The role of oxygen insufficiency in the onset and development of the vascular complications of diabetes

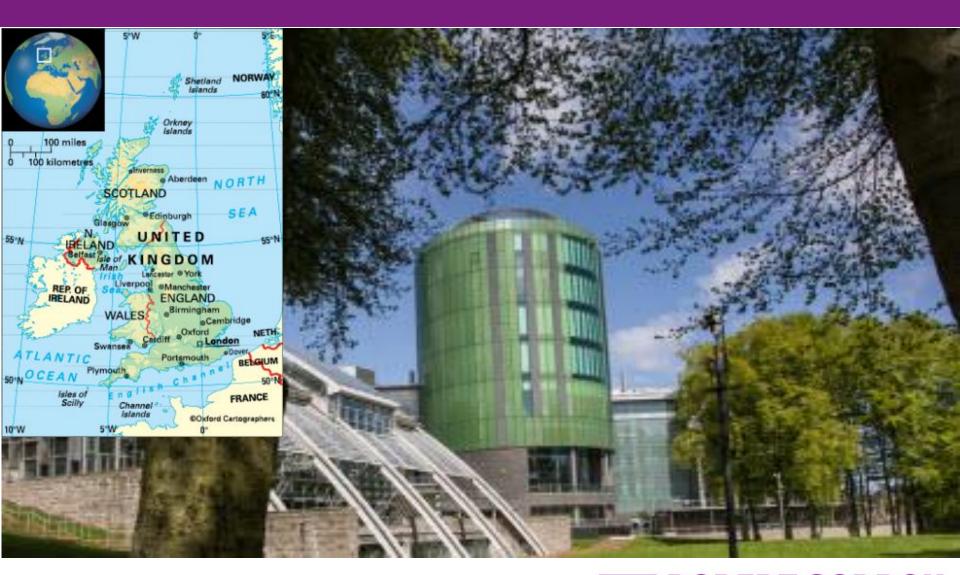
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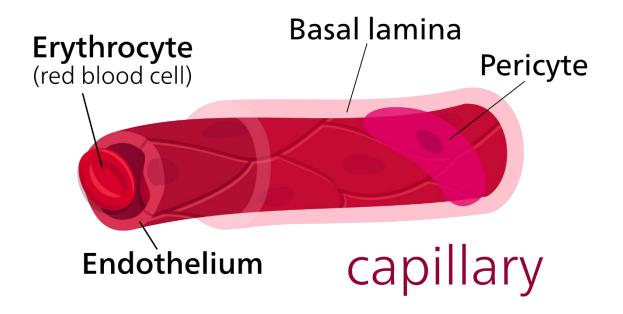
Where?





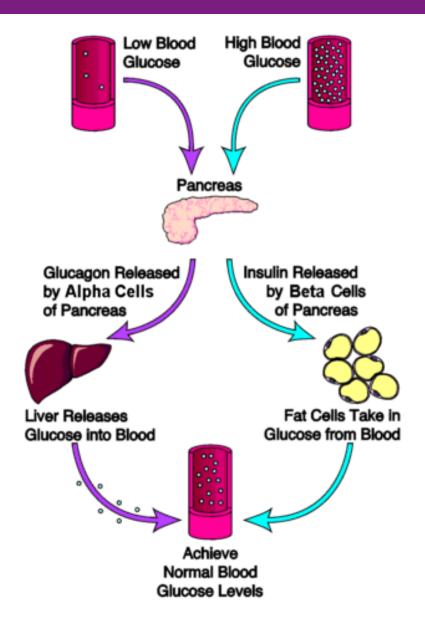
Oxygen and cell survival

Capillaries bring oxygen and nutrients to cells





Glucose concentration



Glucoseconcentrationregulated byinsulin

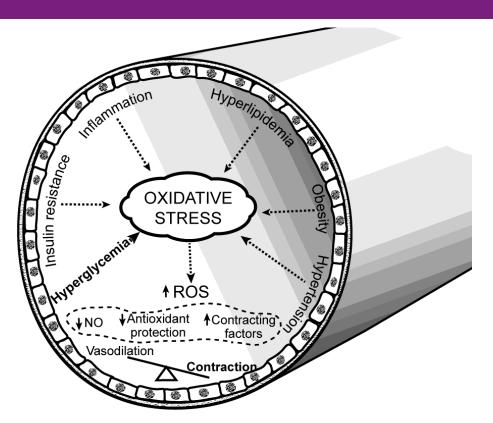


Unregulated glucose level

- Diabetes mellitus (DM)
 - Type 1 DM insulin insufficiency
 - Type 2 DM insulin resistance
- Clinical management of glucose levels is a priority

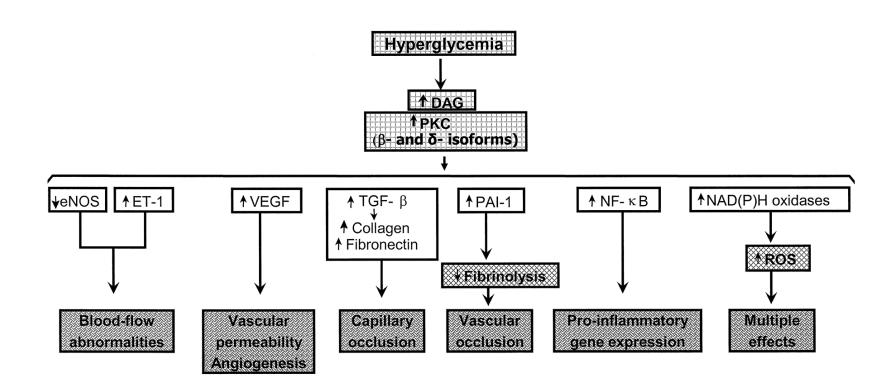
• High and/or fluctuating high levels of glucose increase the vascular complications resulting from the disease.

Glucose mediated endothelial cell damage



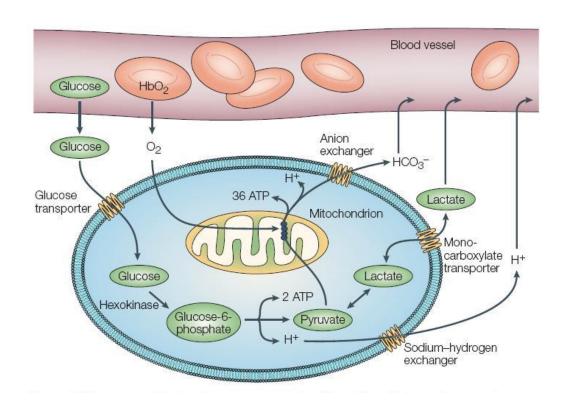
- Oxidative stress
- **♦** cell proliferation
- Impaired O2 delivery
- Anaerobic glucose metabolism







Anaerobic vs aerobic metabolism





Oxygen insufficiency

oxygen demand oxygen supply oxygen demand oxygen supply**Ψ** Adaptive response

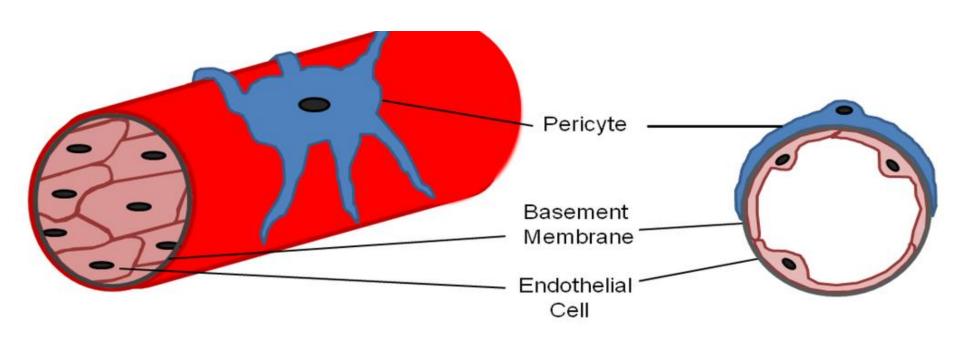


Adaptive response to low oxygen

| Consequence of normoglycaemia and low oxygen? | Rationale for the adaptive response | Consequence in hyperglycaemia and low oxygen? |
|---|---|---|
| > anaerobic metabolism therefore reduced ATP production | to increased glucose uptake to redress balance and increase ATP production | glucose levels may be already very high and increase oxidative stress |
| > glucose metabolism | to increased glucose metabolism to redress balance and increase ATP production | |
| > endothelial cell proliferation | to increase vascular areas and thus enhance oxygen delivery | hyperglycaemia modifies some of the structures within cells that are able to respond to mediate cell proliferation reducing ability of cells to proliferate |
| > erythropoietin production | to increase oxygen delivery to the cells/tissue | |

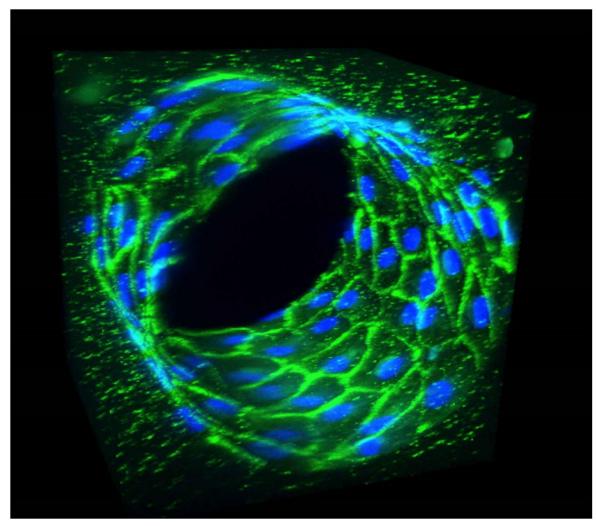


Capillary network





Endothelial cells



3D projection of a confocal z-stack shows human umbilical vein endothelial cells (HUVECs) forming a functional vessel immunofluorescently stained for PECAM-1 (green) and nuclei (blue). (Wong/Searson Lab)



Capillary damage/dysfunction

Oxygen insufficiency

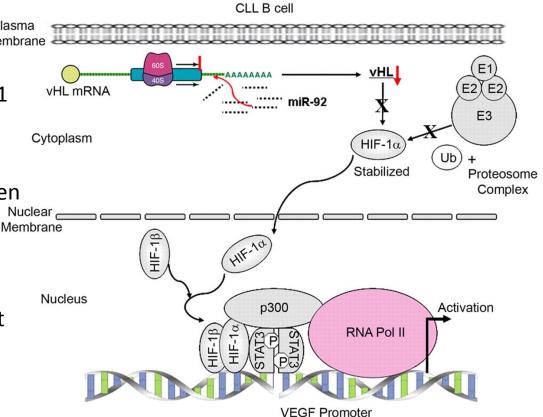
 Hypoxia inducible factor type 1 (HIF1)

Dimeric transcription factor

• HIF1 α – stabilised in oxygen insufficiency

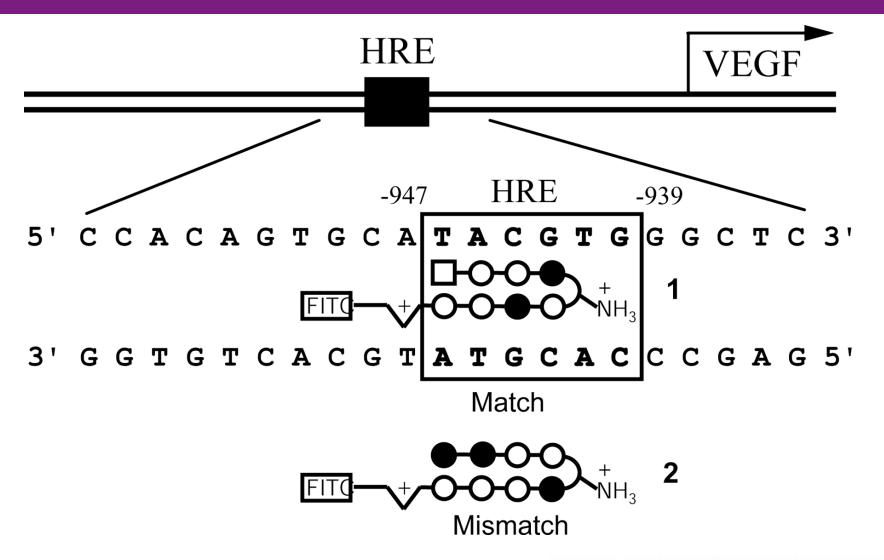
HIF1β – constitutively expressed

 Binds to hypoxia response element (HRE)



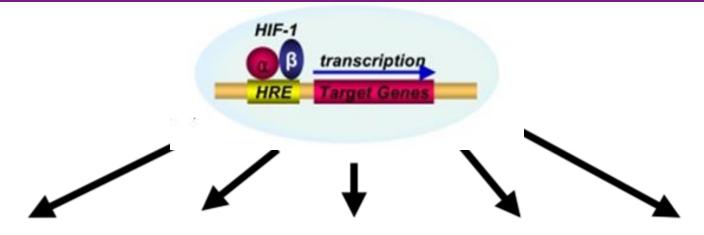


Hypoxia response element





Hypoxia inducible factor type 1



Angiogenesis

EG-VEGF ENG LEP LRP1 TGF-β3 VEGF VEGFR ADM ET1 α₁₈-AR HO1 NOS2

Growth & Survival

Cyclin G2 IGF-BP1,2,3 WAF-1 TGF-a TGF-B3 ADM **EPO** NOS2 IGF2 NOS2 NIP3 NIX RTP801 ET1 VEGF VEGFR Transferrin Transferrin-R MDR

Glucose metabolism

HK1 HK2 AMF/GPI ENO1 GLUT1 **GLUT3 GAPDH** LDHA PFKBF3 **PFKL** PGK1 PKM TPI ALDA ALDC LEP

Invasion & Metastasis

KRT14

TGF-a

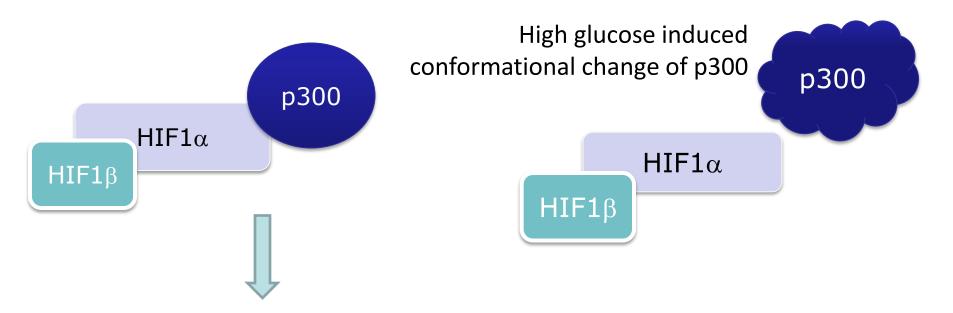
KRT18
KRT19
VIM
MIC2
CATHD
Collagen type V (α1)
FN1
MMP2
PAI1
Prolyl-4-hydroxylase α(1)
UPAR
AMF
c-MET
LRP1

Miscellaneous

DEC1, 2
ETS-1
NUR77
CA 9
p35srj
ITF
AK3
Ecto-5'- nucleotidase
Ceruloplasmin
Transglutminase 2



Glucose mediated change to HIF1 function

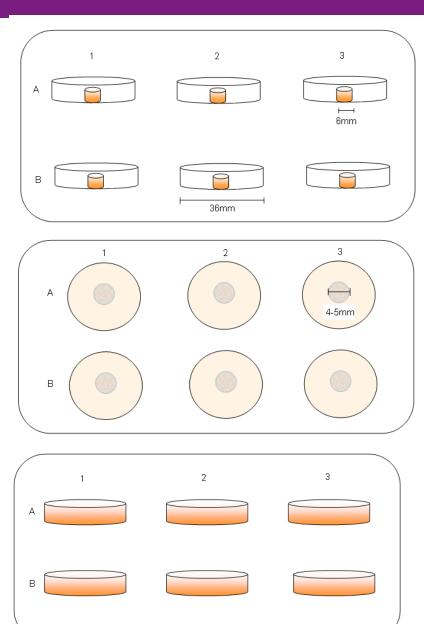


Activation of transcriptional activity

HIF- 1α dysfunction in diabetes Cell Cycle 9:1, 75-79; January 1, 2010; Hariharan Thangarajah, Ivan N. Vial, et al.



Human microvascular dermal endothelial cell model







Measurement & analysis

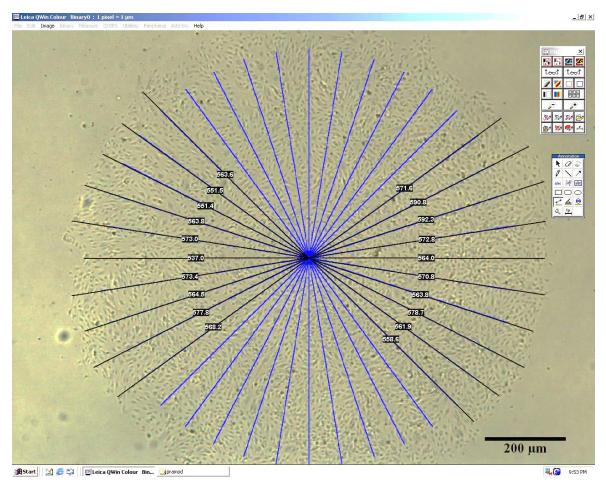
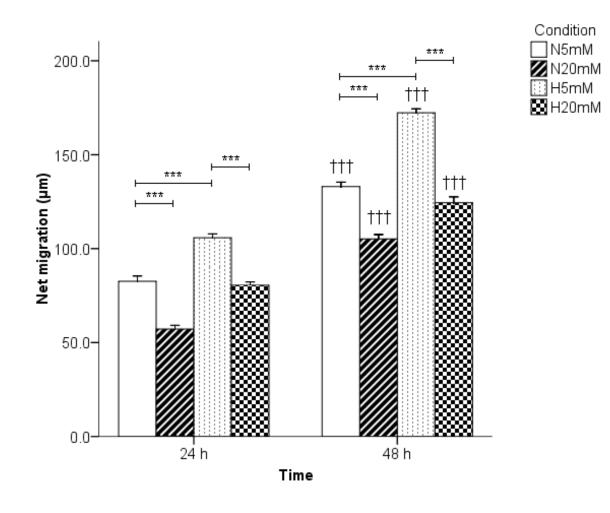


Image taken each day and stored for subsequent analysis



Effect of [glucose] and [oxygen]



Summary

Hypoxia increased net migration distance at 24 & 48 h.

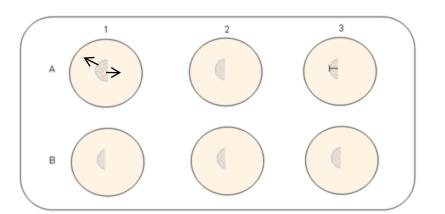
High glucose concentration decreased net migration of endothelial cells at 24 & 48 hours.



Human microvascular dermal endothelial cell (HMVDEC) model

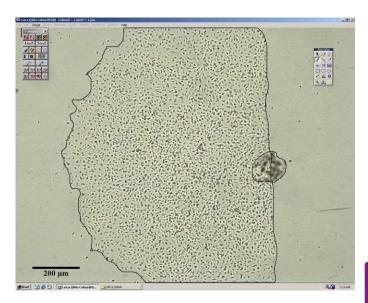
Normoxia (18% oxygen)

Hypoxia (5% oxygen)



5mM glucose

20mM glucose





Measurement & analysis

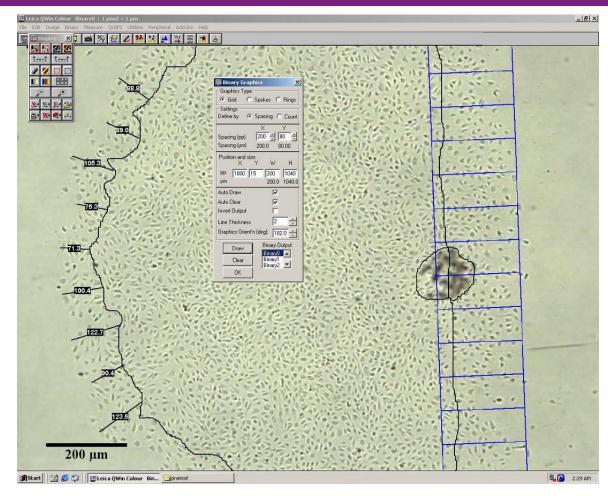
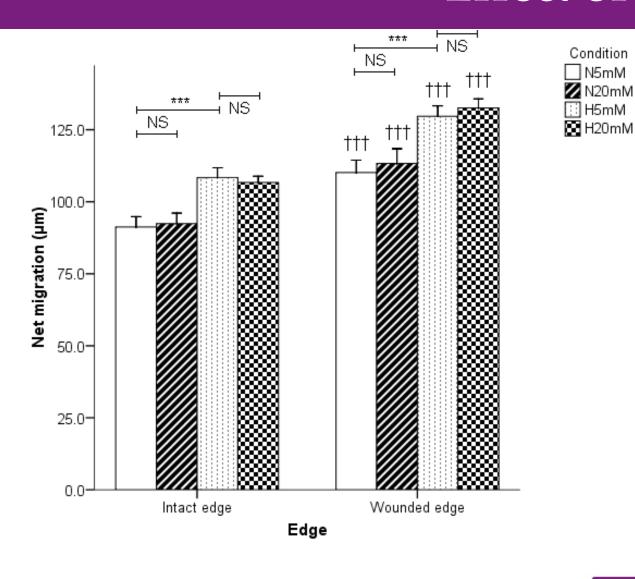


Image taken each day and stored for subsequent analysis



Effect of mannitol

□N5mM



Summary

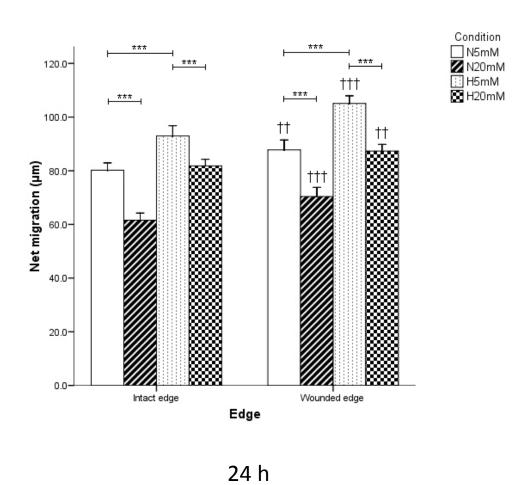
Hypoxia increased net migration distance at 24 & 48 h.

Increased

mannitol concentration did not show any significant change in the net migration of endothelial cells at 24 & 48



Effect of wounding cells



Summary

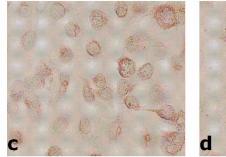
Hypoxia increased migration and an increased glucose concentration decreased the net migration. Cells from the wounded edge travelling at a significantly greater distance than cells from intact edge.

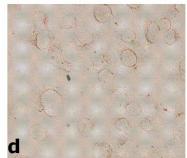


Immunostaining: HIF1α

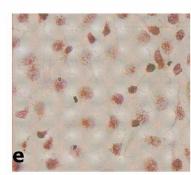
Negative control b

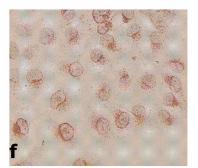
normoxia





hypoxia



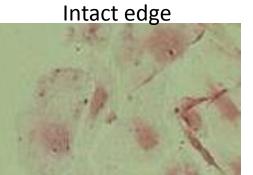


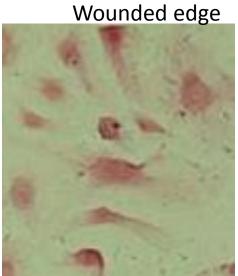
Hector, MacMannus & Knott (2004)

HUVEC

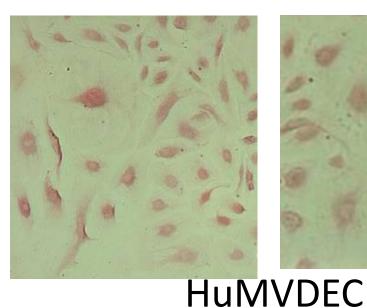


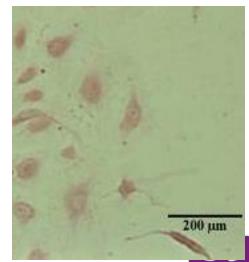
Immunostaining: HIF1α





5 mM glucose hypoxia



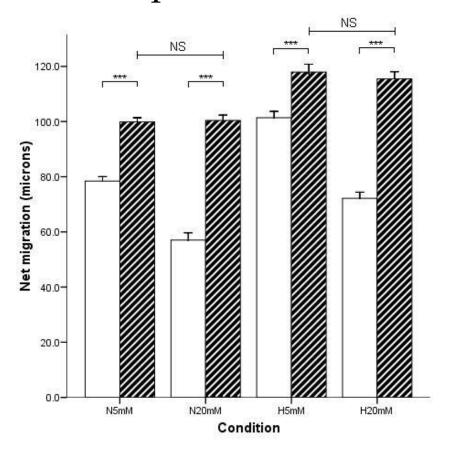


20 mM glucose hypoxia

RGU ROBERT GORDON UNIVERSITY ABERDEEN

Reactive oxygen species

- Silymarin
 - added in liquid form



Treatment
vehicle control

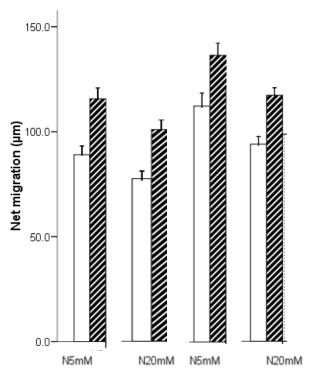
Summary

Silymarin restores glucose mediated decreased cell migration.



Silymarin

Formulated with lyophilised wafers for topical application



Summary

Silymarin can be incorporated into a lyophilised wafer for topical application to recalcitrant wounds.

normoxia

hypoxia

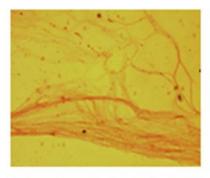


Retinal explant model

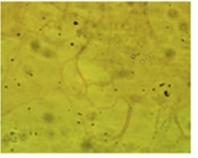


Agarose and collagen

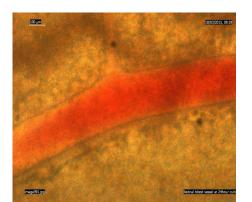
Agarose and collagen



Agarose + Collagen



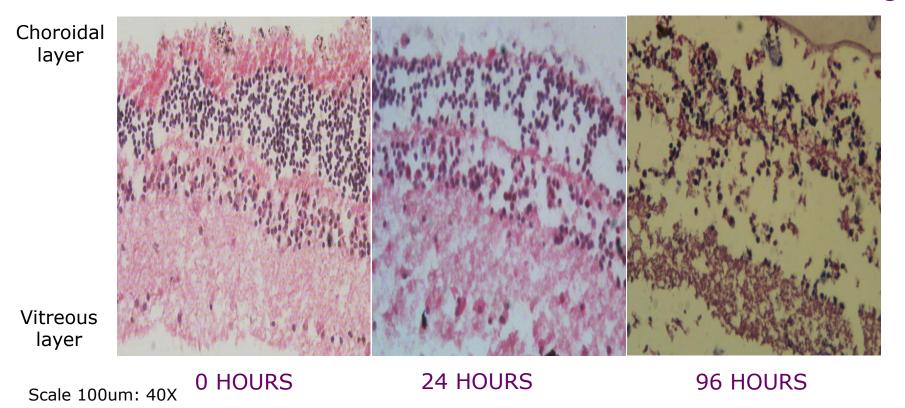
<u>Agarose</u>





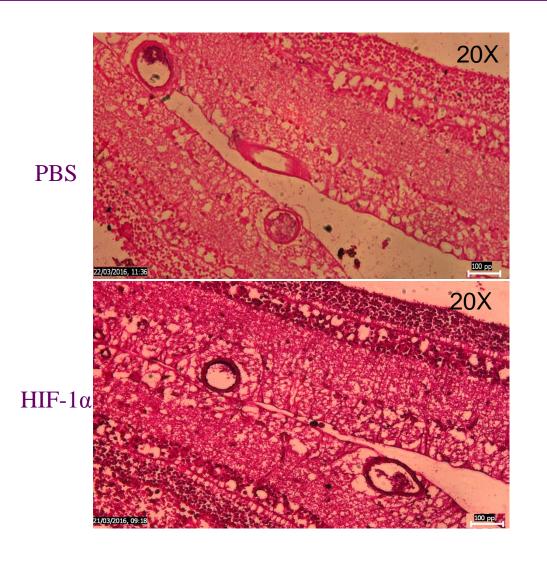
Haematoxylin and eosin staining of retinal explant

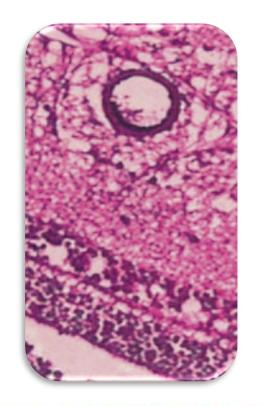
 Model shows retinal structural changes





Immunohistochemistry (HIF1 α) of retinal explant







Hyperbaric oxygen therapy

What is Hyperbaric Oxygen Therapy (HBOT)?

Hyperbaric oxygen therapy (HBOT) is done in a sealed chamber pressurized at 1 ½ to 3 times normal atmospheric pressure where the patient is breathing pure oxygen.





American Cancer Society. (2010). Hyperbaric Oxygen therapy. Retrieved October 22, 2010 from http://www.cancer.org/Treatment/TreatmentsandSideEffects/ComplementaryandAlternativeMedicine/Herbs-VitaminsandMinerals/hyperbaric-oxygen-therapy



Treatment of recalcitrant ulcers





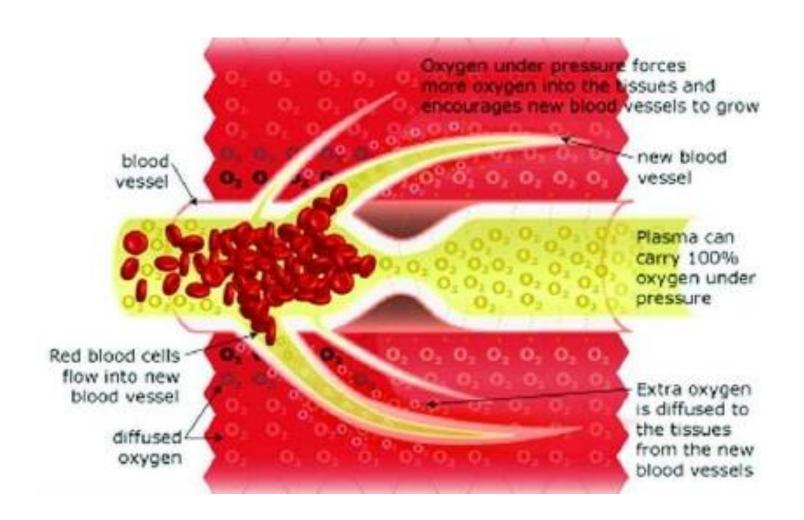


Mechanism of action

- O2 carried by erythrocytes
- HBOT increases O2 solubility
- Crosses cell membranes entering bodily fluids
 - Plasma, lymphatic system, interstitial fluid, cerebrospinal fluid
- Toxicity
 - Lungs (oedema)
 - CNS toxicity (grand mal)
 - Eyes (myopia)



Capillary growth - angiogenesis





HBOT and hyperoxia



Treatment of recalcitrant ulcers



Summary

- Greater understanding of mechanisms of vascular disease
- Facilitates development in management of diabetes
- Provides opportunities for continuing development of therapeutic options

