Toxic Effects of Acrylamide on Human Health: A Review Article

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ABSTRACT

Background: Acrylamide (ACR) is produced in the chemical industry with high volumes such as water-soluble polymers and synthetic organic chemicals. The presence of acrylamide in food was initially assumed to be a result of exogenous contamination. Alarming levels of ACR were first to be discovered in a variety of cooked foods by a Swedish group. The highest levels have been detected in potatoes [fried potato chips and french fries] and grain-based cooked foods using very high temperatures. ACR has major toxic effects on various body systems through multiple mechanisms. ACR was classified as a probable carcinogen to humans.

Objective: The present work aimed to discuss these possible toxic effects on humans, mechanisms, and safety of exposure.

Methods: We researched for data on [Acrylamide, Neurotoxin, Fried potato chips, and French fries] at PubMed, Google Scholar, and Science Direct. However, only the most recent or extensive study was taken into account between August 1999 and September 2022. References from related works were also evaluated by the writers. There are not enough resources to translate documents into languages other than English, hence those documents have been ignored. It was generally agreed that documents such as unpublished manuscripts, oral presentations, conference abstracts, and dissertations did not qualify as a legitimate scientific studies.

Conclusion: Daily consumption of food processed at high temperature make humans at great risk of chronic ACR toxicity which affects greatly human health. Screening for ACR and its active biomarkers in blood and urine is essential in highly susceptible populations as in occupational exposure.

Keywords: Acrylamide, Neurotoxin, Fried potato chips, French fries.

INTRODUCTION

Acrylamide (CH2=CHCONH2) is a watersoluble compound used to produce different chemical and industrial applications at low cost including cosmetics, food processing, agriculture, and water purification. It is also formed by heating food from carbohydrates and amino acid present in the food such as in fried potato products, bread, and coffee. Because of its high water solubility, ACR is easily released to human water supplies^(1,2,3). Acrylamide is generated in food via the Maillard reaction between asparagine and reducing sugars by heat⁽⁴⁾.

Previous studies have shown that acrylamide can have a variety of harmful impacts on living things, including the ability to cause cancer, neurotoxicity, or endocrine disruption ⁽⁵⁾.

I- Mechanism of toxicity of ACR:

Song *et al.* ⁽⁶⁾ treated U2OS cells with ACR for 6 and 24 hours before collecting them for further investigation, providing useful proof of the cytotoxicity produced by ACR. A total of 73 important differential metabolites were discovered, and it was shown that ACR reduced autophagic flow, raised reactive oxygen species (ROS) content, elevated apoptosis rates, and secreted inflammatory factors. By lowering the quantities of glycolytic intermediates, reducing the pace of the tricarboxylic acid (TCA) cycle, and increasing the levels of numerous amino acid metabolites and lipid metabolites, exposure to ACR attenuated glycolysis/gluconeogenesis.

According to **Lin** *et al.* ⁽⁷⁾, there is a substantial correlation between urine levels of the oxidative stress

byproduct 8-hydroxydeoxyguanosine (8-OHdG) and the acrylamide metabolite N-acetyl-S-(propionamide)cysteine (AAMA). Nitric oxide synthase (NOS) signaling was implicated, according to immunohistochemical investigations ⁽⁸⁾.

Haridevanuthu *et al.* ⁽⁹⁾ Acrylamide could have a negative impact on the antioxidant defense mechanism. Another aspect to take into account is the adduct that acrylamide creates in presynaptic neurons, which causes neuroinflammation.

Acrylamide's neurotoxicity is caused by interference with nerve energy metabolism, disruption of ion balance, inhibition of axonal transport by binding to microtubules, interference with neuro conduction (causing visible neurotoxicity), and induction of oxidative stress (free radicals cause interference with acetylcholine esterase activity and disruptions of synaptic vesicle fusion, which results in damage to ultrastructure and functional errors)⁽¹⁰⁾.

Acrylamide and/or glycidamide binding to spermatid protamines leads to dominant mortality and impacts sperm morphology, which might be used to explain the mechanisms of reproductive toxicity. Because acrylamide may bind to the motor proteins kinesin and dynein, it can cause distal axonopathy, which leads to paralysis in the back legs. It may also cause anesthesia in the penis, which has implications on mounting, intromission, and sperm motility. ACR-induced reproductive and neurological damage does not appear to be directly related to the mutations that are anticipated to result from glycidamide binding directly to DNA ⁽¹¹⁾.

II- Safety of ACR exposure:

Prior estimates of the average daily intake of ACR based on dietary contents in western nations ranged from 0.2 to 1.4 g/kg of body weight for adults and from 3.4 g/kg of body weight for lower age groups (12).

Humans ingesting ACR were investigated for safety by **Tardiff** *et al.* ⁽¹³⁾ For neurotoxicity (nongenotoxicity) and carcinogenicity, a nonlinear doseresponse method was used based on modes of action (MoA) (genotoxicity and epigenetic MoA). The estimated tolerated daily intake (TDI) for neurotoxicity from ACR was 40 g/kg/day, whereas the estimated TDIs for cancer were 2.6 and 16 g/kg/day based on ACR or GA, respectively. According to **Tardiff** *et al.* ⁽¹³⁾, the average ACR consumption margins of exposure (MoE) were 300 and 500, respectively; for cancer, the MoE was 200 and 1200, according to ACR and GA, respectively. MoEs were a little lower for heavy ACR users.

The World Health Organization and the European Union designated 0.1 and 0.5 g/L as the minimum quality requirement levels in drinking water, respectively, whereas the US Environmental Protection Agency set 1 mg/L at monomer levels as the highest permitted limit of acrylamide in water ⁽¹⁴⁾.

III- Toxicity of ACR:

1- Neurotoxicity:

The main effects of acrylamide on the nervous system are peripheral neuropathies, although it also damages cerebellar Purkinje cells and degrades distal axons in both the central nervous system and peripheral nervous system. According to **Parzefall**⁽¹⁾, the deterioration of terminal nerves causes harm to the cerebral cortex, thalamus, and hippocampus in addition to impairing cognitive abilities⁽¹⁾.

Studies on neuroretinal toxicity revealed that although the inner nuclear and photoreceptor layers were preserved, chronic exposure to acrylamide resulted in significantly decreased visual function, ganglion cell degeneration, and a reduction in the amplitude of a and b waves on the electroretinogram. Rats exposed to acrylamide during pregnancy experienced severe structural abnormalities in the outer and inner nuclear layers as well as ganglion cell degeneration in the offspring's retinas (15-17) evaluation Experimental of Acrvlamide's neurodegenerative effects on zebrafish was conducted by Krishnan and Kang⁽¹⁶⁾ and Park et al.⁽¹⁷⁾.

2- Endocrine:

At every stage of life, endocrine-disrupting chemicals (EDCs) have the potential to disrupt metabolism, growth, and reproduction. This is particularly true during the pubertal and embryonic stages when gene reprogramming can result in poor tissue/organ development and control even in adulthood ⁽¹⁸⁾.

a- Effects on reproductive and developmental toxicity:

Different researchers employing 14C-labeled acrylamide have confirmed these results in other species, with consequences on female development and reproduction ⁽¹⁹⁾. Acrylamide harms a female mouse's reproductive system and lowers the quality of her eggs ⁽²⁰⁾. In addition to sperm maturation, epididymis, Leydig, and Sertoli cells, acrylamide toxicity has also been reported to impair male offspring affection and germ cell mutagenicity ⁽²⁰⁻²²⁾.

b- Effects on thyroid axis:

Examination of the relationship between urinary levels of the acrylamide metabolite (N-acetyl-Spropionamide cysteine) and serum thyroid hormone measurements in adolescents and young adults revealed that the decrease in thyroxine (T4) was associated with an increase in urinary metabolite levels, particularly in women between the ages of 20 and 30. ⁽²³⁾.

c- Diabetes Mellitus (DM) and insulin level:

It was discovered via research on DM and ACR hemoglobin biomarkers that there is evidence to support the significance of the hemoglobin acrylamide adduct (HbACR) and hemoglobin glycemide adduct (HbGA)/HbACR in relation to DM. In adults, acrylamide is linked to lower blood insulin levels ⁽²⁴⁾.

3- Genotoxicity:

Although acrylamide exhibits little DNA reactivity in vitro, metabolic activation led to the discovery of new GA-based DNA adducts. Even in the absence of metabolic activity, GA, the main metabolite of ACR, was mutagenic. ACR is one of the few chemicals that causes changes in germ cells ⁽²⁵⁾.

4- Carcinogenicity:

Regarding the risk of human cancer, occupational exposure to AA seems to be the most important factor. Due to their extremely low statistical power, none of the epidemiological investigations demonstrated substantial contributions of ACR to human carcinogenesis. Male and female mice and rats' tumor rates have been observed to have significantly increased $^{(1, 26)}$.

Nucleophilic areas of biomolecules interact with acrylamide and its metabolite, GA. However, although AA and GA react with proteins, only GA forms DNA adducts under settings that mimic in vivo circumstances ⁽²⁶⁾.

CONCLUSION

Daily consumption of food processed at high temperature make humans at great risk of chronic ACR toxicity which affects greatly human health. Screening for ACR and its active biomarkers in blood and urine is essential in highly susceptible populations as in occupational exposure.

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