

# Laboratory evaluation of pyriproxifen treated bednets on mosquito fertility and fecundity. A preliminary study

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## Summary

**Aim:** The study evaluated the effect of pyriproxifen treated bednets on mosquito fertility and fecundity in the laboratory. Pyriproxifen (insect growth regulator) has been considered as a possible tool for management of pyrethroid resistance in mosquitoes. There are documentations of the effectiveness of pyriproxifen in controlling larval development when applied directly to breeding site. Considerations have been given to the use of pyriproxifen on bed nets for sterilizing effect on mosquitoes resistant to pyrethroids.

**Method:** Groups of mosquitoes (*Anopheles stephensi* - Beech) were exposed to bednet treated with 2% Pyriproxifen and untreated netting 24 hrs after blood feeding. After oviposition, egg counts were done for each mosquito in the two groups. Larvae emerging from the laid eggs by each mosquito were counted. Three sets of experiments were successful.

**Results:** There was no significant difference in number of eggs laid between the two treatment groups ( $p=0.177$ ). There was statistically significant difference in the number of laid eggs that hatched between the treatment types ( $p=0.0061$ ). There was also statistically significant difference in the mean number of eggs that hatched between the experiments ( $p=0.0013$ ). The mean number of eggs retained in the pyriproxifen group was higher (70.3) than in the control group (41.6). This difference was not statistically significant with the small sample tested ( $p=0.08$ ).

**Conclusion:** The results suggest that 2% pyriproxifen on bed nets has no effect on *An. stephensi* fecundity. Reduced fertility of eggs laid by mosquitoes exposed to pyriproxifen treated bed nets was observed.

**Key-words:** Pyriproxifen, Mosquito, Fecundity, Fertility.

## Résumé

**Dessein:** Evaluer l'effet du filet du lit médicalement traité avec pyriproxifène sur la fertilité et fécondité du moustique dans le laboratoire. Pyriproxifène (régulateur de la croissance des insectes) a été considérée comme un outil probable pour la prise en charge de la résistance pyréthroïde chez les moustiques. Il y a des documentations sur l'efficacité de la pyriproxifène dans le contrôle du développement de la larve quand elle est appliquée

directement sur le lieu de production. On a mis une question à l'étude de l'utilisation de la pyriproxifène sur les filets du lit pour l'effet de la stérilisation sur la résistance des moustiques par rapport au pyrèthroides.

**Méthode:** Groupe des moustiques (*Anopheles stephensi* - Beech) ont été exposés au filet du lit médicalement traité avec 2% pyriproxifène et un filet du lit sans traitement 24 heures après affouragement du sang. Après oviposition, on avait compté les oeufs de chaque moustique dans les deux groupes. On avait compté les larves qui sortent des oeufs par chaque moustique. Trois séries d'expériences étaient connu du succès.

**Résultats:** Il n'y avait aucune différence importante dans les quantités des oeufs pondus entre les deux groupes traités ( $p=0,177$ ). Il y avait une différence statistiquement différente dans la quantité des oeufs pondus qui étaient incubés entre les séries traitées ( $p=0,0061$ ). Il y avait également une différence statistiquement importante dans les quantités moyenne des oeufs incubés entre les expériences ( $p=0,0013$ ). La quantité moyenne des oeufs gardés dans le groupe de pyriproxifène étaient plus élevée (70,3) plus que dans le groupe témoin (41,6). Cette différence n'était pas statistiquement importante par rapport au petit groupe d'échantillon étudié ( $p=0,08$ ).

**Conclusion:** A travers le résultat, on peut dire que 2% de la pyriproxifène sur filet du lit n'a aucun effet sur la fécondité d'*Anopheles stephensi*. Fertilité inférieure des oeufs pondus par des moustiques exposés au filet du lit traité avec la pyriproxifène était notée.

## Introduction

Malaria is a disease caused by protozoan parasites of the genus *Plasmodium* transmitted by anopheline mosquitoes. Of the four species that affect humans, *Plasmodium falciparum* is the most deadly and is associated with high morbidity and mortality in children under the age of 5 years and pregnant women due to its prevalence, virulence and drug resistance<sup>1</sup>. *Plasmodium falciparum* causes approximately 1 million deaths and over 200 million clinical events among Sub-Saharan Africans every year<sup>1</sup>. It has been estimated that 90% of malaria deaths occur in sub-Saharan Africa and of this 80% are children below the age of 5 years<sup>1</sup>.

Insecticide treated bed nets (ITN) reduce clinical malaria episodes by 48% and improve anaemia status by an average of 0.5 g/dl and regular use prevents approximately

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6 deaths for every 1000 protected children under the age of 5 years<sup>2</sup>. These gains are being threatened by the emergence of pyrethroid resistance in several anopheline species<sup>3-6</sup>.

Effective resistance management requires identifying alternative classes to pyrethroids for use on nets. Insect growth regulators (IGR) such as pyriproxifen, have been shown in several studies to be effective in controlling larvae of various species of mosquitoes<sup>7-10</sup>. Use of granular formulations of pyriproxifen at 0.01 to 0.1 mg/l has been documented to inhibit adult emergence when applied for larval control<sup>11-14</sup>. Miller<sup>15</sup> using bed net treated with pyriproxifen at 0.5g/m<sup>2</sup> showed a reduction in fecundity in pyrethroid susceptible *An. stephensi* (Beech) and resistant *An. stephensi* (Dub/Apr) which were fed on human subjects through nets.

It is considered necessary to exploit the female sterilizing property of insect growth regulators such that when a pyrethroid -IGR mixture is applied to nets, pyrethroid resistant mosquitoes making prolonged contact with the net will pick up particles of IGR and will be sterilized and therefore will be unable to pass their pyrethroid resistant genes to the next generation.

Aims of this study are to

1. Test the effect of pyriproxifen on female fertility (egg fertility assessed as percentage of laid eggs which hatch) and
2. Test the effect of pyriproxifen on female fecundity (number of eggs laid per female).

**Materials and Methods**

A bednet treated with 2% Pyriproxifen used in this study was provided by the Sumitomo Corporation Ltd.,Osaka, Japan. A laboratory colony of *Anopheles stephensi* (Beech) was used in the study. Eggs were obtained from the Insectary at the London School of Hygiene and Tropical Medicine. They were reared at room temperature of 25°C± 2°C and a high relative humidity, maintained by placing water soaked sponges under polythene covers of the cages and there was a photophase: scotophase of 16:8hours. Eggs were placed in oviposition bowls containing one-day-old tap water for 48 hours and then transferred to breeding bowls. Larvae were fed with sprinkles of Farley’s baby food once daily. Pupae were collected with a pipette and transferred

to cages for adult emergence. The adults were fed with 10% glucose solution by wick. Adult females were fed by membrane feeding using defibrinated horse blood<sup>16</sup>. Forty-eight hours after the blood meals oviposition bowls were provided. The colonies were self-perpetuating.

**Test of effect on fecundity and fertility**

Three sets of experiments were successfully completed. In the first 2 experiments, 24 hrs after blood feeding groups of 20 female mosquitoes were exposed for 30 minutes to untreated (control) and pyriproxifen treated bed netting. In the 3<sup>rd</sup> experiment groups of 20 mosquitoes were exposed for 1 hour. The exposed batches of insects were then placed in separate cages. After 48 hrs the exposed mosquitoes were placed individually in glass tubes that were lined with cotton wool and filter paper and filled with enough water to allow egg laying. Eggs were left to hatch and later counted using a dissecting microscope. The total number of eggs and hatched larvae per female mosquito were recorded. In the 2<sup>nd</sup> and 3<sup>rd</sup> experiments mosquitoes that did not lay eggs were dissected to record the presence of eggs in ovaries.

Eggs laid and hatched were recorded for each experiment and treatment group. Results were analysed using Statistical packages (Excel, STATA and Epi info). P value of 0.05 was taken as significant.

**Results**

**Effect of pyriproxifen on mosquito fecundity and egg fertility**

In the first two weeks of the study,newly emerged mosquitoes aged 1-2 days were exposed unfed to pyriproxifen treated bed nets or untreated bed net. In both groups there was high mortality (70-80%) immediately after exposure and those that survived in both groups refused to feed. These were thought to be too young hence disinclined to feed. The experiment was repeated. Groups of 2-3 days old unfed mosquitoes were exposed and a high mortality (70%) post exposure was noted. The mosquitoes in both groups also refused to feed. In the third batch, 3-4 days old unfed mosquitoes were exposed and they too had a high mortality after exposure, this was presumably due to handling.

**Table 1 Egg laying /oviposition rate**

			Control			Pyriproxifen	
	Age of used mosquitoes	No females tested	No. surviving 3days	No. laying eggs(%)	No. of females tested	No surviving 3 days	No laying eggs (%)
Exp.1	5-6 days	20	10 (50%)	7 (70)	20	15 (75%)	12 (80)
Exp. 2	8-9 days	20	15(75%)	5 (33.3)	20	9 (45%)	5 (55.5)
Exp. 3	7 days	20	14(70%)	9 (64.2)	20	17(85%)	8(47.0)
<b>Total</b>		<b>60</b>	<b>39(65%)</b>	<b>21(53.8)</b>	<b>60</b>	<b>41(68.3%)</b>	<b>25 (60.9)</b>

In the fourth attempt a group of 2-3 days old female mosquitoes were exposed for 30 minutes after blood feeding. There were 20 mosquitoes each in the treatment group. In the control group, 14 (70%) mosquitoes survived, while in the pyriproxyfen group 15 (75%) survived. None of the mosquitoes in both groups laid eggs. Dissection revealed eggs in 3 mosquitoes in control group and in 4 of the pyriproxyfen treated. Therefore a high proportion in control (85%) and in pyriproxyfen (80%) groups failed to produce eggs despite blood feeding. From this point onwards the outcomes were more successful.

**Experiment 1:** A group of 5-6 days old blood fed females (20 per group) were exposed for 30 minutes and of these 10 (50%) of the control group survived while 15(75%) in the pyriproxyfen group survived. In the control group 7 (70%) of surviving mosquitoes laid eggs (Table 1). The mean number of eggs laid was 93 and the mean number of hatched eggs was 76 (Table 2). In the pyriproxyfen group 12 (80%) of surviving mosquitoes laid eggs (Table 1). The mean number of eggs laid was 74.5 while the mean number that hatched was 46.0 (Table 2). Mortality of mosquitoes after exposure was noted to be higher in the control group than in pyriproxyfen group. The proportion of laid eggs that hatched was significantly lower in the pyriproxyfen group (56.2 %) than in the control group (79.6%) ( $t=2.5$ ,  $df=17$ ,  $p=0.02$ ) (KW 4.5,  $df=1$ ,  $p=0.03$ ). There was no statistically significant difference in the mean number of eggs laid in both groups ( $t=1.2$ ,  $df=13$ ,

proportion that hatched in the pyriproxyfen group (14.6%), was significantly lower than the proportion that hatched in the control group (66.0%), ( $t=5.7$ ,  $df=6$ ,  $p=0.001$ ) (KW 6.81  $df=1$ ,  $p=0.009$ )(Table 2). There was no statistically significant difference in the mean number of eggs laid (0.19,  $df=8$ ,  $p=0.85$ ; KW 0.27  $df=1$   $p=0.60$ ).

Kruskal Wallace non-parametric Anova test showed a significant difference in the mean number that hatched between the two groups a lower hatch rate was noted in the pyriproxyfen group (KW=3.93  $df=1$   $p=0.04$ ). However this result was not confirmed by t- test ( $t=1.8$ ,  $df=8$ ,  $p=0.1$ ). Fewer eggs hatched in experiment 2 compared to experiment 1 in both control and pyriproxyfen groups.

**Experiment 3:** In the this group, 7 days old blood fed females were exposed for 1 hour and 14 (70%) survived in the control group while 17(85%) survived in the pyriproxyfen group. 9 (64.28%) of the surviving mosquitoes laid eggs in control group and 8 (47.05%) laid eggs in the pyriproxyfen group (Table1). The mean number of eggs laid in the control was 92.8, the mean number of hatched eggs was 69.4. In the pyriproxyfen group the mean number of eggs laid was 88.6 while the mean number that hatched was 45.12. (Table 2). The proportion that hatched in the pyriproxyfen group (48.2%) was significantly lower than the proportion that hatched in the control group (78.6.0%) ( $t=3.12$ ,  $df=15$ ,  $p=0.007$ ; KW 6.3,  $df=1$ ,  $p=0.012$ ) (Table 2). There was no statistically significant difference in the mean number of eggs laid in both groups (0.25,  $df=15$ ,  $p=0.8$ ; KW 0.002,  $df1$ ,  $p=0.96$ ). There was a statistically significant difference in the mean number of laid eggs that hatched

Table 2 Egg laid and hatch count

	Control				Pyriproxyfen			
	Mean eggs laid	Mean No. Hatched	Percentage hatched (%)	No. of mosquitoes	Mean No. laid	Mean No. hatched	Percentage Hatched(%)	N
Exp.1	93	76	79.6	7	74.7	46.0	56.2	12
Exp.2	62.8	40.8	66.0	5	67.4	14.2	14.6	5
Exp.3	92.8	69.4	78.6	9	88.8	45.1	48.2	8
<b>Total</b>	<b>85.8</b>	<b>77.7</b>	<b>74.0</b>	<b>21</b>	<b>64.8</b>	<b>39.4</b>	<b>45.6</b>	<b>25</b>

$p=0.24$ ). There was also no statistically significant difference in the mean number of laid eggs that hatched in both groups ( $p=0.07$ ).

**Experiment 2:** A group of 8-9 days old blood fed females were exposed for 30 minutes, 15 (75%) survived in the control group while 9(45%) survived in the pyriproxyfen group. Of these, 5 laid eggs in both groups (33.33% in control and 55.55% in pyriproxyfen group) (Table 1). In the control group the mean number of eggs laid was 62.8 and the mean number of hatched eggs was 40.8. In the pyriproxyfen group the mean number of eggs laid was 67.4 and the mean number that hatched was 14.2.The

in both groups ( $t=2.1$ ,  $df=11$ ,  $p=0.05$ ; KW 4.0,  $df=1$ ,  $p=0.04$ ). 2-way analysis of variance using STATA was applied to data from all three experiments together. It showed no significant difference in number of eggs laid ( $F=1.80$   $p=0.177$ ) between the two treatment groups. There was statistically significant difference in the number of laid eggs that hatched between the treatment types ( $F=5.76$ ,  $p=0.0061$ ). There was also statistically significant difference in the mean number of eggs that hatched between the experiments ( $F=11.97$   $p=0.0013$ ). There were also significant differences between experiments ( $F=27.8$ ,  $p=0.0001$ ).

**Table 3 Eggs retained by mosquitoes in Experiments 2 and 3**

	Control		Pyriproxifen		
	Mean eggs retained	No of mosquitoes	Mean retained	No of mosquitoes	
Exp.2	25.8	8	43.0	4	
Exp.3	67.0	5	82.8	9	
Total	41.6	13	70.3	13	p=0.08

**Overall trends**

**Effect on mosquito fecundity**

In the experiments and between the two treatment groups there was no difference in mean number of eggs laid. This suggests that pyriproxifen on bed nets has no effect on *An. stephensi* fecundity.

**Effect on egg fertility**

There were significant differences between the treatment groups in the mean number of laid eggs that hatched and in the proportion of eggs that hatched. This indicates a reduced fertility of eggs laid by mosquitoes exposed to pyriproxifen treated bed nets.

**Egg retention**

Egg count by dissection was done in experiments 2 and 3, this was not done in experiment 1. The mean number of eggs retained in the pyriproxifen group was higher (70.3) than in the control group (41.6). This difference was not statistically significant with the small sample tested (p=0.08) (Table 3).

**Mosquito survival**

Overall, 39 (65%) of the 60 mosquitoes held for 3 days after exposure in the control group survived, of those that survived 21 (53.8%) laid eggs. In the pyriproxifen group 41 (70%) of the 60 exposed mosquitoes survived for 3 days after exposure. Of these 25 (60.9%) laid eggs. (Table 1). A low rate of oviposition was seen in both groups and appeared not to be associated with treatment types.

**Discussion.**

The study was undertaken to observe the effect of pyriproxifen on mosquito fertility and fecundity after tarsal contact with pyriproxifen residues on bednet. Miller<sup>15</sup> showed a reduction in *An. stephensi* fecundity after exposure to pyriproxifen treated bednet at 0.5g/m<sup>2</sup> and 1.0 g/m<sup>2</sup>. In her work, a group of 15 mosquitoes exposed to untreated bed nets laid a mean number of 84.3 eggs per mosquito and the group exposed to pyriproxifen treated bednet at 0.5g/m<sup>2</sup> laid a mean of 56.1 eggs per mosquito<sup>17</sup>. While this shows a reduction in mean eggs laid in the pyriproxifen group, statistical significance of this difference is not known. A reduction in fecundity

with topical application of IGRs has been reported<sup>18</sup>. However, Dell Chism and Apperson observed that “forcibly exposing gravid female mosquitoes to pyriproxifen treated paper did not affect their fecundity”<sup>19</sup>. In this study, no statistically significant effect of pyriproxifen on fecundity was found. It is to be noted that the dosages of pyriproxifen used on bed nets in Miller’s work were very high.

This work suggests that pyriproxifen on treated net has no effect on fecundity of mosquitoes at low doses. However there was a reduction in egg fertility in mosquitoes exposed after 24 hours to pyriproxifen.

In the last three weeks of the study, high mortality in newly emerged mosquitoes was noted, most of them were dead by the 4th day post emergence. The deaths of these mosquitoes most possibly were due to contamination of the breeding bowls by pyriproxifen through pipettes used in larvae counting. Vasuki<sup>20</sup> reported a drastic reduction in longevity of *An. stephensi* adult mosquitoes that were exposed to sublethal concentrations of insect growth regulator hexaflumuron at larval and pupal stage, he reported *Aedes aegypti* having survival duration of 2.74 days. It is interesting to note that the observed survival period for the set of mosquitoes contaminated was 3-4 days. This effect could be exploited in reducing the longevity of surviving adults and this could possibly impact on transmission of malaria.

Previous study showed that a dose of pyriproxifen as low as 0.000376ppm killed over 90% of larvae and was 2.2 and 21.5 times more toxic than the IGRs diflubenzuron and methoprene respectively<sup>21</sup>. Considering the high level of toxicity of pyriproxifen it will be necessary if studies of this nature are to be repeated that the control and pyriproxifen treated groups be handled in separate rooms. In conclusion an effect on fertility was observed after 30min exposure to netting. The level of sterility demonstrated in this study is considered not enough to impact upon mosquito populations and therefore would be insufficient to reduce malaria. However the accidental finding of reduced longevity following exposure to sublethal doses of pyriproxifen could possibly lead to reduction in survival of adult mosquitoes emerging from eggs laid by adult females who had been exposed to pyriproxifen treated nets, this needs to be explored further. It will be informative to study the effect of pyriproxifen

treated nets using unfed mosquitoes, which will pick up residues at the time of feeding on an animal host, the effect of this contact on the fertility and fecundity will then be assessed in a manner that is realistic. Further work needs to be done to demonstrate tarsal transfer of pyriproxyfen from treated bed nets to oviposition sites for larval control.

## References.

1. Snow R W, Craig M, Deichmann U & Marsh K. Estimating mortality, morbidity and disability due to malaria among Africa's non-pregnant population. *Bull World Health Organ*, 1999; 77: 624-40.
2. Lengeler C, Snow RW. Insecticide treated bednets reduce mortality and severe morbidity from malaria among children on the Kenyan coast. *Trop Med Int Health*, 1996; 1: 139-146
3. Akiyama J. Report to WHO East Mediterranean Regional office, Alexandria. Alexandria: 1996; WHO.
4. Beach R F, Cordon -Rosales C. & Brogdon W G. Detoxifying esterases may limit the use of pyrethroids for malaria vector control in the Americas. *Parasitology today*, 1989; 5: 326-327.
5. Chakravorthy BC & Kalyanasundaram, M. Selection of permethrin resistance in the malaria vector *Anopheles stephensi*. *Indian J Malariol*, 1992; 29: 161-5.
6. Elissa N, Mouchet J, Riviere F, Meunier JY & Yao K. Resistance of *Anopheles gambiae* s.s. to pyrethroids in Cote d'Ivoire. *Ann Soc Belg Med Trop*, 1993; 73: 291-4.
7. Ansari MA, Sharma VP, Mittal PK & Razdan RK. Evaluation of juvenile hormone analogue JHM/S-31183 against immature stages of mosquitoes in natural habitats. *Indian J Malariol*, 1991; 28: 39-43.
8. Okazawa T, Bakote'e B, Suzuki H, Kawada H. & Kere N. Field evaluation of an insect growth regulator, pyriproxyfen, against *Anopheles punctulatus* on north Guadalcanal, Solomon Islands. *J Am Mosq Control Assoc*, 1991; 7: 604-7.
9. Estrada JG & Mulla MS. Evaluation of two new insect growth regulators against mosquitoes in the laboratory. *J Am Mosq Control Assoc*, 1986; 2: 57-60.
10. Suzuki H, Okazawa T, Here N & Kawada F. Field evaluation of a new insect growth regulator, pyriproxyfen, against *Anopheles farauti*, the main vector of malaria in Solomon Islands. *Jpn.J.Sanit.Zool*, 1989; 40: 253-257.
11. Al-Sheikh AA. The use of granular formulation of insect growth regulators (IGRs) for the control of *Anopheles arabiensis* in Gizan, Saudi Arabia (2000). *Biology and control of disease vectors*. London, London School of Hygiene and Tropical Medicine.
12. Yapabandara AM. & Curtis CF. Laboratory and field comparisons of pyriproxyfen, polystyrene beads and other larvicidal methods against malaria vectors in Sri Lanka. *Acta Trop*, 2002 81: 211-23.
13. Yapabandara A M, Curtis CF, Wickramasinghe MB & Fernando WP. Control of malaria vectors with the insect growth regulator pyriproxyfen in a gem-mining area in Sri Lanka. *Acta Trop*, 2001; 80: 265-76.
14. Kedipule VA field test of 2-[1-methyl-2-(4-Phenoxyphenoxy) Ethoxy]pyridine against principal vectors of malaria in a foothill area in Thailand. *Japanese Journal of Tropical Medicine and Hygiene*, 1989; 17: 175-183.
15. Miller JE. Can pyriproxyfen (an insect growth regulator) be used to prevent selection of permethrin resistance by impregnated bed nets? *Trans R Soc Trop Med Hyg*, 1993; 18: 281.
16. Cosgrove JB, Wood RJ, Petric D, Evans DT & Abbott RH. A convenient mosquito membrane feeding system. *J Am Mosq Control Assoc*, 1994; 10: 434-6.
17. Curtis CF, Maxwell CA, Finch RJ and Njunwa KJ. A Comparison of use of a pyrethroid for house spraying or bednet treatment against Tanzanian malaria vectors. *Trop Med Int Health* 1998; 3: 619-31
18. Patterson JW. A comparison of the morphogenetic and sterilizing activities of juvenile hormone mimics on *Aedes aegypti*. *J Insect Physiol*, 1974; 20: 2095-106
19. Dell Chism B. & Apperson CS. Horizontal transfer of the insect growth regulator pyriproxyfen to larval microcosms by gravid *Aedes albopictus* and *Ochlerotatus triseriatus* mosquitoes in the laboratory. *Med Vet Entomol*, 2003; 17: 211-20.
20. Vasuki V. Adult longevity of certain mosquito species after larval and pupal exposure to sublethal concentration of an insect growth regulator, hexaflumuron. *Southeast Asian J Trop Med Public Health*, 1992; 23: 121-4.
21. Ali A, Chowdhury MA, Hossain MI, Mahmud UL A, Habiba D. B. & Aslam A F. Laboratory evaluation of selected larvicides and insect growth regulators against field-collected *Culex quinquefasciatus* larvae from urban Dhaka, Bangladesh. *J Am Mosq Control Assoc*, 1999; 15: 43-7.