

Fig. 1. Northern blot analysis of microRNAs in kidneys and hearts of Dahl salt-sensitive (DS) and Lewis (LW) rats. Male DS and LW fed a 0.2% (-) or 8% (+) NaCl diet were sacrificed, and the kidneys and hearts were excised. Total RNA was prepared with TRIzol reagent from excised whole tissues and was electrophoresed, blotted, fixed to membrane and hybridized to StarFire probes for each microRNA, as described in the Methods. A total of 29 microRNAs were undetectable in either the kidney or heart (data not shown). These were miR-9, 17-3p, 20, 30a-3p, 31, 32, 33, 34b, 96, 103, 126*, 135a, 135b, 182, 185, 189, 190, 194, 199b, 203, 221, 224, 324-3p, 328, 331, 345 and 351, and cel-miR-83 and 84.

observed in the other DS+ rats.

We then assessed the expression levels of 118 microRNA species in the kidneys of DS+, DS-, LW+, and LW- by Northern blotting (Fig. 1). These 118 microRNAs included

those present among libraries and microRNAs from the chromosome 1 QTL for blood pressure (miR-193, miR-142-3p, miR-142-5p, miR-150, miR-211, miR-301, miR-330, miR-343, miR-344). This chromosome 1 QTL is the most promi-

Table 3. Comparison of Body and Heart Weights, and Blood Pressure

Rat strain	Salt diet	BW (g)	HW (g)	SBP (mmHg)
LW	-	358.0±9.3	1.14±0.05	105.8±3.5
LW	+	357.8±3.2	1.12±0.06	110.6±3.2
DS	-	363.6±4.1	1.29±0.01	122.0±2.5
DS	+	370.0±4.5	1.74±0.04*	197.6±9.1*

Dahl salt-sensitive (DS) and Lewis rats (LW) were fed a 0.2% (-) or 8% (+) NaCl diet from 4 to 13 weeks of age. * $p < 0.01$, DS(+) compared to each other group ($n=5$). BW, body weight; HW, heart weight; SBP, systolic blood pressure.

QTL for blood pressure and 2–3 responsible genes are thought to be present in this region (14). To investigate whether microRNA genes in this region might contribute to blood pressure regulation, we measured the expression levels of the microRNAs in this region.

Expression of 76 microRNA species was detected in the kidney (Fig. 1). Some microRNA species appeared differentially expressed among the four groups, and the expression levels of these microRNA species were subjected to reconfirmation using other Northern blotting strips. Moreover, the expression levels of several microRNA species (miR-30c, miR-151*, miR-214, miR-223, miR-322, Can-1, Can-7) were assessed in individual rats ($n=5$). None of the microRNA species were found to be differentially expressed among the kidneys of DS+, DS-, LW+ and LW-. No significant differences in microRNA expression profiles were detected between the strains. Moreover, salt loading did not modulate microRNA expression.

Blood pressure levels of DS+, DS-, LW+ and LW- are shown in Table 3. Salt loading significantly increased blood pressure in DS+ rats, and the ventricles of DS+ rats were significantly hypertrophied (19–21).

Although the kidneys of DS+ rats exhibited sclerotic changes, as previously reported (22), the expression profiles of microRNAs were not markedly altered. Expression profiles of microRNAs have been reported to change dramatically during cellular differentiation (23–25) and in cancer cell growth (26, 27), and it is likely that the expression profiles of microRNAs are not modulated without cellular differentiation.

We then investigated the expression profiles of microRNAs in the ventricles of the heart. The left ventricle of the heart is one of the target organs most affected by high blood pressure (28), and significant cardiac hypertrophy was observed in the DS+ rat (Table 3). It is well known that hypertrophy dramatically changes the expression profiles of mRNA from an adult to a fetal pattern (29, 30). Although we did not construct libraries from the ventricles of the heart and heart-specific microRNAs may not be involved in the analysis, no significant differences in microRNA expression profiles were observed among the four groups, despite the marked cardiac

hypertrophy in the DS+ (Fig. 1). This observation also strengthens the hypothesis that microRNA expression profiles are specific to each cell type, and may not be modulated without cellular differentiation.

The precise number of microRNAs has not been determined (31, 32). Moreover, we were not able to detect microRNAs with low expression levels. The kidney comprises a variety of cells. Thus, some species of cell-specific microRNA may have been diluted to an undetectable level in total RNA derived from the whole kidney. Therefore, it may be premature to conclude that microRNA systems are not involved in the pathogenesis of hypertension in DS.

There were several limitations in the present study. We employed Northern blot analysis for the assessment of the expression levels. Although we used a StarFire oligo labeling method (Integrated DNA Technologies) that permits the generation of oligonucleotide probes which are 10-fold more sensitive than traditional ^{32}P end-labeled probes, the sensitivity of the Northern blot may not have been sufficiently high, in which case a substantial number of microRNAs would not have been detected in the present study. This limitation is currently being overcome by various experimental procedures, including a microarray system, a TaqMan probe-based real-time PCR method, and an RNase mapping method. Future investigation will require application of these methods.

Acknowledgements

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Mechanisms Underlying Nano-Sized Air-Pollution-Mediated Progression of Atherosclerosis — Carbon Black Causes Cytotoxic Injury/Inflammation and Inhibits Cell Growth in Vascular Endothelial Cells —

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Background Epidemiological studies indicate a significant link between exposure to environmental air pollution and mortality and morbidity from ischemic heart disease. Because nanoparticles can translocate into blood circulation, the present study aimed to clarify their direct effects on human vascular endothelial cells (ECs).

Methods and Results Human umbilical vein ECs (HUVECs) were treated with carbon black (CB), a component of diesel exhaust particles, for 24 h. CB induced cytotoxic morphological changes such as cytosolic vacuole formation, cell disorientation and decreased density. Lactate dehydrogenase assay revealed that CB induced cytotoxic injury in both the cells and plasma membranes. Proliferation assay showed that CB inhibited cell growth. Monocyte chemoattractant protein-1 but not vascular cell adhesion molecule-1 was induced by CB. CB reduced the expressions of connexin37 and endothelial nitric oxide (NO) synthase. Microarray analysis revealed the induction of pro-inflammatory molecules by CB.

Conclusions The present results demonstrate for the first time that CB directly affects the endothelium, causing cytotoxic injury, inflammatory responses, and inhibition of cell growth. As EC injury/inflammation and membrane disintegration are related to the initiation of atherosclerosis, and NO is anti-atherogenic and anti-thrombogenic, the direct effects of nanoparticles on ECs may represent one mechanism behind environmental air pollution-mediated atherosclerosis and ischemic heart disease. (Circ J 2006; 70: 129–140)

Key Words: Air pollution; Atherosclerosis; Cell death; Endothelium; Inflammation

According to epidemiological studies in the United States and Europe,^{1,2} modest rises in the mass of particulate matter (PM) are associated with increases in hospitalizations and mortality because of cardiovascular diseases. The absolute number of deaths attributable to PM is much higher for cardiovascular than for respiratory causes.^{3,4} Traffic-derived nano-sized particles are most likely responsible for the cardiovascular effects because of their larger surface area, potentially leading to the enhanced biological toxicity.⁵

Several mechanisms have been proposed; for example, inhaled particles accumulating in the lungs may cause systemic inflammation via oxidative stress, which mediates endothelial dysfunction and atherosclerosis.⁶ The systemic inflammation may also increase blood coagulability by activating platelets and coagulation factors such as fibrinogen.⁶ In addition, some of the cardiovascular effects of PM involve enhancement of autonomic nervous systems via pulmonary reflexes, leading to the arrhythmia.⁷ However, these mechanisms have not been precisely examined.

More recently, Nemmar et al demonstrated that nano-sized particles translocate from the lungs into the blood,^{8,9} and these particles are barely recognized by phagocytosing

cells, such as macrophages, compared with micro-sized particles.⁵ Therefore, because of the low uptake by macrophages, nanoparticles appear to be taken up by epithelial or endothelial cells (ECs) and thus may directly interact with ECs to induce injury and inflammation, promote thrombosis and destabilize atheromatous plaques. However, the effects on vascular ECs have not been precisely examined and so the present study focused particularly on the direct effects of traffic-derived nanoparticles on cultured vascular ECs in order to explore the cellular mechanisms responsible for air pollution-mediated cardiovascular diseases. This study is relevant given that exposure to nano-materials is rapidly increasing, with benefits to medicine from nanotechnology such as imaging and drug delivery.^{5,10}

Methods

Materials

Carbon black (CB; The Association of Powder Process Industry and Engineering, Japan) was suspended in culture medium by sonication and vortexing. CB is a mimetic of soot-like PM derived from the incomplete combustion of diesel engines. Particle size was measured by a Particle Size Analyzer (UPA-EX150, Nikkiso, Japan), revealing a mean diameter \pm SD of 248.2 \pm 161.4 nm (50% accumulation, Fig 1). Antibody sources were as follows: eNOS, VCAM-1, and total actin (Santa Cruz Biotech, CA, USA); proliferating cell nuclear antigen (PCNA; BD Bioscience, CA, USA); and connexin37 (Alpha Diagnostica, TX, USA).

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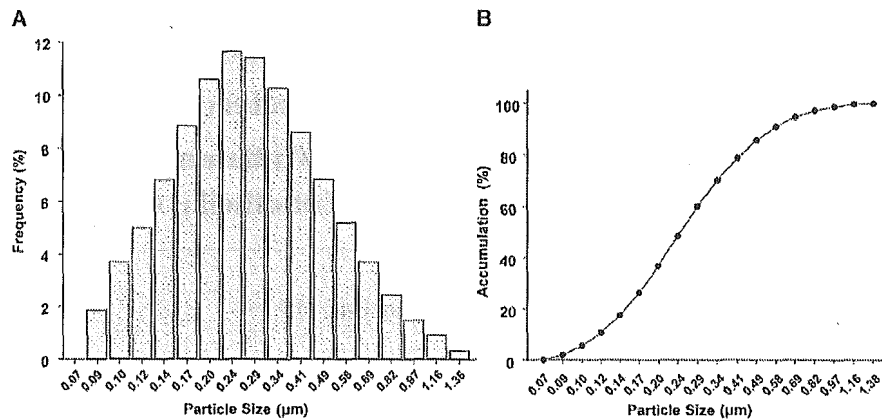


Fig 1. Particle size of carbon black suspended in culture medium. (A) Frequency, (B) accumulation.

Cell Culture

Human umbilical vein ECs (HUVECs) were purchased from Cascade Biologics and cultured in Medium 200 supplemented with low serum growth supplement (LSGS; Cascade Biologics, OR, USA) as described previously.¹¹ Cells at passages 3–6 were used for experiments.

Electron Microscopy

HUVECs in 60-mm dishes were fixed in 0.1 mol/L sodium cacodylate-buffered (pH7.4) 2.0% glutaraldehyde solution at 4°C overnight and postfixed in 0.1 mol/L sodium cacodylate-buffered (pH7.4) 1% OsO₄ solution at 4°C for 2 h. After dehydration in an ethanol gradient (50–100% each 10 min), samples were embedded in EPON812 at 60°C for 2 days. Ultrathin sections (80 nm) were stained with uranyl acetate and lead citrate. Sections were examined in a JEOL JEM2000EX at 100 kV.

Cytotoxicity Assay

The cytotoxicity assay was performed using a CytoTox 96 non-radioactive cytotoxicity assay kit (Promega, WI, USA) in accordance with the manufacturer's instructions. Briefly, after treating HUVECs at approximately 90% confluence in 6-well plates with CB (1–100 μg/ml) for 24 h, the culture medium was collected and the level of lactate dehydrogenase (LDH), a stable cytosolic enzyme that is released during cell lysis, was measured at absorbance 490 nm using a standard 96-well plate reader. Maximal LDH release was assessed by freeze–thaw lysis of cells, and cytotoxicity was expressed relative to this maximal LDH release.

Proliferation Assay

The proliferation assay was performed using a Cell Counting-8 Kit (Dojindo Laboratories, Japan) according to the manufacturer's instructions. Briefly, after treating HUVECs at approximately 30% confluence in 12-well plates with CB (1–100 μg/ml) for 24 h, water-soluble tetrazolium salt (WST-8) was added for 3 h and the culture medium was collected. Conversion of tetrazolium salt into formazan by living cells (active mitochondria) was measured using a standard 96-well plate reader at absorbance 450 nm. The total number of living cells was shown relative to an untreated control sample.

Western Blotting

Western blotting was performed as described previously.¹² Proteins were obtained by homogenizing HUVECs with Triton-based lysis buffer (1% Triton X-100, 20 mmol/L Tris, pH7.4, 150 mmol/L NaCl, 1 mmol/L EDTA, 1 mmol/L EGTA, 2.5 mmol/L sodium pyrophosphate, 1 mmol/L β-glycerol phosphate, 1 mmol/L Na₃VO₄, 1 μg/ml leupeptin, and 0.1% protease inhibitor mixture; Nacalai Tesque, Japan). Protein concentration was determined using the bicinchoninic acid method (Pierce, IL, USA). Equal amounts of proteins (15 μg) were separated by SDS-PAGE (7.5%) and transferred to a nitrocellulose membrane (Pall Corporation, MI, USA). After blocking with 5% bovine serum albumin, membranes were incubated with primary antibody (1:1,000 dilution) at 4°C overnight, and membrane-bound antibodies were visualized using horseradish peroxidase-conjugated secondary antibodies (1:10,000 dilution, 1 h) and the ECL system (Amersham Biosciences, UK). The resulting autoradiograms were analyzed using NIH Image 1.63 software. Experiments were performed at least 3 times and equal loading of protein was ensured by measuring total actin expression.

Quantitative Determination of Monocyte Chemoattractant Protein (MCP)-1 Release

The MCP-1 protein level was measured using an ELISA kit (Biosource, CA, USA) in accordance with the manufacturer's instructions. Briefly, after treating HUVECs at approximately 90% confluence in 6-well plates with CB (100 μg/ml) for 24 h, the culture medium was collected and the level of MCP-1 was measured at absorbance 450 nm using a standard 96-well plate reader.

Microarray Analysis

Total RNA was isolated from HUVECs treated with or without CB (100 μg/ml, 24 h) using RNeasy Kit (QUIAGEN Inc, CA, USA) according to the manufacturer's instructions. Only samples with an A260/A280 between 1.7 and 2.2 (measured in 10 mmol/L Tris-HCl, pH7.6) were considered suitable for use. Hybridization samples were prepared according to the GeneChip Expression Analysis Technical Manual, 701021 Rev.5 (Section 2: Eukaryotic Sample and Array Processing, Chapter 1: Eukaryotic Target Preparation; <http://www.affymetrix.com/support/technical/manuals.affx>).

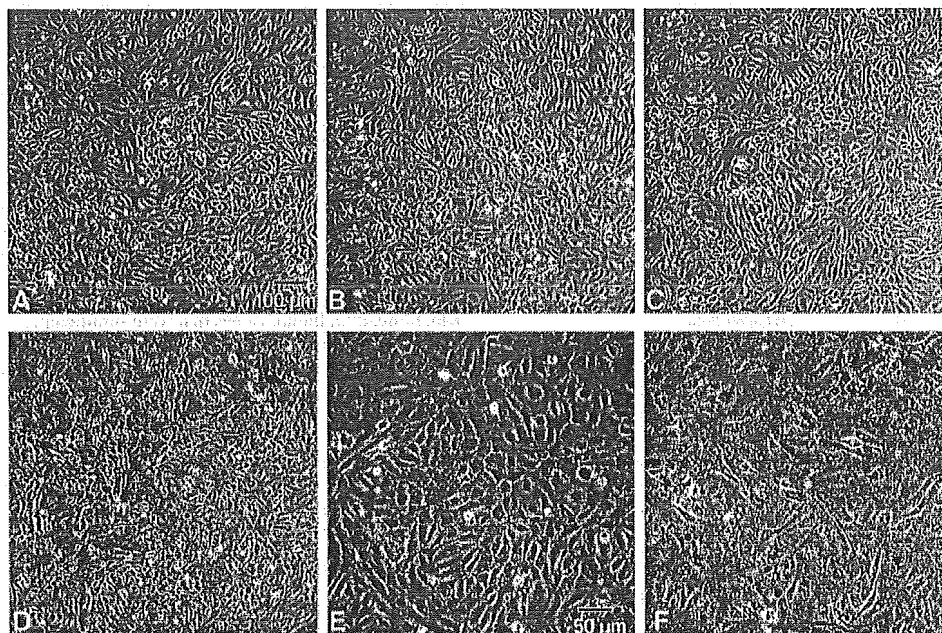


Fig 2. Representative photomicrographs of human umbilical vein endothelial cells (HUVECs) treated with carbon black (CB). HUVECs at ~90% confluence were treated with CB (A,E: 0 μg/ml; B: 1 μg/ml; C: 10 μg/ml; D,F: 100 μg/ml) for 24 h. Scale bar: 100 μm (A–D) and 50 μm (E,F).

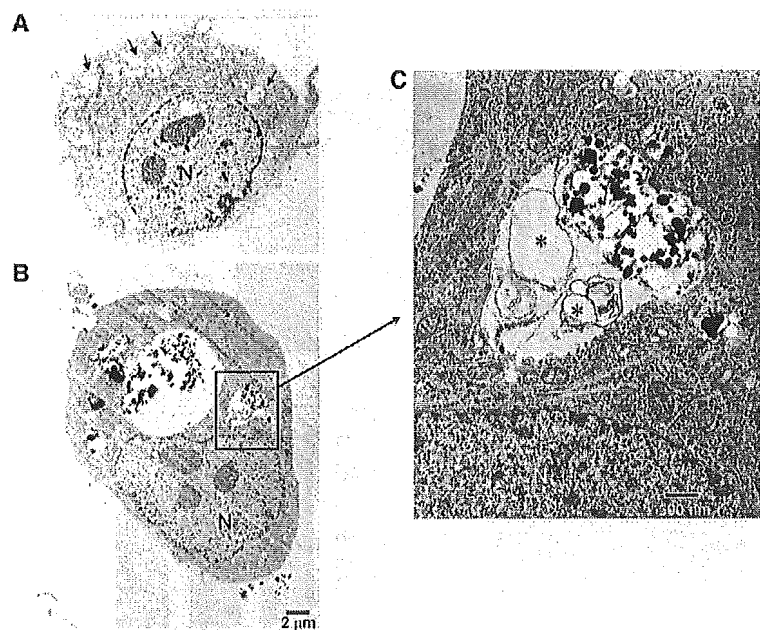


Fig 3. Ultrastructural features of human umbilical vein endothelial cells (HUVECs) treated with carbon black (CB). HUVECs were treated without (A, control) or with 100 μg/ml CB (B, C) for 24 h. Arrows, autophagic vacuoles; (*) membranous whorls. N, nucleus. Scale bar: 2 μm (A,B) and 500 nm (C).

Total RNA (2 μg) was amplified for each sample; cRNA (30 μg) was fragmented in 40 μl of 1× fragmentation buffer. Hybridization cocktails were made as described in the GeneChip Expression Analysis Technical Manual, 701021 Rev.5 (Section 2, Chapter 2: Eukaryotic Target Hybridiza-

tion) and hybridized to Human genome U133 plus2.0 chips at 60 rpm, 45°C for 16 h using the Hybridization Oven 640 110 V (Affymetrix 800138). The Human genome U133 plus2.0 chips comprise 54,000 probe sets and provide comprehensive coverage of the transcribed human genome on a

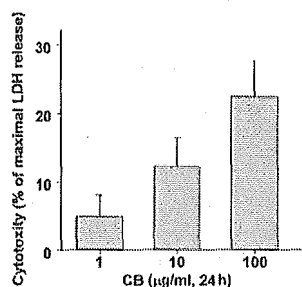


Fig 4. Carbon black (CB) induced cytotoxic injury in human umbilical vein endothelial cells (HUVECs) in a dose-dependent manner. HUVECs at ~90% confluence were treated with CB (1–100 µg/ml) for 24 h. Lactate dehydrogenase (LDH) released into supernatant was measured and maximal LDH release was assessed by freeze–thaw lysis of cells. Cytotoxicity was expressed relative to maximal LDH release (n=6–8).

single array to analyze the expression level of more than 47,000 transcripts and variants, including 38,500 well-characterized human genes plus approximately 6,500 new genes. GeneChips were stained with streptavidin-phycoerythrin using the Fluidics Station 450 (Affymetrix 00-0079). After extensive washing, GeneChips were scanned using a GeneChip Scanner 3000 (Affymetrix 00-0074) and the data were analyzed using the GeneChip Operating Software version 1.1 (Affymetrix 690036) according to the GeneChip Expression Analysis Data Analysis Fundamentals (Chapter

4: First-Order Data Analysis and Data Quality Assessment and Chapter 5: Statistical Algorithms Reference; <http://www.affymetrix.com/support/technical/manuals.affx>). To allow comparison, all chips were scaled to a target intensity of 500 based on all probe sets on each chip. Comparison of the GeneChip array data was obtained using the KURABO custom analysis services (KURABO Industries Ltd, Osaka, Japan, the authorized service provider of Affymetrix Japan K.K., Tokyo, Japan). Hierarchical cluster analysis was performed using Avadis Software version 3.3 for Windows (proprietary product of Strand Genomics Pvt. Ltd, Bangalore, India). Genes that were significantly upregulated by more than 2-fold (top 89 genes, Table 1, Fig 9A) or downregulated by more than –0.5-fold (top 99 genes, Table 2, Fig 9B) in 2 independent experiments are summarized.

Statistical Analysis

Data are shown as mean ± SEM. Statistical evaluations were performed using unpaired Student's t-test and values of $p < 0.05$ were considered statistically significant.

Results

Effects of CB on HUVECs

Cytotoxic Morphological Changes To examine the direct effects of environmental air pollution on vascular ECs, cultured HUVECs were treated with CB (1–100 µg/ml) for 24 h. This induced cytotoxic morphological changes such as cytosolic vacuole formation, cell disorientation, and

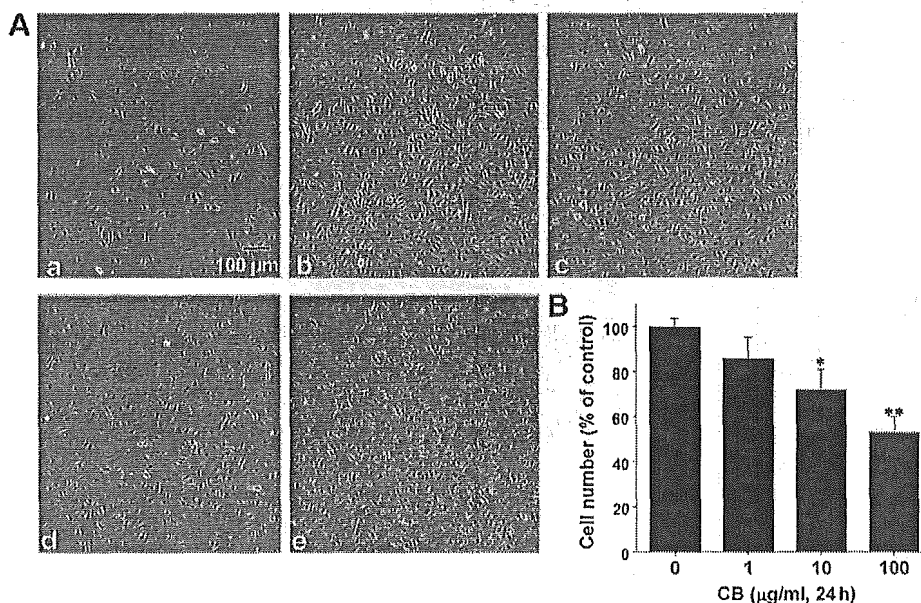


Fig 5. Carbon black (CB) inhibited cell growth in a dose-dependent manner. Human umbilical vein endothelial cells (HUVECs) at ~30% confluence were treated with CB (1–100 µg/ml) for 24 h. (A) Representative photomicrographs of CB for 24 h (a: at start; b: 0 µg/ml; c: 1 µg/ml; d: 10 µg/ml; e: 100 µg/ml). Scale bar: 100 µm (B) Total number of living cells was counted using water-soluble tetrazolium salt (WST-8). Results are shown as percentage relative to control (n=4). * $p < 0.05$ and ** $p < 0.01$ compared with control.

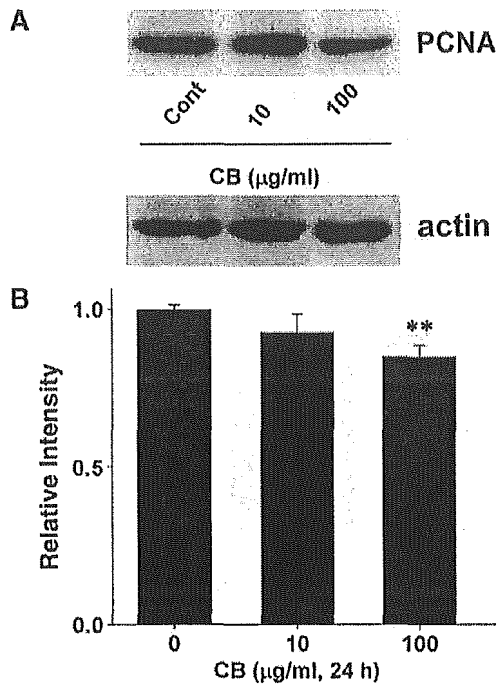


Fig 6. Carbon black (CB) inhibited expression of proliferation marker in human umbilical vein endothelial cells (HUVECs). After HUVECs at ~30% confluence were treated with CB (0, 10 or 100 µg/ml) for 24 h, total cell lysates were harvested. (A) Proliferating cell nuclear antigen (PCNA) expression determined by Western blotting. Equal protein loading was confirmed based on total actin antibody. (B) PCNA expression is shown as the fold-change relative to control (n=7–13). **p<0.01 compared with control.

decreased density in a dose-dependent manner (Fig 2A–F). We next performed an ultrastructural analysis using transmission electron microscopy. The cytoplasm of non-treated HUVECs (control; Fig 3A) contained a number of organelles and small vesicles. It has been reported that in vascular smooth muscle cells the formation of small vesicles occurs under normal physiological conditions for the removal of abnormal proteins and other cytoplasmic macromolecules.¹³ Treatment of HUVECs with CB (100 µg/ml, 24 h) caused extensive vacuolization and internalization of CB (Fig 3B), mainly within autophagic vacuoles, which contained membranous whorls (Fig 3C). Of note, there were a number of CB particles less than 100 nm within the vacuoles.

Increased Release of LDH To quantitatively assess EC injury by CB, we measured endothelial LDH release, a marker of cell death and injury of the plasma membrane. Treatment of HUVECs with CB (1–100 µg/ml, 24 h) increased LDH release into culture medium in a dose-dependent manner (Fig 4; 5.3±3.1% at 1 µg/ml, 12.2±4.2% at 10 µg/ml, and 22.4±5.3% at 100 µg/ml; n=6–8).

Antiproliferative Effects To examine the effects of CB on cell growth, HUVECs at approximately 30% confluence were treated with CB (1–100 µg/ml) for 24 h and then the total number of living cells was measured using WST-8. HUVECs growth was inhibited in a dose-dependent manner (Fig 5A). Quantitative analysis (Fig 5B) revealed that

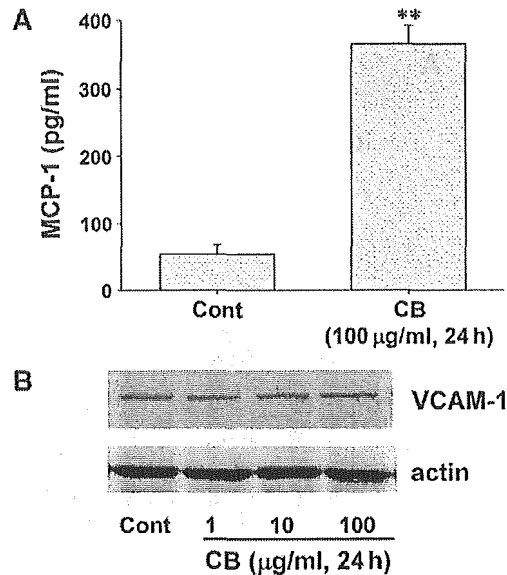


Fig 7. Carbon black (CB) increased proinflammatory chemokine but not leukocyte adhesion molecule in human umbilical vein endothelial cells (HUVECs). After HUVECs at ~90% confluence were treated with CB (1–100 µg/ml) for 24 h, (A) culture medium and (B) total cell lysates were harvested. (A) Monocyte chemoattractant protein (MCP)-1 released into supernatant was measured and its concentration expressed as pg/ml. **p<0.01 compared with control (n=5). (B) Vascular cell adhesion molecule (VCAM)-1 expressions determined by Western blotting. Equal protein loading was confirmed using total actin antibody (n=4).

cell growth was significantly inhibited from 28.0±9.3% (10 µg/ml CB, n=4, p<0.05) to 46.7±7.0% (100 µg/ml CB, n=4, p<0.01). We next examined the effects of CB on the expression of PCNA, which is specifically expressed in the S phase of the cell cycle.¹⁴ Western blotting showed that PCNA expression was significantly suppressed by 100 µg/ml CB compared with controls (Fig 6A,B; 15.0±3.5% inhibition, n=13, p<0.01).

Increased Level of Pro-Inflammatory Chemokines We next examined the effects of CB on the expressions of pro-inflammatory molecules, because in addition to EC injury, inflammation is another key initiating process for atherosclerosis. MCP-1, acting through its receptor CCR2, appears to play an early and important role in the recruitment of monocytes to atherosclerotic lesions,¹⁵ and it has been suggested that the serum concentration of MCP-1 is an independent risk factor for progression of atherosclerosis.¹⁶ CB (100 µg/ml, 24 h) significantly increased the production of MCP-1 in HUVECs (Fig 7A, 55.1±14.2 pg/ml in control vs 366.0±26.0 pg/ml in CB, n=5, p<0.01). Vascular cell adhesion molecule (VCAM)-1 participate in the recruitment of leukocytes by inducing their firm adhesion to the activated endothelium.¹⁷ Western blotting revealed that the expression levels of VCAM-1 were similar between the controls and CB-treated HUVECs (Fig 7B, n=4).

Suppression of Expressions of Gap Junctions and Endothelial NO Synthase (eNOS) Because impairment of the membrane permeability of ECs is crucial for the initiation of atherosclerosis,^{18,19} the effects of CB on the expression

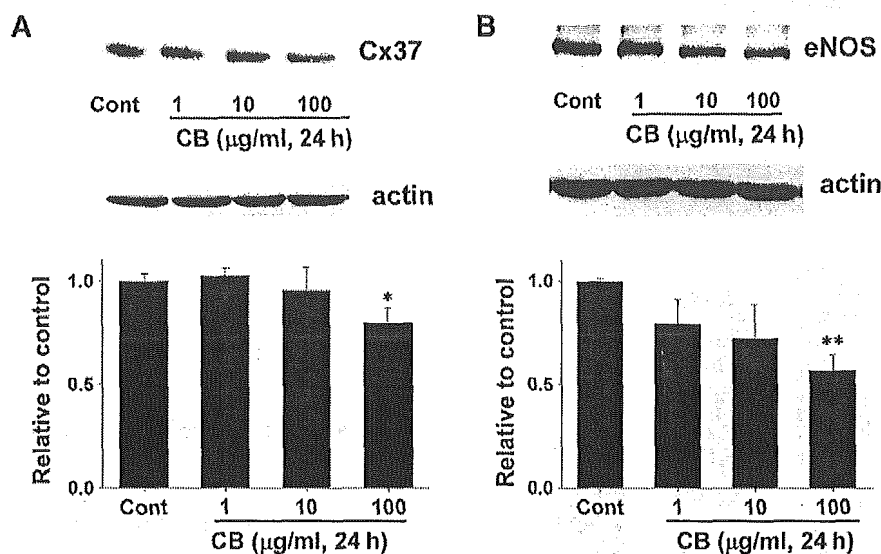


Fig 8. Carbon black (CB) inhibited expressions of connexin37 (Cx37) and endothelial nitric oxide synthase (eNOS) in human umbilical vein endothelial cells (HUVECs). After HUVECs at ~90% confluence were treated with CB (1–100 µg/ml) for 24 h, total cell lysates were harvested. (A) Cx37 and (B) eNOS expressions were determined by Western blotting. Equal protein loading was confirmed using total actin antibody. Expression is shown as the fold-change relative to control (n=4–6 (A) and n=3–5 (B)). *p<0.05 and **p<0.01 compared with control.

Table 1 List of Top 89 Probe Sets Upregulated by Carbon Black (CB) Identified on U133 Chips

Probe set ID	GenBank accession	Gene symbol	Gene name	Ratio 1 (fold)	Ratio 2 (fold)
200939_s_at	NM_012102	RERE	Arginine-glutamic acid dipeptide (RE) repeats	2.08	3.23
201566_x_at	D13891	ID2	Inhibitor of DNA binding 2, dominant negative helix-loop-helix protein	2.25	2.39
202637_s_at	A1608725	ICAM1	Intercellular adhesion molecule 1 (CD54), human rhinovirus receptor	5.29	2.13
202638_s_at	NM_000207	ICAM1	Intercellular adhesion molecule 1 (CD54), human rhinovirus receptor	5.20	5.33
202672_s_at	NM_001674	ATF3	Activating transcription factor 3	3.02	4.85
202768_at	NM_006732	FOSB	FBJ murine osteosarcoma viral oncogene homolog B	28.41	8.97
202859_x_at	NM_000584	IL8	Interleukin 8	2.29	2.34
203665_at	NM_002133	HMOX1	Heme oxygenase (decycling) 1	4.13	2.31
203808_s_at	NM_001078	VCAM1	Vascular cell adhesion molecule 1	3.96	5.39
204114_at	NM_007361	NID2	Nidogen 2 (osteonidogen)	2.04	2.20
204472_at	NM_005261	GEM	GTP binding protein overexpressed in skeletal muscle	4.28	4.84
204595_s_at	A1300520	STC1	Stanniocalcin 1	2.57	2.27
204622_x_at	NM_006186	NR4A2	Nuclear receptor subfamily 4, group A, member 2	13.88	4.12
204698_at	NM_002201	ISG20	Interferon stimulated gene 20kDa	3.76	4.06
204748_at	NM_000963	PTGS2	Prostaglandin-endoperoxide synthase 2 (prostaglandin G/H synthase and cyclooxygenase)	3.26	2.43
204802_at	NM_004165	RRAD	Ras-related associated with diabetes	21.54	7.03
204948_s_at	NM_013409	FST	Follistatin	3.91	3.18
205290_s_at	NM_001200	BMP2	Bone morphogenetic protein 2	2.28	2.00
205680_at	NM_002425	MMP10	Matrix metalloproteinase 10 (stromelysin 2)	2.79	2.18
205822_s_at	NM_002130	HMGCS1	3-hydroxy-3-methylglutaryl-Coenzyme A synthase 1 (soluble)	3.11	2.52
206211_at	NM_000450	SELE	Selectin E (endothelial adhesion molecule 1)	9.91	4.16
206463_s_at	NM_005794	DHRS2	Dehydrogenase/reductase (SDR family) member 2	33.63	41.57
206942_s_at	NM_002674	PMCH	Pro-melanin-concentrating hormone	7.95	5.09
207148_x_at	NM_016599	MYOZ2	Myozenin 2	6.87	2.54
207343_at	NM_020426	LYZL6	Lyszyme-like 6	3.62	4.81
207850_at	NM_002090	CXCL3	Chemokine (C-X-C motif) ligand 3	3.03	2.96
209189_at	BC004496	FOS	V-fos FBJ murine osteosarcoma viral oncogene homolog	5.57	13.67
209277_at	AL574096	TFPI2	Tissue factor pathway inhibitor 2	7.22	4.00
209278_s_at	L27624	TFPI2	Tissue factor pathway inhibitor 2	5.24	3.25
209419_at	AH023200	C22orf19	Chromosome 22 open reading frame 19	4.64	3.04
209774_x_at	M57731	CXCL2	Chemokine (C-X-C motif) ligand 2	2.71	2.60
209785_s_at	AF065214	PLA2G4C	Phospholipase A2, group IVC (cytosolic, calcium-independent)	2.99	2.98
209795_at	L07535	CD69	CD69 antigen (p60, early T-cell activation antigen)	2.03	2.32
210139_s_at	L03203	PMP22	Peripheral myelin protein 22	2.28	2.07

210511_s_at	M13436	INHBA	Inhibin, β A (activin A, activin AB a polypeptide)	2.37	2.81
210675_s_at	U77917	PTPRR	Protein tyrosine phosphatase, receptor type, R	2.18	2.97
211123_at	D87920	SLC5A5	Solute carrier family 5 (sodium iodide symporter), member 5	2.19	2.11
213355_at	A1989567	SIAT10	ST3 β -galactoside α -2,3-sialyltransferase 6	3.45	2.02
213375_s_at	N80918	CG018		2.39	2.13
213782_s_at	BF939176	MYOZ2	Myozenin 2	2.02	3.09
214079_at	AK000345	DHRS2	Dehydrogenase/reductase (SDR family) member 2	20.09	77.60
214321_at	BF440025	NOV	Nephroblastoma overexpressed gene	32.32	5.05
215430_at	AA757089	GK2	Glycerol kinase 2	6.27	12.75
216598_s_at	S69738	CCL2	Chemokine (C-C motif) ligand 2	5.33	4.31
217054_at	AF007194	MUC3B	Mucin 3B	11.59	2.65
217589_at	AW300309	RAB40A	RAB40A, member RAS oncogene family	7.51	3.55
219368_at	NM_021963	NAP1L2	Nucleosome assembly protein 1-like 2	5.99	2.12
219408_s_at	NM_017949	CUEDC1	CUE domain containing 1	2.53	2.11
220014_at	NM_016644	LOC51334		2.31	24.75
220116_at	NM_021614	KCNN2	Potassium intermediate/small conductance calcium-activated channel, subfamily N, member 2	2.75	9.52
220243_at	NM_014155	HSPC063	BTB (POZ) domain containing 15	3.40	3.93
220266_s_at	NM_004235	KLF4	Kruppel-like factor 4 (gut)	2.18	3.64
220542_s_at	NM_016583	PLUNC	Palate, lung and nasal epithelium carcinoma associated	2.18	2.08
221524_s_at	AF272036	RRAGD	Ras-related GTP binding D	4.80	8.50
221555_s_at	AU145941	CDC14B	CDC14 cell division cycle 14 homolog B (<i>S. cerevisiae</i>)	3.04	2.05
221750_at	BG035985	HMGCS1	3-hydroxy-3-methylglutaryl-Coenzyme A synthase 1 (soluble)	2.18	2.15
33304_at	U88964	ISG20	Interferon stimulated gene 20kDa	2.12	2.01
222486_s_at	AF060152	ADAMTS1	A disintegrin-like and metalloprotease (reprolysin type) with thrombospondin type 1 motif, 1	3.37	2.27
226632_at	AL513673	CYGB	Cytoglobin	2.24	2.05
226731_at	AA156873	PELO	Pelota homolog (<i>Drosophila</i>)	9.41	4.61
226847_at	BF438173	FST	Follistatin	4.32	4.77
226991_at	AA489681	NEATC2	Nuclear factor of activated T-cells, cytoplasmic, calcineurin-dependent 2	3.10	2.04
227140_at	AI343467	INHBA	Inhibin, beta A (activin A, activin AB alpha polypeptide)	2.07	2.17
228038_at	AI669815	SOX2	SRY (sex determining region Y)-box 2	2.23	2.07
230657_at	AI423466	CLOCK	Clock homolog (mouse)	2.29	11.50
230906_at	AI859620	NUP62	Nucleoporin 62kDa	6.24	2.46
231042_s_at	AA809487	CAMK2D	Calcium/calmodulin-dependent protein kinase (CaM kinase) II delta	2.97	2.13
231615_at	AU157698	CGA	Glycoprotein hormones, alpha polypeptide	3.93	4.11
233652_at	AI431345	SCML1	Sex comb on midleg-like 1 (<i>Drosophila</i>)	3.21	22.28
237885_at	AW589793	SOX21	SRY (sex determining region Y)-box 21	10.16	12.97
239998_at	AI990484	C7orf53	Chromosome 10 open reading frame 53	4.23	2.49
240156_at	AA417099	RFX2	Regulatory factor X, 2 (influences HLA class II expression)	5.11	3.05
240793_at	BF224054	TTN	Titin	2.60	4.25
242593_at	AI833186	KIAA0143		5.33	3.38
242792_at	AA004487	NFIB	Nuclear factor I/B	2.60	2.34
244056_at	AW293443	UNQ541		12.21	13.96
244084_at	AI432340	PGGT1B	Protein geranylgeranyltransferase type I, beta subunit	9.05	8.77
1553157_at	AB055703	LHX4	LIM homeobox 4	11.17	4.64
1553428_at	NM_173675	FLJ33708		14.17	14.84
1554514_at	BC013753	FLJ20581		21.23	6.46
1554569_at	BC036391	CUGBP2	CUG triplet repeat, RNA binding protein 2	2.18	3.27
1554741_s_at	AF523265	FLJ30435		11.89	2.43
1554804_u_at	BC030524	CLDN19	Claudin 19	2.05	4.42
1554997_u_at	AY151288	PTGS2	Prostaglandin G/H synthase 2 (prostaglandin G/H synthase and cyclooxygenase)	4.34	2.94
1556773_at	M31157	PTH1H	Parathyroid hormone-like hormone	3.67	2.85
1559121_s_at	AI767566	ARIH2	Ariadne homolog 2 (<i>Drosophila</i>)	2.07	2.36
1561589_u_at	AB053319	NBEAL1	Neurobeachin-like 1	7.70	2.20
1568589_at	AFT13014	C7orf74	Chromosome 10 open reading frame 74	7.61	12.19
1570022_at	BC038182	C3orf1	Chromosome 3 open reading frame 1	2.14	23.82

Ratio 1: CB100,24h-1/Control1; Ratio 2: CB100,24h-2/Control2.

of endothelial gap junctions were examined. CB (100 μ g/ml, 24 h) significantly inhibited the expression of connexin37 in HUVECs (Fig 8A, 20.8 \pm 7.4% inhibition, n=6, p<0.05). Endothelium-derived nitric oxide (NO) is known to be anti-atherogenic and anti-thrombogenic²⁰ and Western blotting demonstrated that CB (100 μ g/ml, 24 h) significantly suppressed eNOS expression (Fig 8B, 43.4 \pm 7.7% inhibition, n=5, p<0.01).

Microarray Analysis

We performed the microarray analysis using total RNA from HUVECs treated without or with CB (100 μ g/ml,

24 h). Results from 2 independent samples are summarized in Tables 1 and 2. Hierarchical cluster analysis of differentially expressed genes is shown in Fig 9A,B. The data showed that several inflammation-related genes, including ICAM1 (intercellular adhesion molecule 1), interleukin 8, HMOX1 (heme oxygenase 1), VCAM-1, PTGS2 (prostaglandin-endoperoxide synthase 2), SELE (selectin E), and CCL2 (chemokine (C-C motif) ligand 2, also known as MCP-1), are significantly upregulated by CB (Table 1). Although changes in the gene expression level for MCP-1 (Table 1), eNOS (NOS3, mean ratio (fold)=0.8, data not shown), and connexin37 (GJA4, mean ratio (fold)=0.8, data

Table 2 List of Top 99 Probe Sets Downregulated by Carbon Black (CB) Identified on U133 Chips

Probe set ID	GenBank accession	Gene symbol	Gene name	Ratio 1 (fold)	Ratio 2 (fold)
203003_at	AL530331	MEF2D	MADS box transcription enhancer factor 2, polypeptide D (myocyte enhancer factor 2D)	0.49	0.42
203876_s_at	A1761713	MMP11	Matrix metalloproteinase 11 (stromelysin 3)	0.19	0.22
204196_s_at	NM_004571	PKNOX1	PBX/knotted 1 homeobox 1	0.45	0.31
205749_at	NM_000499	CYP1A1	Cytochrome P450, family 1, subfamily A, polypeptide 1	0.02	0.35
206679_at	NM_001163	APBA1	Amyloid beta (A4) precursor protein-binding, family A, member 1 (X11)	0.13	0.11
207045_at	NM_017667	FLJ20097		0.37	0.45
207252_at	NM_003669	INE1	Inactivation escape 1	0.33	0.42
207323_s_at	NM_002385	MBP	Myelin basic protein	0.34	0.47
209047_at	AL518391	AQP1	Aquaporin 1 (channel-forming integral protein, 28kDa)	0.07	0.30
209841_s_at	AL442092	LRRN3	Leucine rich repeat neuronal 3	0.15	0.09
211516_at	M96651	IL5RA	Interleukin 5 receptor, alpha	0.38	0.36
211880_s_at	AF152507	PCDHGC3	Protocadherin gamma subfamily C, 3	0.33	0.13
213517_at	AW103422	PCBP2	Poly(rC) binding protein 2	0.41	0.46
213593_s_at	AW978896	TRA2A		0.38	0.47
213948_s_at	AL564838	IGSF4B	Immunoglobulin superfamily, member 4B	0.48	0.45
214184_at	AW195837	NPF	Neuropeptide FF-amide peptide precursor	0.30	0.33
215209_at	AU143984	SEC24D	SEC24 related gene family, member D (S. cerevisiae)	0.13	0.48
215567_at	AU144919	C14orf111	Chromosome 14 open reading frame 111	0.20	0.28
215786_at	AK022170	HBXAP	Hepatitis B virus X associated protein	0.39	0.42
216147_at	AL353942	38606	Septin 11	0.20	0.41
219957_at	NM_017987	RUFY2	RUN and FYVE domain containing 2	0.43	0.36
220988_s_at	NM_030945	C1QTNF3	C1q and tumor necrosis factor related protein 3	0.31	0.45
221397_at	NM_023921	TAS2R10	Taste receptor, type 2, member 10	0.40	0.29
226655_s_at	BF126274	STX17	Syntaxin 17	0.43	0.42
227223_at	BE466173	RNPC2	RNA-binding region (RNPI, RRM) containing 2	0.48	0.46
228030_at	A1041522	RBM6	RNA binding motif protein 6	0.45	0.41
228173_at	AA810695	GNAS	GNAS complex locus	0.28	0.50
229193_at	AA005430	CRP		0.21	0.44
229365_s_at	BF475372	PPP1R3F	Protein phosphatase 1, regulatory (inhibitor) subunit 3F	0.22	0.35
229894_s_at	A1858067	RAB43	RAB43, member B oncogene family	0.32	0.43
229996_s_at	BF196224	PCGF5	Polycomb group ring finger 5	0.40	0.35
230562_at	R45298	MCPH1	Microcephaly, primary autosomal recessive 1	0.31	0.08
230609_at	BF510429	ENTH		0.42	0.42
231400_s_at	BE219311	TIMM22	Translocase of inner mitochondrial membrane 22 homolog (yeast)	0.48	0.24
232059_at	A1433419	DSCAML1	Down syndrome cell adhesion molecule like 1	0.34	0.08
232291_at	AA256157	C13orf25	Chromosome 13 open reading frame 25	0.22	0.36
232757_at	AV705679	MTSS1	Metastasis suppressor 1	0.23	0.35
233193_s_at	AK000455	MGC16733		0.34	0.38
233349_at	A1800481	TLK2	Touled-like kinase 2	0.09	0.17
233637_at	AU146919	WDR42A	WD repeat domain 42A	0.41	0.37
234047_at	AK024127	SNRP70	Small nuclear ribonucleoprotein 70kDa polypeptide (RNP antigen)	0.44	0.49
234562_s_at	AK000115	CKLF5F8	Chemokine-like factor super family 8	0.27	0.38
234859_at	AL137352	DKFZp434G0625		0.33	0.40
235926_at	AL312527	ANAPC5	Anaphase promoting complex subunit 5	0.45	0.44
235927_at	BE350122	XPO1	Exportin 1 (CRM1 homolog, yeast)	0.39	0.45
236076_at	AW241549	LOC257396		0.21	0.04
237305_at	AW450381	CDH2	Cadherin 2, type 1, N-cadherin (neuronal)	0.47	0.21
237814_at	BF062366	SNCAIP	Synuclein, alpha-interacting protein (synphilin)	0.43	0.07
238279_s_at	BF062155	COL4A3BP	Collagen, type IV, alpha 3 (Goodpasture antigen) binding protein	0.17	0.46
238513_at	BF905445	PRRG4	Proline rich Gla (G-carboxyglutamic acid) 4 (transmembrane)	0.02	0.05
238563_at	AV762916	TPRT	Trans-prenyltransferase	0.40	0.37
238797_at	BF059582	TRIM11	Tripartite motif-containing 11	0.46	0.34
238982_at	AW665791	DENR	Density-regulated protein	0.08	0.14
239243_at	AA279654	ZNF638	Zinc finger protein 638	0.09	0.12
239441_at	A1359527	LOC284323		0.41	0.33
239448_at	A1475033	SMAD3	SMAD, mothers against DPP homolog 3 (Drosophila)	0.24	0.40
239583_s_at	BG354573	PSG4	Pregnancy specific beta-1-glycoprotein 4	0.49	0.45
239678_at	AL041224	APIGBP1	API gamma subunit binding protein 1	0.33	0.43
240008_at	A1955765	ARID1B	AT rich interactive domain 1B (SWI1-like)	0.02	0.16
240349_at	AV693202	PRKAA2	Protein kinase, AMP-activated, alpha 2 catalytic subunit	0.49	0.35
240458_at	A1242023	FAM20C	Family with sequence similarity 20, member C	0.49	0.39
240655_at	BE502785	ALCAM	Activated leukocyte cell adhesion molecule	0.08	0.46
241027_at	BE858373	OPA1	Optic atrophy 1 (autosomal dominant)	0.20	0.10
241174_at	AV647279	AP4E1	Adaptor-related protein complex 4, epsilon 1 subunit	0.47	0.07
241757_s_at	AA947051	D2LIC		0.42	0.38
241785_at	AA613520	DNAJC11	DnaJ (Hsp40) homolog, subfamily C, member 11	0.41	0.08
241977_s_at	A1634523	RAB3C	RAB3C, member RAS oncogene family	0.38	0.40
242279_at	R11494	SDFR1	Stromal cell derived factor receptor 1	0.31	0.20
242343_s_at	H57111	ZNF518	Zinc finger protein 518	0.41	0.11
242480_at	AA868356	MYST3	MYST histone acetyltransferase (monocytic leukemia) 3	0.44	0.18

242805_at	AW081636	CCNC	Cyclin C	0.40	0.36
242937_at	AV763408	FOXK2	Forkhead box K2	0.34	0.43
243198_at	AA020920	TEX9		0.27	0.29
243650_at	AI217992	PLEKHH2	Pleckstrin homology domain containing, family H (with MyTH4 domain) member 2	0.05	0.20
244778_s_at	N63691	M11S1	Membrane component, chromosome 11, surface marker 1	0.44	0.41
244803_at	A1335191	YAP	YY1 associated protein 1	0.48	0.41
1552536_at	NM_145206	VTH1A	Vesicle transport through interaction with t-SNAREs homolog 1A (yeast)	0.12	0.30
1552621_at	BQ613856	MGC13098		0.45	0.34
1552935_at	NM_152694	ZCCHC5	Zinc finger, CCHC domain containing 5	0.41	0.20
1553145_at	BC010030	FLJ39653		0.18	0.35
1553693_s_at	NM_032783	CBR4		0.41	0.39
1554328_at	BC041485	STXBP4	Syntaxin binding protein 4	0.33	0.49
1554707_at	BC034293	C9orf68	Chromosome 9 open reading frame 68	0.34	0.21
1554960_at	BC040018	MGC48998		0.44	0.48
1555878_at	AK094613	RPS24	Ribosomal protein S24	0.39	0.47
1556088_at	AK098491	RIP		0.44	0.28
1556322_s_at	AW952920	TJP4	Tight junction protein 4 (peripheral)	0.18	0.38
1557223_at	AK057533	RBPMS	RNA binding protein with multiple splicing	0.38	0.33
1557759_at	AW102805	FLJ10241		0.43	0.10
1559063_at	AL355689	C21orf63	Chromosome 21 open reading frame 63	0.31	0.31
1559691_at	BC032767	NDUFS1	NADH dehydrogenase (ubiquinone) Fe-S protein 1, 75 kDa (NADH-coenzyme Q reductase)	0.02	0.45
1559746_a_at	AK096662	FLJ90036		0.11	0.14
1560776_at	AU121725	HIP2	Huntingtin interacting protein 2	0.44	0.43
1561175_at	AK092513	LOC283482		0.08	0.43
1564272_a_at	AK098735	KLHDC1	Kelch domain containing 1	0.01	0.19
1564699_at	BC017920	C5orf4	Chromosome 5 open reading frame 4	0.01	0.04
1568627_at	BC032531	KIAA1387		0.47	0.44
1568782_at	BC027851	RP2	Retinitis pigmentosa 2 (X-linked recessive)	0.39	0.15
1569408_at	BC016012	EIF2C4	Eukaryotic translation initiation factor 2C, 4	0.07	0.10

Ratio 1: CB100,24h-1/Control1; Ratio 2: CB100,24h-2/Control2.

not shown) were in accordance with those in the protein expression level (Figs 7A, 8), that of VCAM-1 (increase, Table 1) was dissociated from the change in protein expression (no difference, Fig 7B). Further validation is necessary by comparing the microarray data with quantitative reverse transcriptase-polymerase chain reaction (RNA level) and/or Western blotting (protein level) data.

Discussion

The major findings of the present study are that CB directly affects vascular ECs, causing cytotoxic injury, inflammatory responses, and inhibition of cell growth. To the best of our knowledge, this is the first demonstration of the direct effects of CB on the vascular endothelium. Novel aspects of this study include the finding that CB increases the production of the inflammatory chemokine, MCP-1, while it suppresses the expressions of gap junctions and eNOS in ECs. Although further validation is necessary, microarray analysis supports the finding that the expression of genes related vascular inflammation is upregulated by CB. Because EC injury, inflammation, and impairment of membrane integrity are closely related to the initiation of atherosclerosis,^{18,19} and NO is anti-atherogenic and anti-thrombogenic,²⁰ the direct effects of nano-sized air pollution on ECs could represent one mechanism by which air pollution exacerbates atherosclerosis and ischemic heart disease (IHD).

We propose that EC injury is most likely mediated via the direct physical contact of CB with the cells, including the internalization of CB and excess autophagic vacuole formation. Because CB has minimal metallic components,²¹ it seems unlikely that the effects were mediated by chemical reactions. In addition to the direct effects of CB, it could also be possible that the changes were mediated secondari-

ly via cytokines and/or reactive oxygen species produced by the injured ECs. There is also a report that examined the toxic effects of several nano-materials, including metals (TiO₂, SiO₂, Co, Ni, polyvinyl chloride), on ECs and it showed that only Co particles had a cytotoxic effect on ECs.²² Thus it seems likely that there are variations in the effects of nano-particles and that our results could be specific to CB.

Associations between EC injury/inflammation and the development of atherosclerosis are well documented.^{18,19} Injury and/or denudation of ECs triggers the attachment of leukocytes to the subendothelial region and promotes transendothelial migration of cells (ie, the EC inflammatory process), initiating atherosclerosis. Platelets also readily accumulate where there are injured ECs, which may promote thrombus formation. Interestingly, our results showed that MCP-1 (ie, chemokine for leukocytes) but not VCAM-1 (leukocyte adhesion molecules), was induced by CB, suggesting a specific role of CB in the vascular inflammatory pathways. Impairment of EC growth may be related to impairment of angiogenesis, the formation of new blood vessels, from the existing vascular bed. Because angiogenesis is important for the maintenance of vascular integrity in both wound healing and the formation of collateral vessels in response to tissue ischemia,²³ the present finding that CB inhibits EC growth may indicate an association with the progression of IHD.

In addition to EC injury/inflammation and inhibition of cell growth, we observed that CB suppressed the expression of connexin37 and eNOS protein in the vascular endothelium. Substantial evidence suggests altered expression of gap junctions during atherogenesis. Kwak et al demonstrated in mouse and human atheroma regions that expression of endothelial connexin37 was suppressed compared with normal aorta.²⁴ Yeh et al² also reported reduced expres-

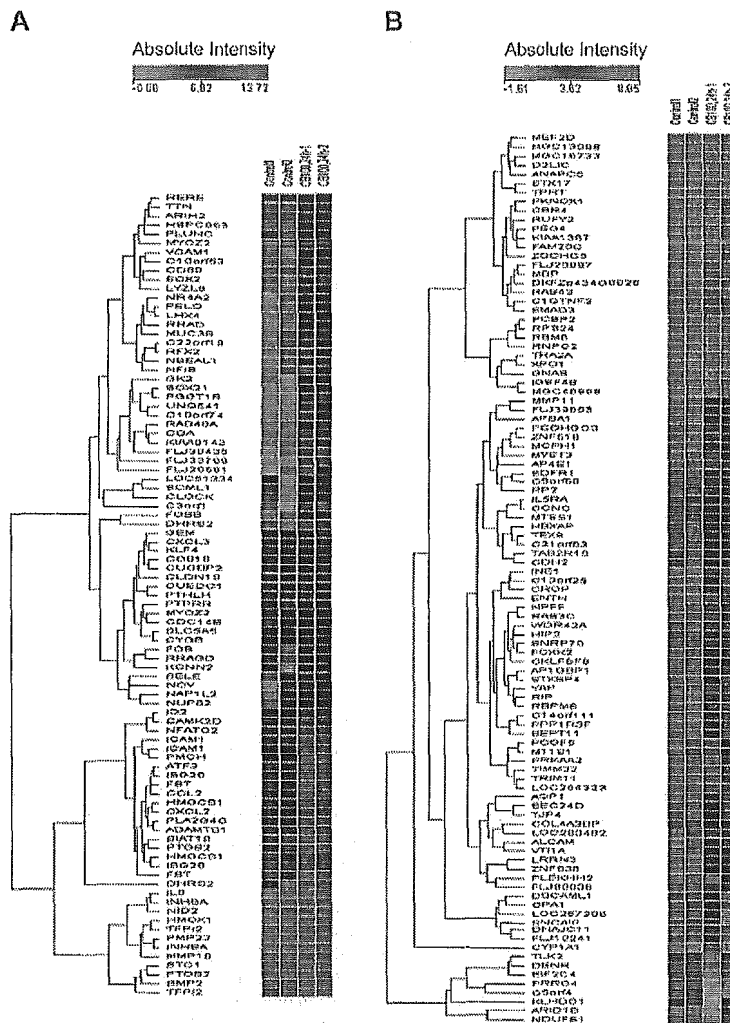


Fig 9. Hierarchical cluster analysis of differentially expressed genes (A) upregulated (top 89 genes) and (B) downregulated (top 99 genes) by carbon black (CB). Total RNA was isolated from human umbilical vein endothelial cells (HUVECs) treated without (Control) or with 100 μ g/ml CB (CB100, 24h) for 24h. Hierarchical trees were generated using Avadis Software, Version 3.3.

sion of connexin37 in the ECs of hyperlipidemic mouse aorta, and that expression recovered with simvastatin treatment.²⁵ ECs apparently have to physically uncouple in order to allow transendothelial migration of leukocytes. Inflammatory mediators, such as tumor necrosis factor- α ^{12,26} and lipopolysaccharide²⁷ induce leukocyte adhesion molecules such as VCAM-1, but also downregulate connexin37 expression in vascular ECs.^{28,29} The inhibition of connexin37 expression by CB thus seems to be associated with EC inflammatory process such as adhesion and/or transmigration of leukocytes. Finally, a genetic polymorphism has been identified in the human connexin37 protein, apparently representing a prognostic marker for atherosclerotic plaque development.³⁰

Impairment of the NO-producing function of ECs is associated with progression of atherosclerosis and IHD via several mechanisms.^{31,32} For example, NO is known to inhibit platelet aggregation and thus prevent thrombus forma-

tion,³⁰ and because it inhibits leukocyte adhesion³³ and smooth muscle proliferation,³⁴ NO is atheroprotective. It has recently been shown that NO regulates large artery stiffness by altering smooth muscle tone.³⁵ Impairment of the NO-producing function seems likely to increase cardiovascular risk factors by enhancing arterial stiffness, because a number of cardiovascular risk factors, including hypertension³⁶ and diabetes³⁷ are associated with increased stiffness of large arteries. An example of the likely mechanism involves the induction of isolated systolic hypertension, which predominantly results from increased stiffness of large arteries, rather than elevated peripheral vascular resistance. Of note, it has been reported that EC cytotoxicity caused by organic compounds in diesel exhaust particles (DEP), including polyaromatic hydrocarbons, nitroaromatic hydrocarbons, heterocyclics, quinines, aldehydes and aliphatic hydrocarbons, was inhibited by NOS inhibitor, suggesting the involvement of peroxynitrite formation due to the organic

particles-mediated superoxide production.³⁶

The present study used CB to mimic traffic-derived nanoparticles. Measurement of particle size revealed a mean diameter of approximately 250 nm (50% accumulation, Fig 1). DEP have a similar volume (mass) distribution.³⁹ It was demonstrated by Nemmar et al that particles less than 100 nm in diameter may translocate into the blood circulation^{8,9} and recent studies have also demonstrated that such particles are more toxic to cells, presumably because of their larger surface area and greater reactivity.⁵ Although the mass distribution of CB <100 nm was only 5.6% in our preparations, the number of smaller sized CB should be much higher than larger sized CB, as shown in DEP.³⁹ The ultrastructural evaluation showed a number of particles <100 nm within the autophagic vacuoles, which supports the concept.

The present study used 1–100 µg/ml of CB for in vitro experiments. Levels of PM (PM_{2.5}; particles <2.5 µm) are high, especially in the developing countries such as China. It has been reported that the maximal concentration of PM_{2.5} in Chongqing, one of the biggest cities in China, was 666 µg/ml³ (daily average)⁴⁰ which indicates that a person can inhale 9,590 µg of PM_{2.5} for 24 h, which is equivalent to 0.8 µg/ml when the extracellular fluid volume is 12 L for a 60 kg person. Thus it is estimated that the CB dosage used in the present study is 1–100-fold higher, but we believe that they are within the pathophysiologic ranges because (1) although the effects of 100 µg/ml CB were very strong, we observed dose-dependent (1–100 µg/ml) effects in the experiments, and (2) CB is hardly metabolized and cumulatively accumulates in EC over time. Inhalation toxicity of CB, especially on the cardiovascular system, needs to be examined.

In summary, the present study examined the direct effects of CB on vascular ECs to determine the mechanisms underlying air pollution-induced increases in atherosclerosis and IHD. We observed CB-mediated cytotoxic, pro-inflammatory, and antiproliferative effects, in addition to inhibition of gap junctions and expression of eNOS proteins, which could represent a possible mechanism. Further examinations using blood vessels and animal models are required to show that traffic-derived nanoparticles have a key role in air-pollution-induced cardiovascular diseases.

Acknowledgments

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環境ナノ粒子の動脈硬化促進メカニズムの検討

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欧米の大規模疫学調査により、大気中に排出された有害ナノ粒子の人体への曝露が心筋梗塞などの虚血性心疾患の罹病率・致死率を有意に上昇させることが知られている。近年、ナノ粒子が肺から吸入された後、循環血中に移動することがヒトで確認された。このことは、ナノ粒子が直接、血管系（とくに血管内皮細胞）に作用し、動脈硬化、高血圧、心筋梗塞に対するリスクとなっている可能性を示唆する。本研究により、ナノ粒子が直接血管内皮細胞に作用し、細胞障害ならびに増殖抑制効果を示すこと、さらには炎症性メディエーター産生を促進することが明らかとなった。

はじめに

米国：NMMAPS (National Mortality and Morbidity Air Pollution Study) およびヨーロッパ：APHEA-2 (Air Pollution and Health: a European Approach) における大規模疫学調査によると、大気中有害微小粒子状物質 (PM: particulate matter) の人体曝露量と循環器 (心血管) 系疾患の罹病率・致死率上昇は優位な相関を示す¹⁾。なかでも PM_{2.5} とよばれる粒径 2.5 ミクロン以下の微小粒子と循環器系疾患リスク上昇との相関がきわめて高い。現在までに明らかになりつつある PM による循環器系疾患リスク上昇のメカニズムは、(1) 肺における炎症が血行性に心血管系に広がる、(2) 血液凝固系亢進による血栓形成促進、(3) 自立神経系刺激を介した不整脈誘導である。さらに最近になって PM_{0.1}=UFP (ultra fine particle) とよばれる粒径 100 nm 以下のナノ粒子は肺から直接、循環血中に侵入することが確認された²⁾。よって、血中 UFP が直接、血管系あるいは血栓・線溶系に作用し、動脈硬化を促進させるメカニズムが十分に考えられるが、未解明である。さらに産業界でも近年、さ

まざまなナノマテリアルが実用化され始めているが、人体に対するその影響は未知であり、迅速な評価が必要である。本研究では、この分子メカニズムを解明するために、培養血管内皮細胞を用いて、とくにナノ粒子の血管系に対する直接作用 (急性効果) を検討した³⁾。

1. 方法

ヒト臍帯静脈内皮細胞 (HUVEC) にカーボンブラック (CB; 質量密度による平均粒径 250 nm) を 24 時間処置し、以下の 5 項目を検討した。CB は、内燃機関 (ディーゼルエンジンなど) から排出される微粒状物質を想定した試験用ナノ炭素粒子粉体である。

- 1) 光学顕微鏡、および電子顕微鏡による形態変化の観察。
- 2) LDH (lactate dehydrogenase) 放出量を指標とした細胞毒性の測定。
- 3) WST (水溶性テトラゾリウム塩) を用いた生細胞数の測定による細胞増殖能の変化。
- 4) ウエスタンブロット、ELISA 法を用いた炎症性蛋

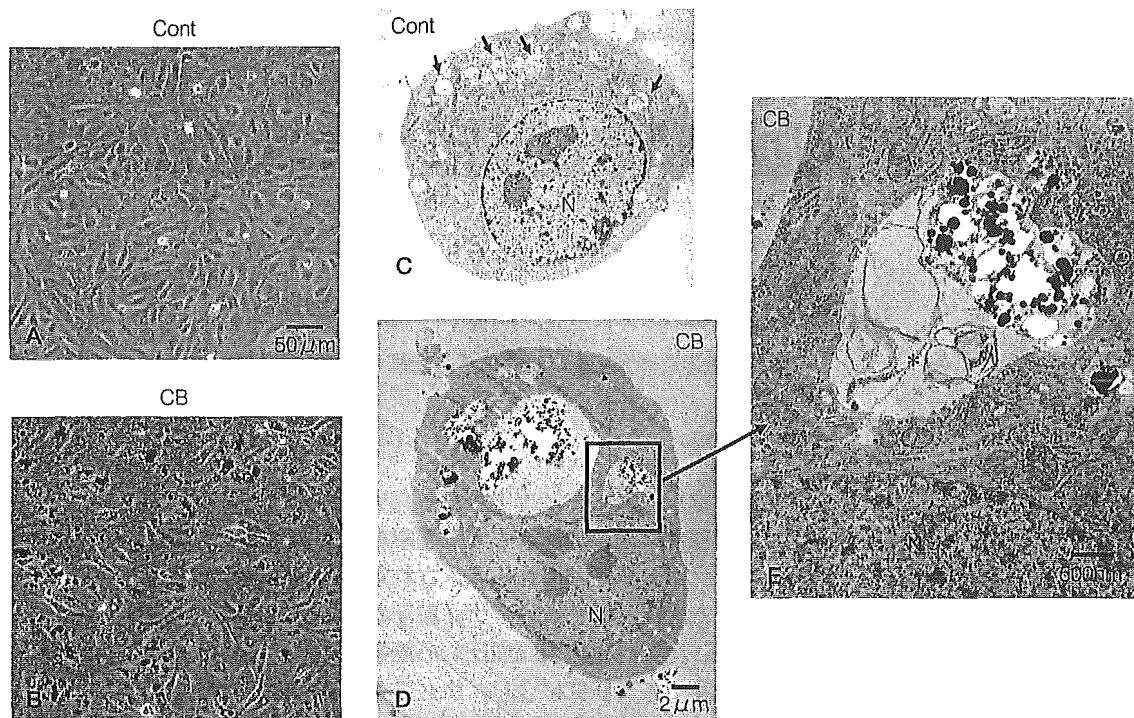


図 1. カーボンブラック (CB) 処置後, 血管内皮細胞の光学および電子顕微鏡像
 A: 正常内皮細胞 (光学顕微鏡レベル), B: CB 処置後内皮細胞 (光学顕微鏡レベル), C: 正常内皮細胞 (電子顕微鏡レベル), D: CB 処置後内皮細胞 (電子顕微鏡レベル), E: CB の食胞への取り込み。
 矢印: 食胞, *: 拡張した食胞, N: 核。
 (Yamawaki H *et al*, 2006³⁾より改変引用)

白およびケモカイン発現変化の測定。

5) マイクロアレイを用いた遺伝子発現プロフィール決定。

2. 結果

1) カーボンブラック処置後血管内皮細胞の光学および電子顕微鏡像

HUVEC に CB (100 $\mu\text{g}/\text{ml}$) を 24 時間処置すると細胞障害性の形態的变化; 細胞質内の食胞形成, 配列の乱れ, 細胞密度の粗鬆化が光学顕微鏡レベルで観察された (図 1 A, B)。さらに電子顕微鏡観察から, CB の細胞質内食胞への取り込みおよび自食作用 (オートファジー様) の顕著な亢進が確認された (図 1 C~E)。

2) カーボンブラックの血管内皮細胞に対する細胞毒性および増殖抑制作用

CB による細胞障害の程度を定量的に測定するために

LDH アッセイをおこなった。培地中への LDH 放出量は細胞および膜障害の指標となる。CB 処置により濃度依存性 (1~100 $\mu\text{g}/\text{ml}$, 24 h) の細胞障害が誘導された (図 2 A)。100 $\mu\text{g}/\text{ml}$ CB 処置により 22.4% (n=8) の細胞および細胞膜が障害を受けた。また, 細胞増殖能の変化を調べるために約 30%コンフルエントの HUVEC に CB を 24 時間処置した後, 水溶性テトラゾリウム塩 (WST-8) を用いて生細胞数を測定した。その結果, CB は濃度依存性 (1~100 $\mu\text{g}/\text{ml}$) に内皮細胞増殖抑制効果をもつことが示された (図 2 B)。100 $\mu\text{g}/\text{ml}$ CB 処置群は, コントロール群 (CB: 0 $\mu\text{g}/\text{ml}$) とくらべて 46.7% (n=4) 細胞数が少なかった。

3) カーボンブラック処置による内皮細胞の炎症性マーカー変化

細胞障害・死と並び内皮細胞の炎症性変化は, 動脈硬化発症に密接に関与することが知られている。ELISA 法を用いて炎症性ケモカイン MCP-1 (monocyte chemo-

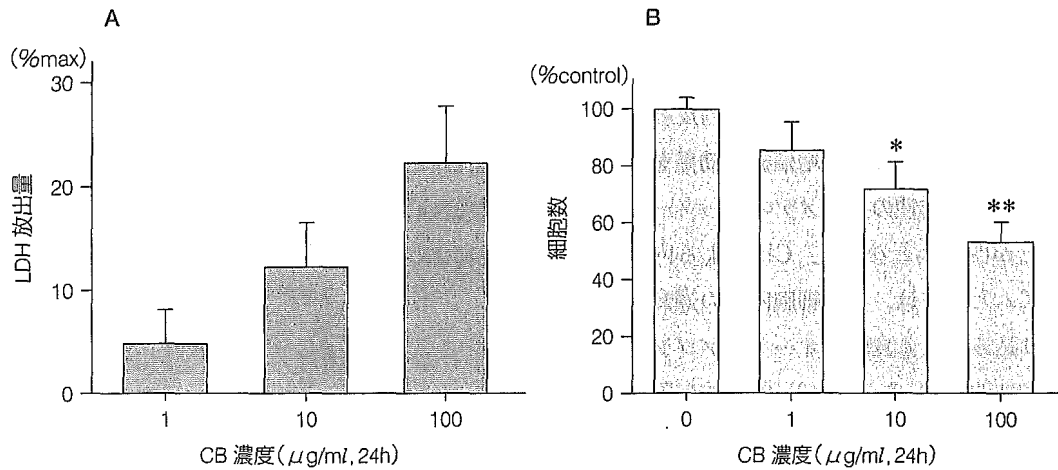


図 2. カーボンブラック (CB) の血管内皮細胞に対する細胞毒性 (A) および増殖抑制作用 (B)
 * $p < 0.05$ vs CB 0 mg/ml, ** $p < 0.01$ vs CB 0 mg/ml.
 (Yamawaki H *et al*, 2006³⁾より改変引用)

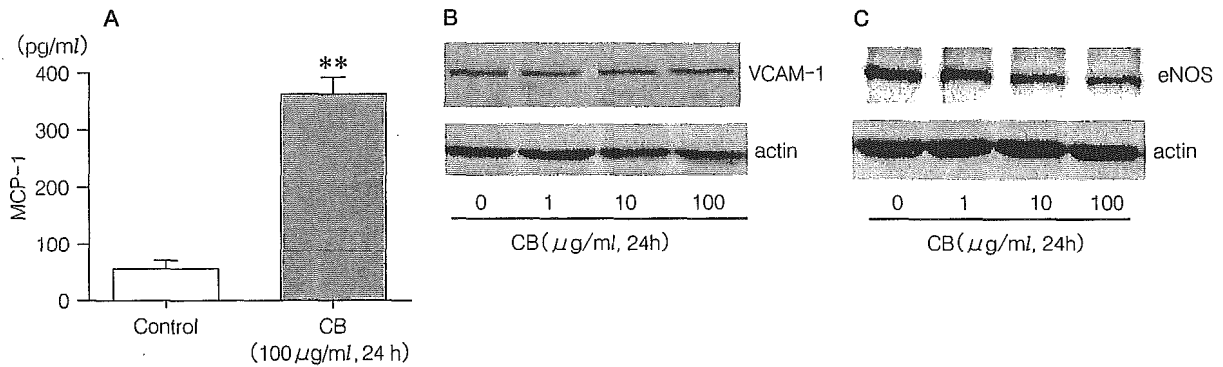


図 3. カーボンブラック (CB) 処置による内皮細胞の炎症性マーカー変化
 A: ELISA 法による MCP-1 産生量の比較, B: ウェスタンブロットによる VCAM-1 発現量の比較, C: ウェスタンブロットによる eNOS 発現量の比較.
 ** $p < 0.01$ vs Control.
 (Yamawaki H *et al*, 2006³⁾より改変引用)

attractant protein-1)産生量を測定したところ, CB(100 $\mu\text{g/ml}$, 24 h)処置により 6.6 倍増加した(コントロール群: 55.1 pg/ml vs CB 処置群: 366.0 pg/ml , $n=5$, 図 3 A). 一方, ウェスタンブロットにより白血球接着因子 VCAM-1 (vascular cell adhesion molecule) 発現は変化しないことが示された(図 3 B). さらに CB 処置により, 内皮細胞型 NO (nitric oxide) 合成酵素 (eNOS: endothelial NO synthase) 発現が有意に抑制されることが明らかとなった(図 3 C).

4) カーボンブラック処置による遺伝子発現変化
 Affymetrix Human genome U 133 plus 2.0 チップを用いたマイクロアレイ解析から, CB(100 $\mu\text{g/ml}$, 24 h)処置により ICAM 1 (intracellular adhesion molecule 1, 5.3 fold vs コントロール), IL 8 (interleukin 8, 2.3 fold), PTGS 2 (prostaglandin-endoperoxide synthase, 3.6 fold), CCL 2 (chemokine [C-C motif] ligand 2 = MCP-1, 4.8 fold), HMOX 1 (heme oxygenase 1, 3.2 fold), SELE (selectin E, 7.0 fold) など炎症性メディエーター遺伝子群発現が増加することが示された。

3. 考察

以上の結果から、カーボンナノ粒子は、内皮細胞に直接作用し、細胞障害作用ならびに増殖抑制効果をもつこと、さらに動脈硬化促進性の炎症メディエーター発現を増加させることが明らかとなった。CBによる内皮細胞障害のメカニズムとしては、(1)細胞内への過剰カーボンナノ粒子取り込みによる食胞(オートファゴソーム)過形成などの物理的要因、さらに(2)物理的に障害を受けた内皮細胞から産生されるサイトカイン、活性酸素産生などによる二次的な障害が推察される。

おわりに

内皮細胞障害、炎症性反応は動脈硬化発症の初期に深

く関与すること、またNOには血管拡張作用、血小板凝集抑制作用があり、カーボンナノ粒子によるeNOS発現低下は高血圧症、易血栓性、心筋梗塞移行に関与する可能性があることから、ナノ粒子が直接、血管系に作用し虚血性心疾患に対するリスクとなっている可能性が本研究により示唆されたと考えられる。

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