

Relation of Vitamin B₁₂ and One-carbon Metabolism to Hydrocephalus in the Rat^{1,2,3}

JAMES C. WOODARD⁴ AND PAUL M. NEWBERNE

*Department of Nutrition and Food Science,
Massachusetts Institute of Technology,
Cambridge, Massachusetts*

ABSTRACT The purpose of this investigation was to examine the relationship of a number of factors involved in 1-carbon metabolism to the induction of hydrocephalus in the rat. Animals raised with a diet deficient in vitamin B₁₂ gave birth to young with congenital hydrocephalus. The addition of an intestinal antibiotic, neomycin, to the dams' diets or the parenteral administration of vitamin B₁₂ antagonists did not markedly increase the incidence of congenital abnormalities. The incidence of congenital hydrocephalus was markedly increased by the inclusion in the diet of X-methyl folic acid, a folic acid antagonist. A higher incidence was obtained, however, when females were fed a diet deficient in vitamin B₁₂ and choline. Methionine and sarcosine in equivalent methyl groups did not offer the same protective effect as did choline. Abnormalities were similar in newborn animals from vitamin B₁₂-deficient dams raised with the folic acid antagonist diets or with the choline-deficient diets. Lesions noted in offspring from these animals included: 1) stunted embryonic growth, 2) hydrocephalus, 3) hydro-ureter and hydronephrosis, 4) umbilical hernia, 5) spina bifida and cranioschisis, 6) harelip, and 7) skeletal defects.

While studying the nutritional requirements for reproduction and lactation in the rat, Richardson and Hogan (1) observed spontaneous cases of hydrocephalus in newborn animals. Approximately 2% of the offspring born to dams raised with a purified ration were hydrocephalic. The original diet consisted of casein and all of the vitamins available at that time, but it was later shown by O'Dell et al. (2) that supplementation of the diet with folic acid would largely prevent the occurrence of the congenital hydrocephalus. These investigators reported that X-methyl folic acid, an antimetabolite, added to soybean oil meal diets during successive gestations resulted in an increased incidence of hydrocephalic offspring compared with animals fed a casein diet (3). Vitamin B₁₂ supplementation was later shown to prevent completely the occurrence of congenital abnormalities in newborn rats whose dams had received the vegetable protein diet (4). The X-methyl folic acid was considered to inhibit vitamin synthesis by intestinal microorganisms.

Newberne and O'Dell (5) were able to produce congenital hydrocephalus in rats by a maternal vitamin B₁₂ deficiency; the diets did not contain any antagonist and

were supplemented with 5 mg of folic acid and 1 g of choline chloride/kg of diet. Whereas the incidence of hydrocephalus in the folic acid antagonist diets of Hogan et al. (3) was 20%, a 10% incidence was noted when the ration was deficient only in vitamin B₁₂ (5). Spina bifida, anophthalmia, harelip, cleft palate and edema were noted with the antagonist diet, but none of these lesions was observed in the newborn animals raised with the vitamin B₁₂-deficient ration without the antagonist.

Because of the differences reported by Hogan et al. (3) and Newberne and O'Dell (5), an attempt has been made to study further, congenital abnormalities in vitamin B₁₂-deficient neonatal rats by determining which accessory dietary factors might influence the incidence or severity of lesions.

Received for publication October 7, 1965.

¹Supported in part by Public Health Research Grant no. AM-07136-03 from the National Institute of Arthritis and Metabolic Diseases.

²This material was taken from a thesis presented by the senior author to the Department of Nutrition and Food Science in partial fulfillment for the degree of Ph.D. It was also presented in part at the 49th Annual Meeting of the Federation of American Societies for Experimental Biology, April, 1965.

³Contribution no. 740 from the Department of Nutrition and Food Science, Massachusetts Institute of Technology, Cambridge, Massachusetts 02139.

⁴Present address: Department of Pathology, University of Florida School of Medicine, Gainesville, Florida.

GENERAL METHODS

Weanling albino rats of the Caesarean Derived (CD) Sprague-Dawley strain were obtained from the Charles River Breeding Farm. The animals were housed in air conditioned animal quarters; food and water were supplied ad libitum. Three female animals were housed together in large, raised, screen-wire cages and fed either a vitamin B₁₂-deficient diet or a vitamin B₁₂-supplemented diet during the growth period.⁵ The 30% protein diet shown in table 1 was supplemented with 0.3% choline chloride and 0.1% DL-methionine during the growth period; vitamin B₁₂ was added to the control diet at the rate of 50 µg/kg of diet. At 13 weeks of age, the rats were placed on the various experimental rations. Females were fed the experimental ration for 4 weeks prior to breeding. Male animals fed a commercial ration were housed separately during their growth period and then placed with females, one male per cage. Females were allowed to litter in their cages, and the offspring were collected as soon as possible after delivery. Hydrocephalus was determined by incising formalin-fixed specimens.

TABLE 1
Composition of basal diets

	1	2
	% of diet	
Sucrose	55	65
Soybean protein ¹	30	20
Salts ²	5	5
Cottonseed oil ³	10	10
	mg/kg of diet	
Vitamins ⁴		
Thiamine·HCl	16	16
Pyridoxine·HCl	16	16
Riboflavin	16	16
Ca pantothenate	40	40
Nicotinamide	12	12
Folic acid	5	5
Inositol	250	250
dl- α -Tocopheryl acetate ⁵	112	112
	IU/kg of diet	
Vitamin A	22,800	22,800
Vitamin D	2,280	2,280

¹ Alpha Protein, Central Soya Company, Chicago (1.05% methionine).

² Hegsted et al. J. Biol. Chem., 138: 459, 1941.

³ Wesson oil, Wesson Sales Company, Fullerton, California.

⁴ Vitamin B₁₂ (50 µg/kg of diet) was added to the control diets.

⁵ Hoffmann-LaRoche, Inc., Nutley, New Jersey.

Three separate experimental trials were conducted. The first trial was performed to determine the effects of feeding an intestinal antibiotic or vitamin B₁₂ antagonists (monobasic acids of vitamin B₁₂) (6, 7). In the second trial the effect of a choline deficiency and the effect of feeding the folic acid antagonist, X-methyl folic acid, were determined. The third trial examined effects of lowering dietary protein levels, of substituting various methyl donors for choline, of parenteral administration of vitamin B₁₂ antagonists and of feeding X-methyl folic acid in a choline-deficient diet.

METHODS AND RESULTS

Experimental trial 1

During the growth period, changes in body weight were measured weekly. Averages for the groups fed the vitamin B₁₂-deficient growth diet (diet C, table 2) and the control diet (diet D) are presented in figure 1 as a growth rate curve. When a 30% soybean protein diet contained 0.1% DL-methionine and 0.3% choline chloride, the growth rate of vitamin B₁₂-deficient rats was found to be similar to that of control animals. After the animals reached maturity the vitamin B₁₂-deficient group was divided into 3 subgroups and either maintained with the growth diet (diet C), given a diet containing neomycin (diet B), or fed a ration containing vitamin B₁₂ antagonists (diet A). The adult vitamin B₁₂-deficient animals gave birth to hydrocephalic young; the control animals did not. Inclusion of an intestinal antibiotic, neomycin, in the diet did not greatly alter the incidence of hydrocephalus, whereas supplementation with monobasic acids of vitamin B₁₂ caused infertility of that group. One apparently normal litter from the vitamin B₁₂ antagonist group was obtained after the males in the cages were exchanged with those maintained with a commercial ration. The incidence of hydrocephalus is shown in table 2.

⁵ Vitamin B₁₂ antagonists were generously supplied by Dr. E. Lester Smith, Glaxo Research Laboratories, Ltd., Greenford, Middlesex, England. The X-methyl folic acid was kindly donated by Dr. E. H. Dearborn of Lederle Laboratories, Pearl River, New York. The soybean protein, Alpha Protein, was supplied through the courtesy of Central Soya Company, Chicago.

TABLE 2
Incidence of hydrocephalus (trial 1)

Diet (Ingredients added to basal diet 1, see table 1)	mg/kg diet	No. females fed diet	No. litters born	Avg no. animals/ litter	Newborns found dead	Avg wt newborn animals	Litters with hydro- cephalic animals	Hydro- cephalic animals
					%	g	%	%
Diet A		6	1	8.0	—	—	0	0
DL-methionine	3000							
choline chloride	1000							
monobasic acids of vitamin B ₁₂	10							
Diet B		6	15	6.8	6.7	5.2	13.3	2.0
DL-methionine	3000							
choline chloride	1000							
neomycin sulfate	125							
Diet C		60	149	6.6	5.1	5.3	9.8	1.3
DL-methionine	3000							
choline chloride	1000							
Diet D		30	86	6.7	5.7	5.7	0	0
DL-methionine	3000							
choline chloride	1000							
vitamin B ₁₂	0.05							

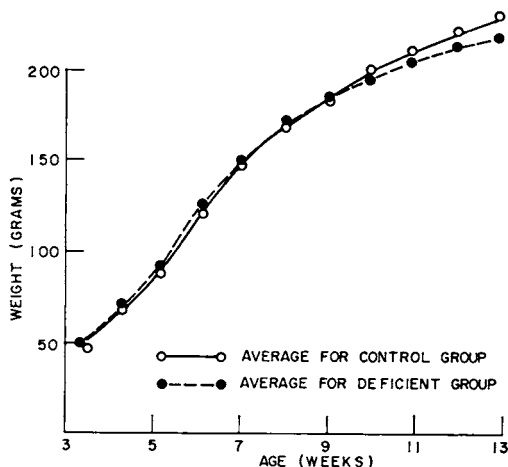


Fig. 1 Growth rate for vitamin B₁₂-deficient and control animals.

Experimental trial 2

The experimental procedure in trial 2 differed from that of trial 1. In trial 2 the mature rats were maintained with the growth diet (diet C, table 3) or with the control diet (diet D) for 2.5 months before being divided into subgroups. During this time, the females of trial 2 gave birth to one and sometimes two litters. All vitamin B₁₂-deficient females that had previously given birth to hydrocephalic young

were maintained with a diet deficient in vitamin B₁₂ (diet C, subgroup 1-a; table 3). One-third of the deficient animals were given a ration deficient in vitamin B₁₂ but containing 10 mg of X-methyl folic acid/kg of diet (diet E, subgroup 1-b; table 3). The animals in the third subgroup were given a vitamin B₁₂-deficient ration which contained no choline (diet F, subgroup 1-c). The control animals were also divided into 3 subgroups (2-a, 2-b, 2-c) and fed diets D, G, or H.

The results (table 3) demonstrated that the addition of X-methyl folic acid to the diet caused a marked increase in the incidence of hydrocephalus (subgroup 1-b); however, a greater incidence of hydrocephalus occurred when the dams' diets were made deficient in choline as well as in vitamin B₁₂ (subgroup 1-c). Females maintained with the folic acid antagonist-containing diet or the choline-deficient diets gave birth to offspring which were often small. Small embryos weighing less than 4 g were most common from dams fed the vitamin B₁₂-choline-deficient diets. Umbilical hernia and limb abnormalities were noted in hydrocephalic animals born to dams receiving the folic acid antagonist.

Samples of liver from adult and newborn animals were collected at the time

TABLE 3
Incidence of hydrocephalus (trial 2)

Group	Sub-group	Diet (Ingredients added to basal diet 1, see table 1)	mg/kg diet	No. litters	Total no. newborn	No. found dead	Avg wt newborn animals g	No. animals weighing under 4 g	Litters hydrocephalic	Newborn animals hydrocephalic
									%	%
1		Diet C (before group subdivision) DL-methionine choline chloride	3000 1000	17	161	9	5.6	0	5.8	0.6
2		Diet D (before group subdivision) DL-methionine choline chloride vitamin B ₁₂	3000 1000 0.05	7	54	1	6.1	0	0	0
1	a	Diet C DL-methionine choline chloride	3000 1000	16	115	5	5.4	0	18.0	6.0
1	b	Diet E DL-methionine choline chloride X-methyl folic acid	3000 1000 10	19	101	12	6.1	3	33.3	13.8
1	c	Diet F DL-methionine	3000	15	72	16	5.8	12	60.0	37.5
2	a	Diet D DL-methionine choline chloride vitamin B ₁₂	3000 1000 0.05	3	28	0	6.0	0	0	0
2	b	Diet H DL-methionine choline chloride X-methyl folic acid vitamin B ₁₂	3000 1000 10 0.05	8	62	5	5.6	0	0	0
2	c	Diet G DL-methionine vitamin B ₁₂	3000 0.05	6	36	6	6.4	0	0	0

of necropsy. These were analyzed for vitamin B₁₂ by the method outlined by the USP (8). Results (table 4) indicated the following: 1) animals raised with a vegetable protein diet deficient in vitamin B₁₂ had low levels of vitamin B₁₂ when compared with the control animals; 2) the addition of X-methyl folic acid to the diet of vitamin B₁₂-deficient animals did not cause a further reduction in liver levels of the vitamin; this suggested that the folic acid antagonist might exert a systemic action rather than inhibit the intestinal synthesis of vitamin B₁₂; 3) there were no differences in liver levels of vitamin B₁₂ between hydrocephalic and nonhydrocephalic littermates; and 4) there were no differences noted in vitamin B₁₂ levels between deficient newborn animals from hydrocephalic litters and nonhydrocephalic litters. It should be noted that animal no. 1 from the vitamin B₁₂-deficient adult group gave birth to only one hydrocephalic litter, whereas animal no. 2 gave birth to numerous hydrocephalic litters. The liver levels of vitamin B₁₂ were essentially the same in all deficient animals.

Experimental trial 3

In contrast with the 30% protein diets used in trials 1 and 2, the basic ration of trial 3 contained only 20% protein. Three separate control groups were used. The first control group was fed the basic 20% protein diet supplemented with choline and vitamin B₁₂ (diet 1, table 5). The second was fed a choline-deficient and vitamin B₁₂-supplemented diet (diet J). The third was fed a vitamin B₁₂-deficient

and choline-supplemented diet (diet K). A fourth group was given diet K and, in addition, received intraperitoneally 50 µg of the vitamin B₁₂ antagonists (monobasic acids of vitamin B₁₂)/week (total of 0.9 mg/animal). Other groups were given rations supplemented with sarcosine hydrochloride, DL-methionine, and DL-homocysteine (diet L); DL-methionine and ethanolamine (diet M); or X-methyl folic acid (diet N). One mole of DL-methionine and 2 moles of sarcosine hydrochloride were considered to have methyl groups equivalent to 1 mole of choline. Three moles of DL-methionine were considered equivalent to 1 mole of choline in methyl groups.

Female animals receiving the vitamin B₁₂ antagonists intraperitoneally gave birth to young which were normal in all respects. For this reason, this group of animals was included in table 5, with those receiving the vitamin B₁₂-deficient diet but not receiving the antagonist. No congenital abnormalities were detected grossly in the animals receiving the vitamin B₁₂-deficient ration supplemented with choline. A high incidence of congenital malformations was noted when either sarcosine and methionine or methionine alone was substituted for choline. The addition of X-methyl folic acid to the choline-deficient, vitamin B₁₂-deficient ration caused the adults to lose weight and to become infertile (see table 5).

When the protein content of the basal diet was reduced from 30 to 20%, the females receiving the choline-deficient but methionine-supplemented rations gave birth to offspring which had multiple con-

TABLE 4
Vitamin B₁₂ analysis (trial 2)

Group	Litter	Liver vitamin B ₁₂ µg/g of liver
Adult animals		
Control (D)		143-202
Vitamin B ₁₂ -deficient (subgroup 1-a)		6-7
Vitamin B ₁₂ -deficient with X-methyl folic acid added (subgroup 1-b)		9-10
Newborn animals		
Vitamin B ₁₂ -deficient newborn animals from dam in subgroup 1-a	hydrocephalic	1-2
	nonhydrocephalic	3-4

TABLE 5
Incidence of hydrocephalus (trial 1)

Diet (Ingredients added to basal diet 2, see table 1)		No. females fed diet	No. litters born	Litters with hydro- cephalic young	No. newborn animals	Newborn animals hydro- cephalic
	<i>mg/kg diet</i>			%		%
Diet I choline bitartrate vitamin B ₁₂	1814 0.05	8	8	0	42	0
Diet J vitamin B ₁₂	0.05	8	7	0	64	0
Diet K choline bitartrate	1814	16	7	0	64	0
Basal diet 2 (vitamin B ₁₂ - and choline-deficient)		8	3	33	16	25
Diet L DL-methionine sarcosine·HCl DL-homocysteine	1069 1312 1452	16	7	43	36	22
Diet M DL-methionine ethanolamine	3207 440	16	8	38	65	8
Diet N X-methyl folic acid	10	16	0	—	—	—

genital abnormalities. Hydrocephalus was by far the most common abnormality observed; however, on occasion the hydrocephalic animals had other defects as well. These included hydronephrosis, hydro-ureter, harelip, umbilical hernia, spina bifida, cranioschisis, and skeletal defects.

DISCUSSION

Weissbach et al. (9) demonstrated in partially purified fractions from animal liver that the methyl group of methyl B₁₂ can be transferred to homocysteine. Buchanan et al. (10) studied the enzyme system in pig liver and provided convincing evidence that the pig liver enzyme is similar to the bacterial vitamin B₁₂-containing enzyme, which transfers a methyl group from 5-methyl-tetrahydrofolic acid to homocysteine to yield methionine and tetrahydrofolic acid. It was suggested by Herbert and Zalusky (11) that in vitamin B₁₂-deficient subjects, pteroylglutamic acid was converted to a metabolically useful form (probably N-5-methyl-tetrahydrofolic acid), which "piles up" in the serum because vitamin B₁₂ is required for its normal

utilization. The accumulation of 5-methyl-tetrahydrofolic acid occurs because the reaction catalyzed by the enzyme 5,10-methylene-tetrahydrofolate reductase probably operates irreversibly under physiological circumstances (10). Therefore, in vitamin B₁₂ deficiency there appears to be a block in conversion of 5-methyltetrahydrofolic acid to methionine and a failure to regenerate tetrahydrofolate. The failure to regenerate tetrahydrofolate and its derivatives could cause alterations in purine and thymidine methyl synthesis as well as affect the catabolism of histidine.

It has always been assumed that the teratogenic effects of diets deficient in either folic acid or vitamin B₁₂ were the consequence of the participation of these 2 vitamins in nucleic acid metabolism. The results of the experiments presented here show that deletion of choline from a vitamin B₁₂-deficient diet greatly increases the incidence of congenital abnormalities in neonatal rats. Choline in the form of phospholipids is important as a structural component of cells, in lipid transport be-

tween tissues, and probably in the metabolism of fatty acids in the liver. Methionine in amounts equivalent to choline in methyl groups would not offer the same protective effects. Thus, a choline-containing compound was probably a critical metabolic intermediate responsible for preventing the congenital abnormalities observed. Vitamin B₁₂ could increase the availability of this intermediate so that the demands of pregnancy could be satisfied. It is still possible, however, that a deficiency of choline caused more methyl groups to be utilized for the synthesis of the missing metabolite and that this in turn decreased the methyl groups available for other functions such as purine and pyrimidine synthesis.

The sarcosine diets gave a high incidence of hydrocephalus; however, it was probably not different from that observed with methionine. The data were not inconsistent with the presence of a vitamin B₁₂-containing enzyme in the terminal chain of methionine synthesis from methyltetrahydrofolic acid; however, there were implications that the action of the vitamin may be more involved. This idea is supported by the synergistic action of X-methyl folic acid and vitamin B₁₂. If it is assumed that the X-methyl folic acid is acting as a systemic folic acid antagonist, then it is plausible to postulate that vitamin B₁₂ and folic acid gave some independent action.

The feeding of an intestinal antibiotic, the injection of vitamin B₁₂ antagonists, and the measurement of liver levels of vitamin B₁₂ all indicated that factors other than a deficiency of vitamin B₁₂ are concerned with production of congenital hydrocephalus in neonatal rats. The fact that the incidence and severity of lesions are increased when vitamin B₁₂-deficient

diets are made deficient in choline or when X-methyl folic acid is added stresses the role of this vitamin in 1-carbon metabolism. Further research must be conducted to determine whether the primary metabolic aberration is in nucleic acid synthesis or is concerned with choline per se.

LITERATURE CITED

1. Richardson, L. R., and A. G. Hogan 1946 Diet of mother and hydrocephalus in infant rats. *J. Nutrition*, 32: 459.
2. O'Dell, R. L., J. R. Whitley and A. G. Hogan 1948 Relation of folic acid and vitamin A to incidence of hydrocephalus in infant rats. *Proc. Soc. Exp. Biol. Med.*, 69: 272.
3. Hogan, A. G., B. L. O'Dell and J. R. Whitley 1950 Maternal nutrition and hydrocephalus in newborn rats. *Proc. Soc. Exp. Biol. Med.*, 74: 293.
4. O'Dell, B. L., J. R. Whitley and A. G. Hogan 1951 Vitamin B₁₂, a factor in prevention of hydrocephalus in infant rats. *Proc. Soc. Exp. Biol. Med.*, 76: 349.
5. Newberne, P. M., and B. L. O'Dell 1958 Histopathology of hydrocephalus resulting from a deficiency of vitamin B₁₂. *Proc. Soc. Exp. Biol. Med.*, 97: 62.
6. Smith, E. L. 1960 Biological activities of anti-vitamin B₁₂ substances. *Acta Haematol.*, 24: 9.
7. Smith, E. L. 1962 Vitamin B₁₂ antimegaloblasts. In: *Vitamin B₁₂ und Intrinsic Factor*. Ferdinand Enke Verlag, Stuttgart.
8. United States Pharmacopoeia, 16th rev. 1960 Mack Publishing Company, Easton, Pennsylvania, p. 888.
9. Weissbach, H., A. Peterkofsky, B. Redfield and H. Dickerman 1963 Studies on the terminal reaction in the biosynthesis of methionine. *J. Biol. Chem.*, 238: 3338.
10. Buchanan, J. M., H. C. Elford, R. E. Loughlin, B. M. McDougall and S. Rosenthal 1964 The role of vitamin B₁₂ in the methyl transfer to homocysteine. *Ann. N. Y. Acad. Sci.*, 112: 156.
11. Herbert, V., and R. Zalusky 1962 Interrelations of vitamin B₁₂ and folic acid metabolism, folic acid clearance studies. *J. Clin. Invest.*, 41: 1263.