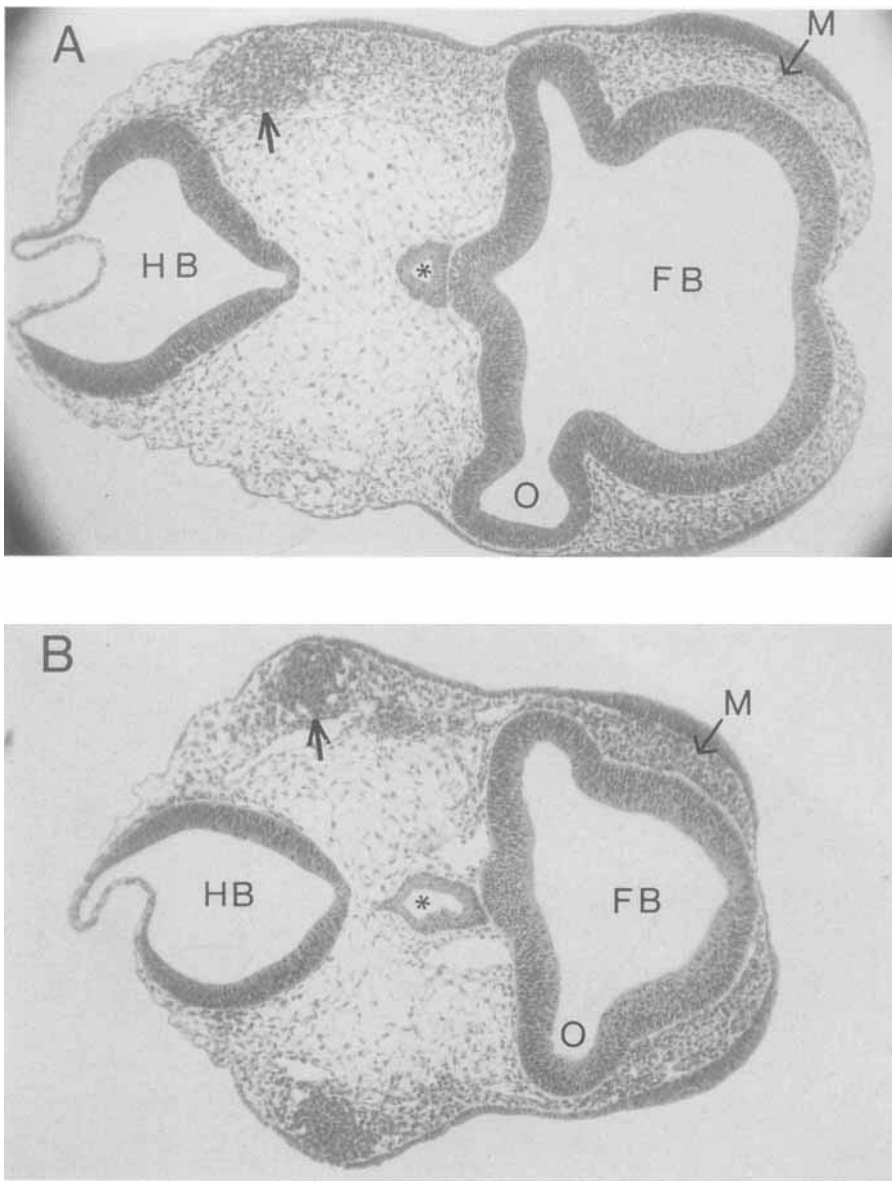


Fig. 6. Cephalic transverse sections taken through the lower optic cup region of control (A) and 30  $\mu$ M CQ-treated (B) embryos at the end of the culture period, stained with H&E. Rathke's pouch (asterisk) is used as a landmark to compare sections. The control section is cut slightly oblique and therefore appears asymmetric. The control shows an expanded forebrain (FB), well-developed optic vesicles (O) and elongated cranial neural crest derivatives (arrow). The forebrain of the CQ-treated embryo has not expanded and the optic vesicles

are rudimentary compared to control. The clumps of cells lateral to the anterior cardinal vein in the CQ-treated section (arrow) correspond to the cranial neural crest in the control section. These cells appear condensed, have a rounded morphology and apparently cause the lateral protrusions observed in the hindbrain region of CQ-treated embryos. The mesenchyme (M) of the CQ-treated embryo also exhibits reduced extracellular space compared to the control. HB, hindbrain.  $\times 70$ , both micrographs.

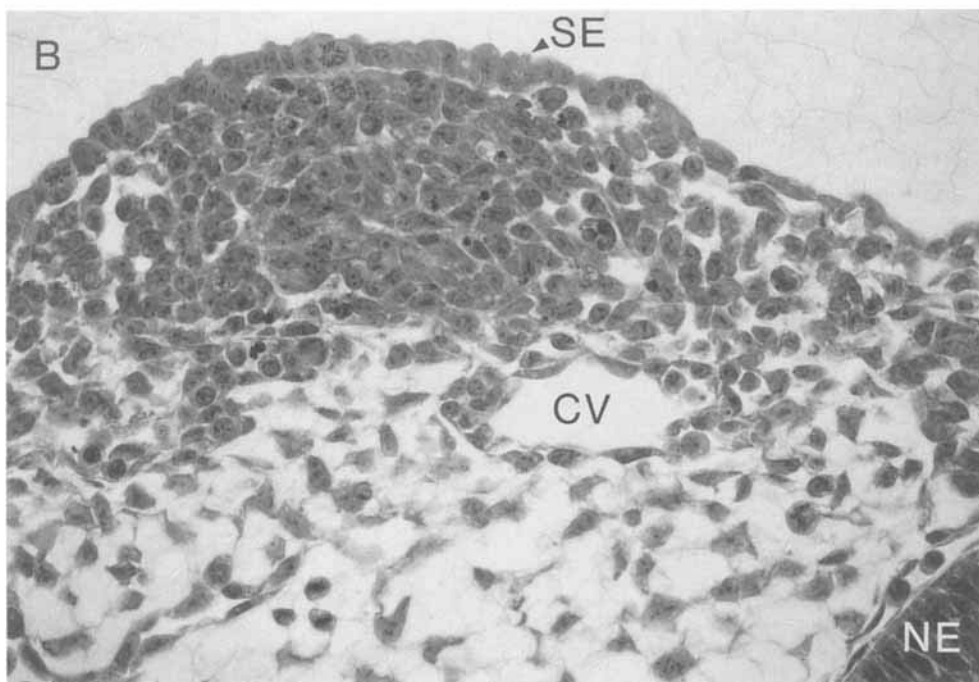
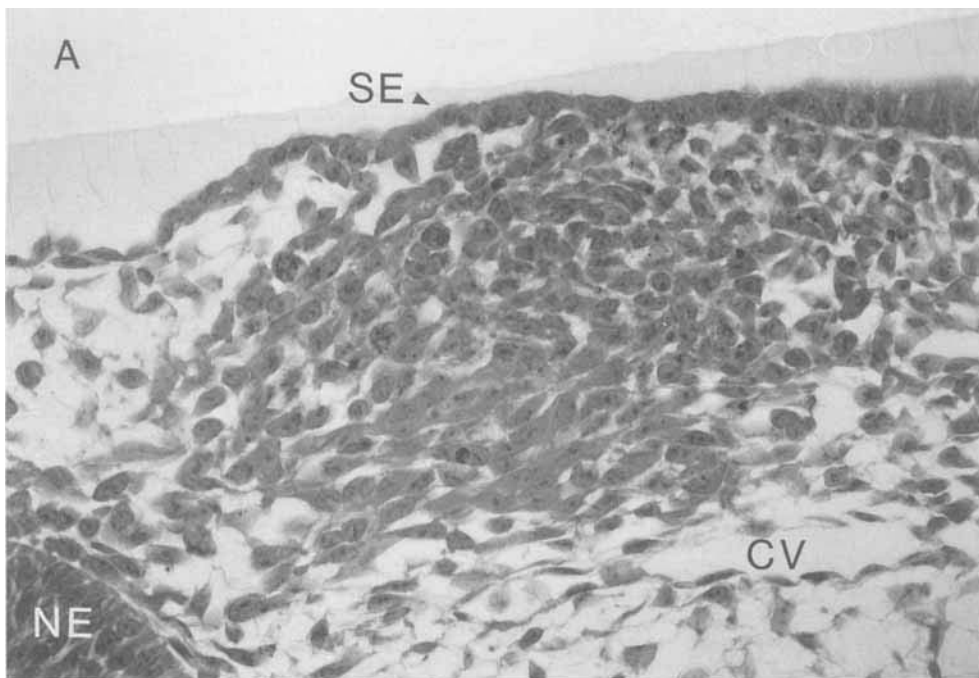


Fig. 7. Higher magnification of areas lateral to the anterior cardinal vein in Fig. 6. This figure shows comparative regions from opposite sides of control (A) and 30  $\mu$ M CQ-treated (B) embryos. The area between the anterior cardinal vein (CV) and the surface ectoderm (SE) contains presumptive cranial neural crest derivatives (primordia of the fifth cranial nerve). Many

control cells appear elongated and are separated by extracellular spaces. The crest cells in the CQ-treated section appear slightly displaced ventrally, display a rounded morphology, and appear clumped with little extracellular space. NE, hindbrain neural epithelium.  $\times 410$ , both micrographs.

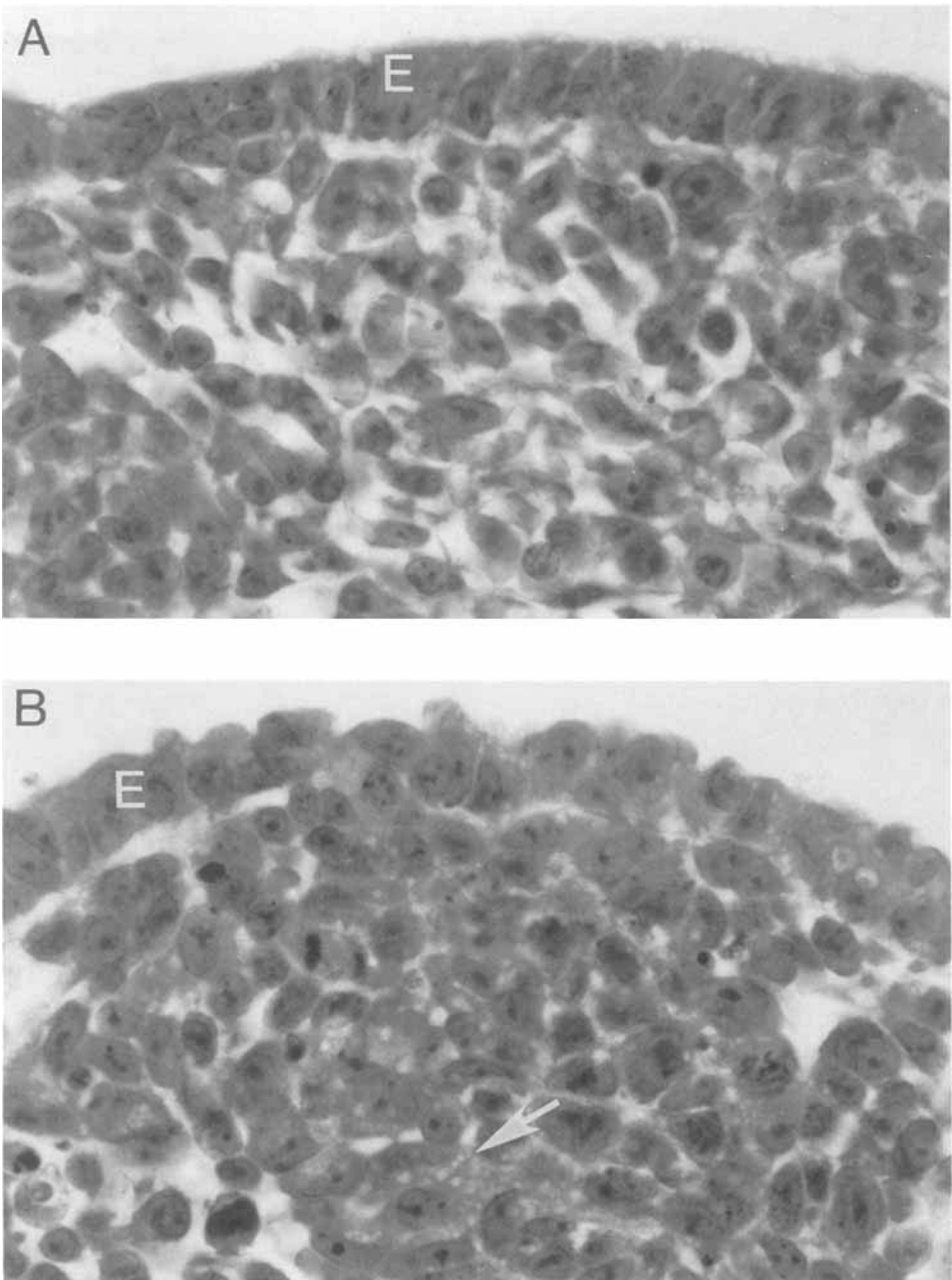


Fig. 8. Presumptive cranial neural crest derivatives from the lateral hindbrain region of control (A) and 30  $\mu$ M CQ-treated (B) embryos. The control cells show uniform areas of extracellular space surrounding cells with

a mesenchymal morphology. The CQ-treated cells exhibit vacuolated cytoplasm (arrow) and reduced extracellular space.  $\times 450$ , both micrographs. E, surface ectoderm.

of transferrin-bound iron and subsequently decrease the rapid hemoglobin synthesis occurring in the VYS during organogenesis. The intracellular release of iron from receptor-bound transferrin is dependent upon the normally acidic pH of endosomes (for review see Mellman et al., '86; Wall and Maack, '85). Since CQ treatment has been found to rapidly increase vacuolar pH (Okhuma and Poole, '78) and inhibit iron release from transferrin in cultured fibroblasts (Octave et al., '82), it seems plausible that conceptuses cultured in the presence of CQ may be unable to acquire enough iron to support VYS hematopoiesis. In the embryo proper, craniofacial development and axial development were most affected by conceptual exposure to CQ. Brain, optic and axial development are also three of the most sensitive targets for *in vivo* teratogenic insult at this gestational age (Wilson, '73). Although the heart is also a sensitive *in vivo* target at this time, it appeared relatively resistant to CQ treatment *in vitro*.

Direct exposure to CQ in the culture media caused dose-related decreases in most of the conceptual growth parameters examined in this study. Notable exceptions were VYS protein content (decreased at 10  $\mu\text{M}$  but increased at 30  $\mu\text{M}$ ) and total head width (unchanged). These anomalies provide clues as to the possible mechanisms of CQ embryotoxicity. Regarding the former, the biochemical growth parameters presented in Figure 4 clearly show a differential pattern of response in the embryo versus the VYS. While embryonic DNA and protein both decrease with increasing CQ concentrations, VYS protein content increases at the highest dose even though the DNA content of the same tissues was significantly decreased. These data, together with the histologic findings of enlarged cytoplasmic vacuoles containing eosinophilic material in the endoderm of CQ-treated VYSs, suggest that the drug might inhibit VYS lysosomal proteolysis and therefore histiotrophic nutrition. Although further experimentation is required to validate this hypothesis, it is consistent with the known inhibitory effects of CQ on lysosomal proteolysis in mammalian cells (de Duve et al., '74; Livesay et al., '80; Libby et al., '80; Nato et al., '82; Posner et al., '82; Shimizu and Kawashima, '89) and also with the observed effects of other embryotoxicants which disrupt lysosomal function in the VYS (Freeman and Lloyd,

'83b; Daston et al., '90; Hunter et al., '91). These and other previous reports show that one of the primary effects of embryotoxicants which disrupt VYS histiotrophic nutrition is general growth retardation in the embryo proper, which is also consistent with the data presented here.

Regarding craniofacial morphology, histologic findings revealed that the lateral protrusions apparent in the cranial region of treated embryos were caused by aggregations of abnormal cells underlying these areas. These particular cells correspond to cranial neural crest derivatives (primordia of the fifth cranial nerve) seen in the same region of control embryos. Rounded cell morphology and decreased extracellular space observed in histologic sections from CQ-treated embryos leads to the speculation that disruption of cell-extracellular matrix interaction might play a role in CQ-induced dysmorphogenesis, since such interaction is an important determinant of neural crest morphology and motility *in vitro* (Tucker et al., '88; Perris et al., '91; Rogers et al., '92). Alterations in cranial neural crest cell migration (which occurs in the rat during GD 9-11) may affect craniofacial development since many of the craniofacial tissues are derived from this pluripotent cell population (Tan and Morriss-Kay, '89; reviewed in Noden, '88 and Le Dourian, '83). Further experiments are needed in order to investigate this possibility.

Whether CQ itself directly affects neural crest cell migration or differentiation, or whether these changes are a result of the more indirect effects of CQ on VYS function is uncertain. Close examination of the affected cells show that they are vacuole-laden and characteristic of CQ-exposed cells in other systems (de Duve et al., '74; Krogsstad and Schlesinger, '86). This suggests a possible direct effect of CQ on the embryo proper, in addition to VYS effects.

The media CQ concentrations used in this study are an order of magnitude higher than those reached in the serum of patients receiving CQ therapy for rheumatologic disease (Mackenzie, '83). We cannot yet assess the relative sensitivities of rats and humans to CQ embryotoxicity and can only speculate that acute overdoses or cumulative effects of long-term low dose exposure to CQ during pregnancy may also have adverse effects on human embryonic development. The possible direct effects of CQ on embry-

onic cells, specifically the neural crest, suggest that both direct embryonic and indirect VYS effects may be involved in CQ embryotoxicity.

#### ACKNOWLEDGMENTS

The authors wish to thank Kaye Brabec, Lorita Dudis, and Dr. Kent Christensen for their assistance in preparing histological specimens. Thanks also to Sara Carlson, Roongrudee Hiranruengchok, and Bjorn Thorsrud for technical assistance and Dr. Tamara L. McNutt for help in editing the manuscript. This work was supported by NIH grants ES 05235, ES 07062, and HD 18258 and by the March of Dimes Birth Defects Foundation grant 15-179.

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