

and oxidative stress contribute to tissue damage in several situations, such as ischemia–reperfusion injury in the brain, heart and kidney, future studies of CyPA-mediated function in appropriate models may reveal its significant role in other diseases. By blocking the vicious cycle that augments ROS production through the CyPA autocrine/paracrine signaling pathway, we may have a novel therapeutic tool for controlling cardiovascular diseases in the near future.

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References

- Shimokawa H. Primary endothelial dysfunction: Atherosclerosis. *J Mol Cell Cardiol* 1999; **31**: 23–37.
- Shimokawa H, Tomoike H, Nabeyama S, Yamamoto H, Araki H, Nakamura M, et al. Coronary artery spasm induced in atherosclerotic miniature swine. *Science* 1983; **221**: 560–562.
- Berk BC, Alexander RW, Brock TA, Gimbrone MA Jr, Webb RC. Vasoconstriction: A new activity for platelet-derived growth factor. *Science* 1986; **232**: 87–90.
- Griendling KK, Berk BC, Ganz P, Gimbrone MA Jr, Alexander RW. Angiotensin II stimulation of vascular smooth muscle phosphoinositide metabolism [State of the art lecture]. *Hypertension* 1987; **9**: III181–III185.
- Berk BC. Vascular smooth muscle growth: Autocrine growth mechanisms. *Physiol Rev* 2001; **81**: 999–1030.
- Taniyama Y, Griendling KK. Reactive oxygen species in the vasculature: Molecular and cellular mechanisms. *Hypertension* 2003; **42**: 1075–1081.
- Griendling KK, Ushio-Fukai M. Redox control of vascular smooth muscle proliferation. *J Lab Clin Med* 1998; **132**: 9–15.
- Handschumacher RE, Harding MW, Rice J, Drugge RJ, Speicher DW. Cyclophilin: A specific cytosolic binding protein for cyclosporin A. *Science* 1984; **226**: 544–547.
- Harding MW, Handschumacher RE, Speicher DW. Isolation and amino acid sequence of cyclophilin. *J Biol Chem* 1986; **261**: 8547–8555.
- Siekierka JJ, Hung SH, Poe M, Lin CS, Sigal NH. A cytosolic binding protein for the immunosuppressant FK506 has peptidyl-prolyl isomerase activity but is distinct from cyclophilin. *Nature* 1989; **341**: 755–757.
- Bierer BE. Cyclosporin A, FK506, and rapamycin: Binding to immunophilins and biological action. *Chem Immunol* 1994; **59**: 128–155.
- Marks AR. Cellular functions of immunophilins. *Physiol Rev* 1996; **76**: 631–649.
- Galat A, Metcalfe SM. Peptidylproline cis/trans isomerases. *Prog Biophys Mol Biol* 1995; **63**: 67–118.
- Ryffel B, Woerly G, Greiner B, Haendler B, Mihatsch MJ, Foxwell BM. Distribution of the cyclosporine binding protein cyclophilin in human tissues. *Immunology* 1991; **72**: 399–404.
- Marks WH, Harding MW, Handschumacher R, Marks C, Lorber MI. The immunochemical distribution of cyclophilin in normal mammalian tissues. *Transplantation* 1991; **52**: 340–345.
- Sarris AH, Harding MW, Jiang TR, Aftab D, Handschumacher RE. Immunofluorescent localization and immunochemical determination of cyclophilin-A with specific rabbit antisera. *Transplantation* 1992; **54**: 904–910.
- Uittenbogaard A, Ying Y, Smart EJ. Characterization of a cytosolic heat-shock protein-caveolin chaperone complex: Involvement in cholesterol trafficking. *J Biol Chem* 1998; **273**: 6525–6532.
- Steinmann B, Bruckner P, Superti-Furga A. Cyclosporin A slows collagen triple-helix formation in vivo: Indirect evidence for a physiological role of peptidyl-prolyl cis-trans-isomerase. *J Biol Chem* 1991; **266**: 1299–1303.
- Zhu C, Wang X, Deinum J, Huang Z, Gao J, Modjtahedi N, et al. Cyclophilin A participates in the nuclear translocation of apoptosis-inducing factor in neurons after cerebral hypoxia-ischemia. *J Exp Med* 2007; **204**: 1741–1748.
- Krumrei U, Bang R, Schmidtchen R, Brune K, Bang H. Cyclophilin-A is a zinc-dependent DNA binding protein in macrophages. *FEBS Lett* 1995; **371**: 47–51.
- Price ER, Zydowsky LD, Jin MJ, Baker CH, McKeon FD, Walsh CT. Human cyclophilin B: A second cyclophilin gene encodes a peptidyl-prolyl isomerase with a signal sequence. *Proc Natl Acad Sci USA* 1991; **88**: 1903–1907.
- Schneider H, Charara N, Schmitz R, Wehrl S, Mikol V, Zurini MG, et al. Human cyclophilin C: Primary structure, tissue distribution, and determination of binding specificity for cyclosporins. *Biochemistry* 1994; **33**: 8218–8224.
- Bergsma DJ, Eder C, Gross M, Kersten H, Sylvester D, Appelbaum E, et al. The cyclophilin multigene family of peptidyl-prolyl isomerases: Characterization of three separate human isoforms. *J Biol Chem* 1991; **266**: 23204–23214.
- Baines CP, Kaiser RA, Purcell NH, Blair NS, Osinska H, Hambleton MA, et al. Loss of cyclophilin D reveals a critical role for mitochondrial permeability transition in cell death. *Nature* 2005; **434**: 658–662.
- Du H, Guo L, Fang F, Chen D, Sosunov AA, McKhann GM, et al. Cyclophilin D deficiency attenuates mitochondrial and neuronal perturbation and ameliorates learning and memory in Alzheimer's disease. *Nat Med* 2008; **14**: 1097–1105.
- Satoh K, Nigro P, Berk BC. Oxidative stress and vascular smooth muscle cell growth: A mechanistic linkage by cyclophilin A. *Antioxid Redox Signal* 2010; **12**: 675–682.
- Alexander RW. Hypertension and the pathogenesis of atherosclerosis: Oxidative stress and the mediation of arterial inflammatory response: A new perspective [Theodore Cooper Memorial Lecture]. *Hypertension* 1995; **25**: 155–161.
- Omar HA, Cherry PD, Mortelliti MP, Burke-Wolin T, Wolin MS. Inhibition of coronary artery superoxide dismutase attenuates endothelium-dependent and -independent nitrovasodilator relaxation. *Circ Res* 1991; **69**: 601–608.
- Baas AS, Berk BC. Differential activation of mitogen-activated protein kinases by H₂O₂ and O₂⁻ in vascular smooth muscle cells. *Circ Res* 1995; **77**: 29–36.
- Matoba T, Shimokawa H, Nakashima M, Hirakawa Y, Mukai Y, Hirano K, et al. Hydrogen peroxide is an endothelium-derived hyperpolarizing factor in mice. *J Clin Invest* 2000; **106**: 1521–1530.
- Takaki A, Monkawa K, Tsutsui M, Murayama Y, Tekes E, Yamagishi H, et al. Crucial role of nitric oxide synthases system in endothelium-dependent hyperpolarization in mice. *J Exp Med* 2008; **205**: 2053–2063.
- Clempus RE, Griendling KK. Reactive oxygen species signaling in vascular smooth muscle cells. *Cardiovasc Res* 2006; **71**: 216–225.
- Griendling KK, Minieri CA, Ollerenshaw JD, Alexander RW. Angiotensin II stimulates NADH and NADPH oxidase activity in cultured vascular smooth muscle cells. *Circ Res* 1994; **74**: 1141–1148.
- Rao GN, Berk BC. Active oxygen species stimulate vascular smooth muscle cell growth and proto-oncogene expression. *Circ Res* 1992; **70**: 593–599.
- Liao DF, Jin ZG, Baas AS, Daum G, Gygi SP, Aebbersold R, et al. Purification and identification of secreted oxidative stress-induced factors from vascular smooth muscle cells. *J Biol Chem* 2000; **275**: 189–196.
- Jin ZG, Melaragno MG, Liao DF, Yan C, Haendeler J, Suh YA, et al. Cyclophilin A is a secreted growth factor induced by oxidative stress. *Circ Res* 2000; **87**: 789–796.
- Jin ZG, Lungu AO, Xie L, Wang M, Wong C, Berk BC. Cyclophilin A is a proinflammatory cytokine that activates endothelial cells. *Arterioscler Thromb Vasc Biol* 2004; **24**: 1186–1191.
- Suzuki J, Jin ZG, Meoli DF, Matoba T, Berk BC. Cyclophilin A is secreted by a vesicular pathway in vascular smooth muscle cells. *Circ Res* 2006; **98**: 811–817.
- Sun J, Hemler ME. Regulation of MMP-1 and MMP-2 production through CD147/extracellular matrix metalloproteinase inducer interactions. *Cancer Res* 2001; **61**: 2276–2281.
- Pushkarsky T, Zybarth G, Dubrovsky L, Yurchenko V, Tang H, Guo H, et al. CD147 facilitates HIV-1 infection by interacting with virus-associated cyclophilin A. *Proc Natl Acad Sci USA* 2001; **98**: 6360–6365.
- Newby AC. Matrix metalloproteinases regulate migration, proliferation, and death of vascular smooth muscle cells by degrading matrix and non-matrix substrates. *Cardiovasc Res* 2006; **69**: 614–

- 624.
42. Mackay DJ, Hall A. Rho GTPases. *J Biol Chem* 1998; **273**: 20685–20688.
 43. Neco P, Giner D, Vinięra S, Borges R, Villarroel A, Gutierrez LM. New roles of myosin II during vesicle transport and fusion in chromaffin cells. *J Biol Chem* 2004; **279**: 27450–27457.
 44. Kimura K, Ito M, Amano M, Chihara K, Fukata Y, Nakafuku M, et al. Regulation of myosin phosphatase by Rho and Rho-associated kinase (Rho-kinase). *Science* 1996; **273**: 245–248.
 45. Satoh K, Nigro P, Matoba T, O'Dell MR, Cui Z, Shi X, et al. Cyclophilin A enhances vascular oxidative stress and the development of angiotensin II-induced aortic aneurysms. *Nat Med* 2009; **15**: 649–656.
 46. Griending KK, FitzGerald GA. Oxidative stress and cardiovascular injury. Part II: Animal and human studies. *Circulation* 2003; **108**: 2034–2040.
 47. Leopold JA, Loscalzo J. Oxidative enzymopathies and vascular disease. *Arterioscler Thromb Vasc Biol* 2005; **25**: 1332–1340.
 48. Ross R. Atherosclerosis is an inflammatory disease. *Am Heart J* 1999; **138**: S419–S420.
 49. Libby P. Inflammation in atherosclerosis. *Nature* 2002; **420**: 868–874.
 50. Li M, Fukagawa NK. Age-related changes in redox signaling and VSMC function. *Antioxid Redox Signal* 2010; **12**: 641–655.
 51. Inoue T, Node K. Molecular basis of restenosis and novel issues of drug-eluting stents. *Circ J* 2009; **73**: 615–621.
 52. Kim H, Kim WJ, Jeon ST, Koh EM, Cha HS, Ahn KS, et al. Cyclophilin A may contribute to the inflammatory processes in rheumatoid arthritis through induction of matrix degrading enzymes and inflammatory cytokines from macrophages. *Clin Immunol* 2005; **116**: 217–224.
 53. Damsker JM, Bukrinsky MI, Constant SL. Preferential chemotaxis of activated human CD4+ T cells by extracellular cyclophilin A. *J Leukoc Biol* 2007; **82**: 613–618.
 54. Yang Y, Lu N, Zhou J, Chen ZN, Zhu P. Cyclophilin A up-regulates MMP-9 expression and adhesion of monocytes/macrophages via CD147 signalling pathway in rheumatoid arthritis. *Rheumatology (Oxf)* 2008; **47**: 1299–1310.
 55. Wang L, Wang CH, Jia JF, Ma XK, Li Y, Zhu HB, et al. Contribution of cyclophilin A to the regulation of inflammatory processes in rheumatoid arthritis. *J Clin Immunol* 2010; **30**: 24–33.
 56. Satoh K, Matoba T, Suzuki J, O'Dell MR, Nigro P, Cui Z, et al. Cyclophilin A mediates vascular remodeling by promoting inflammation and vascular smooth muscle cell proliferation. *Circulation* 2008; **117**: 3088–3098.
 57. Jin ZG, Berk BC. SOXf: Redox mediators of vascular smooth muscle cell growth. *Heart* 2004; **90**: 488–490.
 58. Payeli SK, Schiene-Fischer C, Steffel J, Camici GG, Rozenberg I, Luscher TF, et al. Cyclophilin A differentially activates monocytes and endothelial cells: Role of purity, activity, and endotoxin contamination in commercial preparations. *Atherosclerosis* 2008; **197**: 564–571.
 59. Khromykh LM, Kulikova NL, Anfalova TV, Muranova TA, Abramov VM, Vasiliev AM, et al. Cyclophilin A produced by thymocytes regulates the migration of murine bone marrow cells. *Cell Immunol* 2007; **249**: 46–53.
 60. Daugherty A, Manning MW, Cassis LA. Angiotensin II promotes atherosclerotic lesions and aneurysms in apolipoprotein E-deficient mice. *J Clin Invest* 2000; **105**: 1605–1612.
 61. Daugherty A, Cassis L. Angiotensin II-mediated development of vascular diseases. *Trends Cardiovasc Med* 2004; **14**: 117–120.
 62. Thomas M, Gavrilu D, McCormick ML, Miller FJ Jr, Daugherty A, Cassis LA, et al. Deletion of p47phox attenuates angiotensin II-induced abdominal aortic aneurysm formation in apolipoprotein E-deficient mice. *Circulation* 2006; **114**: 404–413.
 63. Gavazzi G, Deffert C, Trocme C, Schappi M, Herrmann FR, Krause KH. NOX1 deficiency protects from aortic dissection in response to angiotensin II. *Hypertension* 2007; **50**: 189–196.
 64. Thompson RW, Baxter BT. MMP inhibition in abdominal aortic aneurysms. Rationale for a prospective randomized clinical trial. *Ann NY Acad Sci* 1999; **878**: 159–178.
 65. Manning MW, Cassis LA, Daugherty A. Differential effects of doxycycline, a broad-spectrum matrix metalloproteinase inhibitor, on angiotensin II-induced atherosclerosis and abdominal aortic aneurysms. *Arterioscler Thromb Vasc Biol* 2003; **23**: 483–488.
 66. Cassis LA, Rateri DL, Lu H, Daugherty A. Bone marrow transplantation reveals that recipient AT1a receptors are required to initiate angiotensin II-induced atherosclerosis and aneurysms. *Arterioscler Thromb Vasc Biol* 2007; **27**: 380–386.
 67. Habashi JP, Judge DP, Holm TM, Cohn RD, Loeys BL, Cooper TK, et al. Losartan, an AT1 antagonist, prevents aortic aneurysm in a mouse model of Marfan syndrome. *Science* 2006; **312**: 117–121.
 68. Libby P, Okamoto Y, Rocha VZ, Folco E. Inflammation in atherosclerosis: Transition from theory to practice. *Circ J* 2010; **74**: 213–220.
 69. Kunieda T, Minamino T, Nishi J, Tateno K, Oyama T, Katsuno T, et al. Angiotensin II induces premature senescence of vascular smooth muscle cells and accelerates the development of atherosclerosis via a p21-dependent pathway. *Circulation* 2006; **114**: 953–960.
 70. Bruemmer D, Collins AR, Noh G, Wang W, Territo M, Arias-Magallona S, et al. Angiotensin II-accelerated atherosclerosis and aneurysm formation is attenuated in osteopontin-deficient mice. *J Clin Invest* 2003; **112**: 1318–1331.
 71. Yoshimura K, Aoki H, Ikeda Y, Fujii K, Akiyama N, Furutani A, et al. Regression of abdominal aortic aneurysm by inhibition of c-Jun N-terminal kinase. *Nat Med* 2005; **11**: 1330–1338.
 72. Sun J, Sukhova GK, Yang M, Wolters PJ, MacFarlane LA, Libby P, et al. Mast cells modulate the pathogenesis of elastase-induced abdominal aortic aneurysms in mice. *J Clin Invest* 2007; **117**: 3359–3368.
 73. Vanhoutte PM. Endothelial dysfunction: The first step toward coronary arteriosclerosis. *Circ J* 2009; **73**: 595–601.
 74. Higashi Y, Noma K, Yoshizumi M, Kihara Y. Endothelial function and oxidative stress in cardiovascular diseases. *Circ J* 2009; **73**: 411–418.
 75. Nigro P, Abe JI, Woo CH, Satoh K, McClain C, O'Dell MR, et al. PKC ζ decreases eNOS protein stability via inhibitory phosphorylation of ERK5. *Blood* 2010 [Epub ahead of print].
 76. Morikawa K, Shimokawa H, Matoba T, Kubota H, Akaike T, Talukder MA, et al. Pivotal role of Cu,Zn-superoxide dismutase in endothelium-dependent hyperpolarization. *J Clin Invest* 2003; **112**: 1871–1879.
 77. Maseri A, Beltrame JF, Shimokawa H. Role of coronary vasoconstriction in ischemic heart disease and search for novel therapeutic targets. *Circ J* 2009; **73**: 394–403.
 78. Satoh K, O'Dell MR, Liao DF, Cui Z, Nigro P, Mohan A, et al. Cyclophilin A is a novel proinflammatory cytokine that accelerates development of atherosclerosis. *Circulation* 2008; **118**: S309–S310.
 79. Nigro P, Satoh K, O'Dell MR, Soe N, Cui Z, Mohan A, et al. Cyclophilin A mediates endothelial damage and promotes recruitment of inflammatory cells and atherosclerosis. *Circulation* 2009; **120**: S1096–S1097.
 80. Mehta PK, Griending KK. Angiotensin II cell signaling: Physiological and pathological effects in the cardiovascular system. *Am J Physiol Cell Physiol* 2007; **292**: C82–C97.
 81. Sadoshima J, Xu Y, Slayter HS, Izumo S. Autocrine release of angiotensin II mediates stretch-induced hypertrophy of cardiac myocytes in vitro. *Cell* 1993; **75**: 977–984.
 82. Nakamura K, Fushimi K, Kouchi H, Mihara K, Miyazaki M, Ohe T, et al. Inhibitory effects of antioxidants on neonatal rat cardiac myocyte hypertrophy induced by tumor necrosis factor- α and angiotensin II. *Circulation* 1998; **98**: 794–799.
 83. Akki A, Zhang M, Murdoch C, Brewer A, Shah AM. NADPH oxidase signaling and cardiac myocyte function. *J Mol Cell Cardiol* 2009; **47**: 15–22.
 84. Shibata R, Ouchi N, Murohara T. Adiponectin and cardiovascular disease. *Circ J* 2009; **73**: 608–614.
 85. Takimoto E, Kass DA. Role of oxidative stress in cardiac hypertrophy and remodeling. *Hypertension* 2007; **49**: 241–248.
 86. Suzuki N, Ohneda O, Takahashi S, Higuchi M, Mukai HY, Nakahata T, et al. Erythroid-specific expression of the erythropoietin receptor rescued its null mutant mice from lethality. *Blood* 2002; **100**: 2279–2288.
 87. Satoh K, Kagaya Y, Nakano M, Ito Y, Ohta J, Tada H, et al. Important role of endogenous erythropoietin system in recruitment of endothelial progenitor cells in hypoxia-induced pulmonary hypertension in mice. *Circulation* 2006; **113**: 1442–1450.
 88. Nakano M, Satoh K, Fukumoto Y, Ito Y, Kagaya Y, Ishii N, et al. Important role of erythropoietin receptor to promote VEGF expression and angiogenesis in peripheral ischemia in mice. *Circ Res* 2007; **100**: 662–669.
 89. Do e Z, Fukumoto Y, Takaki A, Tawara S, Ohashi J, Nakano M, et al. Evidence for Rho-kinase activation in patients with pulmonary arterial hypertension. *Circ J* 2009; **73**: 1731–1739.
 90. Satoh K, Fukumoto Y, Sugimura K, Tatebe S, Miura Y, Miyamichi S, et al. Cyclophilin A mediates pulmonary vascular remodeling by rho-kinase activation in patients with pulmonary hypertension.

- Circulation* 2010; **122**(Suppl): (in press).
91. Hayashida K, Fujita J, Miyake Y, Kawada H, Ando K, Ogawa S, et al. Bone marrow-derived cells contribute to pulmonary vascular remodeling in hypoxia-induced pulmonary hypertension. *Chest* 2005; **127**: 1793–1798.
 92. Satoh K, Berk BC. Circulating smooth muscle progenitor cells: Novel players in plaque stability. *Cardiovasc Res* 2008; **77**: 445–447.
 93. Satoh K, Fukumoto Y, Nakano M, Sugimura K, Nawata J, Demachi J, et al. Statin ameliorates hypoxia-induced pulmonary hypertension associated with down-regulated stromal cell-derived factor-1. *Cardiovasc Res* 2009; **81**: 226–234.
 94. Abe K, Shimokawa H, Morikawa K, Uwatoku T, Oi K, Matsumoto Y, et al. Long-term treatment with a Rho-kinase inhibitor improves monocrotaline-induced fatal pulmonary hypertension in rats. *Circ Res* 2004; **94**: 385–393.
 95. Itoh T, Nagaya N, Murakami S, Fujii T, Iwase T, Ishibashi-Ueda H, et al. C-type natriuretic peptide ameliorates monocrotaline-induced pulmonary hypertension in rats. *Am J Respir Crit Care Med* 2004; **170**: 1204–1211.
 96. Shimokawa H, Takeshita A. Rho-kinase is an important therapeutic target in cardiovascular medicine. *Arterioscler Thromb Vasc Biol* 2005; **25**: 1767–1775.
 97. Wang YX, Martin-McNulty B, da Cunha V, Vincelette J, Lu X, Feng Q, et al. Fasudil, a Rho-kinase inhibitor, attenuates angiotensin II-induced abdominal aortic aneurysm in apolipoprotein E-deficient mice by inhibiting apoptosis and proteolysis. *Circulation* 2005; **111**: 2219–2226.
 98. Higashi M, Shimokawa H, Hattori T, Hiroki J, Mukai Y, Morikawa K, et al. Long-term inhibition of Rho-kinase suppresses angiotensin II-induced cardiovascular hypertrophy in rats in vivo: Effect on endothelial NAD(P)H oxidase system. *Circ Res* 2003; **93**: 767–775.
 99. Ejiri J, Inoue N, Tsukube T, Munezane T, Hino Y, Kobayashi S, et al. Oxidative stress in the pathogenesis of thoracic aortic aneurysm: Protective role of statin and angiotensin II type 1 receptor blocker. *Cardiovasc Res* 2003; **59**: 988–996.
 100. Guo H, Majumdar G, Jensen TC, Biswas C, Toole BP, Gordon MK. Characterization of the gene for human EMMPRIN, a tumor cell surface inducer of matrix metalloproteinases. *Gene* 1998; **220**: 99–108.
 101. Haug C, Lenz C, Diaz F, Bachem MG. Oxidized low-density lipoproteins stimulate extracellular matrix metalloproteinase inducer (EMMPRIN) release by coronary smooth muscle cells. *Arterioscler Thromb Vasc Biol* 2004; **24**: 1823–1829.
 102. Yurchenko V, Zybarth G, O'Connor M, Dai WW, Franchin G, Hao T, et al. Active site residues of cyclophilin A are crucial for its signaling activity via CD147. *J Biol Chem* 2002; **277**: 22959–22965.
 103. Chen XF, Wang JA, Hou J, Gui C, Tang LJ, Chen XQ, et al. Extracellular matrix metalloproteinase inducer (EMMPRIN) is present in smooth muscle cells of human aneurysmal aorta and is induced by angiotensin II in vitro. *Clin Sci (Lond)* 2009; **116**: 819–826.
 104. Venkatesan B, Valente AJ, Prabhu SD, Shanmugam P, Delafontaine P, Chandrasekar B. EMMPRIN activates multiple transcription factors in cardiomyocytes, and induces interleukin-18 expression via Rac1-dependent PI3K/Akt/IKK/NF-kappaB and MKK7/JNK/AP-1 signaling. *J Mol Cell Cardiol* 2010; **49**: 655–663.

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Cyclophilin A Mediates Vascular Remodeling by Promoting Inflammation and Vascular Smooth Muscle Cell Proliferation

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Background—Oxidative stress, generated by excessive reactive oxygen species, promotes cardiovascular disease. Cyclophilin A (CyPA) is a 20-kDa chaperone protein secreted from vascular smooth muscle cells (VSMCs) in response to reactive oxygen species that stimulates VSMC proliferation and inflammatory cell migration in vitro; however, the role CyPA plays in vascular function in vivo remains unknown.

Methods and Results—We tested the hypothesis that CyPA contributes to vascular remodeling by analyzing the response to complete carotid ligation in CyPA knockout mice, wild-type mice, and mice that overexpress CyPA in VSMC (VSMC-Tg). After carotid ligation, CyPA expression in vessels of wild-type mice increased dramatically and was significantly greater in VSMC-Tg mice. Reactive oxygen species–induced secretion of CyPA from mouse VSMCs correlated significantly with intracellular CyPA expression. Intimal and medial hyperplasia correlated significantly with CyPA expression after 2 weeks of carotid ligation, with marked decreases in CyPA knockout mice and increases in VSMC-Tg mice. Inflammatory cell migration into the intima was significantly reduced in CyPA knockout mice and increased in VSMC-Tg mice. Additionally, VSMC proliferation assessed by Ki67⁺ cells was significantly less in CyPA knockout mice and was increased in VSMC-Tg mice. The importance of CyPA for intimal and medial thickening was shown by strong correlations between CyPA expression and the number of both inflammatory cells and proliferating VSMCs in vivo and in vitro.

Conclusions—In response to low flow, CyPA plays a crucial role in VSMC migration and proliferation, as well as inflammatory cell accumulation, thereby regulating flow-mediated vascular remodeling and intima formation. (*Circulation*. 2008;117:3088-3098.)

Key Words: reactive oxygen species ■ vasculature ■ remodeling ■ atherosclerosis ■ restenosis

The interaction between endothelial cells (ECs) and vascular smooth muscle cells (VSMCs) plays an important role in regulating vascular integrity. ECs secrete several vasoactive substances, including nitric oxide and prostacyclin, which maintain vascular integrity and limit intima formation.¹ VSMCs contain numerous sources of reactive oxygen species (ROS; ie, H₂O₂, O₂⁻, and ·OH), including NADPH oxidases, xanthine oxidase, the mitochondrial respiratory chain, lipoxygenases, and nitric oxide synthases.² It has become clear that increases in ROS represent 1 of the pathogenic mechanisms for vascular disease.^{3,4} ROS have been implicated in the pathogenesis of intima formation in part by promoting VSMC growth,^{5,6} as well as by stimulating proinflammatory events.⁷⁻⁹ Recently, we proposed a pathogenic role for a newly discovered class of ROS mediators that

we term SOXF, for secreted oxidative stress–induced factors.^{10,11} Among these factors, cyclophilin A (CyPA) expression is induced by ROS, and CyPA is secreted in response to ROS.¹⁰⁻¹² We demonstrated that CyPA stimulates proinflammatory signals in ECs and VSMCs, including expression of E-selectin and vascular cell adhesion molecule (VCAM)-1.¹³ Furthermore, we showed that secreted CyPA stimulates the ERK1/2 (extracellular signal-regulated kinases) and JAK/STAT (Janus kinases/signal transducers and activators of transcription) pathways in vitro, thereby increasing DNA synthesis in VSMCs.¹⁰ In addition to effects on vascular cells, CyPA has been shown to be a chemoattractant for inflammatory cells^{14,15} and promotes activation of matrix metalloproteinases (MMPs), especially MMP-1 and MMP-9.^{14,16} Therefore, CyPA is a key mediator that affects ECs, VSMCs, and

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inflammatory cell function during oxidative stress. Here, we tested the hypothesis that CyPA contributes to vascular remodeling by analyzing the response to complete carotid ligation in CyPA knockout (CyPA^{-/-}) mice, wild-type (WT) mice, and mice that overexpress CyPA specifically in VSMC (VSMC-Tg).

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Methods

CyPA Knockout Mice

All animal experiments were conducted in accordance with experimental protocols that were approved by the Institutional Animal Care and Use Committee at the University of Rochester (2002-135A). CyPA^{-/-} mice were purchased from Jackson Laboratory (Bar Harbor, Me) and were backcrossed to C57BL/6J mice for 7 generations. WT littermates (CyPA^{+/+}) were used as controls, and all mice were genotyped by polymerase chain reaction on tail-clip samples.

Generation of CyPA-Overexpressing Transgenic Mouse

We used a Cre/LoxP strategy to prepare CyPA transgenic mice. In brief, a LacZ^{lox}-CyPA construct was prepared with the pZ/EG vector (Data Supplement Figure 1). The pZ/EG double-reporter construct was a kind gift from the Nagy laboratory.¹⁷ This vector contains LacZ floxed by 2 loxP sites, driven by the chicken β -actin promoter and a cytomegalovirus enhancer with enhanced green fluorescent protein downstream.¹⁸ We replaced enhanced green fluorescent protein with full-length WT mouse CyPA carrying a Flag tag to make the LacZ^{lox}-Flag-CyPA construct. Embryonic stem cells transfected by electroporation with linearized LacZ^{lox}-Flag-CyPA cDNA were screened by neomycin resistance and LacZ expression. Embryonic stem clones with a single copy by Southern blotting were used to generate chimeric mice by embryonic stem cell-embryo aggregation. The chimeric mice were bred to C57BL/6J mice to produce hemizygous transgenic offspring. Hemizygous offspring with germline transmission were identified by polymerase chain reaction of DNA harvested from tail snippets of weaned offspring. We obtained 9 germline mice from the 2A3 embryonic stem cell clone and 8 from the 3H9 embryonic stem cell clone. Transgenic mice were backcrossed to C57BL/6J mice for 7 generations to establish experimental lines.

VSMC-Specific Overexpression of CyPA

For VSMC-specific overexpression of CyPA in transgenic mice, the LacZ^{lox}-CyPA transgenic mouse and SM22 α -Cre mouse (C57BL/6J background)¹⁹ were crossed. Previously, we showed that expression of SM22 α promoter when linked to LacZ was restricted to VSMCs in the day 12.5 embryo, without expression in other smooth muscle. Breeding of the LacZ^{lox}-CyPA mice to SM22 α -Cre mice¹⁹ resulted in excision of LacZ and expression of CyPA in VSMCs.

Complete Common Carotid Artery Ligation

Six- to 8-week-old male mice underwent complete carotid artery ligation.^{20,21} Mice were anesthetized with an intraperitoneal injection of ketamine (80 mg/kg) and xylazine (5 mg/kg). The left common carotid artery was exposed through a small midline incision in the neck and was completely ligated with 6-0 silk just proximal to the carotid bifurcation (Data Supplement Figure IIA).^{20,21} In the right common carotid artery (sham), the suture was passed under the exposed carotid artery but not tightened. Four groups of operated animals were processed for morphological studies at 14 days after the operation. Survival rate of the operated mice was >95%, and none of the mice showed any neurological deficits.

Morphometric Analysis

For morphological analysis, 48 animals were perfused with normal saline and fixed with 10% phosphate-buffered formalin at physiological pressure for 5 minutes.²² The carotid arteries were harvested, fixed for 24 hours, and embedded in paraffin, and cross sections (5 μ m) were prepared.²² Because lesion thickness varies longitudinally, the entire length of the left and right carotid arteries was sectioned, and 5 sections located at 250- μ m intervals from the carotid bifurcation were examined (Data Supplement Figure IIA). Vessel areas were measured with ImagePro Plus software (Media Cybernetics Inc, Silver Spring, Md) and morphological parameters calculated as described previously.^{20,21} In brief, the intimal area was calculated as the internal elastic lamina area minus luminal area, the medial area was the external elastic lamina area minus the internal elastic lamina area, and the adventitial area was the vascular area minus the external elastic lamina area (Data Supplement Figure IIB).

Harvesting of Mouse Aortic Smooth Muscle Cells

Mouse aortic smooth muscle cells (MASMs) were isolated from each strain of mice (WT, CyPA^{-/-}, VSMC-Tg, and control mice) and maintained in Dulbecco's modified Eagle's medium (DMEM) containing 10% FBS at 37°C in a humidified atmosphere of 5% CO₂/95% air as described previously.^{23,24} Passages 4 to 6 of MASMs at 70% to 80% confluence were used for experiments.

Preparation of Conditioned Medium

MASMs from each mouse strain were serum starved in DMEM for 24 hours and stimulated with 1 μ mol/L LY83583 to generate intracellular ROS,^{10,11} and medium was collected and centrifuged for 10 minutes at 800g to remove cell debris. The medium was concentrated 100-fold with a Centricon Plus-20 filter (Millipore Corp, Bedford, Mass) to yield concentrated conditioned medium (CM).^{10,11}

Proliferation and Scratch-Wound Assays

MASMs were seeded in 96-well plates in DMEM supplemented with 10% FBS. For proliferation assays, medium was changed to DMEM without FBS and starved for 24 hours, then stimulated with CM for up to 5 days. CM was changed at day 3, and cells were counted at day 2 and day 5. For scratch wound, confluent cells were scratched with a pipette tip, and medium was replaced with CM from different MASMs (Tg, WT, and knockout [KO]), and cells were allowed to migrate for 24 hours. To block protein synthesis (cell proliferation), MASMs were pretreated with anisomycin (10 μ mol/L) for 2 hours. MASMs were positive for smooth muscle actin (α -SMA; green).

Boyden Chamber Migration Assays

For the Boyden chamber assay, MASMs were starved overnight, suspended, and seeded (50 μ L containing 5.0 \times 10⁴ cells) in the upper chamber on collagen-precoated PVP-free polycarbonate membrane. Control medium (DMEM/0.1% BSA) or CM 30 μ L was placed in the lower chamber. After incubation at 37°C and 95% air/5% CO₂ for 8 hours, cells attached to the lower side were fixed in 4% formaldehyde/0.1% glutaraldehyde in 0.1 phosphate buffer, pH 7.2, and then stained for 30 minutes in 0.1% cresyl violet. The relative increases in cell number were determined by quantitative densitometry (ImagePro Plus).

Statistical Analysis

Quantitative results are expressed as mean \pm SD. Comparisons of parameters between 2 groups were made by unpaired Student's *t* test. Comparisons of parameters among the 3 groups were made by 1-way ANOVA, and comparisons of different parameters between the 2 genotypes were made by 2-way ANOVA followed by a post hoc analysis with the Bonferroni test. Statistical significance was evaluated with StatView (StatView 5.0, SAS Institute Inc, Cary, NC). A value of *P* < 0.05 was considered statistically significant.

The authors had full access to the data and take full responsibility for its integrity. All authors have read and agree to the manuscript as written.

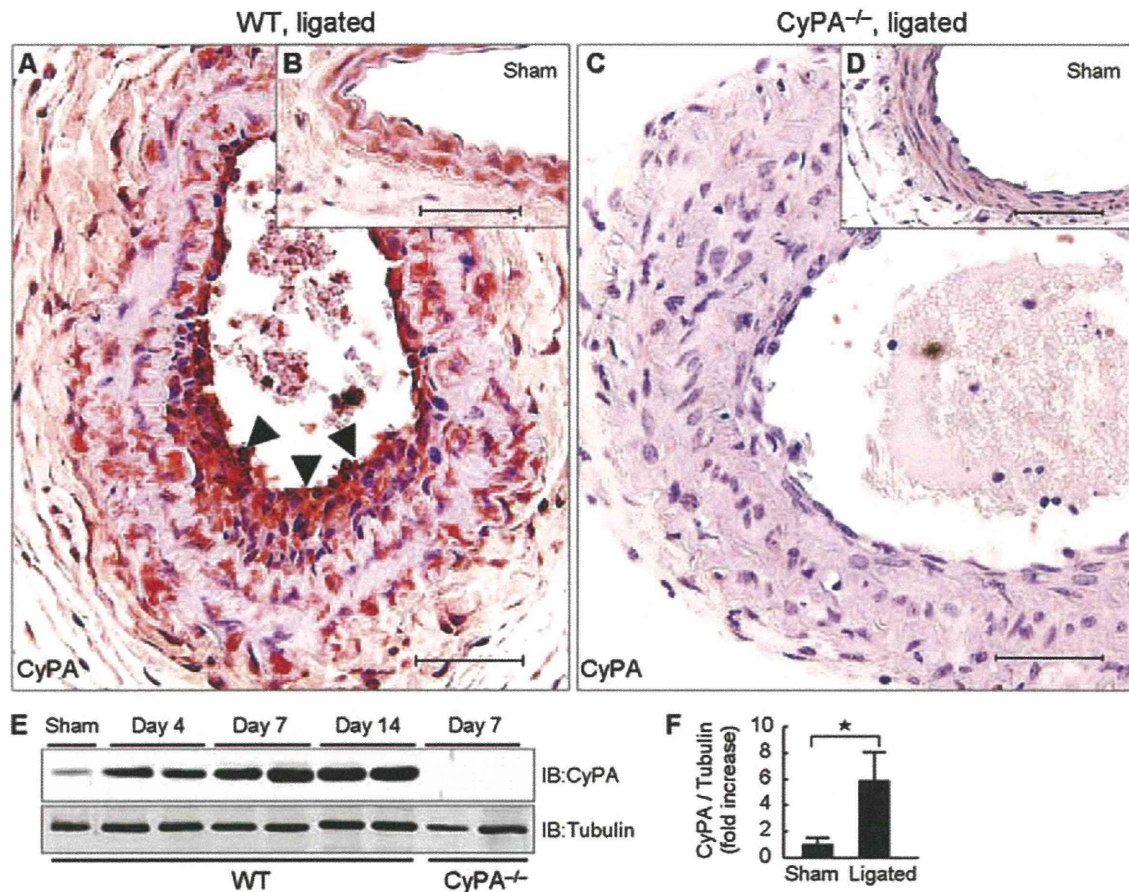


Figure 1. Carotid ligation enhances local CyPA expression. Representative immunostaining of CyPA in ligated (A and C) and sham (B and D) carotids from WT and CyPA^{-/-} mice. Arrowheads show strong expression of CyPA in the intima. Scale bars=50 μ m. E and F, Western blot analysis of CyPA in carotid homogenates of WT (n=8, solid bars) after ligation. Equal protein loading was confirmed with tubulin. Results are mean \pm SD. * P <0.01. IB indicates immunoblot.

Results

Vascular Remodeling After Carotid Ligation Was Significantly Reduced in CyPA^{-/-} Mice

To test the hypothesis that CyPA contributes to vascular remodeling, we performed complete carotid ligation in WT and CyPA^{-/-} mice. ROS generation and the proliferation of VSMCs play significant roles in intima formation in this model.^{25,26} Immunostaining and Western blotting revealed that expression of CyPA increased after carotid ligation in WT mice, with highest expression in the intima (Figure 1A, arrows). In arteries that underwent a sham procedure, no increase in CyPA expression or intima formation was observed (Figure 1B). Quantification by Western blot showed a significant increase in CyPA expression after ligation in WT mice (Figure 1E and 1F). In CyPA^{-/-} mice, there was no CyPA expression in either sham or ligated vessels (Figure 1C and 1D). These results indicate that blood flow cessation increases local CyPA expression. In sham WT and sham CyPA^{-/-} controls, there was no intimal hyperplasia (Figure 2A and 2D), no differences in the thickness of elastic lamina (Figure 2B and 2E), similar α -SMA expression (Figure 2C and 2F), and no differences in medial area (Figure 2M, 2N, and 2O). The ligated arteries of WT mice (14 days) exhibited lumen narrowing (Figure 2G, 2H, and 2I), which was primar-

ily a result of intimal hyperplasia and medial thickening. These changes were obviously reduced in CyPA^{-/-} mice (Figure 2J, 2K, and 2L). Morphometric analysis of sham controls (Figure 2M, 2N, and 2O) showed no differences in intima, media, or intima/media (I/M) ratio in CyPA^{-/-} mice versus WT mice. In contrast, analysis of ligated arteries on day 14 revealed that the intimal area was significantly smaller in CyPA^{-/-} mice than in WT mice (Figure 2M). Additionally, we observed significantly increased medial thickening in WT mice compared with CyPA^{-/-} mice (Figure 2N), which suggests that CyPA plays a crucial role in the development of vascular remodeling after blood flow cessation. Note that there was an increase in intimal area of CyPA^{-/-} ligated vessels (Figure 2K and 2M) compared with sham, which indicates that other mechanisms also contribute to vascular remodeling. However, the I/M ratio of CyPA^{-/-} mice was significantly less than that of WT mice (0.16 ± 0.06 versus 0.29 ± 0.13 , P <0.01; Figure 2O), which indicates a crucial role of CyPA in vascular remodeling.

CyPA Induces VCAM-1 Expression and Promotes Inflammatory Cell Migration

An important initial step for the development of vascular lesions is inflammatory cell recruitment to the vascular wall.⁷⁻⁹ Because CyPA induces VCAM-1 in human umbilical

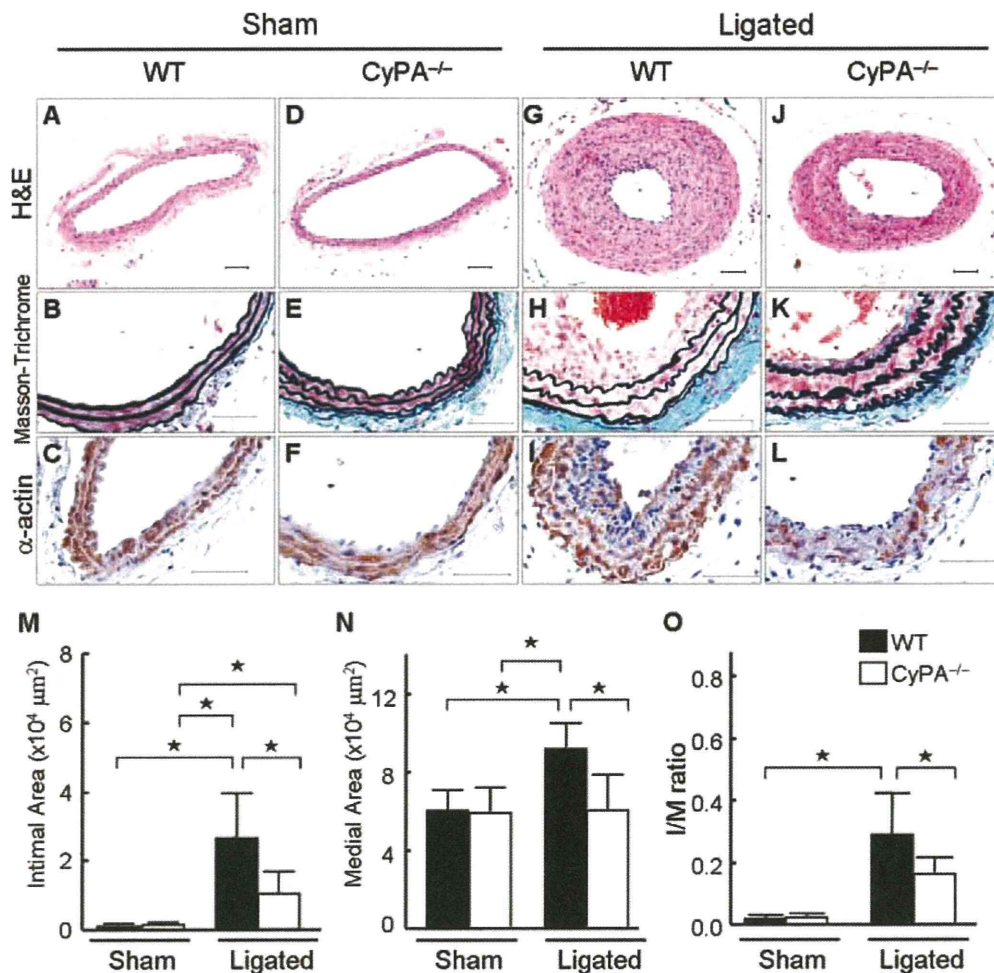


Figure 2. CyPA expression correlates with vascular remodeling. A–F, Photomicrographs showing representative cross-sectional areas of sham carotids of WT and CyPA^{-/-} mice. The predominant cellular component in the intima was VSMC, as revealed by immunostaining for α -SMA. Scale bars=50 μm . G–L, Photomicrographs showing representative cross-sectional areas of ligated carotids of WT and CyPA^{-/-} mice. CyPA deficiency significantly reduced intimal area (M), medial area (N), and I/M ratio (O) in CyPA^{-/-} mice (n=8, open bars) compared with WT mice (n=9, solid bars). Results are mean \pm SD. * P <0.01. H&E indicates hematoxylin and eosin.

vein ECs¹³ and is chemotactic for inflammatory cells,^{14,15} we anticipated differences in inflammation based on CyPA expression. Expression of VCAM-1 was greatly increased in ligated WT carotids compared with sham (Figure 3A, 3B, and 3E). There was no difference in VCAM-1 expression in the sham carotids of WT versus CyPA^{-/-} mice (Figure 3E). In contrast, expression of VCAM-1 was much lower in ligated carotids of CyPA^{-/-} mice than in WT mice (Figure 3C, 3D, and 3E). The number of CD45⁺ inflammatory cells did not differ in sham arteries from WT versus CyPA^{-/-} mice (Figure 3G and 3I). There was a significant increase in CD45⁺ cells in ligated arteries of WT mice (Figure 3F and 3G), whereas there was only a small change in CyPA^{-/-} mice (Figure 3H and 3I). Quantification of CD45⁺ cells per intimal or medial area showed a 2-fold greater number in WT than in CyPA^{-/-} mice (Figure 3J). These data suggest a role for CyPA in expression of VCAM-1 and inflammatory cell migration after carotid ligation.

Generation of VSMC-Specific CyPA Transgenic Mice

To test the hypothesis that VSMC-derived CyPA plays a major role in vascular remodeling, we prepared VSMC-Tg

mice that overexpressed a FLAG-tagged CyPA only in VSMCs using a Cre/LoxP system. In brief, a LacZ^{fllox}-CyPA construct (Data Supplement Figure I) was prepared with the pZ/EG vector, and LacZ^{fllox}-CyPA mice were crossed with SM22 α -Cre mice to achieve VSMC-specific expression. The vessels in Figure 4A through 4C are from control mice (LacZ^{fllox}-CyPA⁺/SM22 α -Cre⁻) in which the transgene expressed is LacZ, as shown by the blue β -gal staining and the low level of CyPA expression. Figure 4E shows the efficiency of Cre recombinase-mediated excision in vivo after mice were bred with SM22 α -Cre to express FLAG-CyPA (SM22 α -Cre \times LacZ^{fllox}-CyPA). Specifically, there was no LacZ expressed, as shown by β -gal staining, whereas anti-FLAG revealed significant FLAG-CyPA expression. The increase in CyPA was confirmed by anti-CyPA antibody (Figure 4F). To quantify FLAG-CyPA expression, we performed Western blots with anti-FLAG and anti-CyPA antibody. As shown in Figure 4G, the relative expression of exogenous CyPA (FLAG tagged) was 2.0-fold greater (in aorta) than that of endogenous CyPA. These experiments show that excision by SM22 α -Cre was highly efficient (>90% of cells expressed FLAG, and <10% expressed

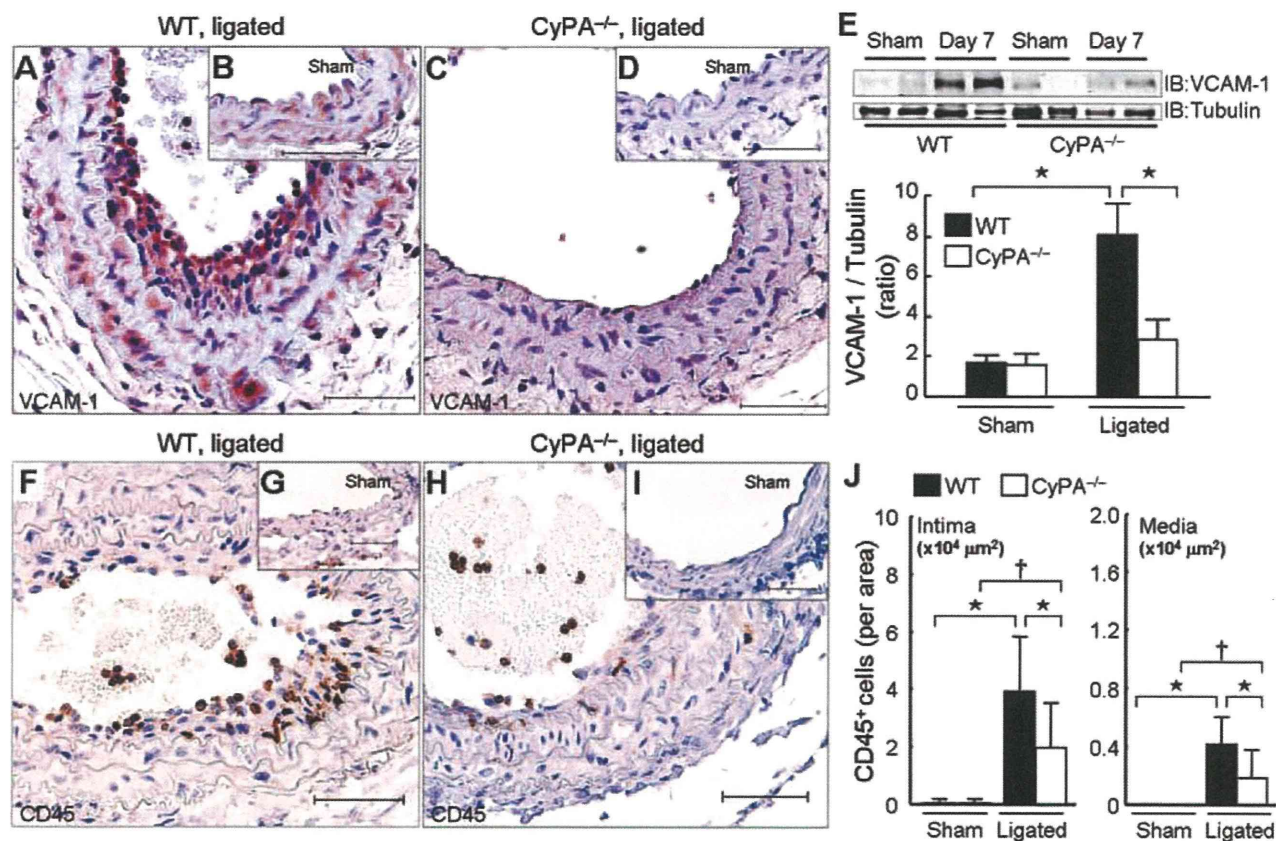


Figure 3. CyPA expression correlated with VCAM-1 expression and inflammatory cell accumulation. Representative immunostaining of VCAM-1 (A–D) and CD45 (F–I) in sham and ligated carotids from WT and CyPA^{-/-} mice. Scale bars=50 μm. E, Western blot comparison of VCAM-1 in carotid homogenates of WT (n=8, solid bars) and CyPA^{-/-} mice (n=6, open bars) at 7 days after ligation. Equal protein loading was confirmed with tubulin. J, The number of CD45⁺ cells in intima and media is increased by ligation in WT mice (n=9, solid bars) and was significantly less in CyPA^{-/-} mice (n=8, open bars). Results are mean±SD. *P<0.01; †P<0.05. IB indicates immunoblot.

LacZ), and the expression of exogenous FLAG-CyPA was 2-fold greater than that of endogenous CyPA. To show that FLAG-CyPA was secreted similarly to endogenous CyPA, we stimulated VSMCs harvested from aorta of WT, CyPA^{-/-}, and VSMC-Tg mice with LY83583. LY83583 is a naphthoquinolinedione that undergoes futile redox cycling—generating intracellular ROS.^{10,11} As expected, both FLAG-CyPA and endogenous CyPA were secreted in response to ROS in MASHs from VSMC-Tg aorta (Figure 4H). The magnitude of secreted FLAG-CyPA was equivalent to that of endogenous CyPA, similar to the expression of CyPA in lysates of intact aorta (Figure 4G).

VSMC-Specific CyPA Transgenic Mice Exhibit Dramatic Intimal and Medial Thickening

To prove further that VSMC-derived CyPA promotes vascular remodeling, we performed complete carotid ligation in VSMC-Tg (*LacZ^{fllox}-CyPA⁺/SM22α-Cre⁺*) and control (*LacZ^{fllox}-CyPA⁺/SM22α-Cre⁻*) mice. In sham arteries, intimal thickening was not observed in VSMC-Tg and control mice (Figure 5A through 5F), and the medial area did not differ significantly (Figure 5M and 5N). Two weeks after carotid ligation, intimal thickness was significantly increased in VSMC-Tg mice to a much greater extent than in control mice (Figure 5G through 5M). Additionally, we observed significantly in-

creased medial thickening in VSMC-Tg mice (Figure 5N). The increased intima formation was due to VSMCs, as revealed by immunostaining for α-SMA (Figure 5H and 5I). The I/M ratio was increased 2.5-fold in VSMC-Tg, which suggests a pathogenic role for VSMC-derived CyPA in accumulation of VSMCs during vascular remodeling (Figure 5O). Inflammatory cell accumulation in the remodeled carotid wall was also increased significantly in VSMC-Tg mice (Figure 6), which suggests that VSMC-derived CyPA recruits inflammatory cells.

CyPA Plays a Crucial Role in VSMC Proliferation In Vivo

To strengthen the link between CyPA expression and VSMC growth, we carefully evaluated proliferation of VSMC by immunostaining for α-SMA, Ki67, and ERK1/2 phosphorylation (pERK1/2) on serial sections. We previously reported that ERK1/2 phosphorylation is important for VSMC migration and growth.²³ There was no difference in pERK1/2 expression (Data Supplement Figure IV, B and D) or Ki67⁺ VSMCs in sham carotids (Figure 7B and 7D); however, immunostaining and Western blotting revealed that pERK1/2 increased after carotid ligation in WT mice, with the highest expression in the intima compared with CyPA^{-/-} carotids (Data Supplement Figure IV, A, C, E, and F). Consistently,

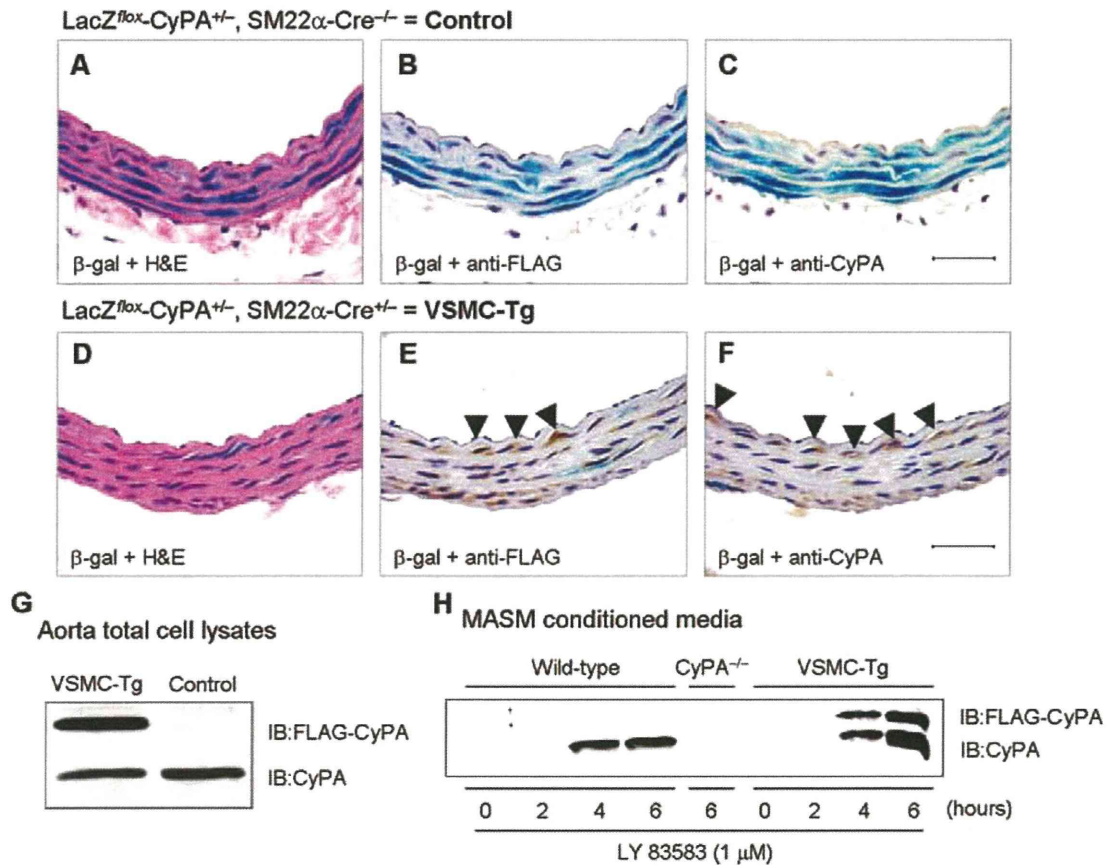


Figure 4. Characterization of CyPA expression in VSMC-Tg mice. A–F, Representative immunostaining and β -gal staining of aorta from VSMC-Tg mice (LacZ^{fllox}-CyPA^{+/-}/SM22 α -Cre^{+/-}) and control mice (LacZ^{fllox}-CyPA^{+/-}/SM22 α -Cre^{-/-}). β -Gal staining shows >90% expression only in VSMCs (B) and complete excision with SM22 α -Cre (E). FLAG-CyPA was expressed only in VSMC-Tg mice and not in control mice. There was no change in endogenous CyPA expression. Scale bars=50 μ m. G, Western blot demonstrated that FLAG-CyPA was expressed only in VSMC-Tg mice aorta, not in control mice. H, MASMs were stimulated with 1 μ mol/L LY83583 for the indicated times, CM were prepared, and secreted CyPA and FLAG-CyPA were detected by Western blotting. IB indicates immunoblot; H&E, hematoxylin and eosin.

Ki67⁺ VSMCs were significantly increased in ligated WT carotids compared with CyPA^{-/-} carotids (Figure 7A, 7C, and 7E). VSMC proliferation was even further enhanced in VSMC-Tg carotids compared with control carotids (Figure 7F through 7J), which suggests that CyPA promotes VSMC proliferation in vivo.

CyPA Plays a Crucial Role in Migration, Chemotaxis, and Proliferation of VSMCs In Vitro

To further confirm the role of CyPA in VSMC proliferation and migration, we harvested MASMs from the 3 mice strains and evaluated their proliferation and migration. To evaluate the effect of CyPA on VSMC migration and chemotaxis, we performed scratch-wound and Boyden chamber assays. The scratch wound was performed with WT-MASM as the “responder” cells and CM from the 3 strains. Tg-CM stimulated migration more than control-CM, and WT-CM stimulated migration more than KO-CM, which suggests that CyPA secreted into CM increased VSMC migration (Data Supplement Figure V). To measure the effect of CyPA on VSMC chemotaxis, we studied migration in response to serum and CM (Figure 8A and 8B). As anticipated, chemotaxis of KO-MASM was significantly reduced compared with WT-MASM and Tg-MASM in response to 10% serum,

which suggests a role for intracellular CyPA in chemotaxis (Figure 8A). Next, we compared the chemotactic activity of CM from the 3 strains using WT-MASM as reporter cells. Migration of WT-MASM in response to Tg-CM was significantly increased compared with WT-CM (Figure 8B) and was dramatically greater than migration induced by KO-CM. These results indicate that secreted CyPA strongly enhances VSMC chemotaxis.

To determine the effect of varying CyPA secretion on VSMC growth, we measured the effects of CM on cell growth. Proliferation of WT-MASM in response to CM from Tg-MASM was significantly greater than that in response to CM from control-MASM (Figure 8C), which suggests that extracellular CyPA promotes VSMC growth. To assess the effect of CyPA expression on cell growth, we studied the ability of MASM from different strains to respond to both platelet-derived growth factor and serum (Figure 8D, 8E, and 8F). In the absence of exogenous growth stimuli, there was no difference in growth of cells isolated from VSMC-Tg compared with control (Figure 8D); however, growth in response to platelet-derived growth factor-BB and 10% serum was significantly increased in VSMC-Tg compared with control (Figure 8E and 8F). These data suggest that the level of CyPA expression has powerful effects on VSMC proliferation.

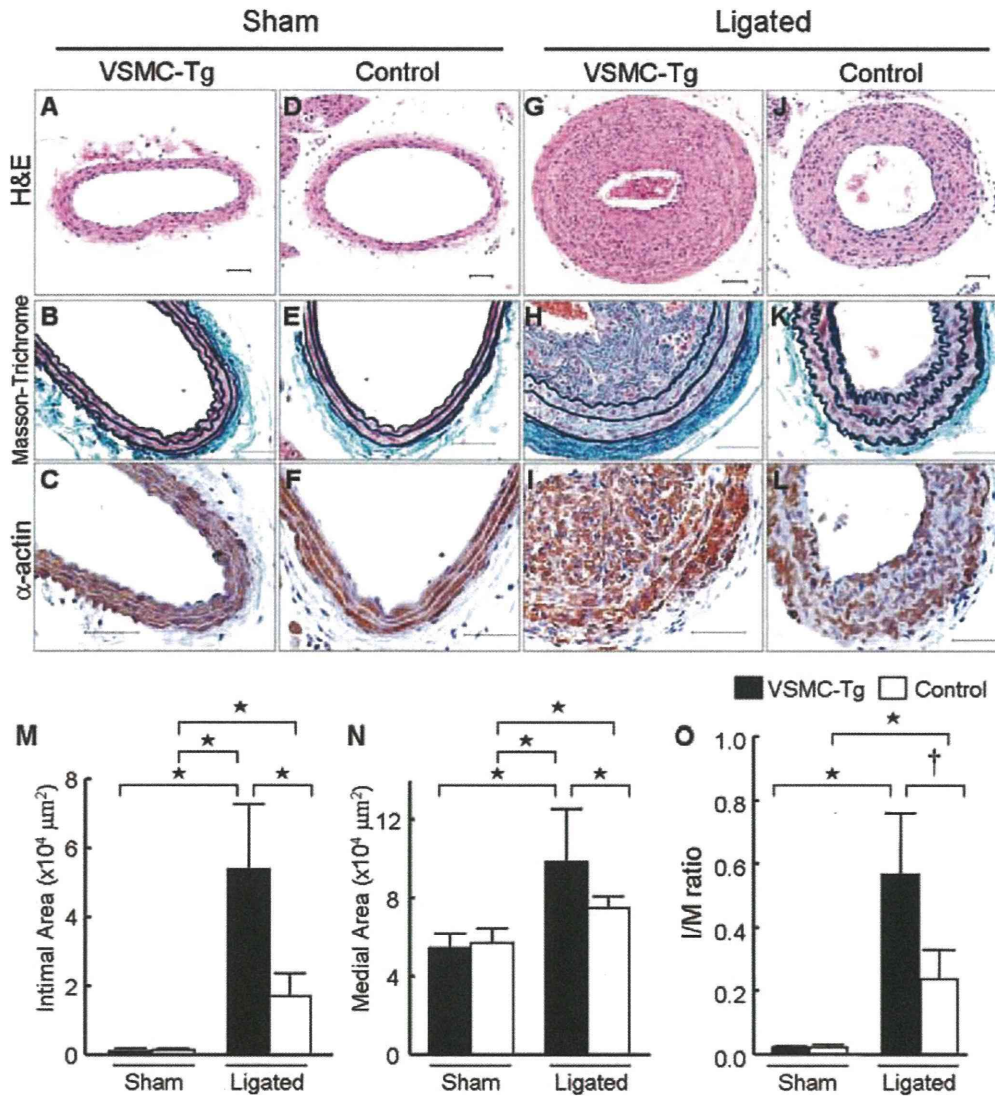


Figure 5. VSMC-specific overexpressed CyPA increases vascular remodeling after carotid ligation. Photomicrographs from sham (A–F) and ligated (G–L) mice carotids of VSMC-Tg and control. The predominant cellular component in the intima was VSMC, as revealed by immunostaining for α -SMA (α -actin). H&E indicates hematoxylin and eosin staining. Scale bars=50 μm . Intima (M), media (N), and adventitia area (O) in VSMC-Tg mice (n=7, solid bars) were greater than in control mice (n=6, open bars). Results are mean \pm SD. * $P < 0.01$; † $P < 0.05$.

Discussion

The major findings of the present study are that carotid ligation increases CyPA expression in the vascular wall and promotes vascular remodeling due to proliferation and migration of VSMCs and accumulation of inflammatory cells. These results are the first direct demonstration that CyPA contributes to vascular remodeling in vivo. The present study revealed 3 important pathological consequences of CyPA activity (Data Supplement Figure VI). First, VSMC-derived secreted CyPA increases intimal VSMCs by virtue of its ability to promote VSMC proliferation and migration. Second, secreted extracellular CyPA is proinflammatory, because it stimulates vascular expression of VCAM-1 and recruits inflammatory cells. Third, we showed a direct role for intracellular ROS to stimulate CyPA secretion that was proportionate to intracellular CyPA expression. These data show a role for CyPA as one of the key mediators of the pathological effects of ROS on vascular remodeling.

To strengthen the link between flow cessation, CyPA expression, and cell growth, we observed the time course and distribution of CyPA expression in carotids after ligation. There was minimal staining of CyPA in sham carotids but a dramatic increase in the intima and media after ligation. In parallel with CyPA expression, carotid ligation induced phosphorylation of ERK1/2 in WT carotids, which was significantly less in CyPA^{-/-} carotids, consistent with the reduced number of Ki67⁺ VSMCs in ligated CyPA^{-/-} carotids. The distribution of Ki67⁺ cells closely overlapped with areas of highest CyPA expression, especially in the rapidly proliferating intimal cells in WT mice (Data Supplement Figure III). Colocalization of CyPA and α -SMA staining revealed that CyPA expression was particularly high in VSMCs (Data Supplement Figure III). To further prove the contribution of VSMC-derived CyPA to vascular remodeling, we prepared VSMC-specific CyPA transgenic mice (VSMC-Tg). VSMC-Tg mice exhibited no significant change in sham

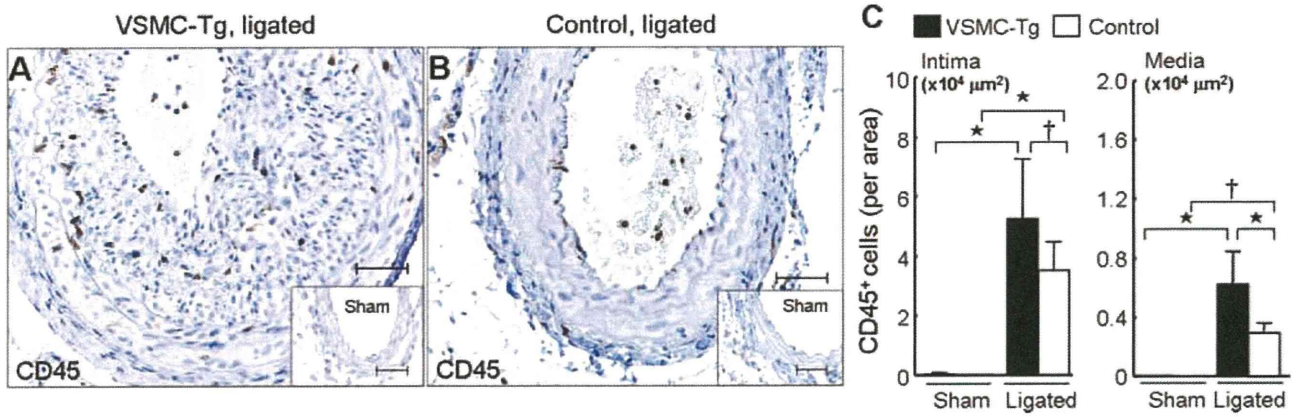


Figure 6. Overexpression of CyPA promotes recruitment of inflammatory cells in ligated carotids. Representative immunostaining of CD45 in ligated arteries from VSMC-Tg (A) and control mice (B). C, Number of CD45⁺ cells in VSMC-Tg (n=7, solid bars) and control mice (n=6, open bars). VSMC-specific overexpression of CyPA enhanced the recruitment of CD45⁺ cells to the intima and media. Results are mean±SD. *P<0.01; †P<0.05.

carotids, whereas ligated carotids showed increases of 217% in intimal area, 32% in medial area, and 140% in I/M ratio compared with control mice expressing normal levels of CyPA. The observation that VSMC-specific CyPA overex-

pression increased not only the medial area but also the intimal area suggests that VSMC-derived extracellular CyPA promotes the proliferation and migration of VSMCs via a secreted, paracrine pathway. VSMC proliferation measured

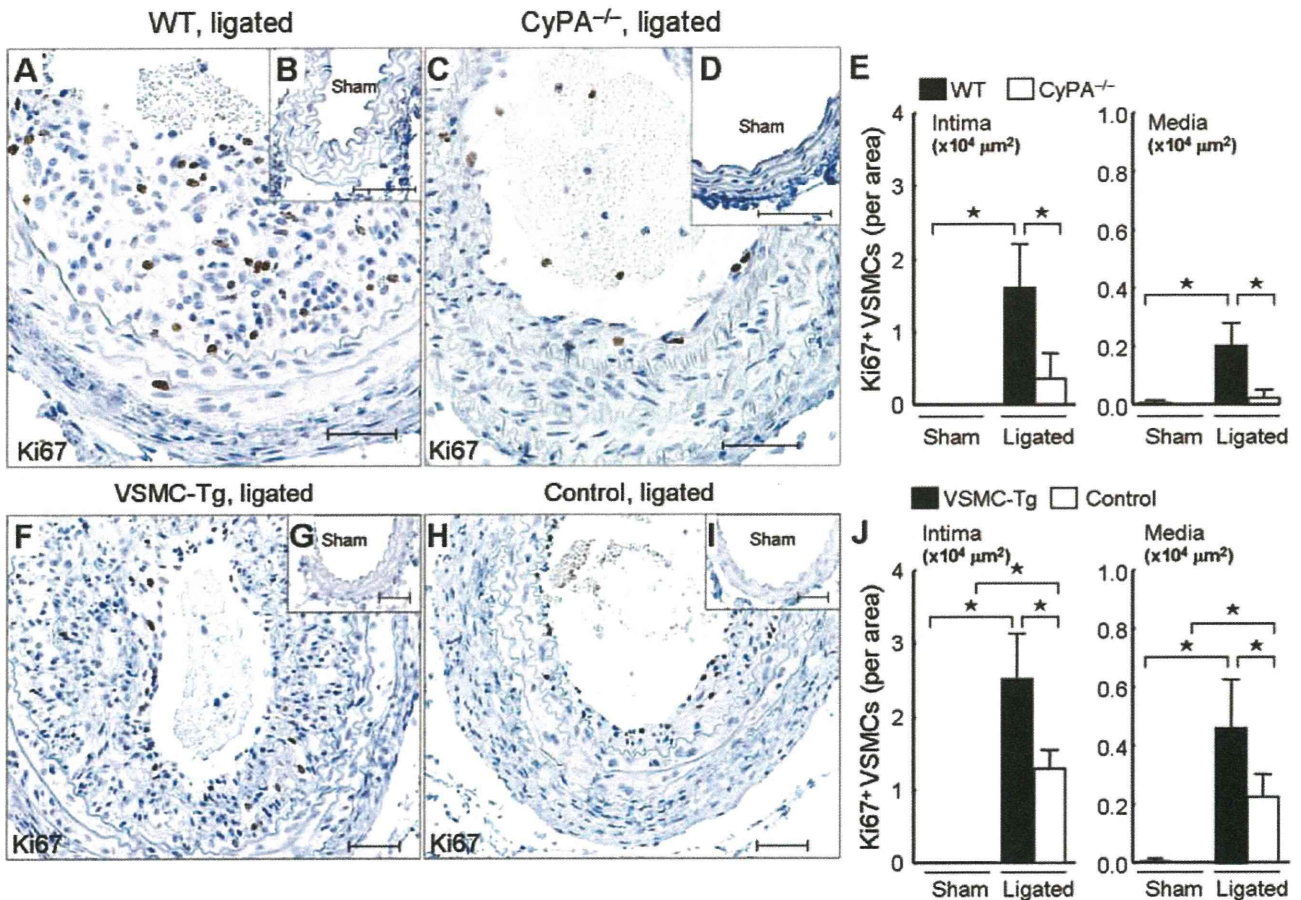


Figure 7. CyPA increases VSMC proliferation in ligated carotids. Representative immunostaining of Ki67 and counterstaining with hematoxylin in sham carotids and ligated carotids from WT, CyPA^{-/-}, VSMC-Tg, and control mice. A–E, There were a significantly increased number of Ki67⁺ cells in ligated WT carotids (n=9, solid bars) compared with CyPA^{-/-} carotids (n=8, open bars). Scale bars=50 μm . E, Analysis of numbers of α -SMA⁺ Ki67⁺ cells by staining of serial section (3 sections per mouse) was performed. F–J, There was a significant increase in Ki67⁺ VSMCs in ligated VSMC-Tg carotids (n=7, solid bars) compared with control carotids (n=6, open bars). J, Analysis of numbers of α -SMA⁺ Ki67⁺ cells by staining of serial section (3 sections per mouse) was performed. Results are mean±SD. *P<0.01.

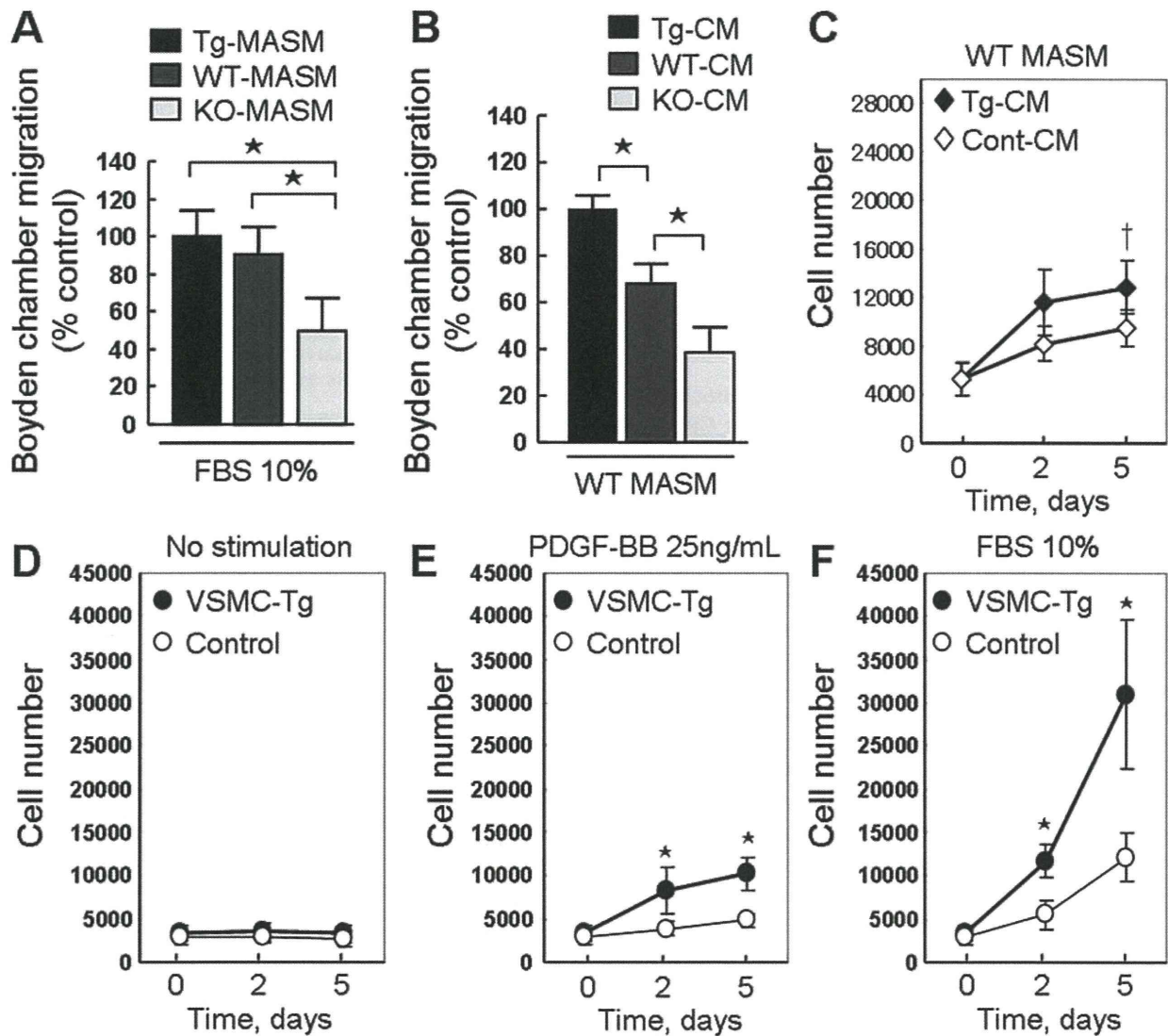


Figure 8. CyPA promotes migration and proliferation of MASMs. **A**, Migration of MASMs in response to 10% fetal bovine serum (FBS) in Boyden chamber assay. Tg-MASMs, WT-MASMs, and KO-MASMs were starved overnight and then seeded in the upper Boyden chamber on collagen-precoated PVP-free polycarbonate membranes. FBS (10%) was added to the lower chamber. Migration was determined, and the maximum increase was normalized to 100%. **B**, WT-MASMs were starved overnight and then seeded in the upper Boyden chamber. Tg-CM, WT-CM, or KO-CM was added to the lower chamber. Cells were incubated for 8 hours at 37°C in a 95% air/5% CO₂ humidified incubator. The membranes were removed, and cells were stained. The relative increases in cell number were determined by quantitative densitometry. * $P < 0.01$. Data are mean \pm SD; $n = 6$ in each group. **C**, CM from VSMC-Tg (Tg-CM) or control (Cont-CM) promotes cell proliferation. WT-MASMs were seeded in 96-well plates in DMEM supplemented with 10% FBS, serum starved for 24 hours, and stimulated with Tg-CM or Cont-CM for 5 days. CM was changed at day 3, and cells were counted at day 2 and day 5. Data are mean \pm SD. † $P < 0.05$. **D–F**, Effect of platelet-derived growth factor-BB (PDGF-BB) and FBS on proliferation of Tg-MASMs and control MASMs. After starvation for 24 hours, MASMs were incubated with DMEM (D) or stimulated with 25 ng/mL PDGF-BB (E) or 10% FBS (F) for 5 days. Medium was changed at day 3, and cells were counted at day 2 and day 5. Data are mean \pm SD. * $P < 0.01$. $n = 8$ in each group.

by Ki67 correlated significantly with CyPA expression (VSMC-Tg > control WT > CyPA^{-/-}). VSMC migration and chemotaxis similarly correlated with the magnitude of CyPA expression. The increased VSMC proliferation and migration that resulted from VSMC-specific overexpression of CyPA suggests a major contribution for VSMC-derived CyPA in vascular remodeling.

Turbulent blood flow and reduced shear stress generate ROS and play a crucial role in the development of atherosclerosis due to local inflammation.^{7–9} In VSMCs, ROS activate a pathway that induces secretion of CyPA,¹² which

stimulates at least 3 signaling pathways (ERK1/2, Akt, and JAK).¹⁰ Extracellular CyPA activates proinflammatory pathways in ECs, including increased expression of VCAM-1.¹³ Additionally, CyPA itself is a chemoattractant and promotes migration of several cell types in vitro.^{13–15} Consistently, carotid ligation increased VCAM-1 expression in ligated WT carotids. VCAM-1 expression was significantly less in ligated CyPA^{-/-} carotids, which corresponded to reduced accumulation of CD45⁺ cells in the intima. This implies that the decreased accumulation of inflammatory cells in CyPA^{-/-} carotids likely results from reduced expression of VCAM-1

and decreased chemotactic signaling in the absence of CyPA. Because decreased myelopoiesis could also explain diminished inflammatory cell recruitment in CyPA^{-/-} mice, we analyzed white blood cell counts from mice with WT or CyPA^{-/-} bone marrow. The number of circulating monocytes was not altered by CyPA deficiency or by carotid ligation. Thus, lack of CyPA in bone marrow cells does not alter inflammatory cell production or ability to enter the peripheral circulation. In contrast to the situation in CyPA^{-/-} mice, VSMC-specific overexpression of CyPA (VSMC-Tg) further enhanced the accumulation of inflammatory cells in ligated carotids, which supports the important role for CyPA in mediating the recruitment of inflammatory cells.

CyPA is expressed by all cell types that participate in vascular pathology.²⁵ Additionally, extracellular CyPA has recently been found to induce interleukin-6 release in inflammatory cells.²⁷ We observed significant accumulation of inflammatory cells in the intima. We propose that ROS generated locally by inflammatory cells causes VSMCs to release CyPA, which would promote a proinflammatory cycle for vascular remodeling. Therefore, in addition to VSMC-derived CyPA, the contribution of inflammatory cells is important for intima formation in this model. Recent observations support the contribution of inflammatory cells to intimal thickening.^{28,29} CyPA could regulate the proteolytic activity necessary for the migration of inflammatory cells through activating MMPs, especially MMP-1 and MMP-9.^{14,16} Considering the importance of migrating inflammatory cells in vascular remodeling,^{30,31} local cytokine production by inflammatory cells could promote intima formation in this model.

Study Limitations

CyPA is a chaperone protein that is widely expressed, including inflammatory cells and ECs. Therefore, CyPA in macrophages and ECs may play an important role in vascular remodeling. Future studies will be required to define the role of CyPA in the response to vascular injury of cells such as macrophages, T and B cells, mast cells, platelets, and vascular progenitor cells.

Clinical Implications and Conclusions

The present data from the use of genetically engineered mice to modulate vascular CyPA expression prove that a decrease in CyPA levels has beneficial effects on the inflammatory response and vascular intima formation, as shown by significantly increased lumen diameter and decreased I/M ratio. This is consistent with our findings that the plasma level of CyPA is increased in patients with acute coronary syndromes.¹³ Additionally, Billich et al³² reported increased concentrations of CyPA in synovial fluids of patients with rheumatoid arthritis. These results suggest that extracellular CyPA is a novel mediator for vascular disease associated with ROS and inflammation.

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Disclosures

None.

References

- Shimokawa H. Primary endothelial dysfunction: atherosclerosis. *J Mol Cell Cardiol.* 1999;31:23–37.
- Clempus RE, Griendling KK. Reactive oxygen species signaling in vascular smooth muscle cells. *Cardiovasc Res.* 2006;71:216–225.
- Griendling KK, FitzGerard GA. Oxidative stress and cardiovascular injury: part I: basic mechanisms and in vivo monitoring of ROS. *Circulation.* 2003;108:1912–1916.
- Leopold JA, Loscalzo J. Oxidative enzymopathies and vascular disease. *Arterioscler Thromb Vasc Biol.* 2005;25:1332–1340.
- Baas AS, Berk BC. Differential activation of mitogen-activated protein kinases by H₂O₂ and O₂⁻ in vascular smooth muscle cells. *Circ Res.* 1995;77:29–36.
- Rao GN, Berk BC. Active oxygen species stimulate vascular smooth muscle cell growth and proto-oncogene expression. *Circ Res.* 1992;70:593–599.
- Ross R. Atherosclerosis: an inflammatory disease. *N Engl J Med.* 1999;340:115–126.
- Festa A, D'Agostino R, Howard G, Mykkanen L, Tracy RP, Haffner SM. Inflammation and microalbuminuria in nondiabetic and type 2 diabetic subjects: the Insulin Resistance Atherosclerosis Study. *Kidney Int.* 2000;58:1703–1710.
- Libby P, Ridker PM. Novel inflammatory markers of coronary risk: theory versus practice. *Circulation.* 1999;100:1148–1150.
- Jin ZG, Melaragno MG, Liao DF, Yan C, Haendeler J, Suh YA, Lambeth JD, Berk BC. Cyclophilin A is a secreted growth factor induced by oxidative stress. *Circ Res.* 2000;87:789–796.
- Liao D-F, Jin Z-G, Baas AS, Daum G, Gygi SP, Aebersold R, Berk BC. Purification and identification of secreted oxidative stress-induced factors from vascular smooth muscle cells. *J Biol Chem.* 2000;275:189–196.
- Suzuki J, Jin Z-G, Meoli DF, Matoba T, Berk BC. Cyclophilin A is secreted by a vesicular pathway in vascular smooth muscle cells. *Circ Res.* 2006;98:811–817.
- Jin ZG, Lungu AO, Xie L, Wang M, Wong C, Berk BC. Cyclophilin A is a proinflammatory cytokine that activates endothelial cells. *Arterioscler Thromb Vasc Biol.* 2004;24:1186–1191.
- Kim H, Kim WJ, Jeon ST, Koh EM, Cha HS, Ahn KS, Lee WH. Cyclophilin A may contribute to the inflammatory processes in rheumatoid arthritis through induction of matrix degrading enzymes and inflammatory cytokines from macrophages. *Clin Immunol.* 2005;116:217–224.
- Damsker JM, Bukrinsky MI, Constant SL. Preferential chemotaxis of activated human CD4⁺ T cells by extracellular cyclophilin A. *J Leukoc Biol.* 2007;82:613–618.
- Zhu P, Ding J, Zhou J, Dong WJ, Fan CM, Chen ZN. Expression of CD147 on monocytes/macrophages in rheumatoid arthritis: its potential role in monocyte accumulation and matrix metalloproteinase production. *Arthritis Res Ther.* 2005;7:R1023–R1033.
- Novak A, Guo C, Yang W, Nagy A, Lobe CG. Z/EG, a double reporter mouse line that expresses enhanced green fluorescent protein upon Cre-mediated excision. *Genesis.* 2000;28:147–155.
- Sakai K, Mitani K, Miyazaki J. Efficient regulation of gene expression by adenovirus vector-mediated delivery of the CRE recombinase. *Biochem Biophys Res Commun.* 1995;217:393–401.
- Miano JM, Ramanan N, Georger MA, de Mesy Bentley KL, Emerson RL, Balza RO Jr, Xiao Q, Weiler H, Ginty DD, Misra RP. Restricted inactivation of serum response factor to the cardiovascular system. *Proc Natl Acad Sci U S A.* 2004;101:17132–17137.
- Kumar A, Hoover JL, Simmons CA, Lindner V, Shebuski RJ. Remodeling and neointimal formation in the carotid artery of normal and P-selectin-deficient mice. *Circulation.* 1997;96:4333–4342.
- Mukai Y, Rikitake Y, Shiojima I, Wolfrum S, Satoh M, Takeshita K, Hiroi Y, Salomone S, Kim HH, Benjamin LE, Walsh K, Liao JK. Decreased vascular lesion formation in mice with inducible endothelial-

- specific expression of protein kinase Akt. *J Clin Invest*. 2006;116:334–343.
22. Korshunov VA, Berk BC. Flow-induced vascular remodeling in the mouse: a model for carotid intima-media thickening. *Arterioscler Thromb Vasc Biol*. 2003;23:2185–2191.
 23. Ishida M, Ishida T, Thomas S, Berk BC. Activation of extracellular signal-regulated kinases (ERK1/2) by angiotensin II is dependent on c-Src in vascular smooth muscle cells. *Circ Res*. 1998;82:7–12.
 24. Ishida T, Ishida M, Suero J, Takahashi M, Berk BC. Agonist-stimulated cytoskeletal reorganization and signal transduction at focal adhesions in vascular smooth muscle cells require c-Src. *J Clin Invest*. 1999;103:789–797.
 25. Jin ZG, Berk BC. SOXF: redox mediators of vascular smooth muscle cell growth. *Heart*. 2004;90:488–490.
 26. Tolbert T, Thompson J, Bouchard P, Oparil S. Estrogen-induced vasoprotection is independent of inducible nitric oxide synthase expression: evidence from the mouse carotid artery ligation model. *Circulation*. 2001;104:2740–2745.
 27. Payeli SK, Schiene-Fischer C, Steffel J, Camici GG, Rozenberg I, Luscher TF, Tanner FC. Cyclophilin A differentially activates monocytes and endothelial cells: role of purity, activity, and endotoxin contamination in commercial preparations. *Atherosclerosis*. 2008;197:564–571.
 28. Schafer K, Schroeter MR, Dellas C, Puls M, Nitsche M, Weiss E, Hasenfuss G, Konstantinides SV. Plasminogen activator inhibitor-1 from bone marrow-derived cells suppresses neointimal formation after vascular injury in mice. *Arterioscler Thromb Vasc Biol*. 2006;26:1254–1259.
 29. Wang CH, Anderson N, Li SH, Szmítko PE, Cherng WJ, Fedak PW, Fazel S, Li RK, Yau TM, Weisel RD, Stanford WL, Verma S. Stem cell factor deficiency is vasculoprotective: unraveling a new therapeutic potential of imatinib mesylate. *Circ Res*. 2006;99:617–625.
 30. Hansson GK, Libby P. The immune response in atherosclerosis: a double-edged sword. *Nat Rev Immunol*. 2006;6:508–519.
 31. Tanaka K, Sata M, Hirata Y, Nagai R. Diverse contribution of bone marrow cells to neointimal hyperplasia after mechanical vascular injuries. *Circ Res*. 2003;93:783–790.
 32. Billich A, Winkler G, Aschauer H, Rot A, Peichl P. Presence of cyclophilin A in synovial fluids of patients with rheumatoid arthritis. *J Exp Med*. 1997;185:975–980.

CLINICAL PERSPECTIVE

Decreased blood flow distal to a stenosis is associated with accelerated atherosclerosis and occlusion, but the mechanisms are not fully elucidated. Accumulating evidence indicates that inflammation and vascular smooth muscle cell (VSMC) proliferation contributes to vessel narrowing. It has become clear that an increase in reactive oxygen species is a key pathogenic mechanism for vascular disease. Cyclophilin A (CyPA) is a 20-kDa chaperone protein secreted from VSMCs in response to reactive oxygen species that stimulates VSMC proliferation and inflammatory cell migration in vitro. Here, using genetically engineered mice to modulate vascular CyPA expression, we show that decreasing CyPA has beneficial effects on the inflammatory response and vascular intima formation in low-flow vessels, as shown by significantly increased lumen diameter and decreased intima/media ratio. The present study may have important clinical implications, because it appears that secreted CyPA mediates the growth and inflammation observed in low-flow vessels. This suggests that a receptor for CyPA may represent an attractive therapeutic target for vascular diseases associated with oxidative stress and inflammation.

Statin ameliorates hypoxia-induced pulmonary hypertension associated with down-regulated stromal cell-derived factor-1

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Aims Mobilization of stem cells/progenitors is regulated by the interaction between stromal cell-derived factor-1 (SDF-1) and its ligand, CXC chemokine receptor 4 (CXCR4). Statins have been suggested to ameliorate pulmonary arterial hypertension (PAH); however, the mechanisms involved, especially their effects on progenitors, are largely unknown. Therefore, we examined whether pravastatin ameliorates hypoxia-induced PAH in mice, and if so, which type of progenitors and what mechanism(s) are involved.

Methods and results Chronic hypoxia (10% O₂ for 5 weeks) increased the plasma levels of SDF-1 and mobilization of CXCR4⁺/vascular endothelial growth factor receptor (VEGFR)2⁺/c-kit⁺ cells from bone marrow (BM) to pulmonary artery adventitia in Balb/c mice *in vivo*, both of which were significantly suppressed by simultaneous oral treatment with pravastatin (2 mg/kg/day). Furthermore, *in vitro* experiments demonstrated that hypoxia enhances differentiation of VEGFR2⁺/c-kit⁺ cells into α -smooth muscle actin⁺ cells. Importantly, pravastatin ameliorated hypoxia-induced PAH associated with a decrease in the number of BM-derived progenitors accumulating in the pulmonary artery adventitia. The expression of intercellular adhesion molecule-1 (ICAM-1) and its ligand, CD18 (β 2-integrin), were enhanced by hypoxia and were again suppressed by pravastatin.

Conclusions These results suggest that pravastatin ameliorates hypoxia-induced PAH through suppression of SDF-1/CXCR4 and ICAM-1/CD18 pathways with a resultant reduction in the mobilization and homing of BM-derived progenitor cells.

1. Introduction

Recent reports demonstrated that circulating endothelial progenitor cells (EPCs) promote endothelial repair, which is enhanced by 3-hydroxy-3-methylglutaryl-coenzyme A reductase inhibitors (statins).^{1–3} Moreover, the number of circulating EPCs correlates with endothelial function and the degree of coronary artery disease in humans.⁴ Accumulating evidence suggests that circulating EPCs are mobilized to the site of ischaemia by several humoral factors, such as vascular endothelial growth factor (VEGF), stromal cell-derived factor-1 (SDF-1), CD18, and intercellular adhesion molecule-1 (ICAM-1), contributing to the neovascularization.^{1,5,6} Recently, it has also been reported that CXC

chemokine receptor 4 (CXCR4), the receptor for SDF-1, plays an important role in the mobilization and recruitment of bone marrow (BM)-derived cells.⁷ We have recently reported that EPCs are mobilized under hypoxic conditions and are incorporated into the pulmonary endothelium in pulmonary arterial hypertension (PAH) in mice.⁸ Recent studies also demonstrated the therapeutic effects of EPC transplantation in animal models of PAH.^{9,10} However, it remains to be examined whether EPCs also exert beneficial effects in patients with PAH, which is characterized by plexiform lesion composed of actively proliferating endothelial cells.¹¹

It has been demonstrated that statins could prevent the development of PAH in animal models.^{12–14} Although statins could mobilize EPCs,^{15,16} long-term statin treatment has been reported to reduce the number of circulating EPCs in patients with coronary artery disease.¹⁷ Therefore,

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statins might have biphasic effects on mobilization of EPCs,¹⁸ as well as other circulating progenitor cells, which have also been reported to exist and differentiate into α -smooth muscle actin (SMA)⁺ cells in humans,^{19,20} and may participate in the progression of atherosclerosis²¹⁻²³ and lung fibrosis.²⁴ Recent reports also showed the existence of circulating progenitors that exhibit fibroblast-like properties, migrate into the pulmonary vasculature, and promote adventitial remodelling as myofibroblasts (α -SMA-expressing fibroblasts) in hypoxia-induced PAH.²⁵⁻²⁷ Indeed, the BM-derived progenitors could differentiate into α -SMA⁺ cells in hypoxia-induced PAH in mice.²⁸ However, it largely remains unknown whether statins affect mobilization and recruitment of those progenitors.

In the present study, we thus examined whether pravastatin ameliorates hypoxia-induced PAH in mice, and if so, which type of progenitors and what mechanism(s) are involved.

2. Methods

All procedures were performed according to the protocols approved by the Institutional Committee for Use and Care of Laboratory Animals of Tohoku University and the Guide for Care and Use of Laboratory Animals published by the US National Institutes of Health (NIH publication 8523, revised 1985). The authors had full access to the data and take full responsibility for its integrity. All authors have read and agree to the article as written.

2.1 Animal preparation

In the present study, we used 16-week-old wild-type (WT, $n = 56$) mice of Balb/c background. ROSA26 (LacZ) mice that express β -galactosidase (β -gal) activity in all tissues²⁹ were purchased from Jackson Laboratory (Bar Harbor, ME, USA).

2.2 Hypoxia-induced pulmonary arterial hypertension model in mice and statin treatment

The present study is a preventive study in nature. Four weeks after the BM transplantation, β -gal-BM chimeric mice were randomized to receive either pravastatin (2 mg/kg/day) or vehicle by daily gavage, and then exposed to hypoxia (10% O₂, for *in vivo* experiment) for 5 weeks in a hypoxic chamber, as previously described.^{8,12} As a control, chimeric mice were maintained in plastic cages in ambient air (21% O₂). After 5 weeks of chronic hypoxia, control and hypoxic mice were anaesthetized with intraperitoneal ketamine hydrochloride (60 mg/kg) and xylazine (8 mg/kg) ($n = 10$, respectively), and right ventricular systolic pressure (RVSP) was measured by percutaneous insertion into the right ventricle (RV) through the subxiphoid approach of a 25-gauge needle connected to a pressure transducer without the use of respirator nor opening the chests. To evaluate the extent of RV hypertrophy, the RV free wall and left ventricle (LV) plus septum (LV+S) were weighed separately.

2.3 Ex vivo culture of mononuclear cells

To confirm the differentiation capacity, isolated peripheral blood mononuclear cells (PBMCs) from hypoxic mice (10% O₂ for 7 days) were cultured on collagen I-coated chamber slides (BioCoat; Becton Dickinson, San Jose, USA) in Dulbecco's modified Eagle's medium (DMEM) supplemented with 10% foetal bovine serum (FBS), 100 U/mL penicillin, and 100 μ g/mL streptomycin in hypoxic conditions (2% O₂, 5% CO₂, and 93% nitrogen, 33°C, for *in vitro* experiment). For immunohistological staining, monoclonal antibody to fluorescein isothiocyanate (FITC)-labelled α -SMA (1:400, Sigma, St Louis, USA) was used for primary antibody.

2.4 Fluorescence-activated cell sorter analysis

Fluorescence-activated cell sorter (FACS) analysis was performed as described previously.^{8,9} To quantify the number of VEGFR2⁺/c-kit⁺ cells, we used phycoerythrin-labelled anti-mouse VEGFR2, FITC-labelled anti-mouse c-kit (eBioscience), and biotinylated anti-mouse lineage antibodies (Mac-1, Gr-1, B220, CD4, CD8, and Ter119) and APC-labelled streptavidin (BD Pharmingen). Quantitative analysis was performed by FACS analysis (FACSCalibur; Becton Dickinson).

2.5 Cell sorting by fluorescence-activated cell sorter

BM cells were obtained from hypoxic mice, and BM mononuclear cells were isolated by density gradient centrifugation with Nycoprep Animal 1.077 (Axis-Shield). Lin⁻/VEGFR2⁺/c-kit⁺ cells were selected with a cell sorting system (FACSARIA; Becton Dickinson Immunocytometry Systems).³⁰

2.6 Bone marrow transplantation

BM transplantation was performed as described previously.⁸ The chimeric rate was >95% by FACS analysis.

2.7 Immunofluorescence staining

Immunofluorescence staining was performed on 4% of paraformaldehyde-fixed frozen sections as previously described.⁸ The primary antibodies used were FITC-labelled anti- β -gal (1:400; Abcam Ltd, Cambridge, UK), anti-mouse ICAM-1 (1:400; BD Pharmingen), anti-mouse CD18 (1:400; BD Pharmingen), Cy3-labelled anti- α -SMA (1:400; Sigma), anti-VEGFR2 (1:200; Santa Cruz), anti-CD31, biotinylated anti-c-kit, and biotinylated anti-CXCR4 (1:400; BD Pharmingen, San Diego). As the secondary antibodies, Cy3- or Cy5-labelled antibodies were used (Jackson ImmunoResearch Laboratories). Vectashield mounting medium with DAPI (vector) was used to counterstain nuclei. Slides were viewed with a confocal fluorescence microscope (Fluoview FV1000, Olympus, Tokyo, Japan). As a negative control, species- and isotype-matched IgG were used in place of the primary antibody.

2.8 X-gal staining

To detect β -gal-positive cells, the lungs were perfusion-fixed with 0.5% glutaraldehyde (pH 7.2) at 4°C and the whole lungs were incubated at 37°C for 18 h in X-gal (5-bromo-4-chloro-3-indolyl β -D-galactopyranoside) solution as previously described.²⁹

2.9 Plasma levels of stromal-derived factor-1

Plasma levels of SDF-1 were evaluated by ELISA with a mouse SDF-1 Quantikine kit (R&D) following the manufacturer's protocol.

2.10 Statistical analysis

Quantitative results are expressed as means \pm SD. Statistical analysis was performed with StatView (StatView 5.0, SAS Institute Inc., Cary, NC, USA). Comparisons of parameters among the three groups were made by one-way ANOVA and those between the two groups under different conditions by two-way ANOVA followed by Bonferroni *post hoc* test. A value of $P < 0.05$ was considered to be statistically significant.

3. Results

3.1 Mobilization of vascular endothelial growth factor receptor 2⁺/c-kit⁺ cells in hypoxia-induced pulmonary arterial hypertension in mice

To elucidate the role of circulating VEGFR2⁺/c-kit⁺ cells, we performed FACS analysis on PBMCs from the mice that were

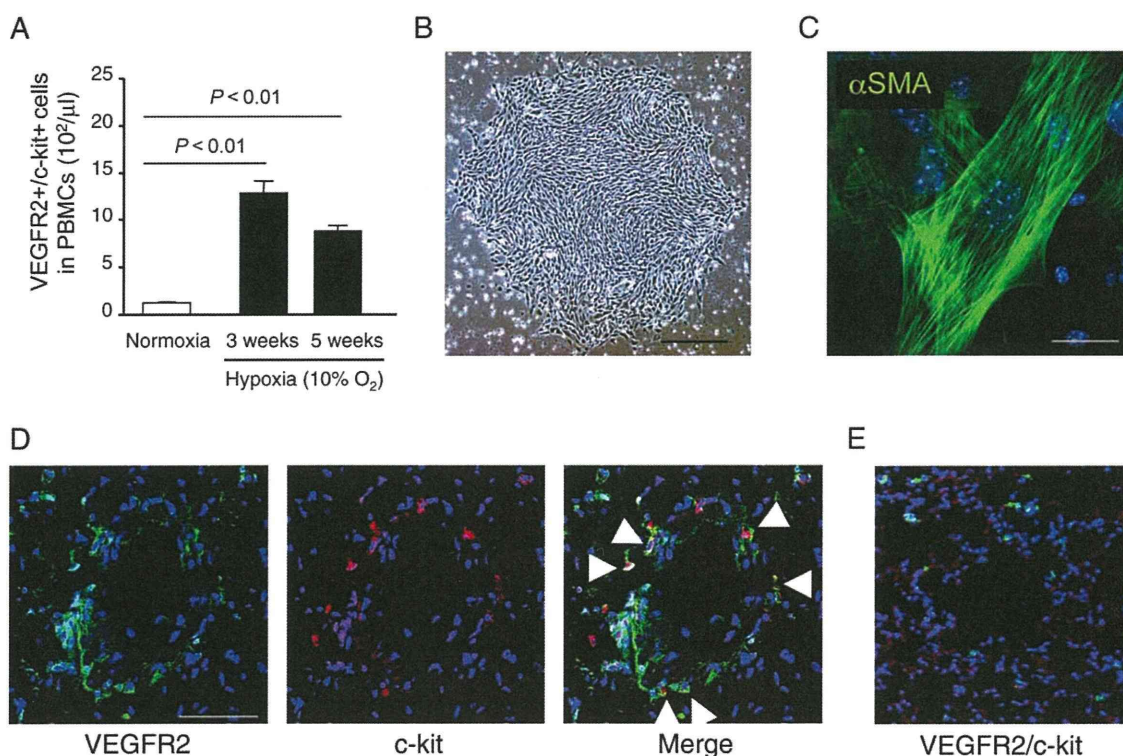


Figure 1 Vascular endothelial growth factor receptor (VEGFR)²/*c-kit*⁺ cells to the adventitia of pulmonary arteries in hypoxia. (A) Fluorescence-activated cell sorter analysis indicated that hypoxia significantly increased the number of circulating VEGFR²/*c-kit*⁺ cells at 3 and 5 weeks ($n = 6$ each). Results are expressed as means \pm SD. (B) Colonies with a 'hill and valley' morphology after cultivation of peripheral blood mononuclear cells for 3 weeks under hypoxic conditions (2% O₂). Scale bar: 200 μ m. (C) α -SMA immunopositive cells in the colony. Scale bar: 10 μ m. (D,E) VEGFR²/*c-kit*⁺ cells in the adventitia of pulmonary arteries in mice with hypoxic condition (5 weeks) detected by immunostaining (D, arrows), but not in normoxic mice (E). Scale bar: 50 μ m.

chronically exposed to hypoxia (10% O₂) for 5 weeks. Interestingly, the number of cells was significantly increased in hypoxic mice compared with that in normoxic mice at 3 and 5 weeks of hypoxia (Figure 1A). Moreover, cultivation of PBMCs from hypoxic mice revealed a colony formation (Figure 1B). Immunostaining revealed that these cells were positive for α -SMA (Figure 1C). Furthermore, VEGFR²/*c-kit*⁺ cells were accumulated mainly at the adventitia of pulmonary arteries of chronically hypoxic mice (Figure 1D), whereas VEGFR²/*c-kit*⁺ cells were not observed in normoxic condition (Figure 1E). These results suggest a crucial role of circulating VEGFR²/*c-kit*⁺ cells in the pathogenesis of hypoxia-induced PAH.

3.2 Differentiation of vascular endothelial growth factor receptor 2⁺/*c-kit*⁺ cells into α -smooth muscle actin⁺ cells

To elucidate the role of VEGFR²/*c-kit*⁺ cells, we isolated VEGFR²/*c-kit*⁺ cells from BM of Rosa26 mice by flow cytometry (Figure 2A) and cultured them on primary cultured stromal cell layers (derived from WT mice) under hypoxic conditions (2% O₂, 33°C) for 3 weeks (Figure 2B). Interestingly, these cells differentiated into α -SMA⁺ cells after 3 weeks of culture (Figure 2C).

3.3 Pravastatin reduces the number of bone marrow-derived cells at the pulmonary artery adventitia

To elucidate the effects of pravastatin on the recruitment of the BM-derived cells and the development of pulmonary

vascular remodelling, we used chimeric mice with β -gal-labelled BM. These chimeric mice were chronically exposed to hypoxia (10% O₂) for 5 weeks with or without simultaneous treatment with pravastatin (2 mg/kg/day). Microscopic observation revealed that the BM-derived (β -gal⁺) cells migrated and accumulated to the adventitia of pulmonary arteries (Figure 3A) and that pravastatin significantly reduced the number of those cells (Figure 3A and B).

3.4 Pravastatin reduces mobilization of vascular endothelial growth factor receptor 2⁺/*c-kit*⁺ cells and ameliorates pulmonary arterial hypertension

It has been shown that the secretion of SDF-1 is controlled by hypoxia-induced factor-1 α (HIF-1 α), which have chemotactic power to mobilize the BM-derived progenitors.^{31,32} We therefore assessed the plasma levels of SDF-1 in chronically hypoxic mice with or without pravastatin. Interestingly, plasma levels of SDF-1 were significantly increased in hypoxic mice, which was significantly reduced by pravastatin (Figure 4A). Moreover, immunostaining revealed that hypoxia enhanced the accumulation of CXCR4⁺ cells in the lung (Figure 4B) and FACS analysis showed the hypoxia-induced increase in the number of circulating CXCR4⁺/VEGFR²/*c-kit*⁺ cells in peripheral blood (Figure 4C), both of which also were inhibited by pravastatin. Finally, we confirmed that pravastatin ameliorated PH in mice *in vivo*, as assessed by RVSP (Figure 4D) and RV hypertrophy (Figure 4E).

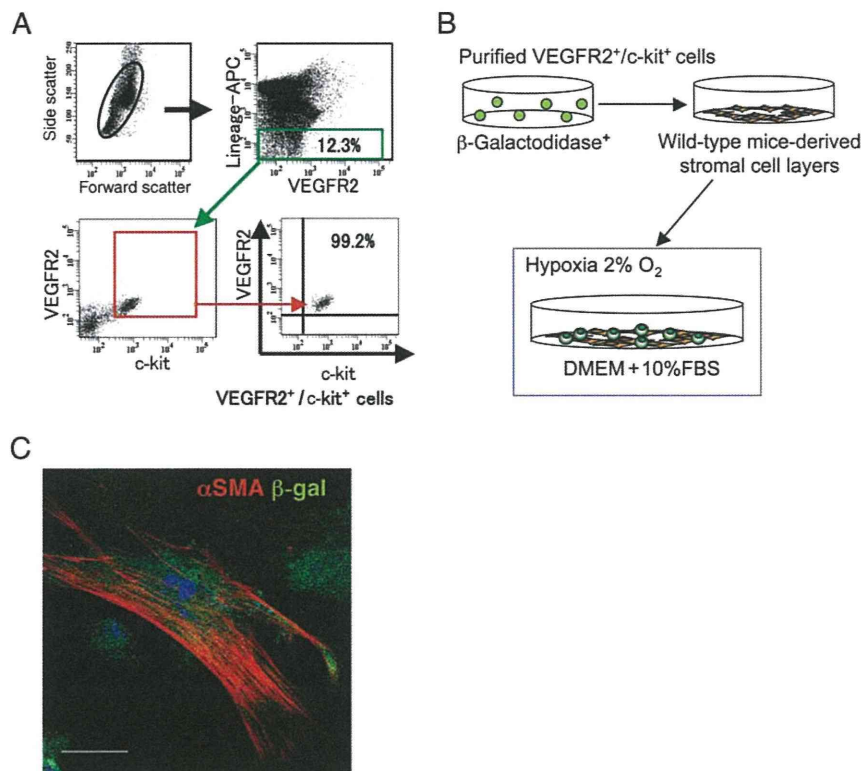


Figure 2 Differentiation of purified vascular endothelial growth factor receptor (VEGFR2)⁺/c-kit⁺ cells into α -smooth muscle actin (SMA)⁺ cells under hypoxic conditions. (A) Purification from the bone marrow of ROSA26 mice by flow cytometry. (B) Cultivation on the irradiated stromal cell layers under hypoxic conditions for 3 weeks. (C) Differentiation of purified VEGFR2⁺/c-kit⁺ cells (β -galactosidase⁺) into α -SMA⁺ cells. Scale bar: 10 μ m.

3.5 Pravastatin reduces accumulation of bone marrow-derived cells by suppressing ICAM-1 expression

It has been implicated that the interaction between ICAM-1 and its ligand, CD18, is crucial for the recruitment of the BM-derived progenitors.³³ We therefore assessed ICAM-1 expression in the hypoxic lung, the number of BM-derived cells, and their CD18 expression. Interestingly, hypoxia enhanced the expression of ICAM-1 in the lung, which was again suppressed by pravastatin (Figure 5A). Moreover, the BM-derived CD18⁺ cells accumulated into the pulmonary artery adventitia in hypoxic lung, which was again reduced by pravastatin (Figure 5A and B).

4. Discussion

The novel findings of the present study were that: (i) chronic hypoxia significantly mobilized VEGFR2⁺/c-kit⁺ cells that accumulated into the pulmonary artery adventitia *in vivo* and differentiated into α -SMA⁺ cells *in vitro* and (ii) pravastatin reduced the plasma levels of SDF-1, mobilization of CXCR4⁺/VEGFR2⁺/c-kit⁺ cells, and the expression of ICAM-1 in the lung, resulting in the reduced accumulation of BM-derived progenitors and amelioration of PAH. The present findings are summarized in Figure 6. To the best of our knowledge, this is the first study that demonstrates the therapeutic effects of a statin for PAH in the cutting edge of circulating progenitors.

4.1 Circulating progenitors and pulmonary arterial hypertension

We have recently demonstrated that circulating progenitors are incorporated into the pulmonary endothelium and that mobilization and homing of progenitors are important in the pulmonary vascular remodelling as they exert beneficial effects in hypoxia-induced PAH in mice.⁸ In the present study, circulating mononuclear cells isolated from mice chronically exposed to hypoxia differentiated into α -SMA⁺ cells *in vitro*. Consistent with our finding, a recent report demonstrated that circulating c-kit⁺ progenitor cells are involved in vessel wall thickening in hypoxia-induced PAH in calves.²⁵ Moreover, it has been shown that BM-derived cells differentiate into α -SMA⁺ cells in pulmonary arteries in hypoxia-induced PAH in mice.²⁸ It has also been demonstrated that circulating progenitors are heterogeneous and that haematopoietic stem cell-derived progenitors contribute to neoangiogenesis through adventitial infiltration, without any contributions to pulmonary endothelium in PAH animal models.^{34,35} Therefore, the BM-derived circulating progenitors may play a crucial role in the development of hypoxia-induced pulmonary vascular remodelling.

In the present study, we were also able to demonstrate the significant mobilization and accumulation of VEGFR2⁺/c-kit⁺ cells at the pulmonary artery adventitia *in vivo* and their differentiation into α -SMA⁺ cells *ex vivo*. Recent reports demonstrated that α -SMA⁺ cells at the pulmonary artery adventitia can be derived from circulating

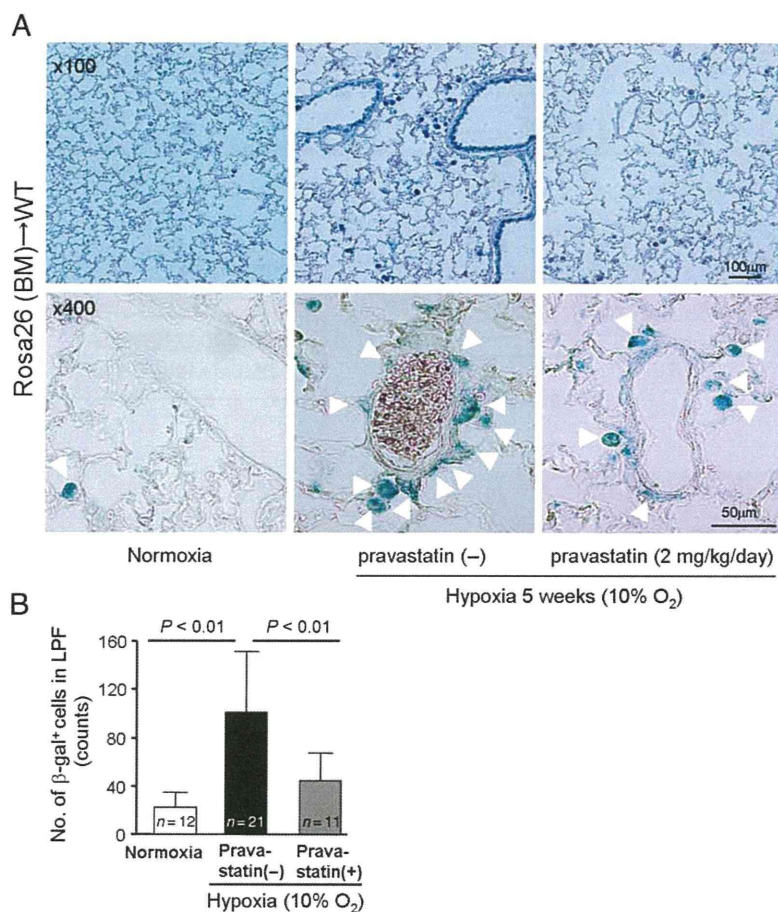


Figure 3 Bone marrow (BM)-derived cells in the adventitia of pulmonary arteries of chimeric mice. (A) X-gal staining showed that β-galactosidase (β-gal)⁺ BM-derived cells were increased by hypoxia and accumulated to the pulmonary artery adventitia (arrowheads) in hypoxic mice, while the number of BM-derived cells was reduced by pravastatin (arrowheads). (B) The number of β-gal⁺ cells was significantly increased in the hypoxic lung, which was significantly suppressed by pravastatin. Results are expressed as means ± SD. Normoxia, normoxic mice; hypoxia, mice exposed to 5 weeks of hypoxia (10% O₂) with or without pravastatin (2 mg/kg/day). LPF, low-power field (×200).

progenitors and have a potential to migrate and incorporate into the media and contribute to medial thickening.^{26,36} These reports and our present findings suggest the existence of circulating progenitor cells for α-SMA⁺ cells and their crucial roles in the pathogenesis of pulmonary vascular remodelling in hypoxia-induced PAH.

4.2 Statins and pulmonary arterial hypertension

It has been recently demonstrated that statins induce apoptosis of neointimal smooth muscle cells³⁷ and ameliorate monocrotaline-induced PAH in rats.¹² Statins have also been shown to prevent pulmonary artery muscularization and progression of PAH by protecting expression and activity of endothelial nitric oxide synthase (eNOS) at post-transcriptional level in hypoxia-induced PAH in rats.^{14,38} Although the mechanisms underlying the beneficial effects of statins on PAH are not fully elucidated, these studies suggest that statins may improve endothelial function, at least in part, through NO-dependent mechanisms.^{12,14,38} On the other hand, it also has been shown that statins mobilize progenitors and activate their function through

up-regulation of eNOS.^{15,16,18} However, in the present study, the number of circulating progenitors assessed by FACS analysis was significantly reduced by pravastatin in hypoxic mice. Therefore, the effect of statins on mobilization of progenitors under hypoxic conditions may have a complex mechanism (Figure 6).

Recently, it has been shown that SDF-1 plays a crucial role to mobilize and recruit BM-derived CXCR4⁺ proangiogenic cells to the ischaemic tissue.³¹ Moreover, it has been shown that the activated perivascular myofibroblasts produce abundant SDF-1, which plays a crucial role in the recruitment of BM-derived cells to the perivascular area.³² Again, recruited CXCR4⁺ cells secrete angiogenic cytokines and promote the proliferation and differentiation of resident cells in vascular walls.^{31,32} In the present study, we demonstrated that pravastatin significantly reduced the plasma levels of SDF-1, which could explain, at least in part, for the reduced mobilization of progenitors by statin. Pravastatin also suppressed the expression of ICAM-1 that is important for homing of BM-derived cells to the ischaemic tissue.³³ Taken together, we were able to demonstrate that pravastatin significantly reduces mobilization and homing of