

## Total plasma cholesterol profile in superovulated crossbred cattle

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### ABSTRACT

Crossbred cows (n = 24) were divided into 4 groups. The animal of each group were treated on day 7 (day 0 = day of estrous) with different hormonal preparation viz 500 I.U. hCG (Group I), 5 mg *Estradiol valerate* (Group II), 10 µg GnRH (Group III) and 1 ml NSS (Group IV). Animal in each group were superovulated on day 10 of estrous cycle with FSH-P. The superovulatory response was determined by counting corpora lutea present on both the ovaries. Total cholesterol level increased significantly (P < 0.05) on the day of superovulatory estrus in group I, II and IV and non-significantly (P > 0.05) in group III. Positive (P < 0.01) correlation existed between ovulation rate and total cholesterol on day 4. This correlation was also significant (P < 0.05) on day 4 to 7 of estrous cycle, day of initiation of gonadotropin treatment, day of PGF<sub>2α</sub> injection, at superovulatory estrus and on day 7 post superovulatory estrus.

**Key words:** Cholesterol, Superovulation Cattle

Blood cholesterol plays a vital role in the physiology of reproduction. Its concentration has been reported to have positive relationship with energy/health status of animals (Robinson, 1957; Velhankar, 1973) resulting in better reproductive performance (Velhankar, 1973; Shahukar *et al.*, 1985, Aminudeen *et al.*, 1984).

Furthermore high level of cholesterol has also been detected at superovulatory estrus than at spontaneous estrus (Khariche, 1989; Prasad, 1990). In the present study the level of blood plasma total cholesterol and its correlation with ovulation rate was evaluated before, during and after gonadotropin treatments in crossbred cows.

Twenty four healthy cross bred cows between 3 to 7 years of age from Instructional Dairy Farm of the University with regular estrous cycle were included in the study. The animals were divided into 4 groups consisting of six animals in each group.

The animals of each group were on day 7, treated with different hormonal preparations viz.

Group I: 500 IU hCG (Human Chorionic Gonadotropin),

Group II: 5 mg EV (*Estradiol valerate*),

Group III: 10 µg GnRH (*Buserelin Acetate*)

Group IV: Served as control and was injected with 1 ml NSS, all by I/M route.

Animals in each group were superovulated on day 10 of estrus cycle (day 0 = day of estrus) with multiple injections of FSH-P (Folltropin-V, Vetrephara, Canada) given at 12 hours interval in 8 divided doses in tapering schedule *i.e.* 65, 65; 55, 55; 45, 45; 35, 35; mgs by intramuscular route. An intramuscular injection of Lutalyse 25 mg (*Dinoprost tromethamine*) was given along with fifth injection of FSH-P to

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induce the luteolysis.

Animals were bled on day 4, 5, 6 and 7 of estrous cycle, on the day of initiation of gonadotropin treatment (*i.e.* day 10 of estrous cycle), on the day of PGF<sub>2</sub> treatment (*i.e.* day 12 of estrous cycle), on the day of onset of superovulatory estrus (*i.e.* day 14/15) and on day 7 post superovulatory estrus (*i.e.* day of embryo collection). Plasma was harvested and stored at 20°C pending analysis. The estimation of cholesterol in blood plasma samples was done using Span Diagnostic Kits (Span Diagnostics Ltd., Udhna, Surat, India) on spectrophotometer (Model, GS 5705, EC India Ltd.).

In the present study, results were in agreement to those reported by Memon and Mullick (1960), Awasthi and Kharche (1987) and Dutta *et al.*, (1988). However, these values were lower than those reported by Agarwal *et al.*, (1982). The concentration of total cholesterol on day 4, 5, 6 and 7 of the estrous cycle between and within groups did not differ significantly ( $P > 0.05$ ) (Table I). Similar trend was observed in values of pooled data ( $n = 24$ ). This might be due to similar hormonal profile during the early oestrous cycle. The concentration of cholesterol increased on the day of gonadotropin treatment in all the groups though non-significantly ( $P > 0.05$ ), similar to findings of Kumar (2002).

The blood plasma cholesterol concentration increased marginally on day of PGF<sub>2</sub> injection, similar to the findings of Kharche *et al.*, (1989) and Kumar (2002). The value reached significantly high level on the day of superovulatory estrus in group I, II, IV and in values of pooled data. However, the increase in group III was non-significant ( $P > 0.05$ ). The high cholesterol level during estrus may be due to increased synthesis of estrogens (Beitz and Allen, 1984). Add interpretation of EV administered group. Bhattacharya *et al.*, (1972) and Deopurkar (1974) also found higher cholesterol during estrus and significantly low values during luteal phase and in anoestrus cows. Fillois *et al.*, (1958) reported increased cholesterol in ovariectomized rats following the administration of estradiol 17-b

Following estrus, the concentration of total cholesterol decreased significantly ( $P < 0.05$ ) in groups I, II, IV and in values of pooled data and non-significantly in group III and reached the pretreatment levels on day 7 post superovulatory estrus, similar to finding of Kumar (2002) who also reported a decreased level of cholesterol on day 7 post superovulatory estrus.

Correlation of blood plasma total cholesterol level on day 4 with ovulation rate was highly significant ( $P < 0.01$ ) and was positively correlated ( $P < 0.05$ ) on day 5 and 7 of the estrous cycle (Table II). However, Kumar (2002) reported a non-significant correlation at day 7. Correlation of total cholesterol level on the day of initiation of gonadotropin treatment, day of PGF<sub>2</sub> injection at superovulatory estrus and days 7 post superovulatory estrus was significant ( $P < 0.05$ ) in agreement with the results of Maruo *et al.*, (1987) and also positively correlated.

Low total cholesterol might indicate health energy status of the donors which in turn would affect the follicular and oocyte maturation, resulting in poor ovulation and embryo yield. A low energy diet (Dufour *et al.*, 1981), faulty metabolism (Schaffer *et al.*, 1990), physiological stress (Aminudeen *et al.*, 1984), fatty liver or fat cow syndrome (Reid and Roberts, 1982) have all been suggested to be causative factors for low total cholesterol level in animals.

However, the role of total cholesterol in the reproduction in cattle needs detailed biochemical studies involving fat supplementation in relation to blood plasma cholesterol in dairy animals with particular reference to superovulatory response. In conclusion, the present study confirms earlier reports (Kweon *et al.*, 1985; Kweon *et al.*, 1987; Mauro *et al.*, 1987; Schaffer *et al.*, 1990) that low cholesterol level may adversely affect ovarian response. Thus preliminary selection of potential donors based on total cholesterol concentration is suggested for use in predicting ovarian response after gonadotropin treatment.

**Table I:** Change in mean concentration of blood plasma total cholesterol (mg/dl) before, during and after gonadotropin treatment in embryo donor cattle

Treatment groups	Day of blood sampling							
	Day 4	Day 5	Day 6	Day 7	Initiation of Gonadotropin treatment	PGF <sub>2</sub> α treatment	Superovulatory estrus	Day 7 post superovulatory estrus
Group I (hCG)	122.30 <sup>A</sup> ±2.48	124.98 <sup>AB</sup> ±2.71	125.80 <sup>AB</sup> ±2.44	126.58 <sup>AB</sup> ±2.49	135.19 <sup>BC</sup> ±3.20	139.65 <sup>C</sup> ±3.63	172.84 <sup>D</sup> ±6.35	137.53 <sup>C</sup> ±3.99
Group II (EV)	133.27 <sup>A</sup> ±4.98	135.19 <sup>A</sup> ±5.13	137.05 <sup>AB</sup> ±5.62	139.81 <sup>ABC</sup> ±5.41	147.79 <sup>ABC</sup> ±5.15	152.40 <sup>BC</sup> ±4.97	180.60 <sup>D</sup> ±7.06	154.95 <sup>C</sup> ±5.11
Group III (GnRH)	124.58 <sup>A</sup> ±6.22	124.79 <sup>A</sup> ±5.90	127.12 <sup>A</sup> ±6.40	129.63 <sup>A</sup> ±6.77	134.76 <sup>A</sup> ±6.44	140.05 <sup>A</sup> ±6.54	152.91 <sup>A</sup> ±8.09	133.80 <sup>A</sup> ±7.72
Group IV (control)	134.15 <sup>A</sup> ±5.55	135.80 <sup>AB</sup> ±5.48	141.78 <sup>ABC</sup> ±3.73	141.40 <sup>ABC</sup> ±6.12	146.79 <sup>ABC</sup> ±6.05	150.95 <sup>BC</sup> ±5.84	173.45 <sup>D</sup> ±5.99	152.68 <sup>C</sup> ±7.20
Total (n = 24)	128.58 <sup>A</sup> ±2.57	130.19 <sup>A</sup> ±2.56	134.62 <sup>AB</sup> ±2.69	134.35 <sup>AB</sup> ±2.86	141.13 <sup>BC</sup> ±2.81	145.76 <sup>C</sup> ±2.78	169.95 <sup>D</sup> ±3.93	144.74 <sup>C</sup> ±3.47

Means within a Column are statistically non-significant ( $P > 0.05$ )

Means within a row with different superscripts are significantly different ( $P < 0.05$ )

**Table 2:** coefficient of correlation between ovulation rate and blood plasma cholesterol (pooled data) in embryo donors

Treatment groups	Day of blood sampling							
	Day 4	Day 5	Day 6	Day 7	Initiation of Gonadotropin treatment	PGF <sub>2</sub> α, treatment	Superovulatory estrus	Day 7 post superovulatory estrus
Total cholesterol	0.535 <sup>**</sup>	0.410 <sup>*</sup>	0.333	0.464 <sup>*</sup>	0.491	0.477 <sup>*</sup>	0.448 <sup>*</sup>	0.438 <sup>*</sup>

\*Indicates significance at 5% ( $P < 0.05$ )

\*\* Indicates significance at 1% ( $P < 0.01$ )

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