



## Artery Research

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### **P7.02: EFFECT OF CAPTOPRIL AND TELMISARTAN ON ANTI-CONTRACTILE PROPERTY OF PERIVASCULAR ADIPOSE TISSUE LOST AFTER HYPOXIA IN RAT MESENTERIC SMALL RESISTANCE ARTERIES**

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Results: The results are shown in the table:

Variable	CTRL	P-value	OVX	P-value	OVX+Ω3
Final body weight (gr)	211±3,85	0,005	246,4±11,7	< 0,0001vsCTRL	263,3±7,3
c-fPWV cm/sec	378,9±7,2	<,0001	560,8±12,1	< 0,0001	363,3±5,9
MeanBP mmHg	108,8±4,8	0,002	129,8±2,6	0,003	109,3±2,7
Superoxide nmol/min/mm <sup>2</sup>	97,4±8,3	0,01	142,3±14,6	0,04	105,0±9,8
SystolicBP mmHg	133,1±6,1	0,07	153,3±12,9	0,11	135,9±4,1
DiastolicBP mmHg	96,7±4,6	0,09	109,1±6,9	0,1	97,2±2,6
Ω3 index, percent	3,2±0,1	0,01	2,5±0,08	< 0,0001 < 0,0001vsCTRL	5,2±0,2

**Conclusions:** Ω3 supplementation reduces arterial BP and restores mechanical arterial properties in a post menopause experimental model, likely by restoring NO availability.

#### P7.02

##### EFFECT OF CAPTOPRIL AND TELMISARTAN ON ANTI-CONTRACTILE PROPERTY OF PERIVASCULAR ADIPOSE TISSUE LOST AFTER HYPOXIA IN RAT MESENTERIC SMALL RESISTANCE ARTERIES

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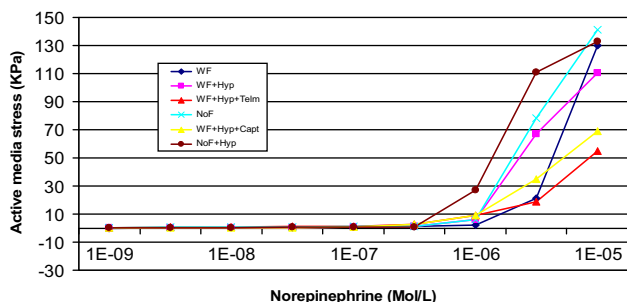
It has been previously demonstrated that inflammation in adipose tissue may be implicated in vascular dysfunction. Adipocytes secrete adiponectin, a physiological modulator of local vascular tone through an increased nitric oxide bioavailability. This capacity is lost in obesity by the development of adipocyte hypertrophy, leading to hypoxia, inflammation, and oxidative stress.

**Aim:** of the study was to investigate the feasibility a pharmacological modulation of the concerned effect, during hypoxia, in Wistar-Kyoto normotensive rats (WKY).

**Materials and Methods:** we investigated 25 WKY of 12 weeks of age. Mesenteric small resistance arteries were dissected and mounted on a wire myograph, according to Mulvany-Halpern technique (internal diameter about 200 μm). A concentration-response to norepinephrine (NE, from 10<sup>-9</sup> to 10<sup>-5</sup> Mol/l) was evaluated in the following conditions: 1) in vessels with perivascular fat tissue (WF), 2) in vessels without perivascular fat tissue (NoF); 3) in WF vessels under hypoxic condition (WF+Hyp); 4) in NoF vessels under hypoxic condition (NoF+Hyp); 5) in WF+Hyp vessels incubated with telmisartan 10<sup>-2</sup> Mol/l (WF+Hyp+Telm) or captopril 10<sup>-2</sup> Mol/l for 3 hours (WF+Hyp+Capt).

**Results:** Are summarized in the figure (active media stress: KPa, mean of two vessels for each rat). A significantly greater reactivity to NE was observed in NoF vessels compared with WF vessels (ANOVA p = 0.003 between curves). This increased reactivity is similar to that observed in WF+Hyp (ANOVA p = NS between, NoF and WF+Hyp). Captopril and Telmisartan were able to prevent the effect of hypoxia (ANOVA p < 0.05 between WF+Hyp and WF+Hyp+Capt or Telm).

In conclusion the ACE inhibitor captopril and the angiotensin-receptor blocker telmisartan seem to be able to restore the anti-contractile effects of perivascular fat tissue lost after hypoxia, possibly through an inhibition of angiotensin II effects.



#### P7.03

##### DIFFERENT EFFECT OF NEURONAL AND ENDOTHELIAL NOS INHIBITION ON HEART, CORONARY AND CAROTID ARTERY OF WISTAR RATS

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Long-term decrease of nitric oxide (NO) production evokes alterations in function and structure of cardiovascular system. We demonstrate the

long-term effect of NO synthases inhibition with two different inhibitors on blood pressure (BP), heart and structure of coronary and carotid arteries. Four groups of ten weeks old Wistar rats were used: 1) control rats and rats receiving 2) N<sup>G</sup>-nitro-L-arginine methylester (L-NAME) (50 mg/kg/day in tap water), 3) 7-nitroindazole (7NI) (10 mg/kg/day in tap water), 4) the same doses of L-NAME (in tap water) and 7NI (in pellet diet). The experiment lasted 6 weeks. BP was measured by the plethysmographic method weekly. At the end of the experiment the animals were perfused with a glutaraldehyde fixative (120 mmHg) and heart, coronary and carotid artery were excised and processed for electron microscopy.

	Wistar	L-NAME	7NI	L-NAME+7NI
BP (mmHg)	112±2.20	164±2.10*	118±1.90*	131±5.12**#
H/B (mg/g)	3,08±0,14	3,41±0,13*	2,64±0,10**	3,07±0,12**#
Coronary a.				
CSA (μm <sup>2</sup> )	8860±800	18280±1320*	6780±610**	14250±2290**#
Carotid a.				
CSA (μm <sup>2</sup> )	69190±2460	109780±4040*	54290±2200**	88950±4340**#

Blood pressure (BP), heart/body weight (H/B), cross sectional area – intima + media (CSA). \*P < 0.01 vs. Wistar, #P < 0.01 vs. L-NAME, \*\*P < 0.01 vs. 7NI

The study revealed, for the first time, that long-term inhibition of nNOS with 7NI, contrary to eNOS inhibition with nonspecific inhibitor L-NAME, evoked pressure independent cardiac hypertrophy and hypertrophy of the vessel wall. The data suggested that long-term nNOS inhibition likely initiates a different chain of events leading to alterations in cardiovascular system then those after eNOS inhibition.

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#### P7.04

##### EVALUATION OF AORTIC STIFFENING IN HYPERTENSIVE RAT MODELS IN VIVO VIA ECHOTRACKING: PULSATILE DISTENSION WAVEFORM ANALYSIS

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**Objectives:** Large artery stiffening, a risk factor in cardiovascular diseases, can be evaluated in human and rats by pulse wave velocity and echotracking, but controversies remain regarding the roles of blood pressure (BP) and vascular wall properties. We studied these points with the echotracking device ArtLab in the hypertensive rat (SHR) treated with L-NAME (SHRLN) to reduce nitric oxide levels.

**Methods:** In anaesthetized normotensive rats (WKY), SHR and SHRLN 20 weeks old, aortic BP is recorded via a catheter and diameter via the ArtLab ultrasound probe, in a motion mode to detect pulsatile displacement of aortic walls (distension). Data are analysed via a Matlab software.

**Results:** Compliance and distensibility are decreased in SHRLN (<SHR<WKY) and stiffness index increased. From distension-pressure loop curves, ascending, descending slopes and isobaric ascending slope at 200 mmHg are reduced in SHRLN<SHR<WKY. If we plot pulsatile time-waveform curves of pulse pressure (PP) and distension in % (Figure), maximal values and waves kinetics are altered. We therefore calculate a distensibility index as area under the curves of distension/PP. Diltiazem i.v. in SHRLN decreases systolic BP and PP to values similar to those in WKY; compliance, distensibility and stiffness reach only the values of SHR. Isobaric compliance at 160 mmHg is < than in WKY and distension remains lower than in SHR.

**Conclusions:** This study shows that 1) the ArtLab device analyses accurately compliance and stiffness indexes in animal models and 2) adding an analysis of aortic distension pulse waveform allows additional evaluation of BP-independent vascular wall stiffening.