Introduction to the Inflammatory Pathobiology of Atherosclerosis

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Atherosclerosis – plan of talk/learning objectives

- Importance of atherosclerosis to human health
- Cellular pathology of atherosclerosis
- Link between cholesterol and inflammation
- How to investigate molecular mechanisms
- Homeostatic *versus* pathogenic roles of humoral immunity

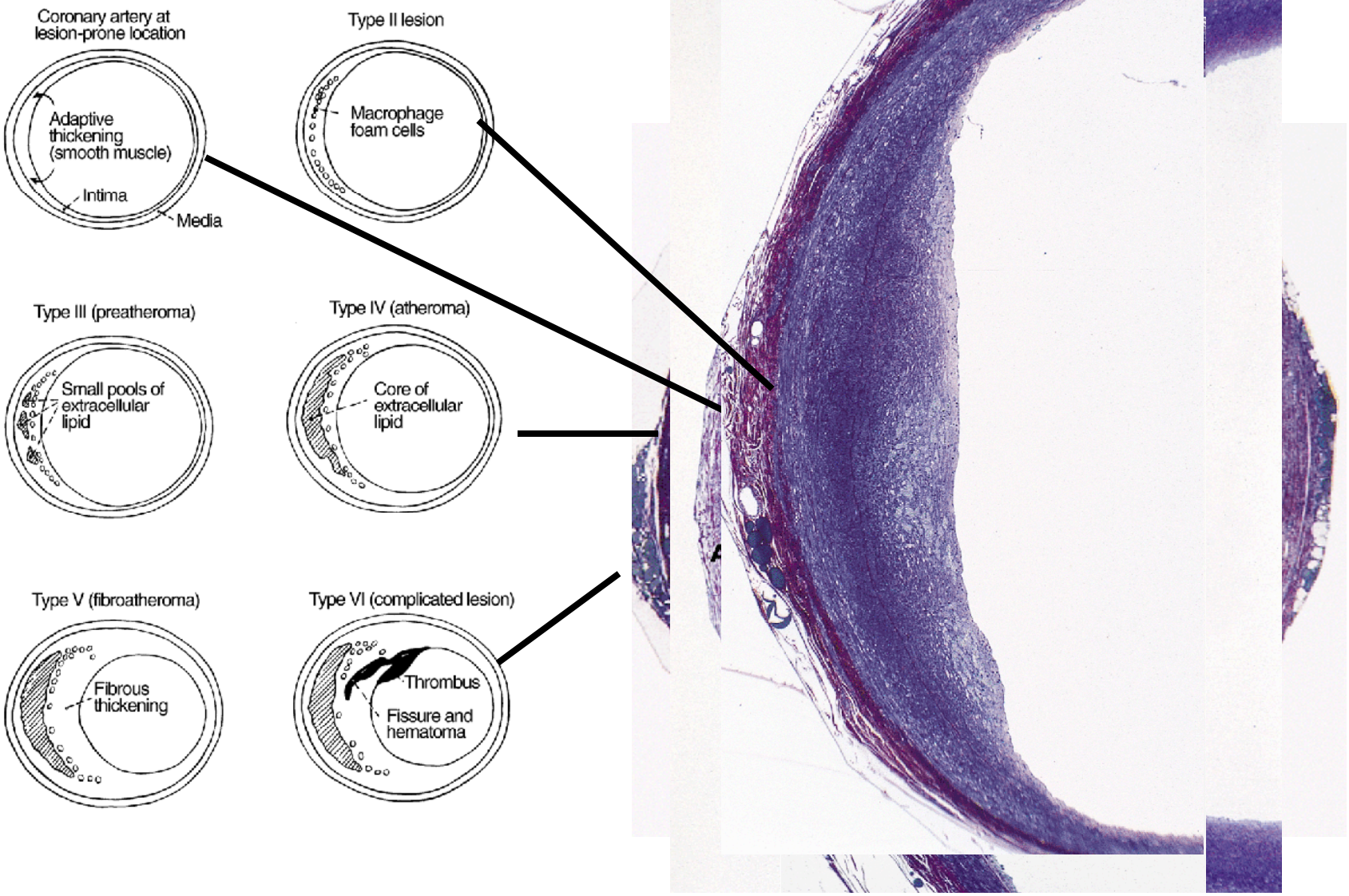
The DEATHS preceding were caused by Diseases and Casualties as follows, viz.

Abscesses	1	Hernia, or Rupture	3
Aneurism	1	Jaundice	10
Apoplexy	13	Inflammation of the bowels	1
Burns or Scalds	6	——— of the stomach	1
Cancer	5	Killed by lightning	1
Casualties	15	Insanity	1
Childbed	14	Intemperance	2
Cholera Morbus	6	Locked jaw	2
Colic	2	Mortification	11
Consumption	221	Old Age	26
Convulsions	36	Palsy	12
Cramp in the stomach	2	Pleurisy	8
Croup	1	Quinsy	15
Debility	28	Rheumatism	1
Decay	20	Rupture of blood vessels	1
Diarrhœa	15	Small-Pox,(at Rainsford's Island)	2
Drinking cold water	2	Sore throat	1
Dropsy	21	Spasms	2
——— in the head	23	Stillborn	49
Drowned	13	Suicide	1
Dysentery	14	Sudden death	25
Dispepsia or Indigestion	15	Syphilis	12
Fever, bilious	7	Teething	15
——— pulmonic	46	Worms	11
——— inflammatory	24	Whooping Cough	14
——— putrid	6	White swelling	2
——— typhus	33	Diseases not mentioned	48
Flux infantile	57		
Gout	3	Total,	942
Hoemorrhage	4		

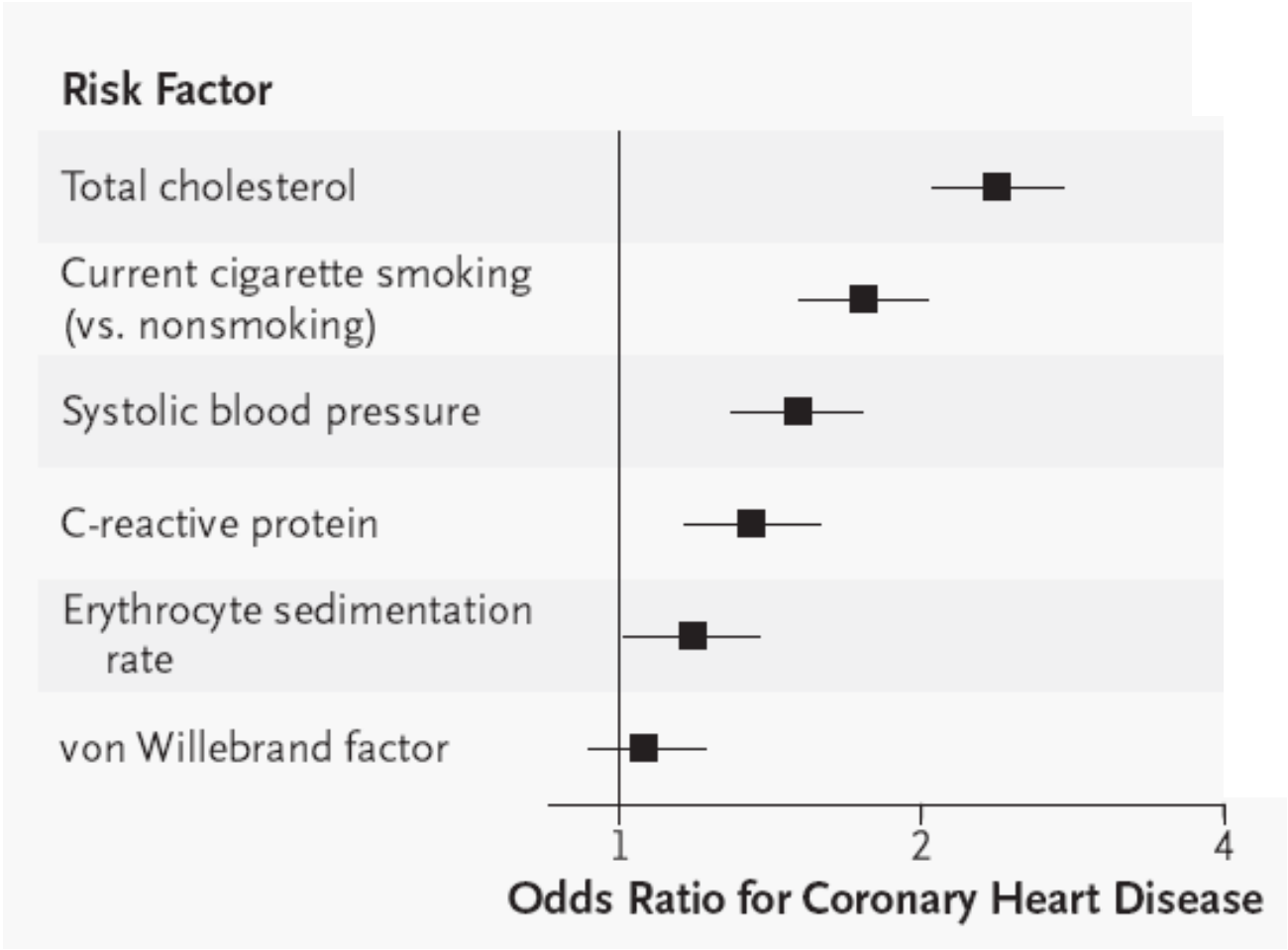
Causes of Death in 1811. Abstract of the Bill of Mortality for the Town of Boston.

Jones et al 2012 NEJM 366:2333

Type II lesion

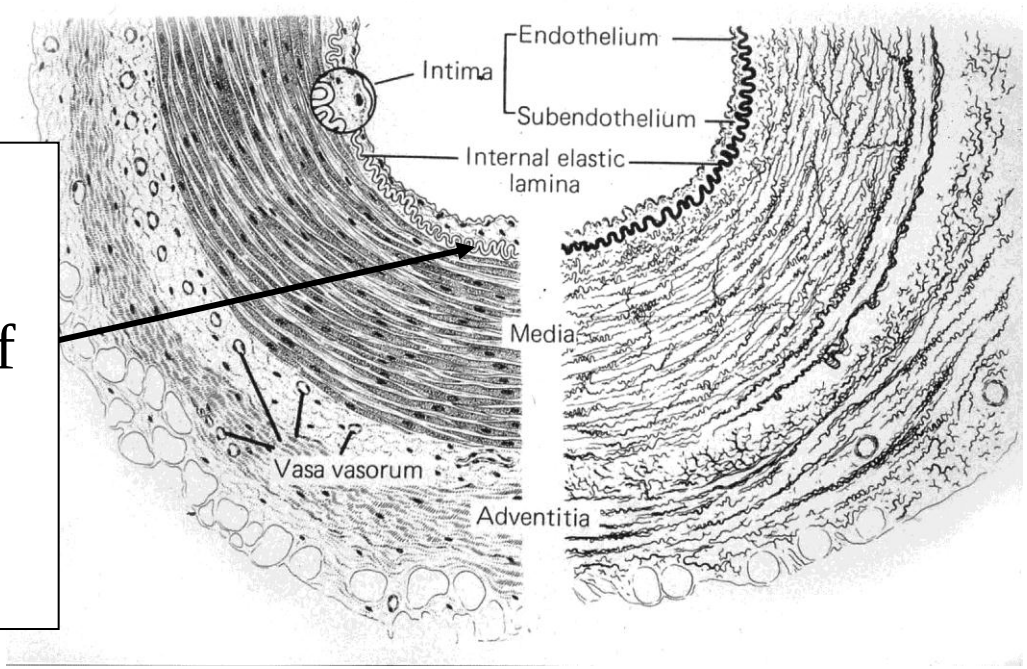


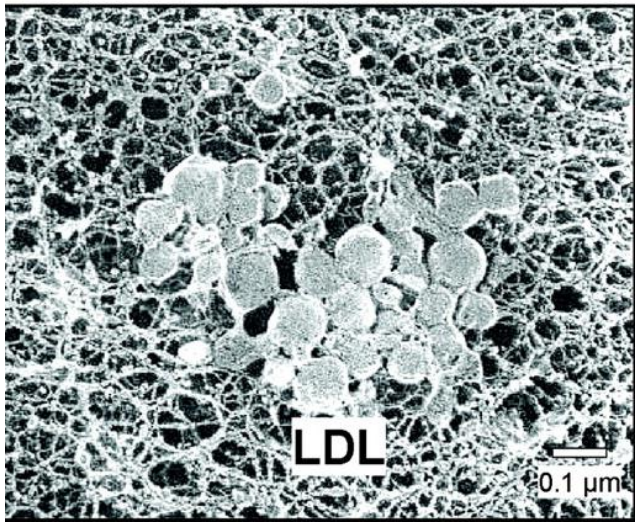
Relative importance of risk factors



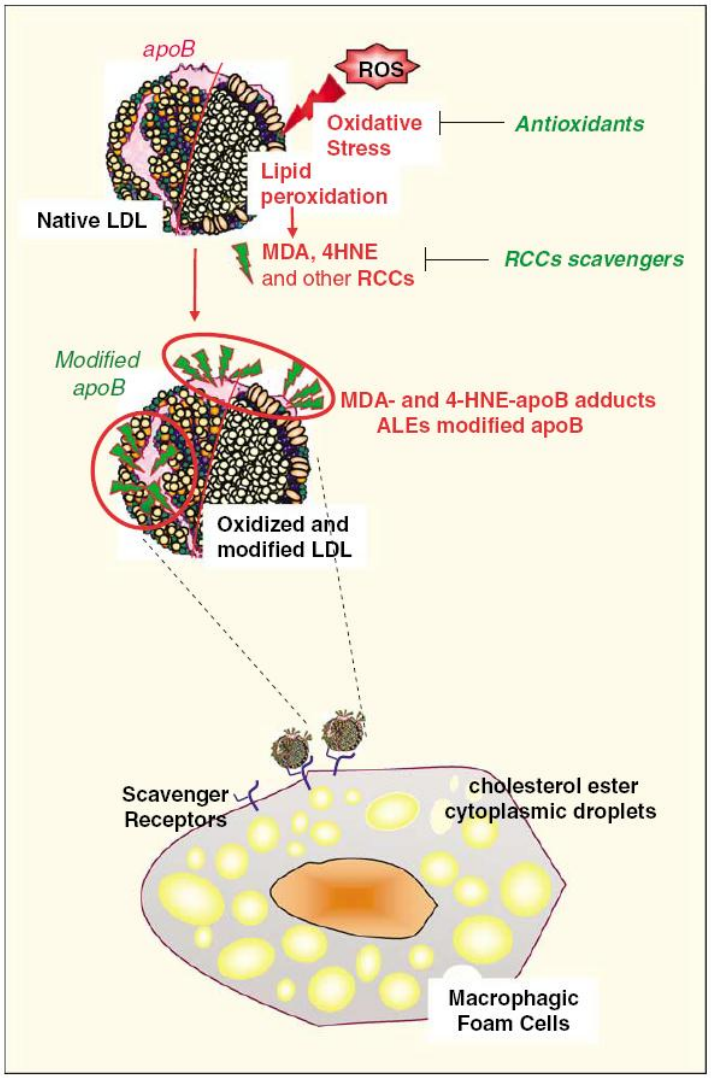
Danesh et al 2004 N Engl J Med 350:1387

Low density lipoproteins (LDL) deposit in the subintimal space at sites of low/complex flow, and bind to matrix proteoglycans

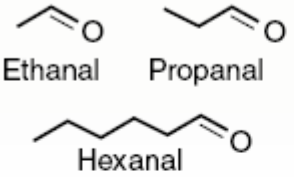




From: Tabas, I. et al. Circulation 2007;116:1832-1844

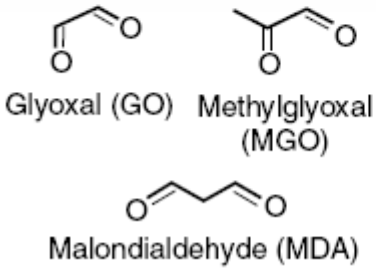


Saturated Aldehydes

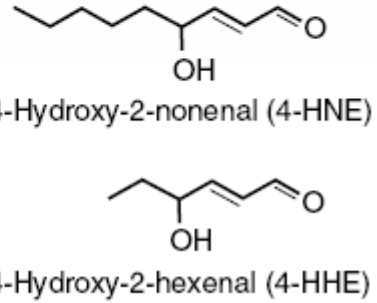


Unsaturated Aldehydes

Dicarbonyls

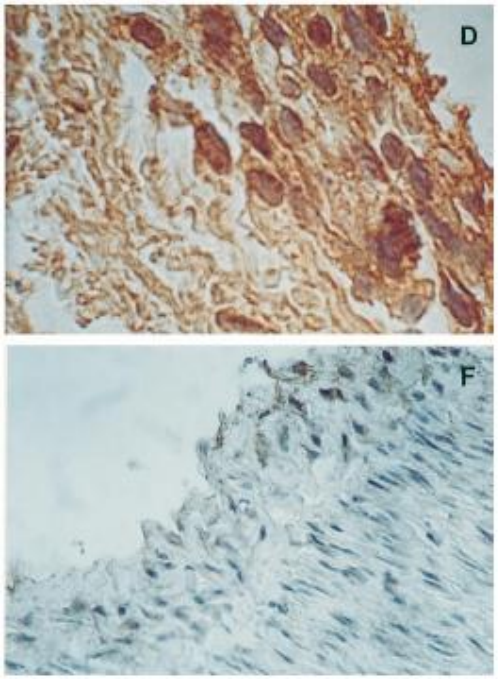


4-Hydroxy-2-alkenals



LDL modification in the arterial wall happens before macrophage infiltration

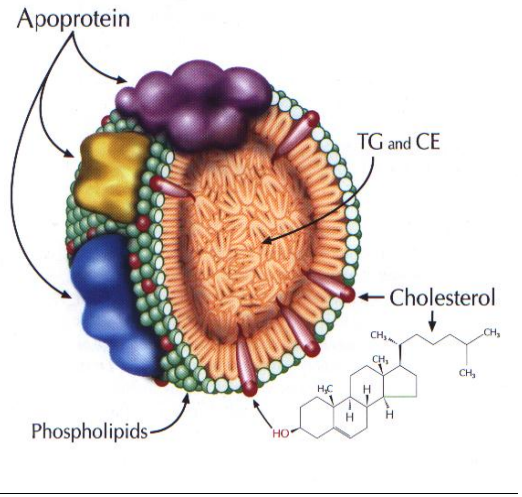
MDA-lysine
(oxidised LDL)

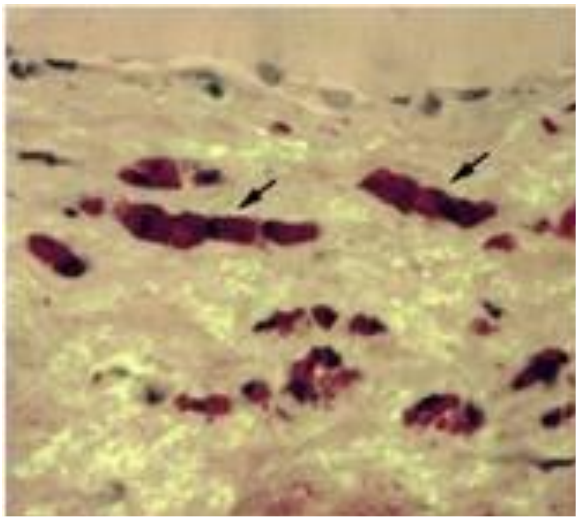


monocyte/møs

Napoli et al 1997 J Clin Invest 100:2680

Foam cells

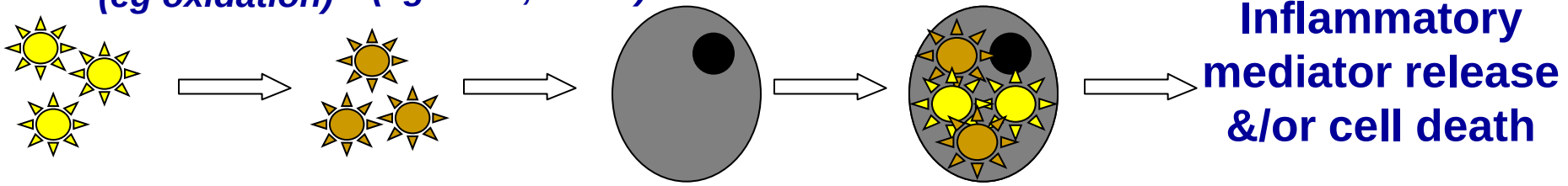




Dr Howard Kruth

lipoprotein modification (eg oxidation)

via scavenger receptors (eg SR-A, CD36)

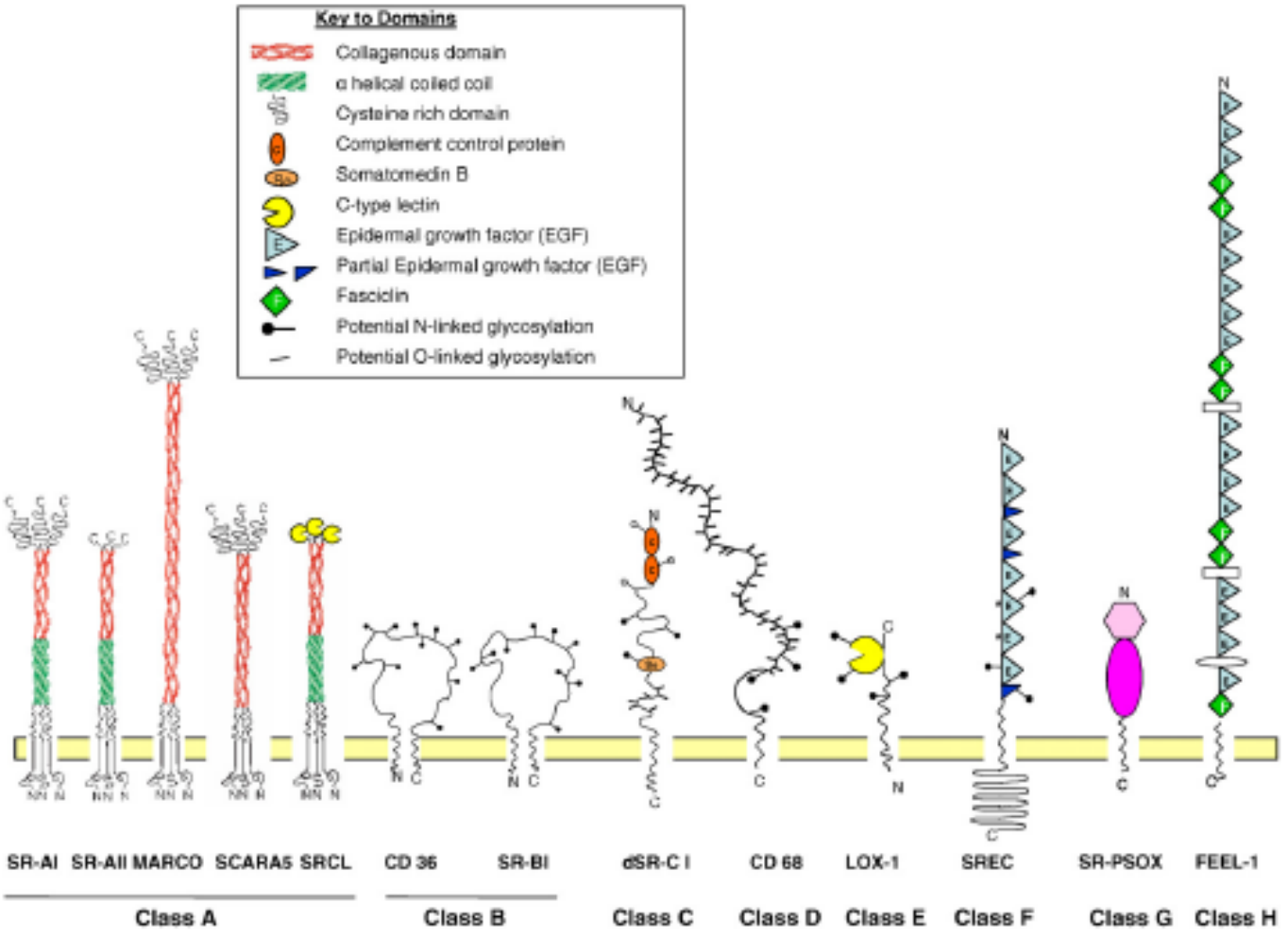


Macrophage

"foam cells"

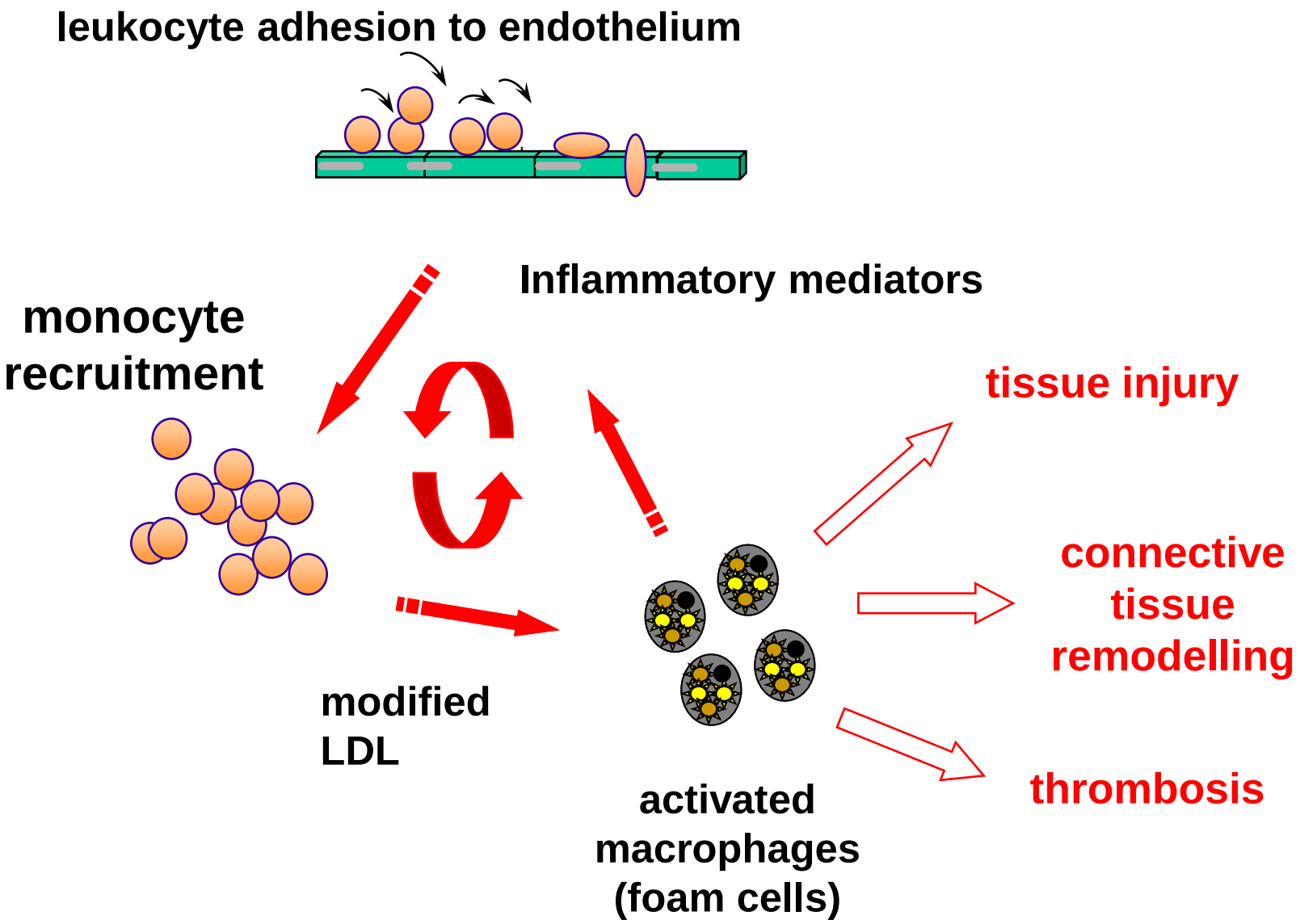
Inflammatory mediator release &/or cell death

Macrophage scavenger receptors

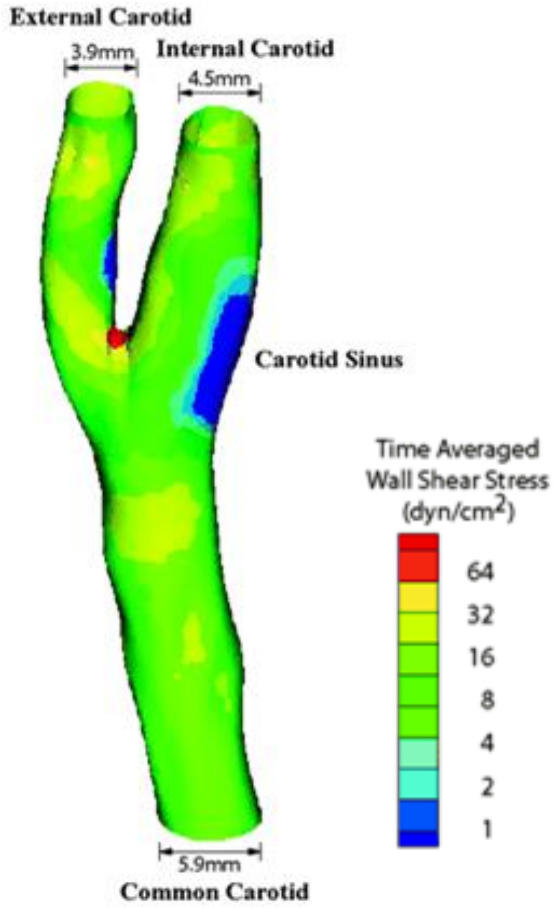


from Pluddemann et al (2007) Methods 43:207

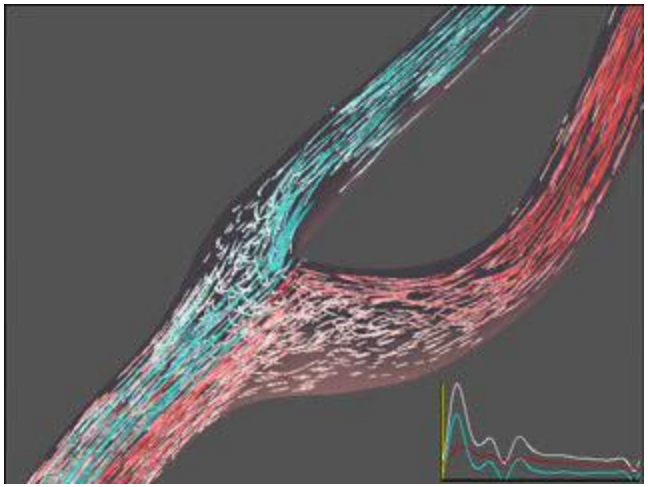
Inflammatory genesis of atherosclerosis



Branch points and curvatures are most susceptible to atherosclerosis



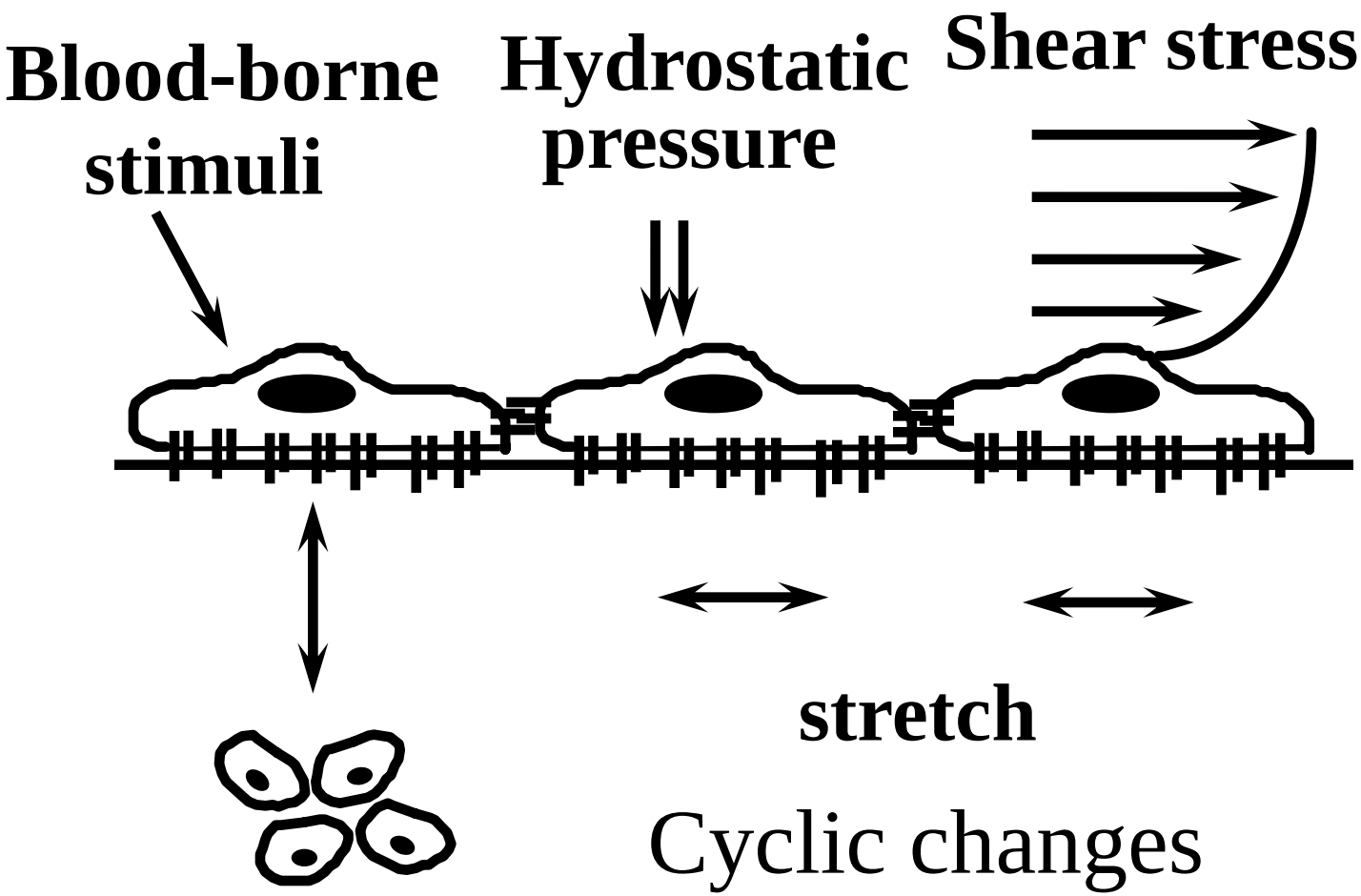
Dai et al. (2004) PNAS 101, 14871-14876



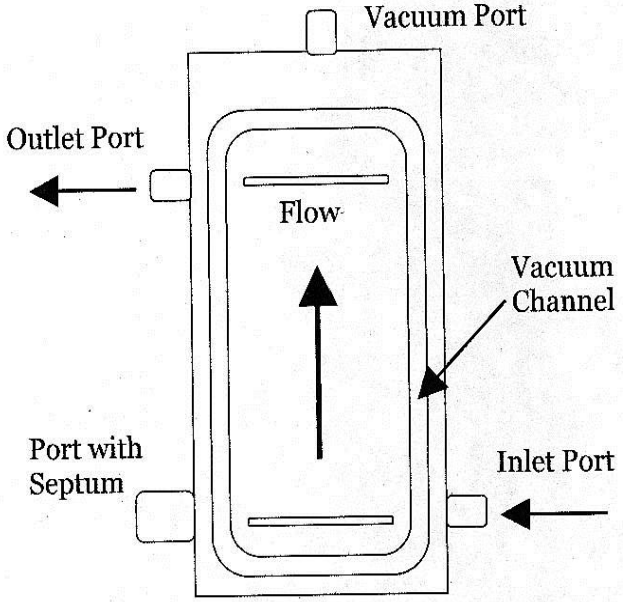
By Dr David Steinman
University of Western Ontario

- Risk factors are systemic but lesions are focal
- Low shear stress regions are susceptible
- Blood flow exerts shear stress on EC
- Endothelial cells detect shear stress

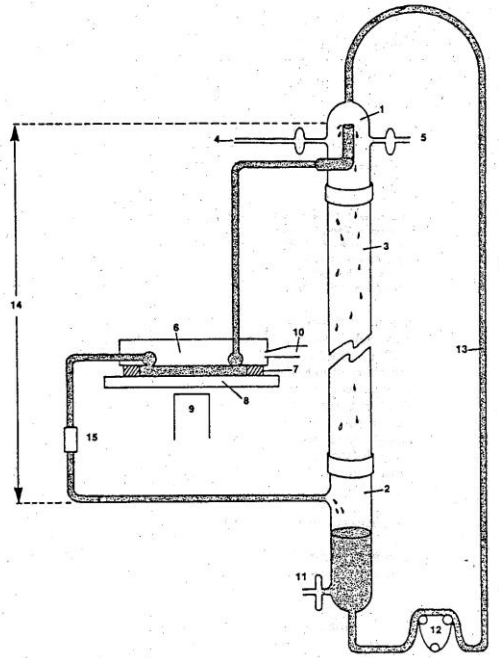
Effects of mechanical forces on endothelial function

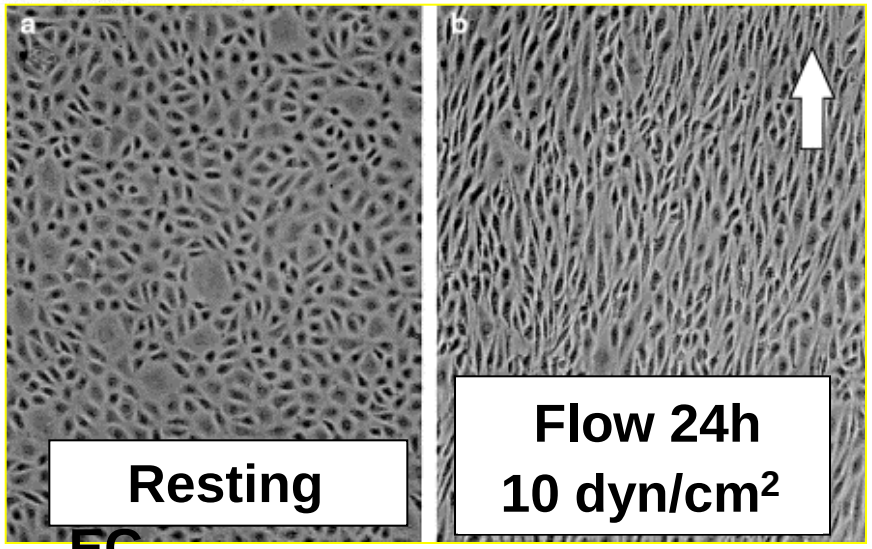


Use of parallel plate flow chamber for studying endothelial cells under flow



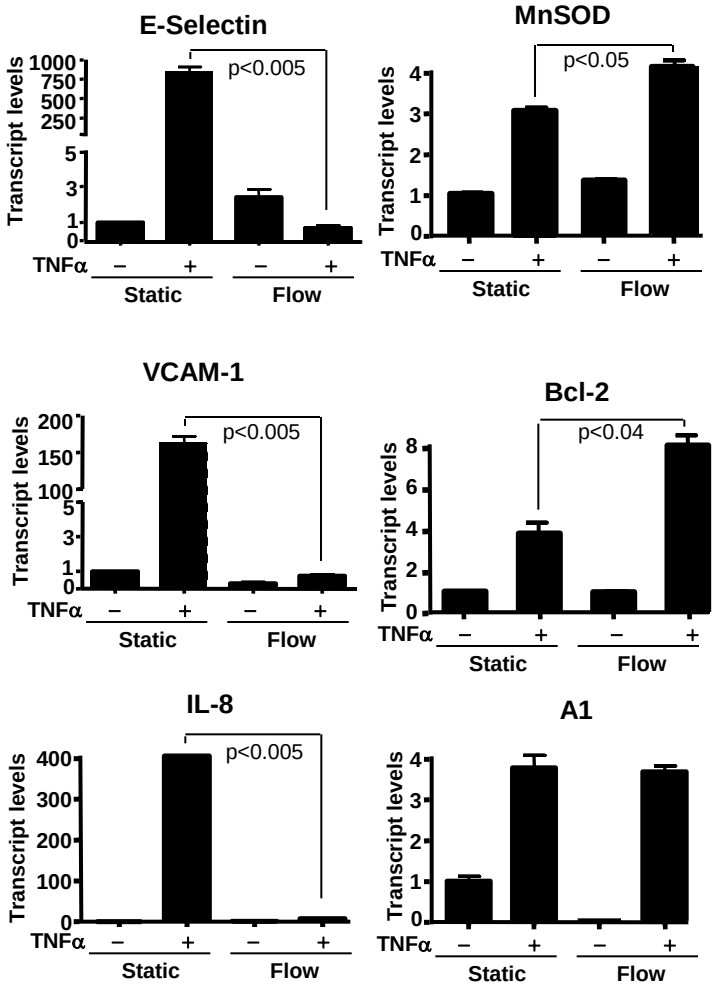
Flow Chamber





EC

Laminar flow suppresses proinflammatory gene expression but sustains cytoprotective responses in response to TNFα

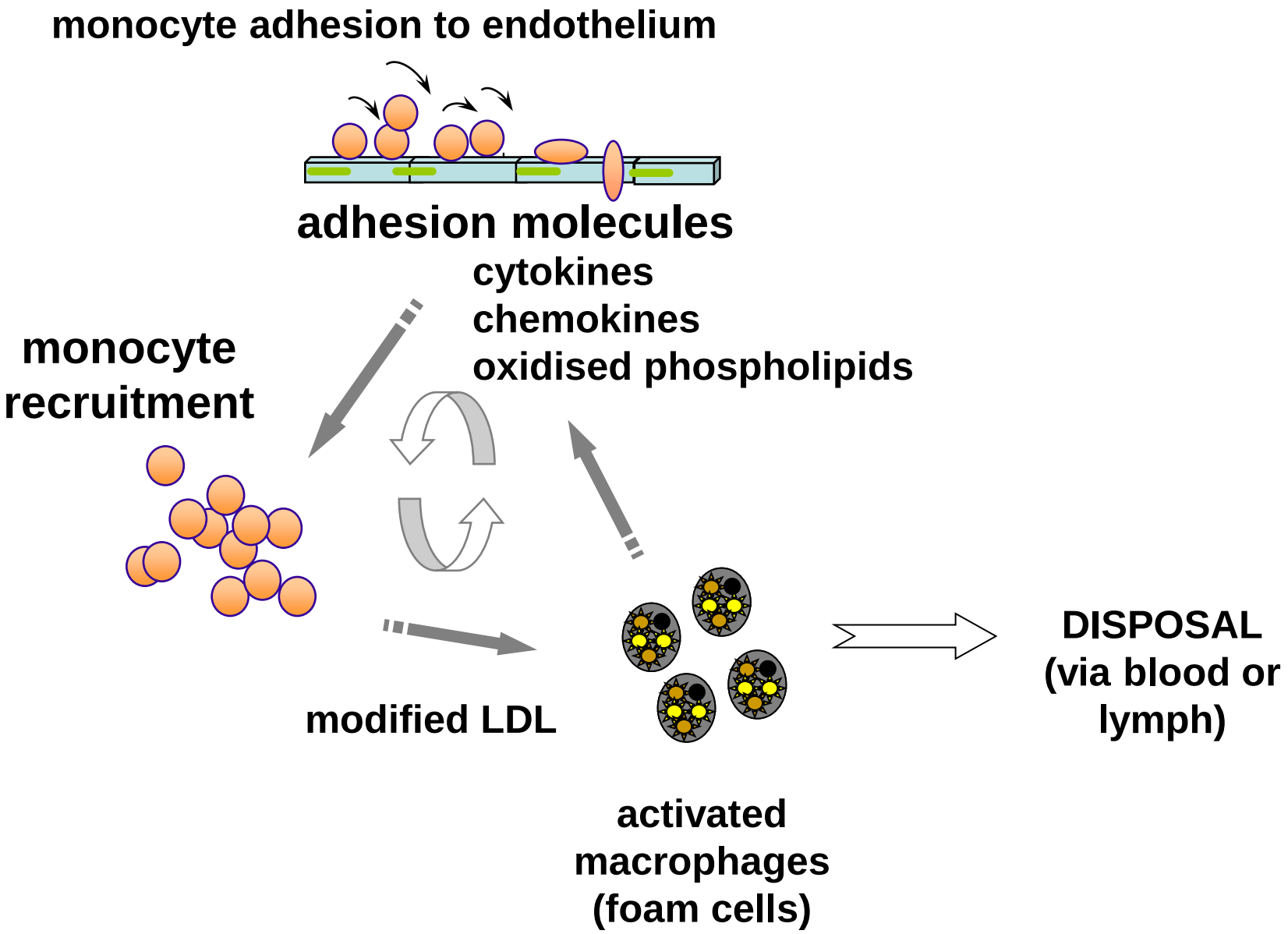


proinflammatory genes

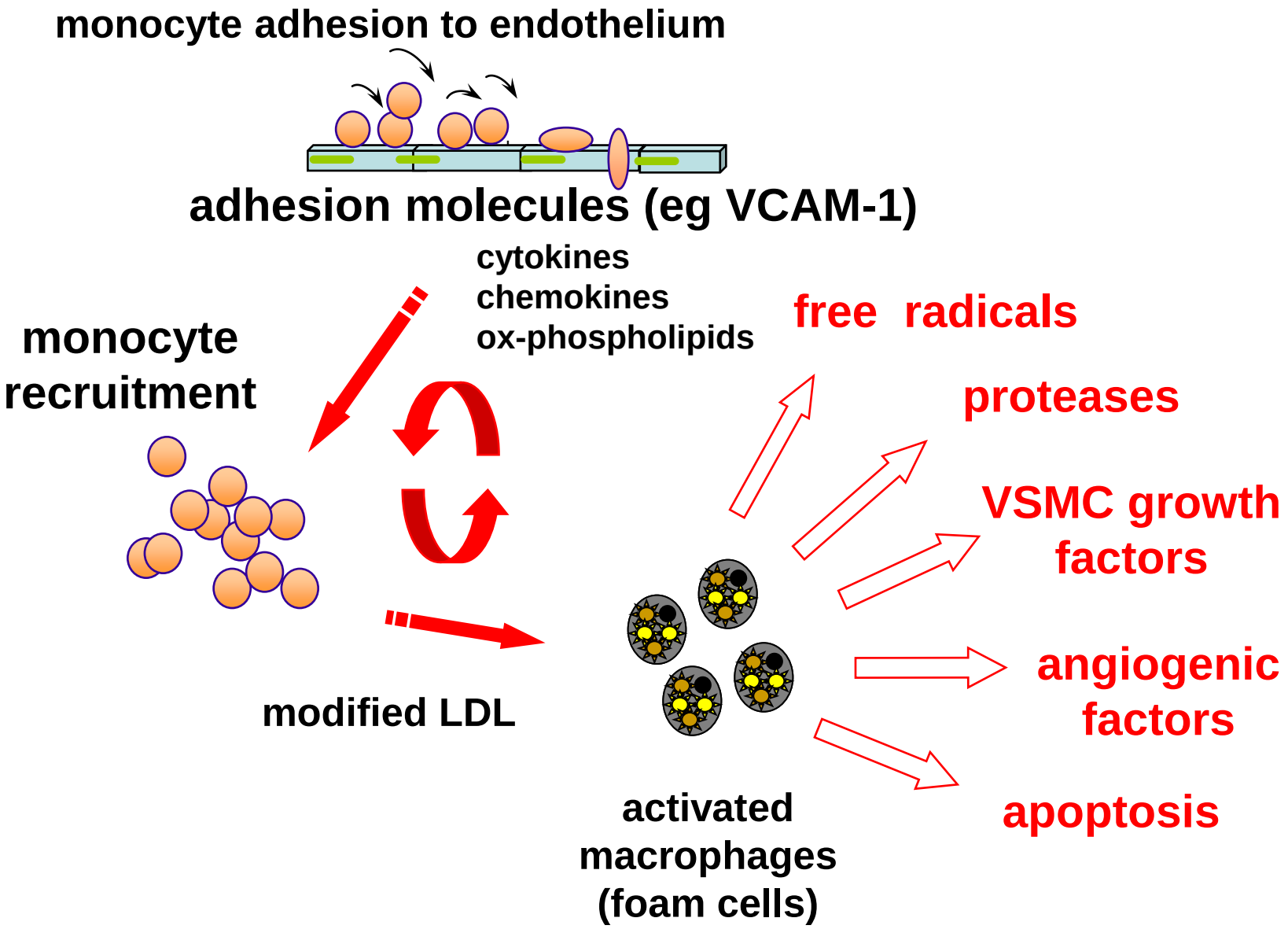
cytoprotective genes

Partridge et al (2007) FASEB J , 21:3553

Homeostatic debris disposal



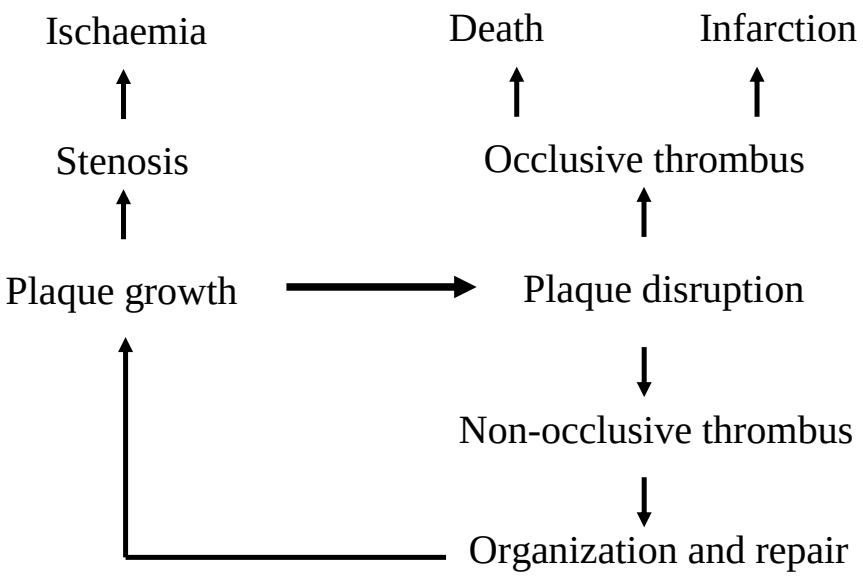
Inflammatory basis of atherosclerosis

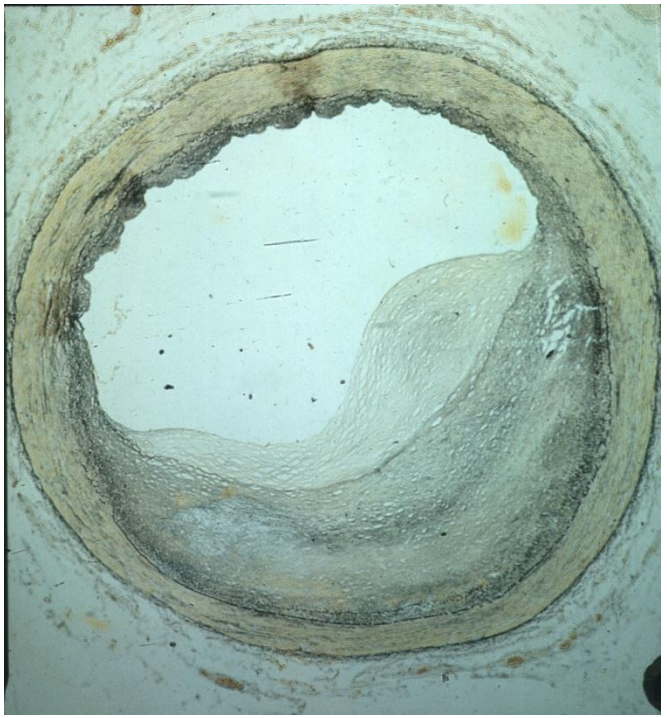


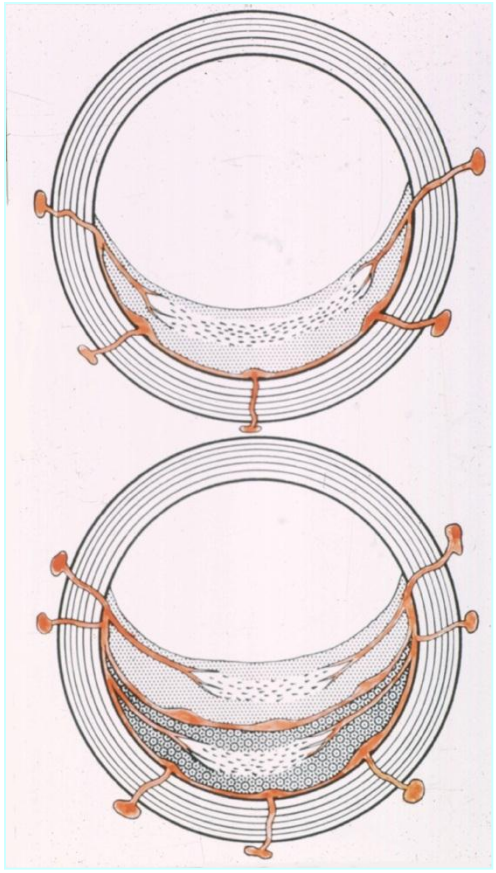
Macrophage uptake of LDL

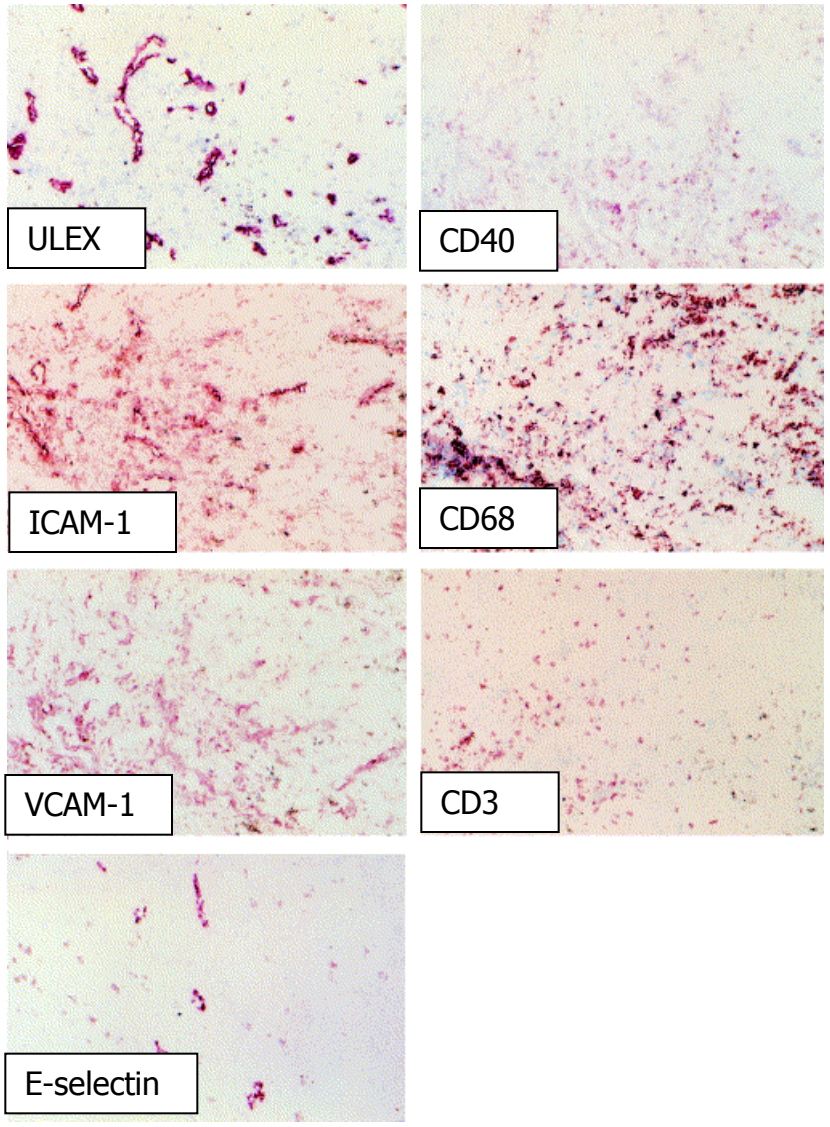
- Physiological uptake of LDL via LDL receptor controlled by receptor down-regulation
- Uptake of oxidised LDL by scavenger receptors is not regulated and results in “foam cell” formation.
- Cholesterol-laden macrophages die by apoptosis or necrosis and release proinflammatory cytokines and growth factors.

Step-wise progression of atherosclerotic plaques



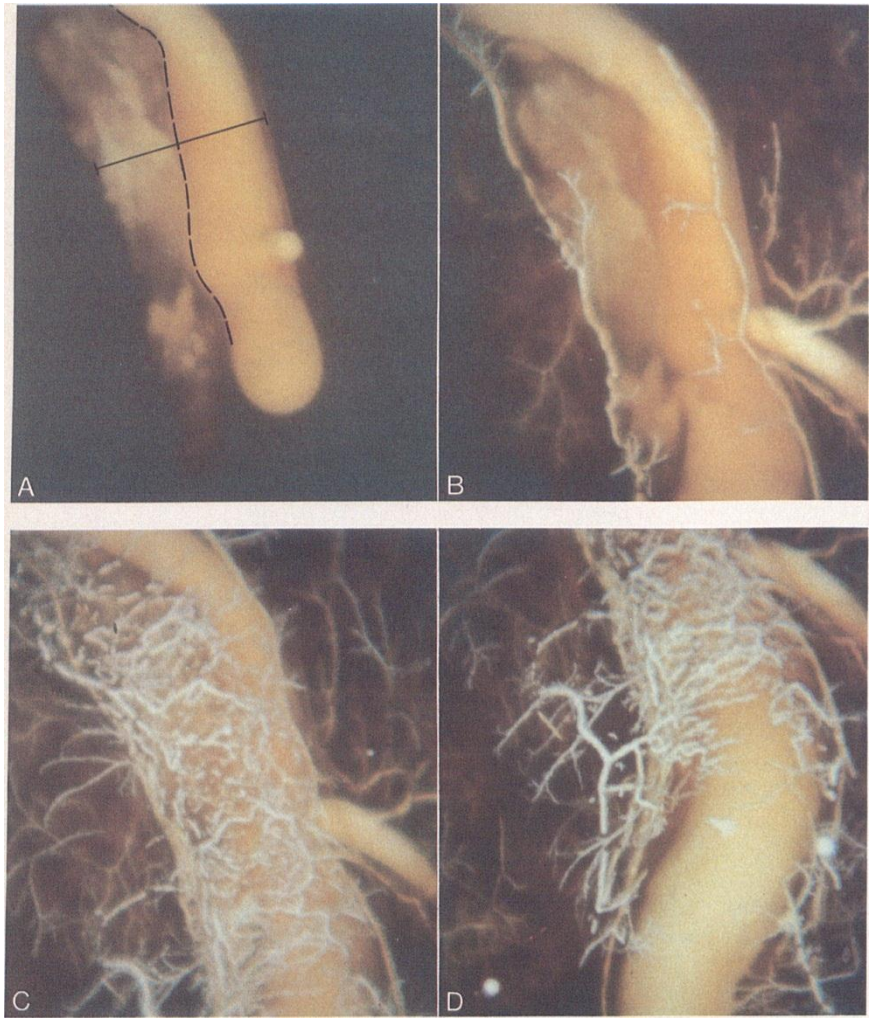






De Boer et al (1999) Cardiovasc Res 41:443.

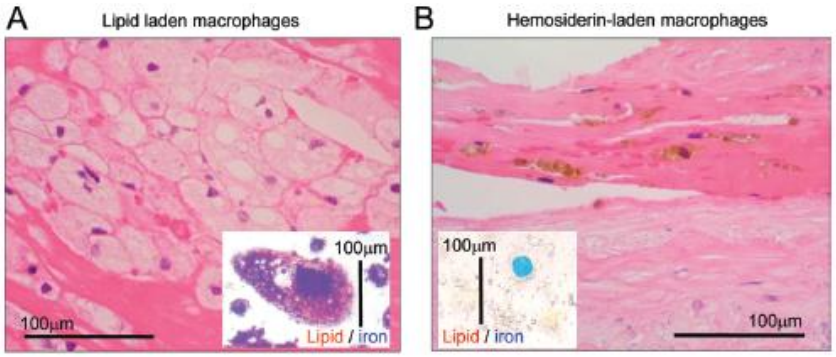
Intra-plaque haemorrhage and lesion progression



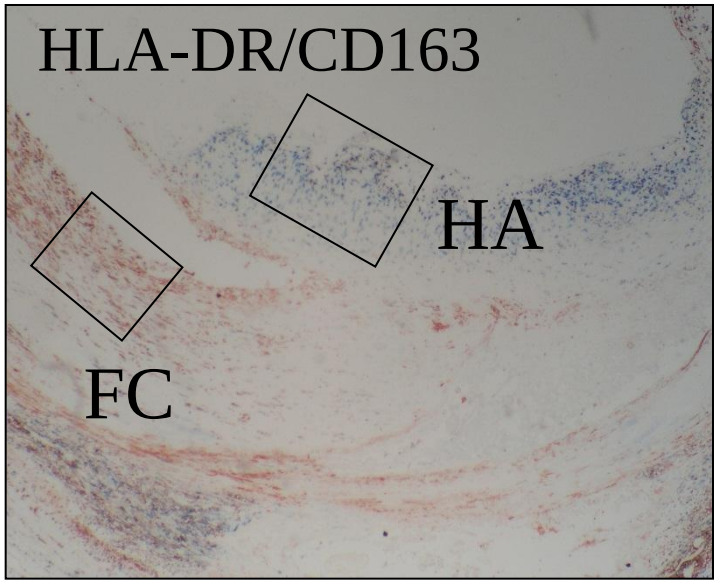
- poorly formed vessels with inadequate pericyte and basement membrane support
- density of microvessels correlates with density of activated macrophages
- intraplaque haemorrhage linked to acute clinical events – due to physical disruption
- extravasated erythrocytes provides a dual metabolic challenge –lipid from erythrocyte membranes and iron from heme

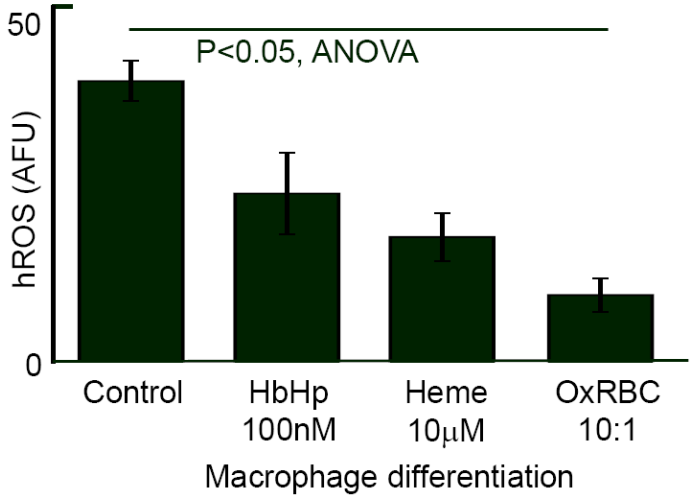
Barger AC et al. N Engl J Med 1984;310:175-177.

Haemorrhage-associated macrophage differentiation



Joe Boyle

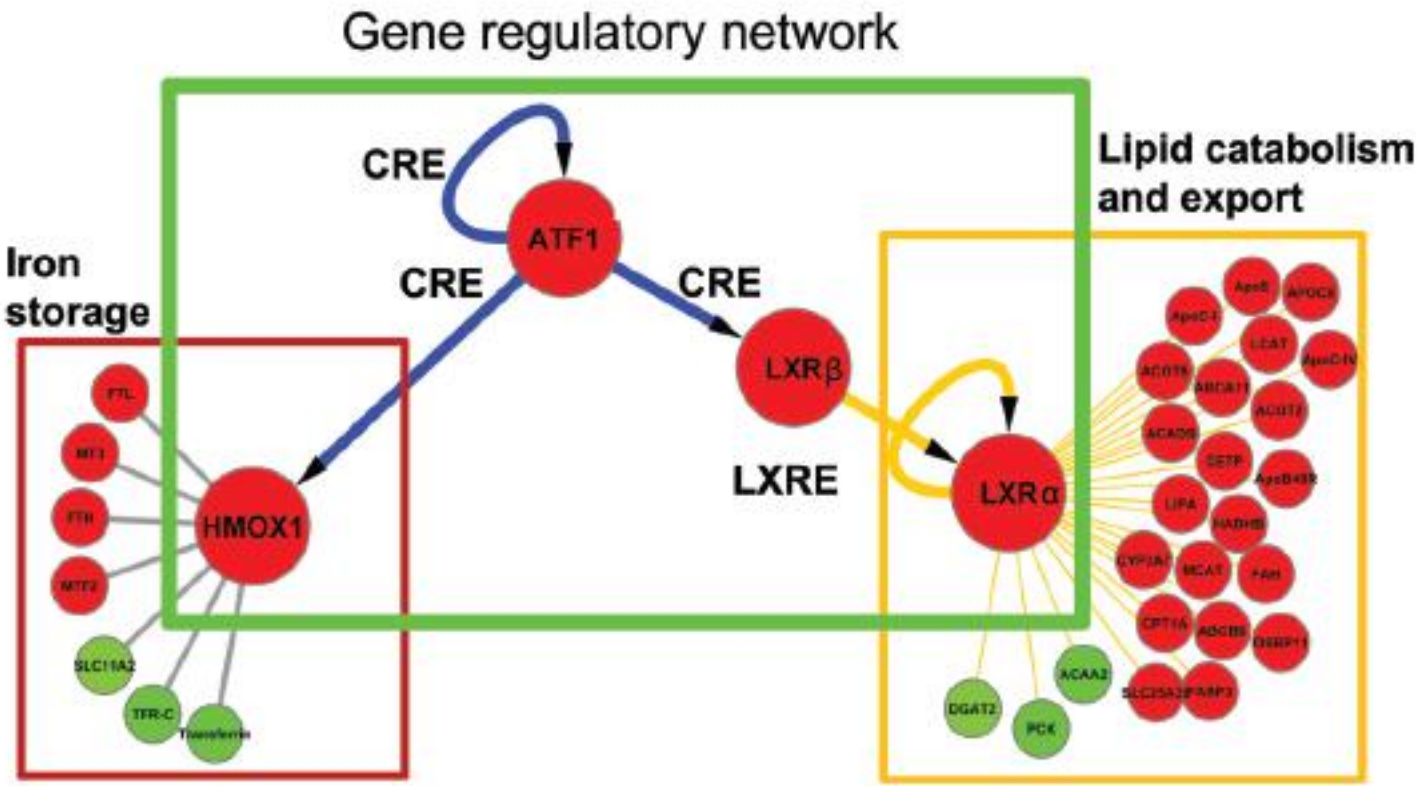




Boyle et al 2009 Am J Path 174:1097

Boyle et al 2011 ATVB 31:2685

The Mhem phenotype - coinduction of genes handling iron load and lipid export

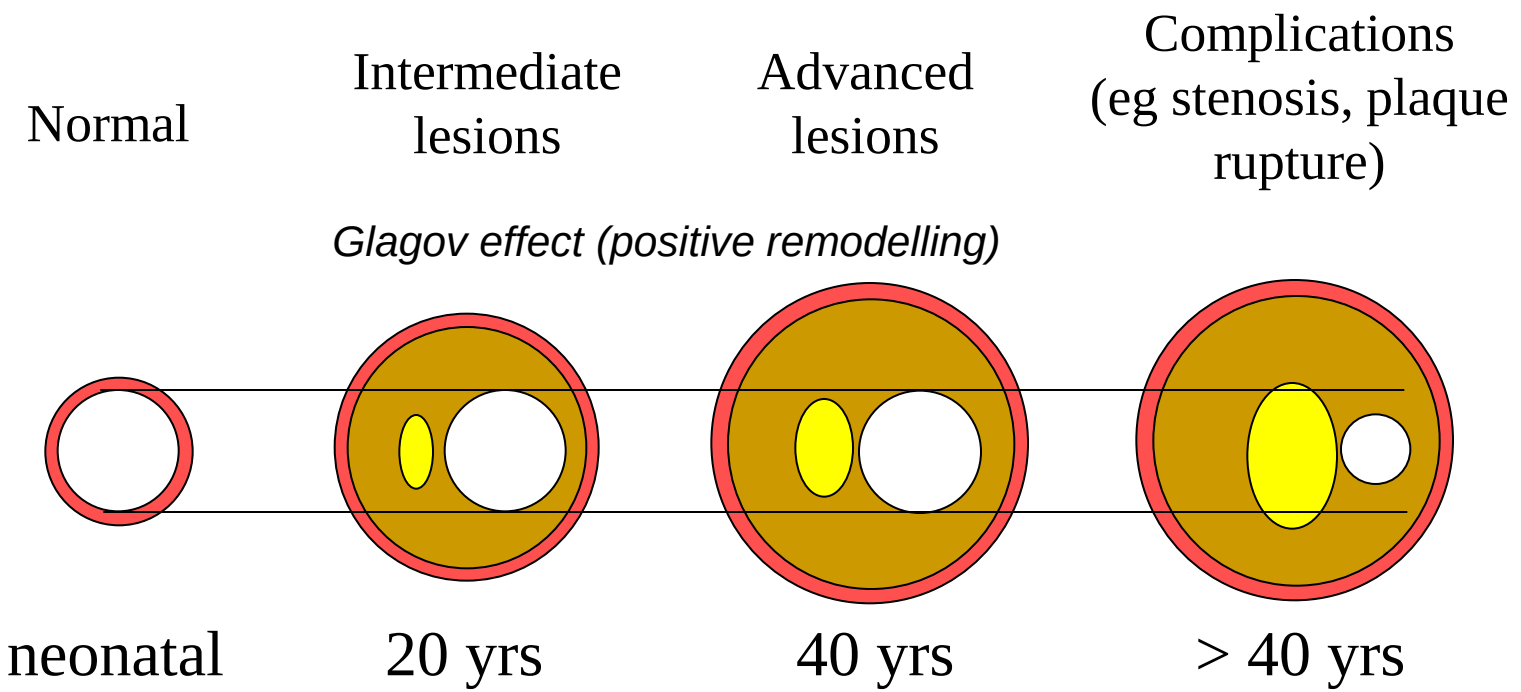


Boyle et al 2012 Circ Res 110:20

Main cellular players

- **Vascular endothelial cells**
  - Barrier function (eg to lipoproteins)
  - Leukocyte recruitment
- **Platelets**
  - Thrombus generation
  - Cytokine and growth factor release
- **Monocyte-macrophages**
  - Foam cell formation
  - Cytokine and growth factor release
  - Major source of free radicals
  - Metalloproteinases
- **T lymphocytes**
  - Macrophage activation
- **Vascular smooth muscle cells**
  - Migration and proliferation
  - Collagen synthesis
  - Remodelling and fibrous cap formation

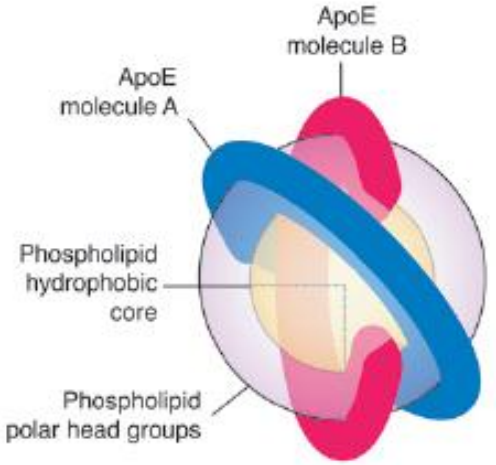
Natural history of atherosclerosis



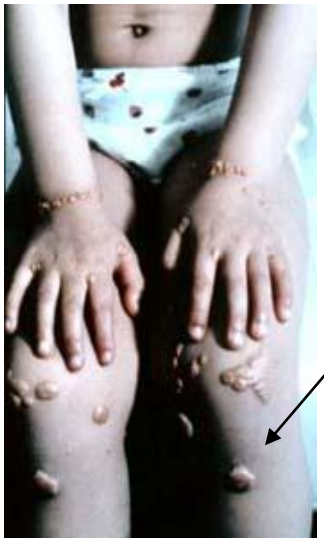
Seymour Glagov et al (1987) New Engl J Med 316:1371

Mouse models of atherosclerosis

- **ApoE-/-**
  - 34kd component of VLDL and chylomicrons
  - ligand for LDL receptor

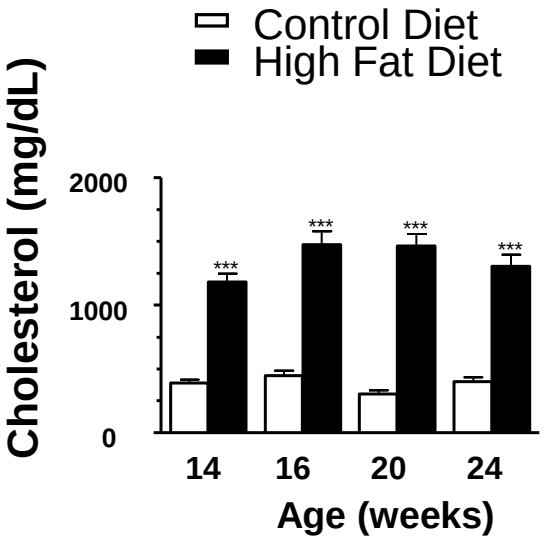


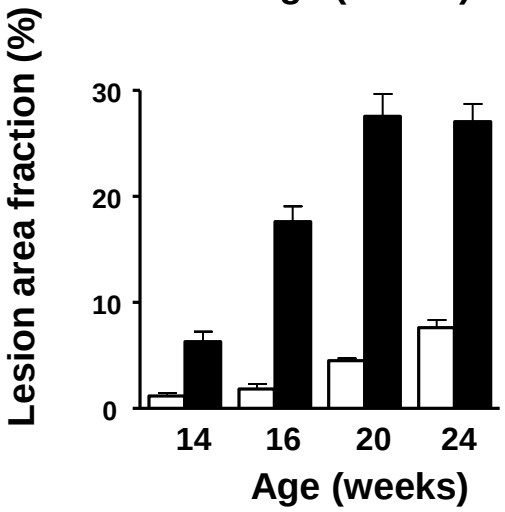
- **LDL receptor -/-**
  - Mutations in familial hypercholesterolaemia

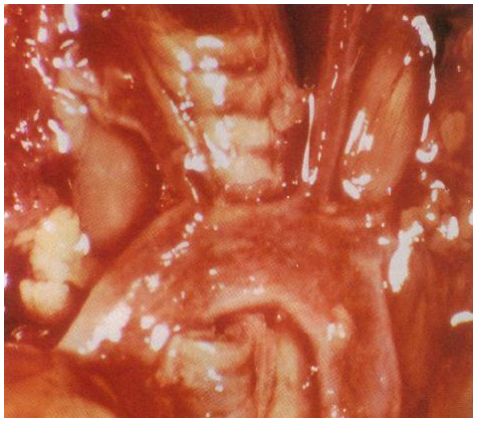


xanthoma

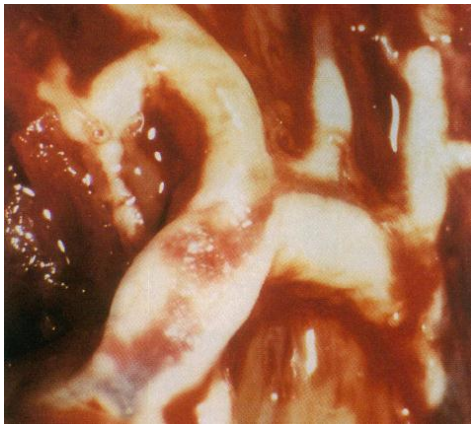
Atherosclerosis in *Ldlr*$^{-/-}$ mice





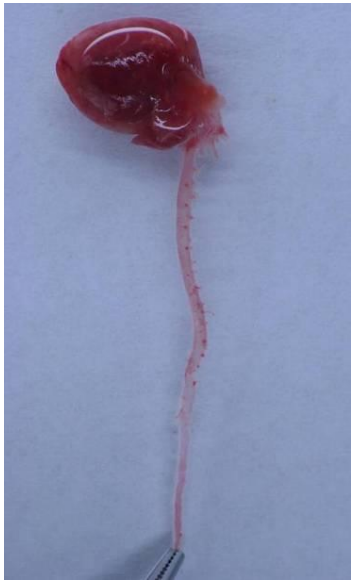


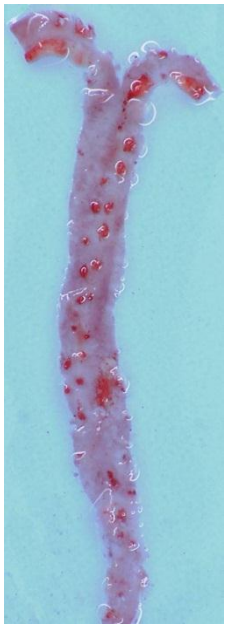
wild-type

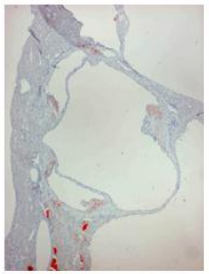
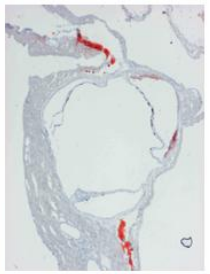
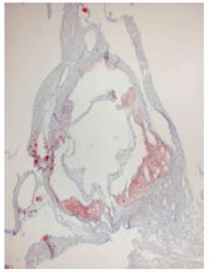
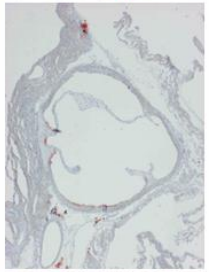
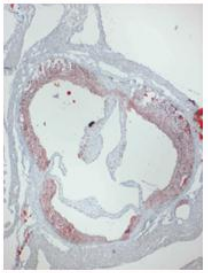
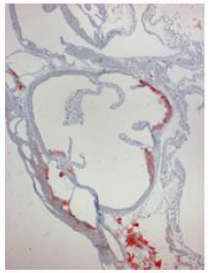
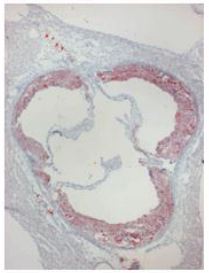
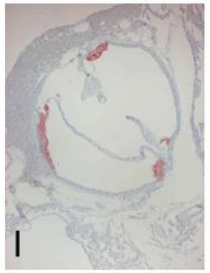


Ldlr-/- high fat 13 mo

Ishibashi et al 1994 JCI 93:1885





	high fat	chow
14		
16		
20		
24		

weeks

Aortic valve

Influence of adhesion molecules, chemokines and cytokines on mouse atherosclerosis

Accelerators

Adhesion molecules
P-selectin
E-selectin
ICAM-1
VCAM-1

Chemokines & receptors
MCP-1
CCR2
CXCR2
CX3CR1

Cytokines
IL-1
TNFa
IL-4
IL-6
IL-12
IL-18
IFNg

Decelerators

IL1RA
TGFb
IL-10

Debris (eg modified lipoproteins, apoptotic cells)

Reversible fatty lesions

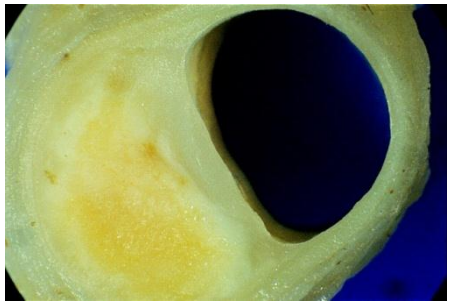
inflammatory drive + - *homeostatic innate immunity*

Irreversible remodelling

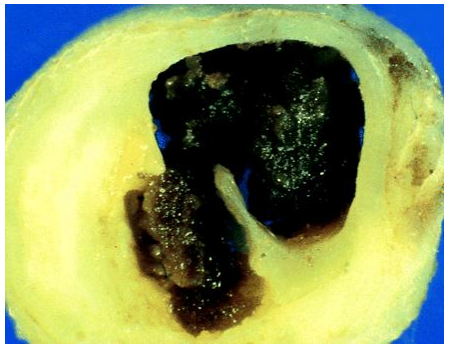
wound healing

environmental and genetic influences

inflammation

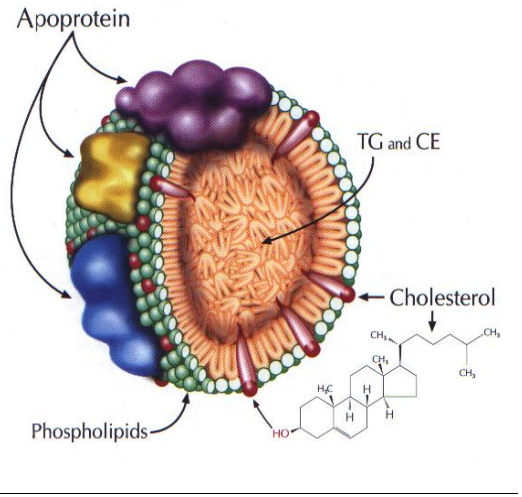


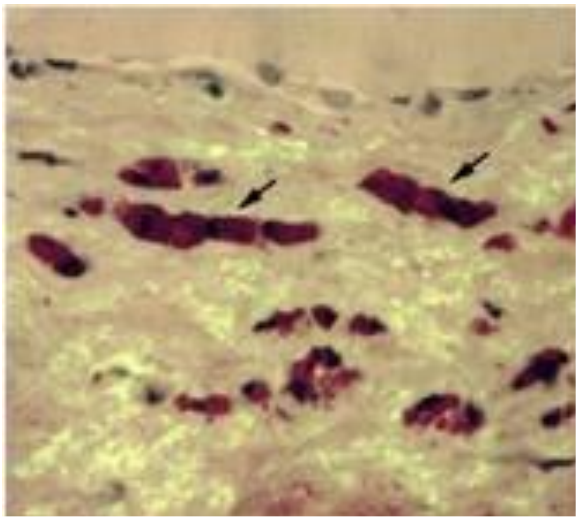
Stable plaques



Unstable plaques

Foam cells

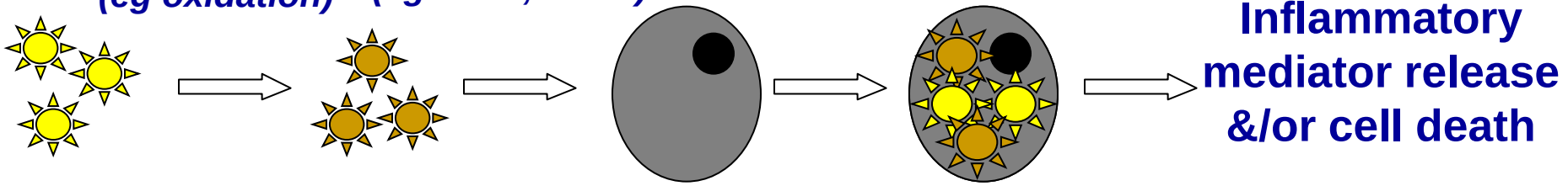




Dr Howard Kruth

lipoprotein modification (eg oxidation)

via scavenger receptors (eg SR-A, CD36)

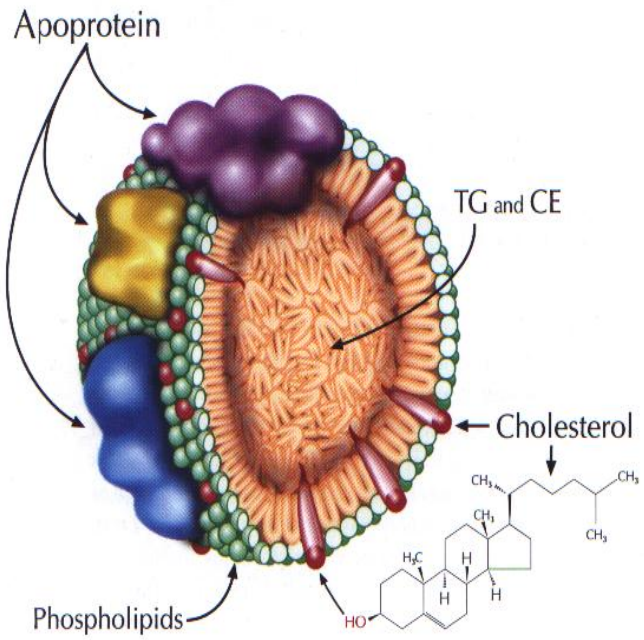


Macrophage

"foam cells"

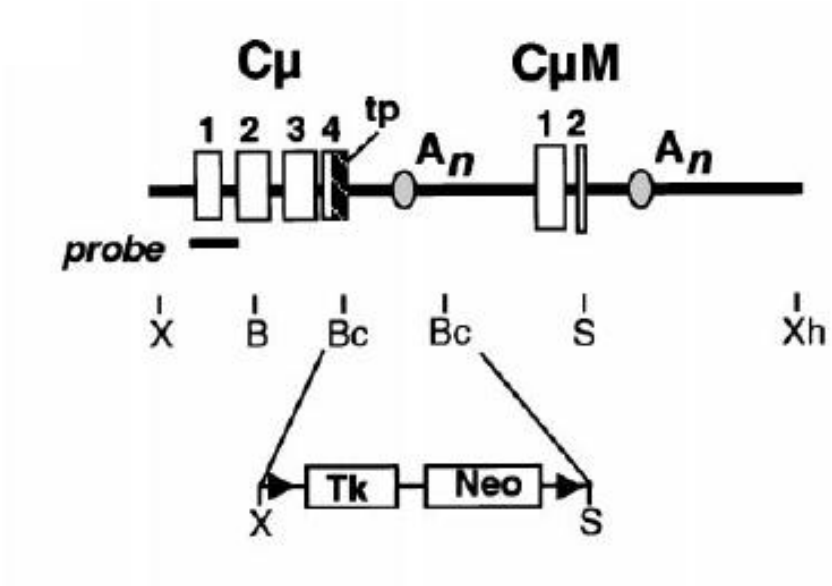
Inflammatory mediator release &/or cell death

What is antigenic about oxidised LDL ?

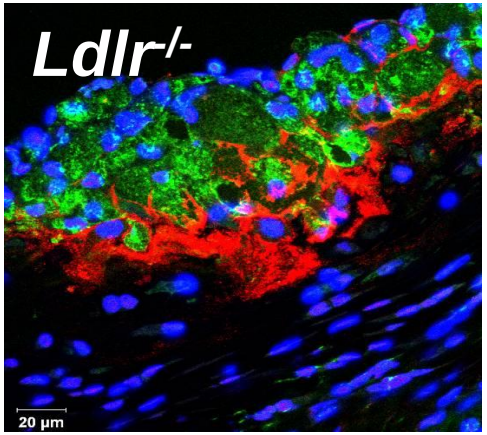


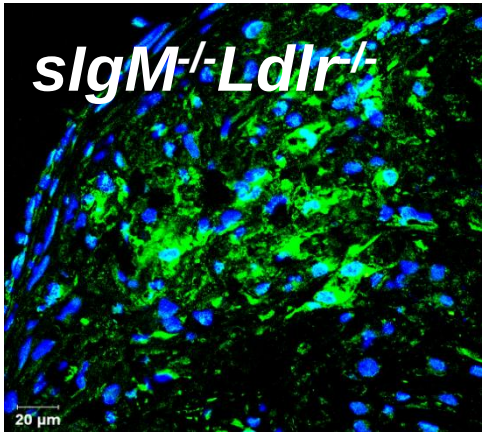
- large complex and unstable antigen with many possible epitopes including
- modified apoB peptides (eg with MDA, 4-HNE adducts)
- modified phospholipids (eg exposed phosphorylcholine headgroup)

IgM staining in aortic root of *Ldlr*$^{-/-}$ mice



Ehrenstein et al 1998 PNAS 95:10089

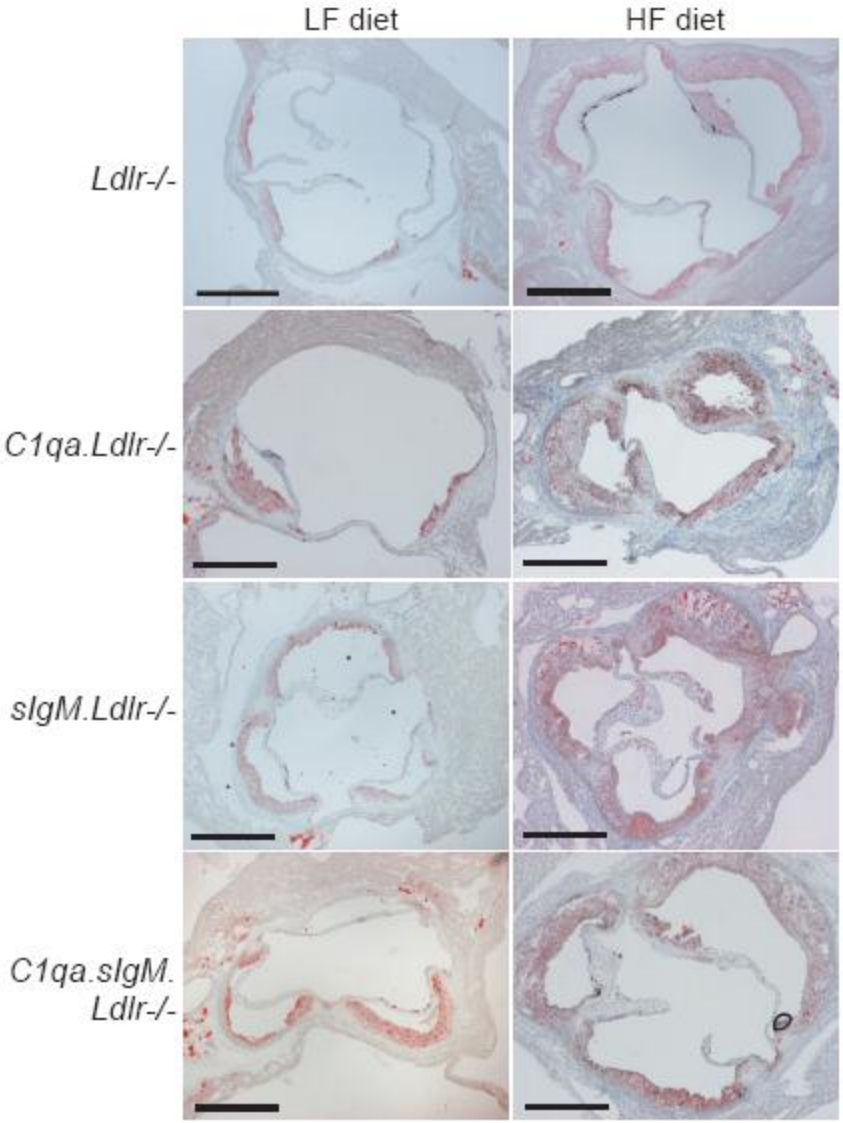




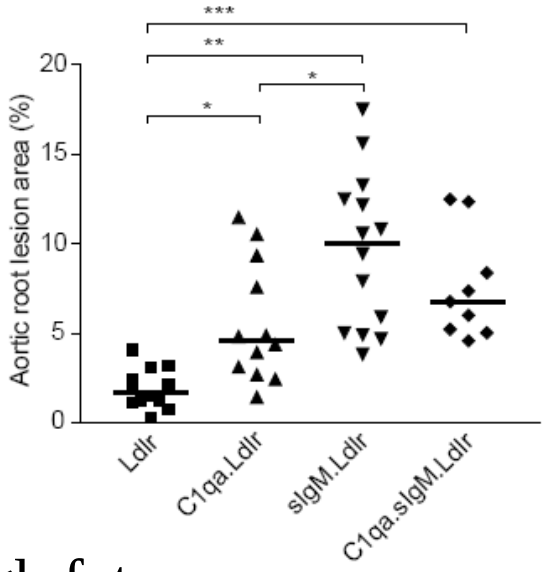
Blue –nuclei

Red –IgM
Green –CD68 (møs)

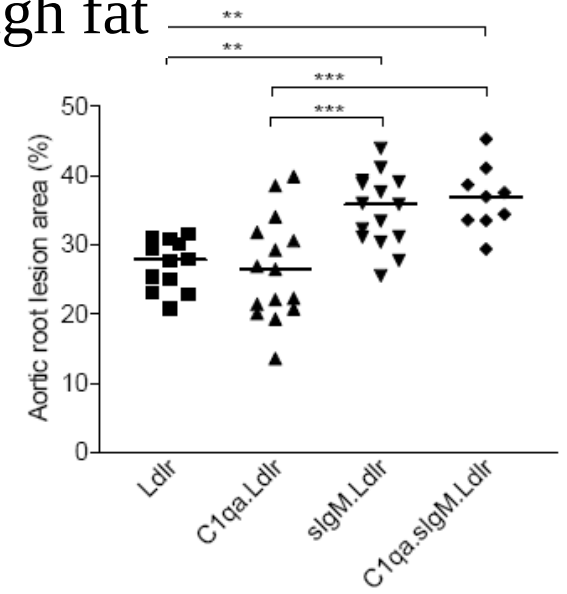
IgM deficiency accelerates atherosclerosis



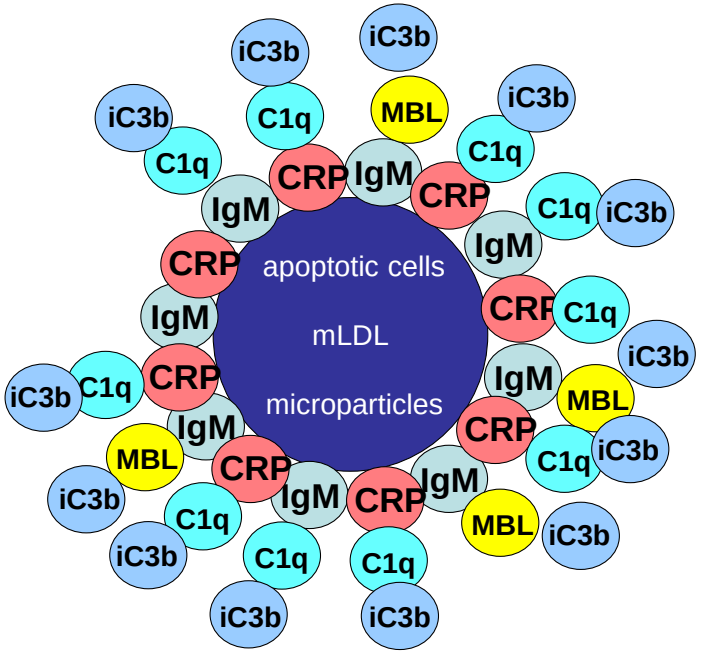
Low fat



High fat

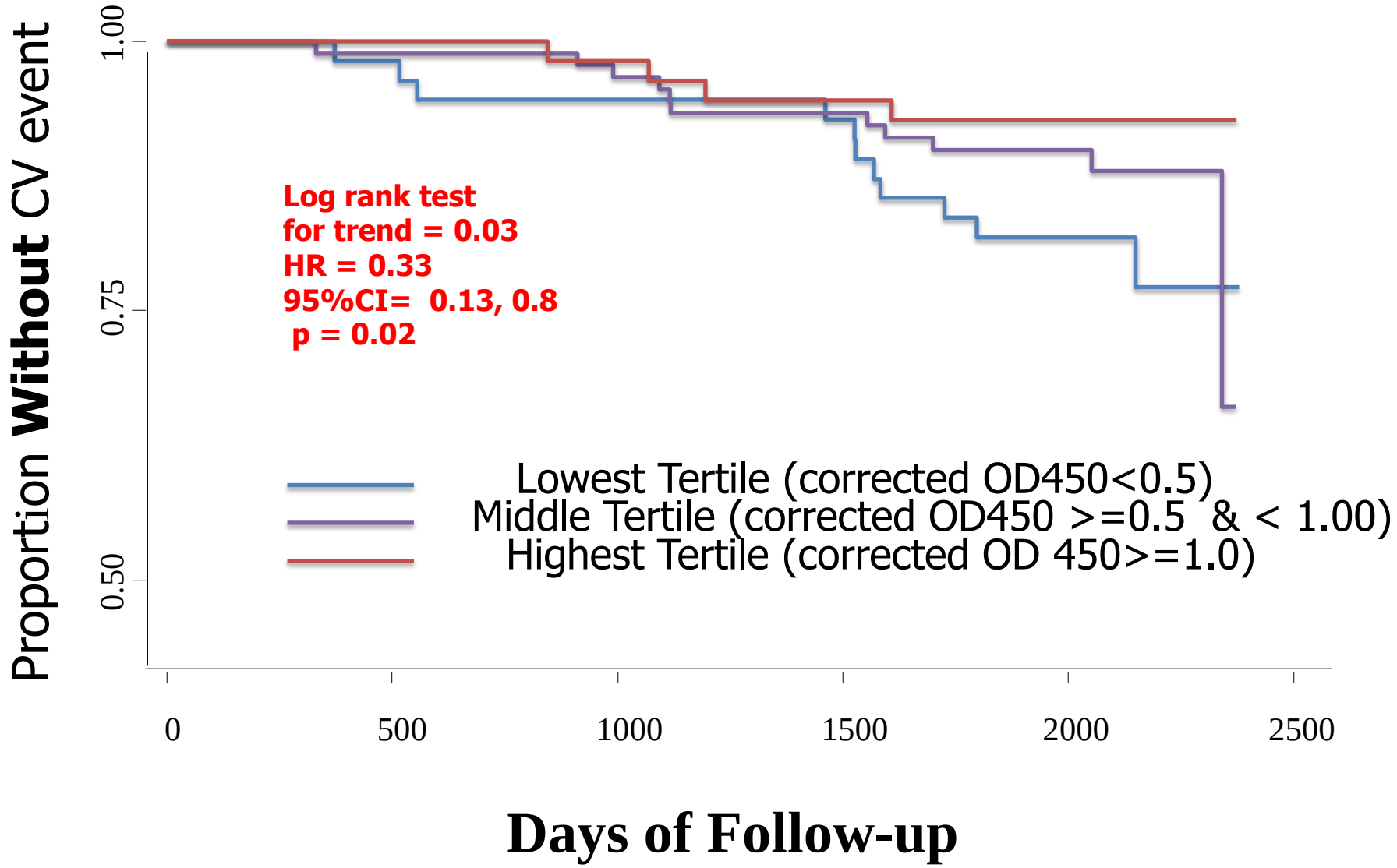


Lewis et al (2009) Circulation 120:417



Homeostatic clearance

Kaplan-Meier survival estimates for population tertiles of IgG anti-oxLDL levels.



Summary

- Atherosclerosis can be viewed as a dynamic chronic autoinflammatory disease of arteries

- The innate immune system regulates the safe disposal of lipoproteins and other debris from the arterial wall and is intrinsically protective

- Overdrive of the innate immune system leads to irreversible remodelling, and this may be accelerated by adaptive immune mechanisms

- The interplay between proinflammatory and wound healing pathways governs plaque development