

Journal of Scientific Research & Reports

28(5): 28-34, 2022; Article no.JSRR.86829

ISSN: 2320-0227

Study on the Therapeutic Benefits of Vitamin E after Paraquat Toxicity

Okolonkwo, Benjamin Nnamdi ^{a*}, Jonathan, Nyebuchi ^b, Adjekuko, Ohwonigho Collins ^c and Mieiwari, Ibifubara Jumbo ^b

^a Department of Medical Laboratory Science, PAMO University of Medical Sciences, Port Harcourt, Rivers State. Nigeria.

^b Department of Medical Laboratory Science, Rivers State University, Port Harcourt, Nigeria.
^c Department of Biological Sciences, University of Delta, Agbor, Delta State, Nigeria.

Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

Article Information

DOI: 10.9734/JSRR/2022/v28i530520

Open Peer Review History:

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here:

https://www.sdiarticle5.com/review-history/86829

Received 03 March 2022 Accepted 06 May 2022 Published 23 May 2022

Original Research Article

ABSTRACT

The Paraquat (1, 1-dimethyl-4,4-bipyridlium dichloride) is a non-selective nitrogen herbicide that is used for broadleaf control of weed. It has been shown that paraquat is toxic to human and animal. Vitamin E (α-tocopherol) is a lipid soluble antioxidant found in all cellular membranes. It helps in protecting the cell against lipid peroxidation. It has been documented that vitamin E has a protective effect against PQ-induced hematological toxicity in albino rats. This study was carried out to evaluate the haematological effect of Vitamin E therapy on the chronic toxicity of paraguat in Albino rats. . A total of 200 male albino rats were used for the study. The 200 rats were divided into four main groups (A, B, C, D) and each group had 50 rats and was further subgrouped into two, having 25rats per subgroup. "A" group was not induced with paraquat while "B", 'C" and "D" groups were induced in increasing dose of 0.02g, 0.04g and 0.06g respectively. "A" group had two subgroups; "Ao" and "Ave" which represented the sub-group not treated with Vit E and the subgroup treated with Vit E (500mg) respectively. This design also applied to group "B", "C" and "D". Paraquat induction frequency was done every forth night for three month followed by weekly treatment for three months. The result showed a significant decrease in PCV, Hb, and TWBC count for group in the Ao, Bo, Co and Do at p<0.05 but no significant difference in the neutrophil and lymphocyte count. It also showed a significant increase in the Hb, and PCV of subgroups Ave, Bve, Cve and

*Corresponding author: E-mail: bokolonkwo@pums.edu.ng;

Dve at p<0.05 but no significant difference in the TWBC count and differentials. This suggest that Vitamin E supplementation had an ameliorative effect on the PCV and Hb values but no effect on the TWBC count and differentials on paraquat toxicity.

Keywords: Vitamin E; paraquat; rat; antioxidant; haematological parameters.

1. INTRODUCTION

The poor regulation of toxicants present in domestic and industrial product has led increase in toxicant in the environment especially in under-developing and developing countries [1.2]. Herbicides or weed killers are phytotoxic chemicals that are used in the destruction of different kinds of weeds or reduce their growth [3]. These herbicides are mostly in use in developing countries [4]. Paraguat (PQ) is one of these herbicides and it is used globally because of its high efficiency, low environmental pollution and low residues in crops (Ren et al., 2014). 1-dimethyl-4,4-bipyridlium (1, dichloride) is a non-selective nitrogen herbicide that is used for broadleaf control of weed [5]. Globally, it is ranked as the second highest selling herbicide that is available at the rate of 20 percent solution form [6]. To human and animal, paraquat is highly toxic (Suntres, 2002), its toxicity can lead to Acute Respiratory Distress Syndrome (ARDS) [7]. The mechanism of Paraguat toxicity is yet to be fully understood, but it is presumed that the toxicity is as a result of Reactive Oxygen Specie (ROS) generation process. through redox-cycling consequently lead to oxidative-stress damage to cellular organelles, proteins, nucleic acids and lipids [8-10]. When paraguat toxicity becomes severe it can lead to multiple organ failure especially lungs, kidneys and liver [11].

PQ gain access into the body and is excreted in the form of a prototype in the kidney, where the concentration is highest, which eventually leads to altered kidney function. Since paraquat cannot be excreted normally, it further accumulates in the body; thus, involving other organs such as the liver, heart and lung, which then results in multiple organ failure [12]. Creatinine is a product derived from the constant degradation of creatine,. large amounts of creatinine gets accumulated once kidney function is impaired which then result to the production of 1-5-hydroxy-1methylhydantoin and methylhydantoin (HMH) [13].

Although the mechanism of paraquat toxicity is still not explained explicitly, it has shown widely

that PQ-induced toxicity as a result of prolonged redox-cycling and reactive oxygen specie (ROS) generation consequently result in general inflammation due to oxidative stress [10]. An increase in leukocytes and neutrophil counts, and a marked decline in lymphocyte counts, were reported from a study following acute inflammatory response due to oxidative stress [14]. Recently, neutrophil-to-lymphocyte ratio (NLR) has also been shown to be a viable inflammatory marker. NLR is shown to be a very sensitive inflammatory and prognostic indicator in many diseases including sepsis, stroke, cardiac disorders, and cancer etc [15]. There is a similar inflammatory response in paraquat toxicity and NLR, therefore the NLR may also be used as prognostic indicator to predict mortality in patients with PQ poisoning. It should also be understood that alterations and changes in the and haematological chemical composition indices are used to provide diagnosis about the type of toxicants and degree of pollution in the body [16].

Vitamin E (α-tocopherol) is a lipid soluble antioxidant found in all cellular membranes. It helps in protecting the cell against lipid peroxidation (Machlin, 1980). One of its functions is to act as a chain-breaking antioxidant it carries out this function by preventing chain initiation and propagation of free radical reaction and lipid peroxidation in cellular membrane [17]. Another of its function is to influence the cellular response to oxidative stress through modulation of signal-transduction pathway [18]. Also, vitamin E functions as membrane stabilizer [19,20]. It has the ability to neutralize free radicals, that destroy cellular molecules, and it is also capable of preserving the integrity of renal tubules. In addition, it is an anti-toxin agent. Vitamin E has been studied severally because of its reported hepatoprotective effects in animals, because of its ability to attenuate the induced oxidative in various tissues bγ stress reducing Malondialdehyde (MDA) levels, thereby restoring the levels of Glutathione (GSH), and Superoxide dismutase (SOD), and the recovery of impaired hepatic cells [21]. It has been documented that vitamin E has a protective effect against PQ-

induced hematological and biochemical toxicity in albino rats [22]. It must be noted that literature on haematological effect of Vitamin E therapy on the chronic toxicity of paraquat in albino rats is rare; therefore it is imperative to carry out study on the subject.

2. MATERIALS AND METHODS

2.1 Study Area/Population

The study was carried out in the medical Laboratory Science Departmental Laboratory of Rivers State University. The study was a biological trial with Albino rats which were considered the choicest animals for this experiment because of their availability, cost, genetic makeup, handling technique and nature of the study. Two hundred (200) healthy mature male albino rats with a mean weight of 0.2±0.02kg were used in this study. The rats were obtained from Animal House, Department of Biology, Rivers State University. The rats were transported to the study site and allowed to acclimatize for two week before proceeding with the study. The rats were housed in conventional wire mesh cages under standard laboratory conditions and were allowed free access to water and feed throughout the experiment.

2.2 Grouping and Treatment of Animals

Two hundred (200) male Albino Rats were used for this research and were divided according to their body weight into 4 groups with each group containing fifty (50) Rats each.

Group A: This was the negative control group. They were not induced with paraquat

Group B: This group was induced every two weeks with 0.02g of paraquat per kg of rat for three months.

Group C: This group was induced every two weeks with 0.04g of paraquat per kg of rat for three months.

Group D: This group was induced every two weeks with 0.06g per kg of paraquat for three months.

Each of the main groups had subgroups. "A" group had "Ao" and "Ave" subgroups; "B" group had "Bo" and "Bve" subgroups; "C" group had "Co" and "Cve" subgroups; "D" group had "Do" and "Dve"

"Ao", "Bo", "Co" and "Do" subgroups: were not treated with vitamin E

The "Bo", "Co" and "Do" subgroups were the positive control groups

"Ave", "Bve", "Cve" and "Dve" subgroups: were treated orally with 500mg of vitamin E every week for three months.

After three months of weekly treatment with Vit E, the rats were sacrificed and their blood samples were analysed for haematological parameters.

2.3 Procedures for Administration of Toxicant

Toxicant was administered via oral gavage route. The rats were held at the skin over the head and turned so that the mouth was faced upward and the body lowered towards the holder. The syringe needle bevel was then placed into the mouth of the rat a bit laterally in a way to avoid the teeth which are located centrally. The content in the syringe was then emptied into the mouth of the rat gradually [23].

2.4 Sample Collection

The blood samples were collected via cardiac puncture from the animals and sacrificed under 70% chloroform anesthesia into the Ethylenediaminetetra acetic acid (EDTA) specimen bottle and used for analysis of haematological parameters [23].

2.5 Laboratory Analysis

2.5.1 Haemoglobin (Hb.) estimation by cyanmethaemoglobin method

Principle: Iron (II) of the haem in haemoglobin is oxidized to the ferric state by ferricyanide to form methaemoglobin which then is reduced to cyanmnethaemoglobin by ionised cyanide. This is red in colour and is measured spectrophotometrically at 540nm.

Procedure: $2\mu l$ of blood was washed into 5ml of Drabkins solution in a test tube. The test tube was covered with a rubber cap, was inverted severally and then allowed to stand at room temperature for 10min. This is to ensure complete conversion to cyanmethaemoglobin. The absorbance was then read at 540nm wavelength against a blank (5ml of Drabkins

reagent only). The absorbance of known standard was read alongside those of the test samples. The result is calculated thus:

Absorbance of Test X Standard concentration (mg/dl)

Absorbance of Standard

= The Hb concentration of test (mg/dl)

2.5.2 Packed cell volume (PCV) method

The packed cell volume (PCV) or the haematocrit is a measure of the relative volume of red cells present in a sample of whole blood in percentage.

Well-mixed, anticoagulated, blood was aspirated by capillary action into a microhaematocrit tube, leaving about 15mm unfilled. One end of the tube was sealed with plasticine. The tube was centrifuged at approximately 12,000g (centrifugal force) for 10 minutes using the microhaematocrit centrifuge.

The PCV was subsequently determined by measuring the height of the red cell column and expressing it as a percentage—ratio of the height of the total blood column using a microhaematocrit reader.

2.5.3 Total white blood cell (T-WBC) counts

Quantitative and qualitative alteration in the circulating leucocytes characterizes diverse disease state and is often diagnostically significant. This could also assist us in determining the immune response to the foreign body (paraquat).

Procedure: One in twenty (1:20) dilution of the blood was made using 2% Glacial Acetic Acid tinged with few drops of Gentian violet. The diluted sample was mixed and allowed to stand for 15 minutes for complete destruction of the red cells. A known quantity of the diluted sample was aspirated into the charged chamber (Improved Neubaur Counting Chamber), and the white cells present in the four outer large squares of 1mm² areas were counted.

Calculation:

Number counted X 50 (mf) = T-WBC counted per ml of blood (mf = multiplication factor).

2.5.4 White blood cells differential count

A drop of the anticoagulated blood sample on a clean, grease free slide was spread with a glass

spreader at angle of 45° to the slide. With a swift, forward movement, the drop of blood is spread on the slide, making a uniform film of equal distribution of cells.

After thin film preparation, the films were air dried, fixed in alcohol (methanol), air dried again, and stained with field stain 'A' and 'B'. The films were examined under the microscope using oil immersion objective, and the cells (neutrophils and lymphocytes) counted were rated in percentage of 100 Leucocyte.

2.6 Statistical Analysis

The data generated from this study was analyzed using SPSS version 23.0 for descriptive and inferential statistics (ANOVA) for inter-group comparison and T-test for intra-group (sub-group) comparison at test significance, P-value<0.05.

3. RESULTS

Table 1 shows the comparative effects of vitamin E therapy on the Chronic Toxicity of Paraguat in Albino Rats (Rattus norvegicus). The results show that there was a significant difference in PCV, Hb and WBC levels in rats among A₀, B₀, C₀ and D₀ groups, and Ave, Bve, Cve and Dve, p-value<0.05. There was no significant difference in neutrophil and lymphocytes. Intragroup comparison showed there was significant difference increase in Hb and subgroups in levels between the same group, p-value<0.05 except A₀ and Ave, pvalue>0.05.

- Index (a) = represents a statistically significant difference among inter-groups such as (Ao, Bo, Co and Do) and (Ave, Bve, Cve and Dve)
- Index (b) = represents a statistically significant difference observed within each group (i.e. Group B: B_0Vs B_{VE}).

4. DISCUSSION

The result presented in Table 1 showed that there was a significant decline in the Hb and PCV levels among A_0 , B_0 , C_0 and D_0 groups. This indicates that the toxicant brought about a decline in Hb levels as the dosage of toxicant increased. The impact on haematological parameters was dose-dependent of paraquat.

Table 1. Changes in the Haematological data after three months treatment period

Sub-					
group	Hb(g/dL)	PCV (%)	T-WBC	Neutrophil	Lymphocytes
A_0	22.95 ± 0.35	68.00 ± 1.00	16.70 ± 1.40	53.0 ± 4.0	47.0 ± 2.5
A_VE	21.75 ± 1.15	64.50 ± 3.50	17.75 ± 2.85	35.0 ± 3.0	65.0 ± 3.7
B_0	9.25 ± 0.65^{a}	31.00 ± 2.00^{a}	9.40 ± 0.30^{a}	38.5 ± 2.5	61.5 ± 2.5
BE	10.10 ± 1.10 ^{a,b}	$33.00 \pm 3.00^{a,b}$	9.90 ± 0.30^{a}	37.5 ± 2.5	62.5 ± 2.5
C_0	10.80 ± 1.20 ^a	35.00 ± 3.00^{a}	10.25 ± 0.35^{a}	45.5 ± 3.5	54.5 ± 3.5
C_VE	11.80 ± 0.20 ^{a,b}	$37.50 \pm 0.50^{a,b}$	8.40 ± 0.40^{a}	34.5 ±3.5	65.5 ± 3.5
D_0	10.80 ± 1.10 ^a	43.00 ± 3.00^{a}	12.15 ± 1.95 ^a	34.5 ± 2.5	65.5 ± 2.5
D_VE	$12.75 \pm 0.75^{a,b}$	$40.00 \pm 2.00^{a,b}$	13.40 ± 1.50 ^a	29.5 ± 0.5	70.5 ± 0.5

Statistical significance: P ≤ 0.05.

This suggests that toxicity brings about increase in anaemic tendencies in male albino over chronic period of paraguat exposure. The changes in the mean concentration of Hb could be caused by free radical induced damage in accordance with erythrocyte membrane and this agrees with a study by Sato et al. [24]. The result of this study is in agreement with an earlier study carried out by Lalruatfel et al. [25]. Similar trends were also found in PCV levels among the groups mentioned above. There was a significant decrease in PCV level among A0, B0, C0 and D0 group following increase in paraquat dosage induction. The PCV level in the rats were decreased by way of hemolysis from the lipid peroxidation due to the production of reactive oxygen species caused by the toxicity of paraquat and this is in accordance with the previous studies by Lalruatfel et al. [25]. The findings of this study demonstrated that paraquat exposure results in substantial hematological changes in the adult male albino rats. All stated alterations revealed that exposed albino suffered from anemia caused by the herbicide paraguat. This is shown as an indication of the toxic effects of paraguat on tissues responsible for the production of erythrocytes as well as the viability of the cells [26].

The Total White Blood Cell (TWBC) count also showed a significant decrease when the $B_0,\ C_0$ and D_0 groups were compared with the A_0 group. As the concentration of the toxicant increased, the TWBC count increased from B_0 to D_0 group. This indicates that the toxicant brought about a significant decrease in the TWBC count. The result further showed that there was no significant difference in the neutrophil and lymphocyte counts when $B_0,\ C_0$ and D_0 was compared with $A_0.$ This suggests that toxicity had no effect on the neutrophil and lymphocyte count of male albino rats. The changes in the TWBC count in this study agrees with the view of

Olson et al. [27] who proposed that the toxic effect of paraquat on leucopoiesis will lead to decrease TWBC count.

The result of the study also showed that there was no significant difference when A_{VF} group was compared with A₀ group indicating that the treatment with Vitamin E had no effect on the Hb concentration of male rats not induced with toxicant. The results also showed that there was a significant increase in the Hb concentration when B_{VE} group was compared with B_0 group. This suggests that the treatment with Vitamin E brought about an increase in Hb concentration of rats induced with 0.02 paraguat. This indicates that Vitamin E increases the Hb concentration of rats induced with 0.02 paraguat. The result also showed an increase in the Hb concentration when the C_{VE} group was compared with C_0 group and D_{VE} groups was compared with D₀ group. This suggests also that Vitamin E therapy increases the Hb concentration of rats induced with 0.04g and 0.06g paraguat respectively thereby acting as an ameliorative agent against paraquat toxicity. The result also showed a significant increase in the PCV value when B_{VE} was compared with B_0 , and when C_{VE} was compared with Co. This indicates that Vitamin E therapy increases the PCV of rats induced with 0.02 and 0.04 doses of paraguat toxicity. However, there was a significant decrease in PCV of the rats when D_{VE} group was compared with D₀ group. This means that treatment with Vitamin E brings about a decrease in PCV value in rats induced with 0.06 concentration of paraguat toxicant. There was no significant difference in the TWBC, neutrophil and lymphocyte counts when B_{VE} was compared with B_0 and C_{VE} was Compared with C_0 and D_{VE} was compared with D₀ respectively at p<0.05. This indicates that treatment with Vitamin E has no effect on the TWBC, neutrophil and lymphocyte induced counts of rats with different concentration of toxicant. The result from this study suggests that Vitamin E therapy acts to ameliorate the effects of paraquat toxicity on the haematological parameters such as Hb and PCV of male albino rats by increasing the Hb and PCV values that were previously reduced as a result of paraquat toxicity. However, it had no effect on the TWBC, neutrophil and lymphocyte counts. There is dearth literature on the ameliorative effects of Vitamin E on paraquat-induced toxicity on haematological parameters. Therefore more studies in this area will be necessary.

5. CONCLUSION

This study has shown that paraquat can induce haematological insults on anaemic indicators and total white blood cell count but it can be drawn that vitamin E therapy for three months of weekly treatment can ameliorate the effects of the toxic insult on the haematological parameters especially on anaemia indicators such as Hb and PCV on male albino rats.

DISCLAIMER

The products used for this research are commonly and predominantly use products in our area of research and country. There is absolutely no conflict of interest between the authors and producers of the products because we do not intend to use these products as an avenue for any litigation but for the advancement of knowledge. Also, the research was not funded by the producing company rather it was funded by personal efforts of the authors.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

REFERENCES

- Onwuli D, Ajuru G, Holy B, Fyneface CA. The concentration of lead in periwinkle (*Tympanotonos fuscatus*) and river sediment in Eagle Island River, Port Harcourt, Rivers state, Nigeria. American Journal of Environmental Protection. 2014;2(2):37-40.
- Fyneface CA, Emeji R, Osere H, Nwisah L. Concentrations of Nickel in Sediment and Periwinkle of Eagle Island River, Port Harcourt. Asian Journal of Fisheries and Aquatic Research. 2018;1(4):1-5.

- Gupta PK. Toxicity of Herbicides. Veterinary Toxicology, Basic and Clinical Principles, 3rd edn. 2018; Elsevier: 553–567.
- Hossain MM. Recent perspective of herbicide: Review of demand and adoption in world agriculture. Journal of the Bangladesh Agricultural University. 2015;13 (1):13-24.
- Guo F, Sun YB, Su L, Li S, Liu ZF, Li J, Hu, XT, Li J. Losartan attenuates paraquatinduced pulmonary fibrosis in rats. Human and Experimental Toxicology. 2015;34 (5):497-505.
- Banday TH, Bashir S, Bhat S, Aswin K, Praveen, Jagadeesh SG. Manifestation and Management of Paraquat Intoxiction. A deadly poison? *IOSR* Journal of Dental and Medical Sciences. 2013;12 (6):74-76.
- 7. Huang CJ, Yang MC, Ueng SH. Subacute pulmonary manifestation in a survivor of severe paraquat intoxication. The American Journal of the Medical Sciences. 2005;330(5):254-256.
- 8. Adam A, Smith LL, Cohen GM. An assessment of the role of redox cycling in mediating the toxicity of paraquat and nitrofurantoin. Environmental Health Perspectives. 1990;85:113-117.
- Bonneh-Barkay D, Reaney SH, Langston WJ, Di Monte DA. Redox cycling of the herbicide paraquat in microglial cultures. Molecular Brain Research. 2005;134(1):52-56.
- Castello PR, Drechsel DA, Patel M. Mitochondria are a major source of paraquat-induced reactive oxygen species production in the brain. The Journal of biological chemistry. 2007;282:14186– 14193.
- Tavakol HS, Farzad K, Fariba M, Abdolkarim C, Hassan G, Seyed-Mostaf, HZ, Akram R. Hepatoprotective effect of Matricaria chamomilla. L in paraquat induced rat liver injury. Drug Research. 2015;65 (02):61-64.
- 12. Cochemé HM, Murphy MP. Complex I is the major site of mitochondrial superoxide production by paraquat. Journal of Biology and Chemistry. 2008;283(4):1786–98.
- 13. lenaga K, Yokozawa T. Creatinine and HMH(5-hydroxy-1-methylhydantoin,NZ-419) as intrinsic hydroxyl radical scavengers. Drug Discovery Therapy. 2001;5(4):162–75
- Alonso de-Vega JM, Diaz J, Serrano E, Carbonell LF. Oxidative stress in critically ill patients with systemic inflammatory

- response syndrome. Critical care medicine. 2002;30:1782–1786.
- 15. Zahorec R. Ratio of neutrophil to lymphocyte counts—rapid and simple parameter of systemic inflammation and stress in critically ill. *Bratislavske lekarske listy*. 2001;102:5–14.
- 16. Akil E. Echocardiographic epicardial fat thickness and neutrophil to lymphocyte ratio are novel inflammatory predictors of cerebral ischemic stroke. Journal of stroke and cerebrovascular diseases: the official journal of National Stroke Association. 2014;23:2328–2334.
- 17. Kamal-Eldin A, Appelqvist LA. The chemistry and antioxidant properties of tocopherols and tocotrienols lipids. *Lipids*. 1996;31:671-701.
- 18. Azzi A, Boscobonik D, Hensey K. The protein kinase C familyEur. Journal of Biochemistry. 1992;208:547-557.
- Truber MG, Packer L. Vitamin E: beyond antioxidant function. American Journal of Clinical Nutrition. 1995;62(6):1505-1595.
- 20. Clarke MW, Burnett JR, Croft KD. Vitamin E in human health and disease Critical Review of Clinical Laboratory Science. 2008;45(5):417-450.
- 21. Bharrhan K, Chopra P, Rishi R. Vitamin E supplementation modulates endotoxin-induced liver damage in a rat model. American Journal of Biomedical Science. 2010;2:51-62.

- 22. Ambali SF, Akanbi DO, Shitu M, Giwa A, Oladipo OO, Ayo JD. Chlorpyrifos-induced clinical haematological and biochemical changes in Swiss albino mice: mitigating effect by co-administration of vitamins C and E. Life Science Journal. 2010;7(3):37-44.
- 23. Emeji R, Gabriel TE, Ndokiari B. Therapeutic Effects of Viscum album Combined with Garcinia kola against CCL4 induced Liver Injury in Albino Rats. *Asian* Journal of Biochemistry, Genetics and Molecular Biology. 2019;2(3):1-8.
- 24. Sato Y, Kamo S, Takahashi T, Mechanism of Free Radical-Induced Hemolysis of Human Erythrocytes: Hemolysis by Water-Soluble Radical Initiator. Biochemistry. 1995;34:8940–8949.
- 25. Lalruatfel PL, Saminathan M, Ingole RS. Toxicopathology of Paraquat Herbicide in Female Wistar Rats. Asian Journal of Animal and Veterinary Advance. 2012;9:523–542.
- 26. Patnaik L, Patra A. Haemoatopoietic alterations induced by carbaryl in Clarias batrachus (LINN). Journal of Applied Science and Environmental Management. 2006:10.
- 27. Olson Η, Betton G, Robinson D. Concordance the of Toxicity of Pharmaceuticals in Humans and in Regulatory Toxicology Pharmacology. 2000;32:56-67.

© 2022 Nnamdi et al.; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Peer-review history:
The peer review history for this paper can be accessed here:
https://www.sdiarticle5.com/review-history/86829