



Letter to the Editor

Is melanin a source of bioactive molecular hydrogen?



Molecular hydrogen (dihydrogen; H₂) has traditionally been described as a biologically inactive gas, with low capacity to react with most biomolecules. However, in the past two decades hydrogen emerged as a potent therapeutic agent, with antioxidant, anti-inflammatory and anti-apoptotic effects demonstrated in a plethora of animal disease models and human studies. Prominent effects of supplemental H₂ in clinical environment are observed especially in oxidative stress-mediated disorders, including neurodegenerative, metabolic, inflammatory and skin diseases [1]. Hydrogen can reach and react with cytotoxic reactive oxygen species (ROS) at the site of cellular damage, and protect tissues against acute and chronic oxidative injuries [2]. In addition, treatment with H₂ affected signal transduction and blood buffering capacity [3], suggesting that scavenging ROS might not be a unique mechanism of its action *in vivo*. Supplemental hydrogen has been involved in very promising results so far, yet several enigmas remain to be resolved regarding its role in health and disease. In particular, no answer has been provided why large quantities of gut-derived endogenous hydrogen have no systemic effects, while supplemental H₂ demonstrates a prominent effect in much less amounts than that produced by intestinal bacteria. In this paper we discuss an alternative sites for endogenous H₂ production in the human body that might be responsible for systemic effects of hydrogen, and its possible role in the pathogenesis of oxidative stress-related disorders.

It is well known that the endogenous H₂ is produced by enteral bacteria as a byproduct of anaerobic metabolism. Approximately 150 mL of hydrogen gas per day occurs in the gut *via* the fermentation of undigested carbohydrates by resident enterobacterial flora [4]. Hydrogen gas is further transferred to the portal circulation, and excreted through the breath in significant amounts. Its bioavailability and metabolic pathways are not fully understood. Few studies investigated effects of gut-derived hydrogen as an antioxidant, with systemic effects of bacteria-driven H₂ were found to be absent or negligible [5]. It seems that the endogenous H₂ originating from intestinal bacteria mainly behaves as an inert gas. Although traditionally referenced as a unique site for hydrogen production, the gut might not be the only source of endogenous H₂ in the human body. A recent paper hypothesized an alternative mechanism for endogenous H₂ production in the brain [6], with hydrogen released from newly recognized site (or sites) possibly having a potential to produce systemic effects.

It appears that melanin, a dark brown to black natural pigment, could split water molecules and generate H₂ as demonstrated by some *in vitro* studies [7,8]. Due to its photo-electrochemical properties and polymeric structure, melanin quenches photons and through semiconductor photocatalysis (also known as switching) dissociates water into H₂ and oxygen [9]. Serban and Nissenbaum

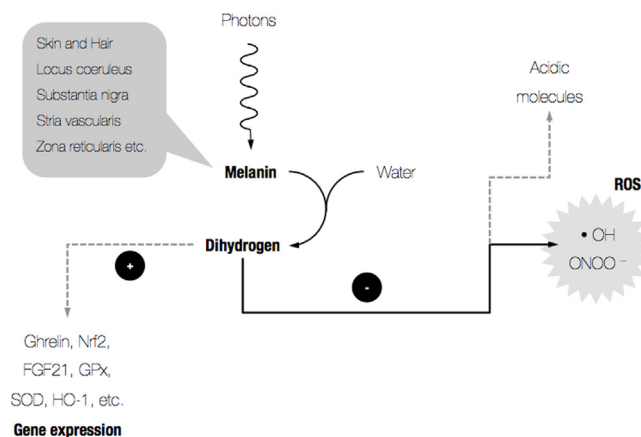


Fig. 1. An alternative mechanism for endogenous synthesis of molecular hydrogen (dihydrogen). Photochemical reaction of melanin with water releases dihydrogen to the cell in melanin-rich tissues. Molecular hydrogen could stimulate (+) or inhibit (–) several cellular processes, and bioactive molecules (for detailed review see Ohta [1]). Solid line indicates direct reduction of reactive oxygen species (ROS) with dihydrogen. Dashed lines indicate indirect up-regulation of gene expression of pro-inflammatory cytokines and hormones by dihydrogen, and reduction of organic acids. *Abbreviations:* Nrf2—nuclear factor erythroid-related factor 2; FGF21—fibroblast growth factor 21; SOD—superoxide dismutase; GPx—glutathione peroxidase; HO-1—heme oxygenase-1; •OH—hydroxyl radical; ONOO[–]—peroxynitrate.

[7] reported a light-induced production of H₂ from water by catalysis with melanoidin, a derivative of melanin, with tracer experiments indicate that H₂ evolved originates from water. After a lag time of 10–20 min, H₂ production rate (during 4 h irradiation) averaged 0.14 μmol H₂ per minute in the solution containing ~4 mg of melanin analog. It seems that artificial or natural light (406 nm with bandwidth ~12 nm) activates melanin-mediated photo-reactivity in aqueous media of human retinal pigment epithelium cells [10], with the difference in switching potential of melanin is attributed to the pigment content in different melanosomes of human hair [11]. However, above preclinical studies with human cells did not evaluate the rate of H₂ production by melanin. Once endogenous hydrogen is obtained, it might react with ROS and provide protection against oxidative stress (Fig. 1). In fact, endogenous hydrogen may critically contribute to the balanced antioxidant defense in the cell since H₂ selectively scavenges the hydroxyl radical, the most cytotoxic of ROS, while preserving other ROS (e.g., nitric oxide radical, hydrogen peroxide) important in cell physiology and homeostasis [2]. Due to its small molecular weight, H₂ can rapidly penetrate biomembranes and reach subcellular components which are the main site of ROS generation. In addition, melanin-driven molecular hydrogen might also display other biological effects by up- or down-regulation of gene expression of various pro-inflammatory cytokines and hormones [1].

Since melanin is found in several areas of the human body (e.g., epidermis, hair, iris, stria vascularis, adrenal gland, locus coeruleus), melanin-driven production of endogenous H₂ might be possible in great quantity. This might emphasize the importance of systematic melanin-driven production of endogenous H₂ as a delicate antioxidant and protective component. On the other hand, failure of melanin to produce molecular hydrogen might compromise cellular protection from acute and chronic oxidative injury, and induce cellular damage. It has been suggested that Parkinson's disease (PD) might be due to insufficient production of endogenous H₂ in substantia nigra, a brain structure rich in melanin, to protect the brain from oxidative stress [6]. Furthermore, a reduction or absence of skin melanin has been identified as a risk factor for oxidative stress-related skin disorders [12], in which insufficient production of endogenous H₂ might play a role [13]. Having this in mind, restoring disturbances in the natural production and pooling of H₂ by melanin, or using supplemental hydrogen might be considered as a novel treatment approaches for oxidative stress-induced diseases. So far, very few studies evaluated the possible therapeutic effects of molecular hydrogen in diseases affecting melanin-rich tissues where oxidative stress plays a major role. Fujita et al. [14] reported beneficial effects of H₂ in Parkinson's disease, with hydrogen-containing water (0.08–1.15 ppm of H₂) significantly reducing oxidative stress and loss of dopaminergic neurons in PD model mice. A pilot clinical study of hydrogen therapy in Japanese patients with levodopa-medicated PD [15] found a significant improvement in total Unified Parkinson's Disease Rating Scale (UPDRS) scores in participants supplemented with 1000 mL/day of hydrogen rich-water. Although preliminary research reported encouraging results of hydrogen provision, no study evaluated pre-intervention levels of melanin-driven production of H₂ and its tissue dynamics. In addition, due to the fact that switching was only seen when melanin was hydrated [8], it seems reasonable to count the cell hydration as a relevant factor of melanin-driven H₂ production. Therefore, cellular hypohydration or dehydration may negatively affect melanin-driven production of endogenous hydrogen, and jeopardize its role in antioxidant defense, which warrants further investigation. The next logical step would be to measure melanin-driven H₂ production in relevant organs (such as skin and brain), and to determine its kinetics and possible roles for antioxidant defense in health and disease. However, molecular hydrogen is a dissipative, penetrative and short-lived molecule that tends to rapidly react with oxidizing species, making it difficult to assess its concentration in the human body. Availability of sensitive assays intended for immediate analysis of hydrogen level in blood and/or tissue homogenates may help to acknowledge melanin-driven production of molecular hydrogen as one of the critical factors in molecular medicine of oxidative stress.

It is well known that mammalian cells do not have their own dehydrogenase which metabolizes molecular hydrogen [16], implying that H₂ does not seem to be produced from any substrates through enzyme-mediated reactions in mammals. However, H₂ could be produced from melanin by a non-enzymatic photochemical reaction as postulated here, and then show beneficial effects. Although only a limited number of *in vitro* studies are currently available on the hydrogen-generating properties of melanin [7,8], this might be considered as an alternative source of bioactive H₂ at least in small quantities [17]. *In vivo* studies are highly warranted to decipher the possible production of H₂ by melanin-rich tissues. Nevertheless, more mechanistic information is needed to confirm and further define possible bioactivity of melanin-driven H₂ in health and disease.

In conclusion, a possible systematic production of endogenous molecular hydrogen by melanin has been suggested as a newly identified component of cellular defense in oxidative stress.

Supplemental hydrogen might be beneficial for disturbances in melanin-driven production of hydrogen. *In vivo* studies are needed to fully describe its production, kinetics and utilization in the human body.

Conflict of interest

The authors declare no competing financial interests.

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