Adhesion Molecules Polymorphism in Peripheral Atherosclerosis

THESIS

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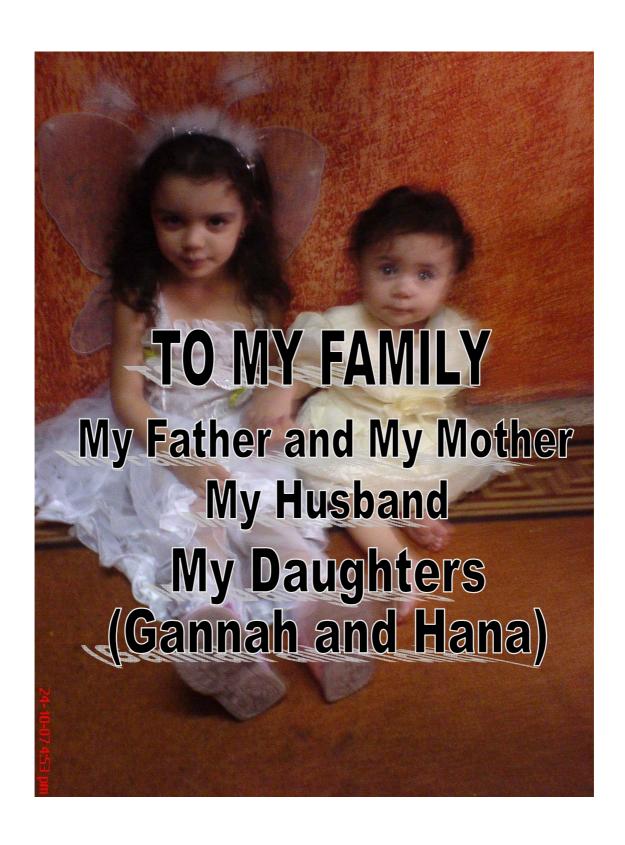
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ABSTRACT

Numerous reports document the role of vascular adhesion molecules in the development and progression of atherosclerosis. E-selectin plays a role in the early stages of vascular disease by facilitating the attachment of leukocytes to the endothelium. Polymorphism in the E-selectin gene leading to a replacement of serine by arginine at position 128 has been associated with premature coronary artery disease. Intercellular adhesion molecule-1 (ICAM-1) plays a crucial role in lymphocyte migration and activation, and is considered important in the pathogenesis of atherosclerosis. The aim of the present study was to evaluate the association between gene polymorphism of E-selectin & ICAM-1 and peripheral arterial occlusive disease (PAOD) in Egyptian. We investigated 2 mutations, namely S128R in E-selectin and K469E in ICAM-1 in 52 patients with PAOD and 30 control subjects using polymerase chain reaction—restriction fragment length polymorphism (PCR-RFLP) analysis in an Egyptian population. Patients were classified into 31 diabetic and 21 non diabetic subjects.

The distribution of E-selectin genotypes in patients affected by PAOD was 84.6% AA genotype and 15.4% AC genotype. The distribution of E-selectin genotypes in control subjects was 96.7% AA and 3.3% AC. The AC genotype was significantly more common in patients than controls. Additionally, the distribution of ICAM-1 genotypes in patients affected by PAOD was 30.8% EE, 48% EK, and 21.2% KK. The distribution of ICAM-1 genotypes in control subjects was 13.3% EE, 33.4% EK and 53.3% KK. The EE genotype was significantly more common in patients than controls. It is interesting in this study those patients having AC genotype, also having EE genotype.

Conclusions- Our data support the hypothesis that inflammatory mechanisms are important in the pathophysiology of vascular diseases with an atherosclerotic basis. Eselectin gene S128R polymorphism and ICAM1 gene K469E polymorphism were associated with increased risk in PAOD. The E allele may serve as a genetic risk factor for PAOD.

Early detection of these gene polymorphism helps in early prophylaxes against PAOD.

Key Words: PAOD (Peripheral Arterial Occlusive disease), ICAM-1, E-selectin, RFLP.

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LIST OF ABBERVIATIONS

ABI Ankle – Brachial Index

ACE Angiotensin Converting Enzyme

AP-1 Activator Protein 1

APC Adenomatous Polyposis Coli

A561C Adinine/Cytosine 561
ALT (IU/l) Alanine Transaminase
AT1 Angiotensin II Type 1

ARE Antioxidant Response Elements

Arg Argnine

AST Asprtate Transaminase

CAC Coronary Artery Calcification
CAD Coronary Artery Disease
CAMs Cell Adhesion Molecules

CD Celiac Disease

cDNA Complemtary Deoxyriboneucleic Acid

CHD Coronary Heart Disease

CLA Cutaneous Lymphocyte Antigen

C. pneumonia Chlamydia Pneumonia

CR Consensus Repeat

CRBP-1 Cellular Retinol Binding Protein-1

CRC Colorectal Cancer
CRP C-Reactive Protein
CS Cigarette Smoking

CSF Colony-Stimulating Factor
CT Computed Tomography

CTA Computed Tomographic Angiography

CVD Cardiovascular Disease CVS Cerebrovascular Stroke

DM Diabetes Mellitus
Dgl Desmoglein Isoforms
Dsc Desmocollin Isoforms

EC Endothelial Cells
ECG Electrocardiogram
ECM Extracellular Matrix

EDTA Ethylene Diamine Tetraacetic Acid

EGF Epidermal Growth Factor

ELAM Endothelial Leukocyte Adhesion Molecule

eNOS Endothelial NO Synthase

ESL E-Selectin Ligand

ESR Erythrocyte Sedimentation Rate

ET-1 Endothelin-1

FBS Fasting Blood Sugar.

FGF Fibroblast Growth Factor

GAP GTPase Activation Protein

GEF Guanine Exchange Factor

GDP Guanisine Diphosphate

GMP Guanosine Mono Phosphate

GSK-3 β Glycoprotein Synthase Kinase-3 β

HA Hyaluronate

HDL High Density Lipoprotein

HIV Human Immunodeficiency Virus

HSP Heat Shock Protein

HTN Hypertension

HUVEC Human Umbilical Vein Endothelial Cells

IBD Inflammatory Bowel Disease IC Intermittent Claudication

ICAM-1 Intercellular Adhesion Molecule-1 IDDM Insulin Dependent Diabetes Mellitus

IHD Ischemic Heart Disease

IL Interleukin

I/R Ischemia/Reperfusion.
IRS Insulin Resistance Study

ITIMs Immunoreceptor Tyrosine Inhibition Motifs

KB Kilobases

LDL Low Density Lipoprotein

LECAM Lymphocyte Endothelial CAM

LFA Lymphocyte Function Associated Antigen

Lp Lipoprotein

LPS Lipopolysaccharide

MAP Mitogen Activated Protein MAdCAM Mucosal Addressin CAM

MCP-1 Monocyte Chemoattractant Protein-1

MI Myocardial Infarction

MIDAS Metal Ion Dependent Adhesion Site
MIF Macrophage Migration Inhibitory Factor
MIP-2 Macrophage Inflammatory Protein-2

MMP Matrix Metalloproteinase

MRA Magnetic Resonance Angiography

mRNA Messenger Ribonucleic Acid

MS Multiple Sclerosis

MVEC Microvascularendothelial Cells NIHD Non Ischemic Heart Disease

NF-kB Nuclear Factor kB

NO Nitric Oxide ox-LDL Oxidized LDL

PAD Peripheral Arterial Disease

PAOD Peripheral Arterial Occlusive Disease

PCR Polymerase Chain Reaction

PADGEM Platelet Activation-Dependent Granule External

Membrane Protein

PDGF Platelet-Derived Growth Factor

PECAM Platelet–Endothelial Cell Adhesion Molecule

PKC Protein Kinase C

PSC Primary Sclerosing Colangitis PSGL P-Selectin Glycoprotein Ligand

PTA Percutaneous Transluminal Angioplasty

RA Rheumatoid Arthritis RAD Renal Artery Disease

RAS Renin-Angiotensin System

RF Rheumatoid Factor

ROS Reactive Oxygen Species

RPTP Receptor Protein Tyrosine Phosphatases

RR Relapsing Remitting

SBP Segmental Blood Pressure

sCAD Spontaneous Cervical Artery Dissection

SH2 Src Homology 2

SMCs: Smooth Muscle Cells

SNP Single Nucleotide Polymorphism

SP-MS Secondary Progressive

SSEA Sialyl Stage-Specific Embryonic Antigen

sTNFR Soluble TNFR

TBE Tris-Borate EDETA
TF II D Transcription Factor II D

TGF-β, Transforming Growth Factor-Beta

TM Transmembrane

TNF-α Tumor Necrosis Factor -α

TNFR Tumor Necrosis Factor Receptor

UT Untranslated

VCAM-1 Vascular Adhesion Molecule-1

VLA Very Late Antigen

WHO World Health Organization

INTRODUCTION

Peripheral arterial disease (PAD) is associated with high mortality rates (e.g. 30%, 50% and 70%, at 5, 10 and 15 years, respectively due to a high incidence of cerebrovascular and cardiovascular events. This may be explained, at least in part, by the ongoing endothelial and enhanced coagulation activation that occurs in PAD patients compared with normal individuals. Irrespective of the cause underlying the increased incidence of cerebrovascular and cardiovascular events, PAD patients are more likely to have a fatal or non-fatal myocardial infarction (MI) or stroke that of ever requiring a major amputation. In addition, the presence of PAD in patients with stable angina conveys a 6.3-fold increased risk for sudden death (*Paraskevas et al.*, 2007).

Cellular adhesion molecules are markers of inflammation that are hypothesized to play a major role in the initiation of atherosclerotic lesions. The cell adhesion molecules are important for binding of leukocytes to the endothelial cells and in the infiltration of inflammatory cells into tissues. Various inflammatory mediators such as TNF- α , IL-1 β and bacterial lipopolysaccharide (LPS), increase the expression of cell adhesion molecules (CAMs) including ICAM-1, VCAM-1 and E-selectin on endothelial cells (*Kumar et al.*, 2007).

Thus, upon inflammatory stimulation, the endothelial barrier function is rapidly lost and preformed P-selectin is translocated to the luminal surface of endothelial cells, followed by expression and release of E-selectin, intercellular adhesion molecule-1 (ICAM-1), and vascular adhesion molecule-1 (VCAM-1), substances that regulate attachment and

transendothelial migration of leukocytes. Both macrophages and endothelial cells produce ICAM-1 in response to inflammatory cytokines (*Bartzeliotou et al.*, 2007).

During inflammation, E-selectin, which is usually absent in normal tissues, is expressed on the endothelium. After activation by cytokines, adhesion molecules are shed from the surface of endothelial cells and leucocytes and their circulating levels in plasma can be measured, serving as markers of endothelial activation and vascular inflammation (*Afshar-Kharghan and Thiagarajan*, 2006).

The inflammatory reaction that accompanies development and progression of atherosclerosis is orchestrated by several molecules, belonging to different families of inflammatory mediators, such as cytokines, chemokines, adhesion molecules, and proteolytic enzyme. Importantly, plasma levels and/or functional activity of these inflammation determinants may be strongly influenced by functional single nucleotide polymorphisms of the corresponding genes, with important clinical implications (*Flex et al.*, 2007).

As all these inflammatory mediators display complex interactions during atherogenesis, genetic studies aimed to investigate individual susceptibility to cardiovascular diseases (CVDs) should not be limited to the evaluation of polymorphisms of single inflammatory genes, but should consider several genetic variants together, in order to account for the pleiotropic and interdependent effects of candidate genes (*Flex et al.*, 2004).

Aim of the Work

The aim of the present study is to evaluate the association between gene polymorphisms of ICAM-1 & E-selectin and atherosclerotic peripheral diseases.