

	Control	Ang II (n = 8)	Ang II-AML (n = 7)
SBP (mmHg)	135 ± 2	175 ± 3*	132 ± 6
Body Weight (g)	288 ± 10	261 ± 11**	261 ± 10**
Ao weight (mg/cm)	13.2 ± 0.3	16.9 ± 1.3*	13.4 ± 0.4
O ₂ ⁻ (cpm/mg/min)	608 ± 159	1005 ± 140*	595 ± 62
ONOO ⁻ (cpm/mg/min)	782 ± 115	1875 ± 295*	1142 ± 134
Emax (% of NE contraction)	105 ± 4	86 ± 3*	102 ± 3
ED50 (- Log M)	8.0 ± 0.27	6.6 ± 0.19*	7.6 ± 0.18

* $P < 0.05$ vs Control and Ang II-AML; ** $P < 0.05$ vs Control

beneficial synergistic effects upon the blood pressure as well as the vasculature.

Key Words: Angiotensin II, Reactive Oxygen Species, Nitric Oxide

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HMG-COA REDUCTASE INHIBITOR IMPROVES ENDOTHELIAL DYSFUNCTION IN MINERALOCORTICOID HYPERTENSION BY INHIBITION OF RHOA

Matthias Hermann, Frank Ruschitzka, Giovanni Camici, Sidney Shaw, Thomas F Luscher. Cardiovascular Research, University Zurich-Irchel, Zurich, Switzerland; Cardiovascular Center, University Hospital, Zurich, Switzerland; Department of Clinical Research, Inselspital Bern, Bern, Switzerland.

Statins reduce cardiovascular morbidity and mortality. These beneficial effects are not fully explained by their lipid-lowering action. As such, we investigated the impact of a new statin, rosuvastatin, on endothelial function, the key event in early atherogenesis, in an experimental model of normocholesterolemic hypertension.

Hypertension was induced in Wistar-Kyoto rats by inhibition of 11 β -hydroxysteroid dehydrogenase type 2 (11 β -HSD2) with Glycyrrhizic acid (GA). 11 β -HSD2 provides mineralocorticoid receptor specificity for aldosterone by metabolising glucocorticoids to their receptor inactive 11-dehydro derivatives. GA was added to the drinking water (3 g/L) for 21 days. From days 8 to 21 rosuvastatin (20 mg/kg/d) or placebo were added to chow. Endothelium-dependent and -independent relaxation of isolated aortic rings to acetylcholine (ACh, 10⁻¹⁰-10⁻⁵ mol/L) and sodium nitroprusside (SNP, 10⁻¹⁰-10⁻⁵ mol/L) was measured. In addition, vascular reactivity to endothelin-1 (ET-1; 10⁻¹⁰-10⁻⁷ mol/L) was investigated. ETA and ETB receptor mRNA expression was determined by RT-PCR and RhoA activity by a pull-down assay. Systolic blood pressure increased in rats treated with GA (175 vs 153 mmHg in controls; $p < 0.01$). Endothelium-dependent relaxations to acetylcholine were blunted after GA treatment ($p \leq 0.005$ vs control), while the responses to SNP remained unchanged. Rosuvastatin normalized NO-mediated endothelium-dependent relaxation in hypertensive animals ($p \leq 0.01$ vs placebo), although blood pressure and cholesterol levels were not affected by the statin. Vascular reactivity to ET-1 was increased by GA ($p < 0.01$ vs control), but not affected by rosuvastatin. ETB receptor mRNA decreased in the GA group ($p < 0.05$ vs control) and was upregulated by rosuvastatin ($p < 0.005$; GA+rosuvastatin vs GA), whereas ETA receptor mRNA upregulation in the GA group ($p < 0.01$ vs control) was partially prevented by the statin. In addition, GA increased Rho-GTP binding ($p \leq 0.05$ vs control) which was prevented in both groups by rosuvastatin treatment ($p \leq 0.01$ control+rosuvastatin vs control and GA+rosuvastatin vs GA).

These data for the first time show that HMG-CoA inhibition improves endothelial dysfunction in normocholesterolemic mineralocorticoid hypertension without affecting blood pressure or cholesterol levels by correction of a stimulated endothelin system.

Key Words: HMG-CoA reductase inhibitor, hypertension, endothelin

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PLASMA IMMUNOREACTIVE ENDOTHELIN-1 LEVELS IN HYPERTENSIVE RATS AND HUMAN SUBJECTS

Saad Abdel-Sayed, Peter Gohlke, Hans R Brunner, Juerg Nussberger. University Hospital CHUV, Division of Hypertension, Lausanne, Vaud, Switzerland.

Endothelin-1 (ET-1) is an endothelium-derived potent vasoconstrictor peptide of 21 amino acids. To establish reference values in different forms and models of hypertension and in human subjects an assay for plasma ET-1 was optimized. Immunoreactive (ir-) ET-1 is extracted by acetone from 1 ml plasma and subjected to a sensitive sandwich type enzyme linked immunosorbent assay. The detection limit for plasma ET-1 (3 SD above zero readings) is 0.05 fmol/ml. Mean recoveries of the 1, 2, 5, 10 fmol of ET-1 added to 1 ml plasma (n = 5, each) were 66, 75, 85 and 92 % respectively. The within-assay coefficients of variation were 12, 5, 3, 3 and 0.5 % for plasma ET-1 concentrations of 0.84, 1.5, 2.3, 5.2 and 9.9 fmol/ml respectively. Between-assay coefficients of variation for two human control plasmas containing 1.0 fmol/ml (n = 8) and 1.2 fmol/ml ET-1 (n = 7) were 8% and 10% respectively. Assay accuracy was demonstrated by the consistent recoveries of added ET-1 and by the linearity of ir-ET-1 concentrations measured in serially diluted plasma extracts (r = 0.99). No ir-ET-1 was detected when albumin buffer was extracted instead of plasma (buffer blank). Using this method, we found increased ir-ET-1 levels in plasma of three experimental rat models of hypertension. (i) Plasma ir-ET-1 concentrations were significantly higher in stroke-prone spontaneously hypertensive rats (SP-SHR) than in normotensive Wistar rats. (ii) DOCA-salt hypertensive rats exhibited 4 times higher ir-ET-1 levels than sham operated control rats. (iii) One kidney-one clip (1K-1C) hypertensive rats showed moderately increased ir-ET-1 levels compared to sham operated controls. In contrast, the ir-ET-1 levels in plasma of SHR were half that of normotensive Wistar rats. In two kidney-one clip (2K-1C) Goldblatt hypertensive rats, the plasma ir-ET-1 concentrations were not different from sham-operated control rats. The plasma ir-ET-1 concentrations of 37 healthy human subjects were 0.85 ± 0.26 fmol/ml (mean ± SD). We conclude that the present assay reliably measures plasma immunoreactive ET-1 levels in rats and in human subjects. Normal plasma ET-1 concentrations in humans and conscious rats are in the low picomolar range.

Key Words: Endothelium, Vasoconstrictor, Hormone

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IDENTIFICATION OF DOMINANT NEGATIVE RAT RAMPs ABLE TO INHIBIT ENDOGENOUS ADRENOMEDULLIN RECEPTOR FUNCTION

Kenji Kuwasako, Kazuo Kitamura, Johji Kato, Tanenao Eto. First Department of Internal Medicine, Miyazaki Medical College, Kiyotake, Miyazaki, Japan.

Adrenomedullin (AM) exerts a wide variety of biological effects, including potent vasorelaxation. Its receptors were recently shown to be heterodimers comprised of a novel accessory protein, the receptor activity-modifying protein (RAMP), and the calcitonin receptor-like receptor (CRLR). When CRLR is co-transfected with RAMP2 or -3, the two proteins are transported together to the plasma membrane where they function as an AM-specific receptor. Recently, we have shown that seven amino acids of human (h)RAMP2 (86-92) and hRAMP3 (59-65) are essential for high-affinity agonist binding to hAM receptors. Interestingly, both seven-residue segments are located between three conserved residues (Trp, Cys and Tyr) and the three ones are common to humans, rats and mice. In this study, we examined whether seven-residue segments situated between three residues conserved in both rat (r)RAMP2 and rRAMP3 (amino acids 93-99 and 58-64, respectively) are key determinants of agonist binding to rAM receptors, and then tested whether their deletion mutants can act as dominant negative RAMPs.