

1 **COCOA INTAKE ATTENUATES OXIDATIVE STRESS**
2 **ASSOCIATED WITH RAT ADJUVANT ARTHRITIS**

3
4 **Authors:** S. Ramos-Romero¹, F.J. Pérez-Cano^{1,2}, E. Ramiro-Puig¹, A. Franch^{1,2}, M.
5 Castell^{1,2*}.

6
7 **Institutional Address:**

8 ¹ Departament de Fisiologia, Facultat de Farmàcia, Universitat de Barcelona, Spain

9 ² Institut de Recerca en Nutrició i Seguretat Alimentària (INSA-UB), Barcelona, Spain

10
11 **e-Mail Addresses:**

12 sara.ramosromero@ub.edu, franciscoperez@ub.edu, emma.ramiro@gmail.com,
13 angelsfranch@ub.edu

14
15 ***Corresponding author:**

16 Margarida Castell, PhD

17 Department de Fisiologia, Facultat de Farmàcia, Universitat de Barcelona

18 Av Joan XXIII s/n, Edifici B, 3^a planta

19 08028, Barcelona, Spain

20 Phone: +34 93 402 45 05

21 Fax: +34 93 403 59 01

22 e-mail address: margaridacastell@ub.edu

ABSTRACT

Cocoa contains flavonoids with antioxidant properties. The aim of this study was to ascertain the effect of cocoa intake on oxidative stress associated with a model of chronic inflammation such as adjuvant arthritis. Female Wistar rats were fed with a 5 or 10% cocoa-enriched diet or were given p.o. a quercetin suspension every other day for 10 days. Arthritis was induced by a heat-killed *Mycobacterium butyricum* suspension. Reactive oxygen species (ROS) produced by macrophages, and splenic superoxide dismutase (total, cytoplasmic and mitochondrial) and catalase activities were determined. Clinically, joint swelling in arthritic rats was not reduced by antioxidants; however, the 5% cocoa diet and quercetin administration reduced ROS production. Moreover, the 5% cocoa diet normalized the activities of superoxide dismutase and catalase. In conclusion, a cocoa diet reduces the oxidative stress associated with a chronic inflammatory pathology, although it was not enough to attenuate joint swelling.

Keywords: cocoa, oxidative stress, adjuvant arthritis

Abbreviations: AA, arthritis reference animals; AIN, American Institute of Nutrition; C5, arthritic animals fed 5% cocoa; C10, arthritic animals fed 10% cocoa; EGTA, ethylene glycol tetraacetic acid; H₂DCF-DA, dichlorofluorescein diacetate; Q, arthritic animals treated p.o. with quercetin; p.o., 'per os' oral administration; RA, rheumatoid arthritis; REF, healthy reference animals; RNS, reactive nitrogen species; ROS, reactive oxygen species; SOD, superoxide dismutase; TNF- α , tumour necrosis factor- α

1. Introduction

Flavonoids are polyphenol antioxidant compounds found in vegetables. These benzo- γ -pyrone derivatives can prevent injury caused by free radicals by neutralizing free radicals, chelating metals (principally Fe^{2+} and Cu^{+}) that enhance reactive oxygen species, inhibiting enzymes, and regulating antioxidant defense [1]. Cocoa (product of *Theobroma cacao*) is a natural flavonoid source, mainly containing flavanols such as epicatechin, catechin and procyanidins, and smaller amounts of other flavonoids such as quercetin (3,3',4',5,7-pentahydroxyflavone) [2]. The antioxidant effects of quercetin and catechin have been extensively studied on a variety of inflammatory processes and immune functions [3]. Moreover, other flavanols present in cocoa, such as epigallocatechin-3-gallate and procyanidin B₂, protect Caco2 cells against oxidative stress by reducing ROS production, preventing caspase-3 activation, and increasing antioxidant enzymes as glutathione peroxidase, glutathione reductase and glutathione-S-transferase [4]. Nevertheless, the antioxidant efficacy of flavonoids *in vivo* is less documented. Previous studies show that cocoa flavonoids reduce the macrophage ability to release inflammatory mediators including ROS and nitric oxide *in vitro* and in healthy animals [5-7]. Moreover, a cocoa diet increases the activity of the antioxidant enzymes superoxide dismutase (SOD) and catalase in healthy rat thymus [8].

Rheumatoid arthritis (RA) is a chronic, systemic, autoimmune and inflammatory disease characterized by joint inflammation and synovial hyperplasia, involving infiltration of activated T cells and macrophages. Macrophages possess broad proinflammatory, destructive and remodeling capacities, and contribute considerably to inflammation and joint destruction in RA. Activation of macrophages is not restricted to

the synovial compartment, but extends to circulating monocytes and other cells of the mononuclear phagocyte system [9]. It is believed that macrophages act as amplifiers of systemic inflammation and it has been suggested that RA severity may be associated with the degree of systemic activation of monocytes/macrophages [9]. Activated macrophages release inflammatory mediators such as proteolytic enzymes, ROS and reactive nitrogen species (RNS) [10]. Among ROS, the superoxide anion ($O_2^{\bullet-}$) increases the vascular permeability and promotes neutrophil migration and can be converted into hydroxyl radical (HO^{\bullet}), becoming more aggressive [11]. The SOD is an endogenous ubiquitous enzyme that catalyzes the $O_2^{\bullet-}$ dismutation into H_2O_2 . Subsequently, the endogenous enzyme catalase transforms it to H_2O and O_2 . SOD shows three isoforms: the cytoplasmic SOD1, the mitochondrial SOD2, and the extracellular SOD3. SOD1 and SOD3 use copper and zinc as cofactors, and manganese is the cofactor of SOD2 [11].

Oxidative stress must be important in the pathogenesis of RA since oxidation markers and impaired antioxidant status are found in the plasma and synovial fluid of RA patients [12-13]. Moreover, several studies have pointed out the beneficial effect of antioxidants in RA patients [14-15]. Due to the antioxidant properties demonstrated by cocoa, it could be hypothesized that cocoa intake modulates the oxidative stress provoked by an inflammatory disease. The aim of this study was to ascertain the effect of cocoa-enriched diets on the oxidant and antioxidant status of rats with adjuvant arthritis considering oxidative stress of peritoneal macrophages, applied in several studies as systemic inflammatory cells [16-17], and antioxidant status in a secondary lymphoid tissue very rich in lymphocytes and monocytes, as the spleen. At the same

96 time, a group treated with the flavonoid quercetin, with recognized antioxidant and anti-
97 inflammatory activities was added [18].

2. Materials and methods

2.1. Animals and diets

Nine-week-old female outbred Wistar rats (Harlan, Barcelona, Spain) were fed a standard diet, formulated according to the American Institute of Nutrition (AIN-93M), or a diet containing 5% or 10% of partially defatted *Natural Forastero* cocoa (Nutrexpa, Barcelona, Spain) with 21.2 mg of total phenols/g (Folin-Ciocalteu method). Five and ten percent cocoa diets were prepared from a basal mix (Harlan), in which the proportion of proteins, carbohydrates, lipids and fiber had been modified in such a way that the addition of 5 or 10% cocoa resulted in a final isoenergetic diet with the same macronutrient composition as the AIN-93M diet (Table 1). The diets began 14 days before the arthritis induction and lasted until the end of the study (six weeks later) (Fig. 1).

Animals were randomly distributed in 5 different experimental groups (11-12 rats/group): REF (healthy reference animals), AA (arthritis reference animals), Q (arthritic animals treated p.o. with quercetin at 200 mg/kg on days 0, 2, 4, 6, 8 and 10 after arthritis induction), C5 (arthritic animals fed 5% cocoa) and C10 (arthritic animals fed 10% cocoa) (Fig. 1). Studies were performed in accordance with the institutional guidelines for the care and use of laboratory animals established by the Ethical Committee for Animal Experimentation at the University of Barcelona and approved by the Catalanian Government.

2.2. Induction and evaluation of adjuvant arthritis

Arthritis was induced in all the animals with the exception of the REF group. Adjuvant arthritis was induced as in previous studies [19-20] by injecting intradermally

a suspension of 0.5 mg of heat-killed *Mycobacterium butyricum* (Difco, Detroit, MI, USA) in 0.1 ml of liquid vaseline into the base of the rat tail. Arthritis was clinically assessed by means of hind-paw volume (water plethysmometer LI 7500 Letica, Spain) and arthritic score. The arthritis score was calculated as the sum of the clinical score of the four paws according to scores established by two observers in a blind manner following the criteria: '0' means no signs of inflammation, '1' means erythema or slight swelling in the paw articulations, '2' means erythema and moderate swelling in the paw articulations, '3' means erythema and deep swelling in the paw articulations, '4' means erythema and severe swelling and immobility.

Body weight, hind-paw volume and arthritis score were determined weekly in all the studied groups. On day 28 post-induction, animals were anaesthetized by an intramuscular injection of ketamine (90 mg/kg; Merial, Lyon, France) and xylazine (10 mg/kg; Bayer HealthCare, Kiel, Germany), and peritoneal macrophages, as immune cells involved in the systemic inflammation, and the spleen, as immune cell storage and secondary lymphoid tissue, were obtained. Spleen fragments were immediately frozen at -80 °C until analysis.

2.3. Peritoneal macrophages isolation and ROS production

Peritoneal macrophages were obtained by injecting 40 mL of ice-cold sterile PBS (pH 7.2) into the peritoneal cavity. After 2 min of abdominal massages, cell suspension was aspirated. Macrophages were plated and allowed to attach overnight, then they were washed with warm RPMI medium without phenol red (Sigma-Aldrich) containing 100 IU/mL streptomycin-penicillin. Macrophages were incubated with 20 µmol/L of reduced 2',7'-dichlorofluorescein diacetate probe (H₂DCF-DA; Invitrogen,

Paisley, UK) for 30 min at 37 °C. Macrophage ROS oxidized H₂DCF to a fluorescent compound (DCF). Fluorescence was measured at 30, 60 and 90 min by a fluorometer (excitation 538 nm, emission 485 nm).

2.4. Spleen superoxide dismutase

A fragment of spleen was homogenized in cold 0.1 g/mL HEPES buffer (20 mM pH 7.2, containing 1 mM ethylene glycol tetraacetic acid EGTA, 210 mM mannitol and 70 mM sucrose) and centrifuged (1,500 g, 5 min, 4 °C). The total SOD activity was determined in the supernatant using superoxide dismutase assay kit II (Merck KGaA, Darmstadt, Germany) following the manufacturer's instructions. To determine SOD subtypes, homogenate supernatant was centrifuged at 10,000 g. The supernatant and the pellet were used to evaluate the cytoplasmic and mitochondrial SOD activities, respectively. In the mitochondrial SOD quantification, the pellet was resuspended in HEPES buffer, and potassium cyanide (3 mM, Sigma-Aldrich) was added to the samples to inhibit cytoplasmic SOD.

One unit of SOD is defined as the amount of enzyme needed to exhibit 50% dismutation of the superoxide radical. SOD activity was expressed as units of SOD per g of protein from spleen homogenates (quantified following the Bradford method using the Bio-Rad Protein Assay of Bio-Rad Laboratories Inc., Hercules, CA).

2.5. Spleen catalase activity

A spleen fragment was homogenized on ice-cold phosphate buffer (0.1 g/mL; 50 mM K₂HPO₄, 50 mM KH₂PO₄ and 1 mM EDTA, pH 7.0) and centrifuged (10,000 g, 15 min, 4 °C). The catalase activity was determined in the supernatant by using a

catalase assay kit (Merck) following the manufacturer's instructions. The detection method was based on the reaction of the enzyme with methanol in the presence of an optimal concentration of H_2O_2 , and the formaldehyde produced was measured spectrophotometrically with 4-amino-3-hydrazino-5-mercapto-1,2,4-triazole as the chromogen. Catalase activity was expressed as μmol of formaldehyde per min per g of protein from spleen homogenates.

2.6. Statistics

The software package PASW Statistics 18.0 (SPSS Inc., Chicago, IL) was used for statistical analysis. Levene's and Kolmogorov-Smirnov's tests were applied to assay variance equality and normal distribution of the studied groups, respectively. The one-way analysis of variance (ANOVA) followed by Scheffé's post hoc significance test was applied when the assumptions of normality and equal variance were met. However, non-parametric tests (Kruskal-Wallis and Mann-Whitney U) were used to assay significance. Chi squared test was applied in the frequency study. Significant differences were accepted when $P < 0.05$ and were labeled in tables and figures with a different letter.

3. Results and discussion

Rheumatoid arthritis, as well as experimental models of arthritis, have been associated with oxidative stress [12-13]. Therefore, foods with antioxidant properties could help in the treatment of RA decreasing this harmful state [21]. The results obtained here show the effects of cocoa-enriched diets and quercetin treatment on some markers of oxidative stress in adjuvant arthritis after 4 weeks of induction.

The inflammatory status of adjuvant arthritis was measured by means of hind-paw volume, arthritis score and body weight increase. As can be seen in Table 2, maximum hind-paw volume in the AA group was achieved 3 weeks after induction and thereafter tended to reduce. Similar results were observed when considering arthritis score. Quercetin group, which was included as a positive control, did not prevent arthritis as we expected and even induced a more precocious appearance of arthritis (measured by hind-paw volume or arthritis score, Table 2). These results do not agree with those of Mamani-Matsuda and coworkers [18] who show the curative effect of quercetin (30 mg every 2 days from day 10 after induction) in adjuvant arthritis induced in 6 week-old Lewis rats. The differences could be attributed to events that would change susceptibility to this flavonoid, such as the rat strain (Wistar vs Lewis), age of animals (9-week vs 6-week old animals), the protocol (preventive vs curative) or even the dose (about 40 mg per rat vs 30 mg). Similarly, cocoa diets (groups C5 and C10) were not able to prevent joint swelling, which actually was already detected at day 7 post-induction. However, after maximum paw swelling on day 21 after induction, the animals from groups C5 and C10 underwent a faster recuperation than the AA rats. These results correlate with the body weight increase: during the first two weeks, body weight decreased in all groups receiving arthritis induction, thereafter body weight rose

and this recovery was faster in the C5 and C10 groups than in the AA and Q groups (Table 2).

Macrophages, obtained 4 weeks after arthritis induction, allow the potential oxidative stress in adjuvant arthritis to be estimated (Fig. 2). Macrophages from the AA animals synthesized higher amounts of ROS than those from the REF group ($P < 0.001$). Macrophages from the C5 and Q groups, but not from the C10 group, produced lower ROS than the AA rats ($P < 0.05$). These results indicate the attenuation of the oxidative stress by certain doses of cocoa flavonoids. Similarly, the increased ROS synthesis in AA rats and their modulation by antioxidant compounds has been reported [22-24]. Moreover, the attenuation of ROS by a cocoa diet is in line with results derived from macrophages obtained from cocoa-fed rats, both healthy ones [6] and those with collagen-induced arthritis [7]. Likewise, administration of quercetin was able to decrease ROS concentration in a kidney inflammation model [25]. The inhibition of ROS synthesis by flavonoids can be associated with their free-radical quenching activity [26]. However, it should be noted that the richest cocoa diet did not produce antioxidant effects. This result does not agree with *in vitro* studies showing a dose-dependent antioxidant effect of cocoa [5, 27], which could be due to the different compounds reaching cells. Thus, the *in vitro* antioxidant activity could be partially due to large flavonoid polymers found in cocoa [1], but these polymers are not intestinally absorbed [28]. On the other hand, flavonoids can act as pro-oxidants when they are in high concentration *in vivo* [1, 29]. Previous studies have shown that low concentrations of quercetin inhibit lipid peroxidation in rat liver and protect human leucocytes against oxidative DNA damage, but high concentrations of this flavonoid enhance the hydroxyl radical formation and increase the DNA damage [1].

In order to protect tissues from oxidative injuries, the body possesses enzymatic antioxidant enzymatic systems such as superoxide dismutases and catalase enzymes. It has been reported that AA decreases serum or synovial SOD and catalase activities together with other endogenous antioxidant systems [22-24, 30]. Here we found that, 4 weeks after induction, arthritis produced a decrease in splenic catalase activity ($P < 0.05$; Fig. 3) and, paradoxically, an increase in splenic total and mitochondrial SOD ($P < 0.05$; Fig. 4). The decreased catalase activity could be associated with the consumption of catalase in neutralizing the H_2O_2 . On the other hand, increased splenic SOD activities could reflect the response of the body to increased ROS concentrations and/or it could be due to the fact that arthritis was in its recovery phase one month after its induction. Moreover, SOD increase could also be explained by the increase in the oxidative stress found in arthritic rats (Fig. 2), and by the increased tumour necrosis factor- α (TNF- α) secretion present in arthritis [7]. Both oxidative stress and TNF- α are shown to induce SOD synthesis [31-32]. It should be added that a similar increase in SOD activity was found in the plasma of RA patients [33] and in the synovial membrane of mice with collagen-induced arthritis [34].

Interestingly, the changes in the enzymatic antioxidant systems produced by adjuvant arthritis were totally prevented in the C5 group which was fed with a diet containing 5% cocoa ($P < 0.05$; Fig. 3 and 4). SOD and catalase activities in the C10 and Q groups were not significantly different from the AA rats (Fig. 3 and 4). The beneficial effect of a 5% cocoa diet on antioxidant systems in adjuvant arthritis is in line with the effect of other flavonoids or compounds of a botanical origin on this experimental inflammatory model [24, 30], although these studies found a clinical

improvement on arthritis. The reduction of oxidative stress by a 5% cocoa diet (Fig. 2), as well as the decrease in TNF- α secretion produced by a similar diet as reported in a previous study [7] could be responsible for the reduction in splenic SOD. The effect of 5% cocoa diet on SOD seems to be due to its activity on the mitochondrial SOD (Fig. 4C), a unique and essential isoform for life [35]. On the other hand, cocoa intake normalized the catalase activity (Fig. 3), which is a cytosolic enzyme absent in the mitochondria of most cells [36]. These results suggest that the antioxidant effect of cocoa is exerted in both cellular compartments.

From the results obtained in this study, it can be concluded that cocoa intake reduces the oxidative stress in macrophages provoked by adjuvant arthritis. This antioxidant effect of cocoa is dependent on the doses employed. Nevertheless, we still need to discover the antioxidant effect of cocoa on joint tissues and to ascertain the relationship between this antioxidant effect and inflammatory markers. Further studies are needed to establish more deeply the role of cocoa, a source of antioxidant flavonoids, as a coadjuvant in the treatment of chronic inflammatory diseases.

Acknowledgements

This study was supported by the Ministerio de Educación y Ciencia, Spain (AGL2005-002823), and by the Generalitat de Catalunya, Spain (SGR 2005-0083). S.R. is the recipient of a fellowship from the Ministerio de Educación y Ciencia, Spain (BES-2006-13640).

References

- [1] Procházková D, Boušová I, Wilhelmová N. Antioxidant and prooxidant properties of flavonoids. *Fitoterapia* 2011;82:513-23.
- [2] Rusconi M, Conti A. *Theobroma cacao* L., the Food of the Gods: A scientific approach beyond myths and claims. *Pharmacol Res* 2010;61:5-13.
- [3] Boots AW, Haenen GR, Bast A. Health effects of quercetin: from antioxidant to nutraceutical. *Eur J Pharmacol* 2008;585:325-37.
- [4] Rodríguez-Ramiro I, Ramos S, Bravo L, Goya L, Martín MA. Procyanidin B2 induces Nrf2 translocation and glutathione S-transferase P1 expression via ERKs and p38-MAPK pathways and protect human colonic cells against oxidative stress. *Eur J Nutr* 2011;in press.
- [5] Ramiro E, Franch A, Castellote C, Pérez-Cano F, Permanyer J, Izquierdo-Pulido M, Castell M. Flavonoids from *Theobroma cacao* down-regulate inflammatory mediators. *J Agric Food Chem* 2005;53:8506-11.
- [6] Castell M, Franch A, Ramos-Romero S, Ramiro-Puig E, Pérez-Cano FJ, Castellote C. Effect of a diet rich in cocoa flavonoids on experimental acute inflammation. In: Keller RB, editors. *Flavonoids: Biosynthesis, Biological Effects and Dietary Sources*, New York: Nova Science Publishers Inc; 2009, p. 213-29.
- [7] Ramos-Romero S, Pérez-Cano FJ, Pérez-Berezo T, Castellote C, Franch A, Castell C. Effect of a cocoa flavonoid-enriched diet on experimental autoimmune arthritis. *Br J Nutr* 2012;107:523-32.
- [8] Ramiro-Puig E, Urpí-Sardà M, Pérez-Cano FJ, Franch À, Castellote C, Andrés-Lacueva C, Izquierdo-Pulido M, Castell M. Cocoa-enriched diet enhances antioxidant enzyme activity and modulates lymphocyte composition in thymus from young rats. *J Agric Food Chem* 2007;55:6431-8.

314 [9] Kinne RW, Bräuer R, Stuhlmüller B, Palombo-Kinne E, Burmester GR.
315 Macrophages in rheumatoid arthritis. *Arthritis Res.* 2000;2:189-202.

316 [10] Phillips DC, Dias HKI, Kitas GD, Griffiths HR. Aberrant reactive oxygen and
317 nitrogen species generation in rheumatoid arthritis (RA): Causes and consequences
318 for immune function, cell survival, and therapeutic intervention. *Antioxid Redox*
319 *Signal* 2010;12:743-85.

320 [11] Afonso V, Champy R, Mitrovic D, Collin P, Lomri A. Reactive oxygen species and
321 superoxide dismutases: Role in joint diseases. *Joint Bone Spine* 2007;74:324-9.

322 [12] Seven A, Güzel S, Aslan M, Hamuryudan V. Lipid, protein, DNA oxidation and
323 antioxidant status in rheumatoid arthritis. *Clin Biochem* 2008;41:538-43.

324 [13] Vasanthi P, Nalini G, Rajasekhar G. Status of oxidative stress in rheumatoid
325 arthritis. *Int J Rheum Dis* 2009;12:29-33.

326 [14] Tiku ML, Gupta S, Deshmukh DR. Aggrecan degradation in chondrocytes is
327 mediated by reactive oxygen species and protected by antioxidants. *Free Radic Res*
328 1999;30:395-405.

329 [15] Nourmohammadi I, Athari-Nikazm S, Vafa MR, Bidari A, Jazayeri S, Hoshyarrad
330 A, Hoseini F, Fasihi-Radmandi M. Effects of antioxidant supplementations on
331 oxidative stress in rheumatoid arthritis patients. *J Biol Sci* 2010;10:63-6.

332 [16] Kauss T, Moynet D, Rambert J, Al-Kharat A, Brajot S, Thiolat D, Enneman R,
333 Fawaz F, Mossalayi MD. Rutoside decreases human macrophage-derived
334 inflammatory mediators and improves clinical signs in adjuvant-induced arthritis.
335 *Arthritis Res Ther.* 2008;10:R19.

336 [17] Li R, Li J, Cai L, Hu CM, Zhang L. Suppression of adjuvant arthritis by hesperidin
337 in rats and its mechanisms. *J Pharm Pharmacol.* 2008;60:221-8.

338

339 [18] Mamani-Matsuda M, Kauss T, Al-Kharat A, Rambert J, Fawaz F, Thiolat D,
340 Moynet D, Coves S, Malvy D, Mossalayi MD. Therapeutic and preventive
341 properties of quercetin in experimental arthritis correlate with decreased
342 macrophage inflammatory mediators. *Biochem Pharmacol*. 2006;72:1304-10.

343 [19] Franch A, Castellote C, Vilà JL, Vilaró S, Castell M. Anticytoskeletal autoantibody
344 development in adjuvant arthritis. *J Rheumatol*. 1994;21:489-97.

345 [20] Pelegrí C, Castell M, Serra M, Rabanal M, Rodríguez-Palmero M, Castellote C,
346 Franch A. Prevention of adjuvant arthritis by the W3/25 anti-CD4 monoclonal
347 antibody is associated with a decrease of blood CD4⁺ CD45RC^{high} T cells. *Clin Exp*
348 *Immunol*. 2001;125:470-7.

349 [21] Efthimiou P, Kukar M. Complementary and alternative medicine use in rheumatoid
350 arthritis: proposed mechanism of action and efficacy of commonly used modalities.
351 *Rheumatol Int* 2010;30:571-86.

352 [22] Jung HJ, Nam JH, Choi J, Lee KT, Park HJ. Antiinflammatory effects of
353 chiisanoside and chiisanogenin obtained from the leaves of *Acanthopanax*
354 *chiisanensis* in the carrageenan- and Freund's complete adjuvant-induced rats. *J*
355 *Ethnopharmacol* 2005;97:359-67.

356 [23] Jawed H, Shah SUA, Jamall S, Simjee SU. N-(2-hydroxy phenyl) acetamide
357 inhibits inflammation-related cytokines and ROS in adjuvant-induced arthritic
358 (AIA) rats. *Int Immunopharmacol* 2010;10:900-5.

359 [24] Tastekin N, Aydogdu N, Dokmeci D, Usta U, Birtane M, Erbas H, Ture M.
360 Protective effects of l-carnitine and alpha-lipoic acid in rats with adjuvant arthritis.
361 *Pharmacol Res* 2007;56:303-10.

362 [25] Liu CM, Ma JQ, Sun YZ. Quercetin protects the rat kidney against oxidative stress-
 363 mediated DNA damage and apoptosis induced by lead. *Environ Toxicol Pharmacol*
 364 2010;30:264-71.

365 [26] Avila V, Bertolotti SG, Criado S, Pappano N, Debattista N, García NA.
 366 Antioxidant properties of natural flavonoids: quenching and generation of singlet
 367 molecular oxygen. *Int J Food Sci Technol* 2001;36:25-33.

368 [27] Erlejan AG, Fraga CG, Oteiza PI. Procyanidins protect Caco-2 cells from bile
 369 acid- and oxidant-induced damage. *Free Radic Biol Med* 2006;41:1247-56.

370 [28] Monagas M, Urpi-Sarda M, Sánchez-Patán F, Llorach R, Garrido I, Gómez-
 371 Cordovés C, Andres-Lacueva C, Bartolomé B. Insights into the metabolism and
 372 microbial biotransformation of dietary flavan-3-ols and the bioactivity of their
 373 metabolites. *Food Funct* 2010;1:233-53.

374 [29] Halliwell B. Are polyphenols antioxidants or pro-oxidants? What do we learn from
 375 cell culture and in vivo studies? *Arch Biochem Biophys* 2008;476:107-12.

376 [30] Kripa KG, Chamundeeswari D, Thanka J, Uma Maheswara Reddy C. Modulation
 377 of inflammatory markers by the ethanolic extract of *Leucas aspera* in adjuvant
 378 arthritis. *J Ethnopharmacol* 2011;134:1024-7.

379 [31] Kuo S, Cheswron SE, Mellott JK, Rogers RJ, Hsu JL, Nick HS. In vivo
 380 architecture of the manganese superoxide dismutase promoter. *J Biol Chem*
 381 1999;274:3345-54.

382 [32] Xu Y, Kiningham KK, Devalaraja MN, Yeh CC, Majima H, Kasarskis EJ, St Clair
 383 DK. An intronic NF- κ B element is essential for induction of the human manganese
 384 superoxide dismutase gene by tumor necrosis factor- α and interleukin-1 β . *DNA Cell*
 385 *Biol* 1999;18:709-22.

- 386 [33] Bhowmick K, Chakraborti G, Gudi NS, Kutty Moideen AV, Shetty HV. Free
387 radical and antioxidant status in rheumatoid arthritis. Indian J Rheumatol 2008;3:8-
388 12.
- 389 [34] Kasama T, Kobayashi K, Sekine F, Negishi M, Ide H, Takahashi T, Niwa Y.
390 Follow-up study of lipid peroxides, superoxide dismutase and glutathione
391 peroxidase in the synovial membrane, serum and liver of young and old mice with
392 collagen-induced arthritis. Life Sci 1988;43:1887-96.
- 393 [35] Lebovitz RM, Zhang H, Vogel H, Cartwright JJr, Dionne L, Lu N, Huang S,
394 Matzuk MM. Neurodegeneration, myocardial injury, and perinatal death in
395 mitochondrial superoxide dismutase-deficient mice. Proc Natl Acad Sci U.S.A.
396 1996;93:9782-7.
- 397 [36] Hitchon CA, El-Gabalawy HS. Oxidation in rheumatoid arthritis. Arthritis Res
398 Ther 2004;6:265-78.

Figure legends

Fig. 1. Diagram of the experimental design that began 14 days before arthritis induction and finished on day 28 post-induction. White bars mean the standard diet (Ref, AA and Q groups), pale grey color represents the 5% cocoa diet (C5 group), and dark grey color represents the 10% cocoa diet (C10 group). Striped bars are representative of period after arthritis induction. Animals from Q group were treated with quercetin p.o. on days 0, 2, 4, 6, 8, 10 post-induction (squared bar). At the end of the study, peritoneal macrophages and spleen were obtained from all animals.

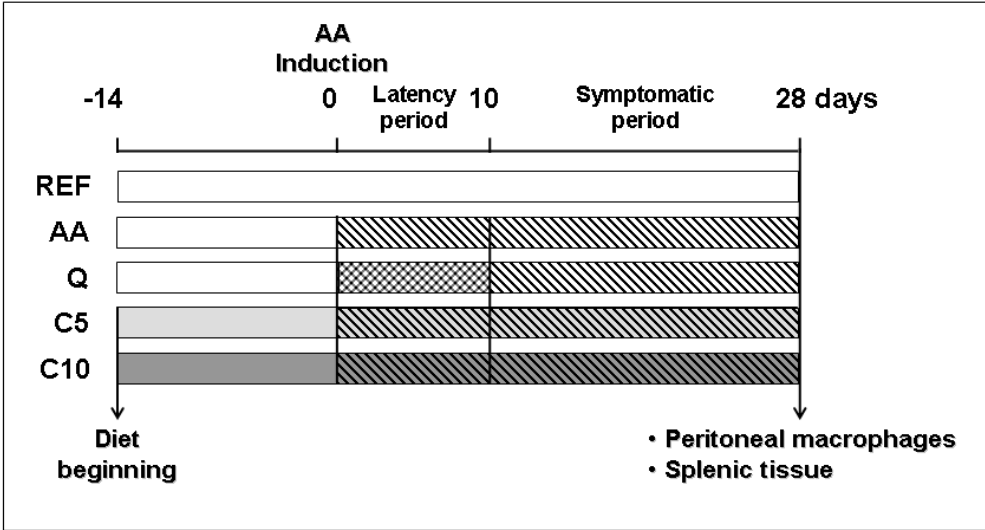


Fig. 2. Time course of ROS production by macrophages, expressed in fluorescence units (FU) and determined by DCF assay. Values are expressed as mean \pm S.E.M. ($n = 8$). Means with different letter (a, b, c) differ, $P < 0.05$ (Kruskal-Wallis and Mann-Whitney U tests).

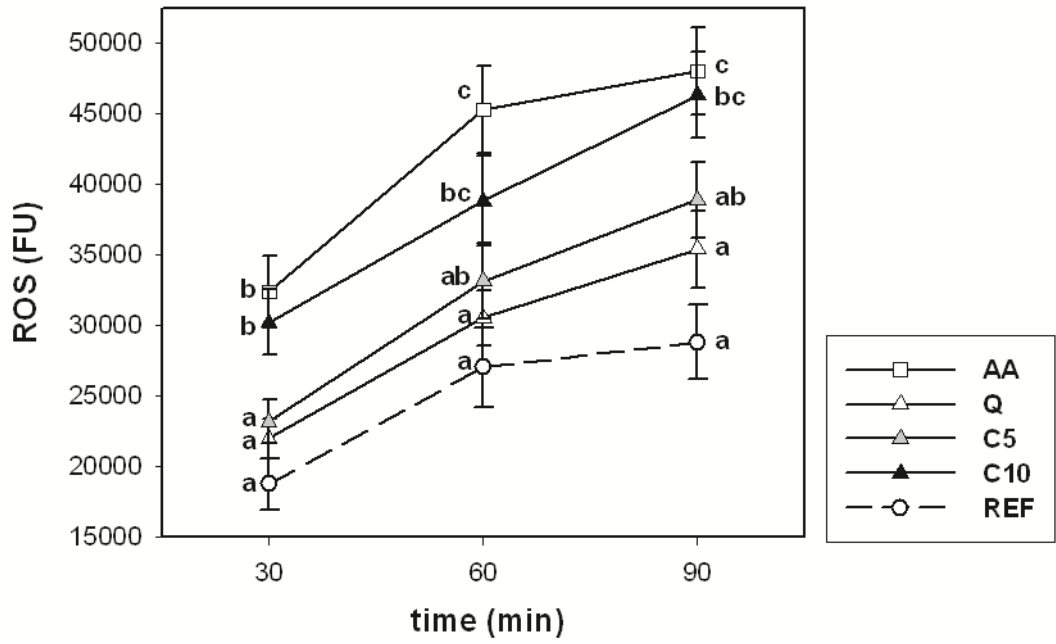


Fig. 3. Catalase activity in spleen homogenates expressed as $\mu\text{mol}/\text{min}/\text{g}$ of protein. Each bar represents the mean \pm S.E.M. ($n = 11-12$). Means with different letter (a, b) differ, $P < 0.05$ (ANOVA followed by Scheffé's test).

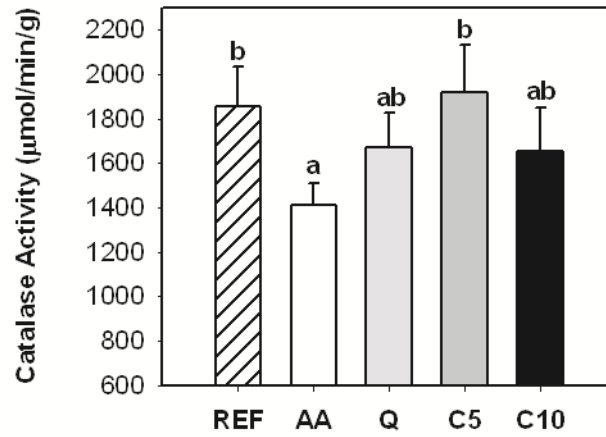
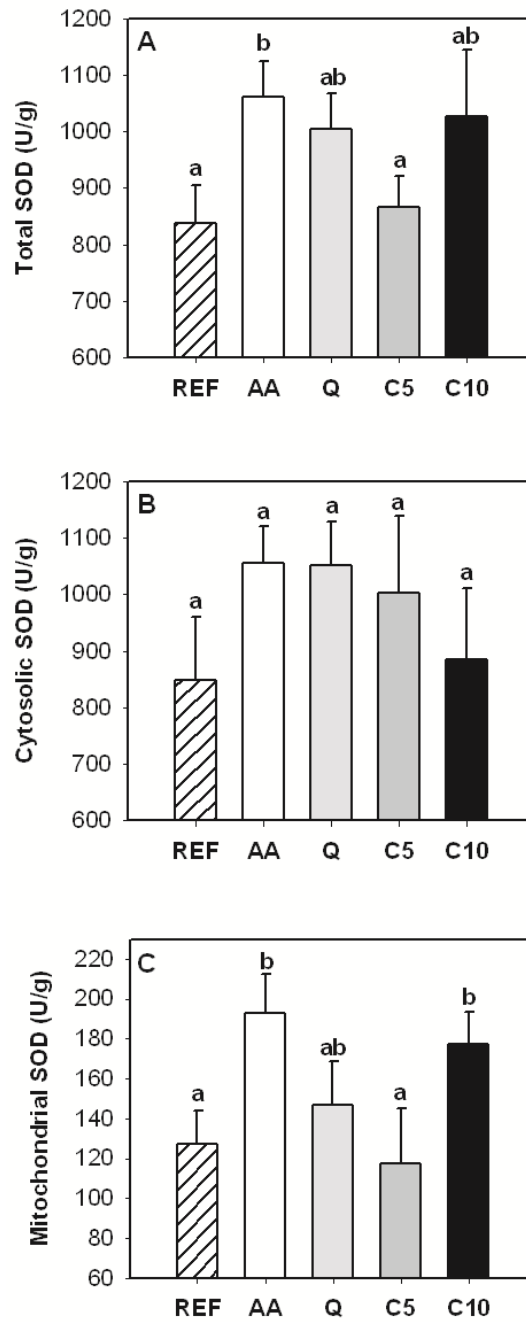


Fig. 4. Activity of SOD subtypes in spleen homogenates: (A) total, (B) cytosolic, and (C) mitochondrial SOD activities. SOD is expressed as units (U)/g of protein. Each bar represents the mean \pm S.E.M. ($n = 11-12$). Means with different letter (a, b) differ, $P < 0.05$ (Kruskal-Wallis and Mann-Whitney U tests).



425 **Tables**

426 **Table 1.** Composition of the experimental diets (g/kg).

| Components | Standard diet (AIN-93M, g/kg) | 5% Cocoa diet (g/kg) | 10% Cocoa diet (g/kg) |
|----------------------------------------|----------------------------------|-------------------------|--------------------------|
| Casein | 140 | 129 | 118 |
| L-Cystine | 1.8 | 1.8 | 1.8 |
| Corn starch | 465.69 | 457.69 | 449.69 |
| Maltodextrin | 155 | 155 | 155 |
| Sucrose | 100 | 100 | 100 |
| Soybean oil | 40 | 34.5 | 29 |
| Cellulose | 50 | 37.25 | 24.5 |
| Mineral mix (TD94046) | 35 | 35 | 35 |
| Vitamin mix (TD94047) | 10 | 10 | 10 |
| Choline bitartrate | 2.5 | 2.5 | 2.5 |
| <i>tert</i> -Butylhydroquinone | 0.008 | 0.008 | 0.008 |
| Natural cocoa powder | - | 50 | 100 |
| Cocoa macronutrients: | | | |
| <i>Protein</i> | | 11 | 22 |
| <i>Carbohydrate</i> | | 8 | 16 |
| <i>Lipid</i> | | 5.5 | 11 |
| <i>Insoluble fiber</i> | | 12.75 | 25.5 |
| Total cocoa polyphenols ⁽¹⁾ | | 1.06 | 2.12 |
| Cocoa flavonoids ⁽²⁾ : | | | |
| <i>Epicatechin</i> | | 0.10995 | 0.2199 |
| <i>Procyanidin B₂</i> | | 0.08375 | 0.1675 |
| <i>Catechin</i> | | 0.0368 | 0.0736 |
| <i>Isoquercetin</i> | | 0.00275 | 0.0055 |
| <i>Quercetin</i> | | 0.0015 | 0.003 |

427

428 ¹Cocoa polyphenols were determined by Folin-Ciocalteu method.

429 ²Main cocoa flavonoids were determined by HPLC.

Table 2. Effect of flavonoid intake on total body weight increase and arthritis severity (n = 11-12). Body weight (g) and hind-paw volume (mL) values are summarized as mean \pm S.E.M. Means or frequencies with different letter (a, b, c) differ, $P < 0.05$ (ANOVA followed by Scheffé's test). Arthritis score is presented as frequency of each score. Frequencies without a common letter differ, $P < 0.05$ (Chi square).

| | | post-induction day | | | | |
|--------------------------------|-----|--------------------|-------------------------------|------------------------------|------------------------------|------------------------------|
| | | Group | 7 | 14 | 21 | 28 |
| Body Weight | REF | | 211.7 \pm 2.6 ^a | 220.1 \pm 3.1 ^a | 227.1 \pm 3.4 ^a | 231.8 \pm 3.6 ^a |
| | AA | | 195.6 \pm 4.1 ^b | 194.8 \pm 4.8 ^b | 193.8 \pm 5.2 ^b | 200.2 \pm 5.4 ^b |
| | Q | | 192.2 \pm 3.1 ^b | 189.9 \pm 2.7 ^b | 195.1 \pm 3.5 ^b | 202.2 \pm 3.7 ^b |
| | C5 | | 185.0 \pm 2.5 ^c | 183.1 \pm 2.6 ^c | 189.5 \pm 2.5 ^b | 198.9 \pm 2.4 ^b |
| | C10 | | 180.0 \pm 2.4 ^c | 181.3 \pm 2.3 ^c | 184.2 \pm 3.4 ^b | 192.9 \pm 4.0 ^b |
| Hind-paw volume ⁽¹⁾ | REF | | 0.81 \pm 0.01 ^a | 0.83 \pm 0.01 ^a | 0.84 \pm 0.01 ^a | 0.85 \pm 0.01 ^a |
| | AA | | 0.82 \pm 0.01 ^a | 1.27 \pm 0.09 ^b | 1.74 \pm 0.13 ^b | 1.43 \pm 0.09 ^b |
| | Q | | 0.93 \pm 0.03 ^b | 1.34 \pm 0.16 ^b | 2.14 \pm 0.23 ^b | 1.58 \pm 0.18 ^b |
| | C5 | | 0.87 \pm 0.02 ^b | 1.40 \pm 0.11 ^b | 1.67 \pm 0.12 ^b | 1.27 \pm 0.09 ^b |
| | C10 | | 0.86 \pm 0.02 ^{ab} | 1.31 \pm 0.12 ^b | 1.73 \pm 0.16 ^b | 1.27 \pm 0.10 ^b |
| Arthritis score range | | | | | | |
| Arthritis Score ⁽²⁾ | REF | 0 | 11 ^a | 11 ^a | 11 ^a | 11 ^a |
| | | 1-4 | 0 | 0 | 0 | 0 |
| | | 5-8 | 0 | 0 | 0 | 0 |
| | | 9-12 | 0 | 0 | 0 | 0 |
| | | 13-16 | 0 | 0 | 0 | 0 |
| | AA | 0 | 11 ^a | 2 ^b | 1 ^b | 1 ^b |
| | | 1-4 | 1 | 2 | 3 | 5 |
| | | 5-8 | 0 | 8 | 4 | 3 |
| | | 9-12 | 0 | 0 | 4 | 3 |
| | | 13-16 | 0 | 0 | 0 | 0 |
| | Q | 0 | 5 ^b | 0 ^b | 1 ^b | 1 ^b |
| | | 1-4 | 6 | 5 | 3 | 5 |
| | | 5-8 | 0 | 4 | 3 | 4 |
| | | 9-12 | 0 | 2 | 4 | 1 |
| | | 13-16 | 0 | 0 | 0 | 0 |
| | C5 | 0 | 5 ^b | 0 ^b | 0 ^b | 0 ^b |
| | | 1-4 | 7 | 6 | 3 | 8 |
| | | 5-8 | 0 | 5 | 7 | 3 |
| | | 9-12 | 0 | 1 | 2 | 1 |
| | | 13-16 | 0 | 0 | 0 | 0 |
| | C10 | 0 | 7 ^{ab} | 0 ^b | 1 ^b | 3 ^b |
| | | 1-4 | 4 | 6 | 2 | 3 |
| | | 5-8 | 1 | 5 | 6 | 5 |
| | | 9-12 | 0 | 1 | 3 | 1 |
| | | 13-16 | 0 | 0 | 0 | 0 |

¹ Hind-paw volume is shown as the average of the two hind-paw volumes, expressed as mL.

² Arthritis score was established according to: '0' means no signs of inflammation, '1' means erythema or slight swelling in the paw articulations, '2' means erythema and moderate swelling in the paw articulations, '3' means erythema and deep swelling in the paw articulations, '4' means erythema and severe swelling and immobility.