

• 论著 •

抑制 c-Abl 激酶调节桩蛋白酪氨酸磷酸化对通气损伤活体大鼠的保护效应

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【摘要】目的 探讨在活体机械通气损伤模型抑制 c-Abl 激酶是否可以减少桩蛋白酪氨酸残基位点 Y31 和 Y118(Pxn Y31、Pxn Y118)磷酸化,从而阻断其下游效应分子血管内皮 - 钙黏蛋白(VE-cad)及 Rho/Rho 激酶活化所致的血管屏障功能紊乱。**方法** 90 只健康雄性 SD 大鼠按随机数字表法分为 9 组,每组 10 只。假手术(Sham)组仅进行气管切开;保护性通气 1 h、2 h 组(PVT 1 h、2 h 组)潮气量(VT)为 6 mL/kg,呼气末正压(PEEP)为 5 cmH₂O(1 cmH₂O=0.098 kPa);大 VT 通气 1 h、2 h 组(HVT 1 h、2 h 组)VT 为 30 mL/kg,PEEP 为 0;p42/44 丝裂素活化蛋白激酶(p42/44MAPK)抑制剂 UO126 和 c-Abl 激酶抑制剂 AG957 预处理 1 h、2 h 组分别于大 VT 通气前 1 h 腹腔注射 UO126 1 mg/kg 或灌胃 AG957 10 mg/kg。各组于预定实验时间结束后处死大鼠,采集肺组织标本及支气管肺泡灌洗液(BALF),用伊文思蓝(EB)实验检测肺血管渗透性,用酶联免疫吸附试验(ELISA)检测 BALF 中肿瘤坏死因子-α(TNF-α)水平;镜下观察肺组织病理学改变,并计算弥漫性肺泡损伤系统(DAD)评分,计算肺湿 / 干重(W/D)比值;用比色法测定肺组织髓过氧化物酶(MPO)活性,用蛋白质免疫印迹试验(Western Blot)检测肺组织 c-Abl Y245、Pxn Y31、Pxn Y118、VE-cad Y658、p42/44MAPK Y202/Y204、肌球蛋白轻链(MLC)及肌球蛋白磷酸酯酶目标亚基 Y696(MYPT Y696)的磷酸化情况。**结果** ① Sham 组与 PVT 组肺组织无明显病理学改变,且两组间各指标均无明显差异;HVT 组肺组织损伤严重,且 DAD 评分、肺 W/D 比值、EB 渗出量、MPO 活性和 BALF 中 TNF-α 水平较 Sham 组及 PVT 组明显升高;给予 AG957 或 UO126 预处理后,上述指标均较 HVT 组明显降低。② HVT 组肺组织各蛋白磷酸化水平较 Sham 组和 PVT 组明显增加,以 2 h 更明显;给予 AG957 预处理后 2 h,肺组织蛋白磷酸化水平平均较 HVT 组明显降低〔p-c-Abl Y245(灰度值):0.29±0.04 比 0.42±0.04, p-Pxn Y31(灰度值):0.51±0.03 比 0.70±0.05, p-Pxn Y118(灰度值):0.65±0.04 比 0.91±0.04, p-VE-cad Y658(灰度值):0.77±0.07 比 1.32±0.07, p-p42/44MAPK Y202/Y204(灰度值):0.38±0.06 比 0.61±0.03, p-MLC(灰度值):0.37±0.04 比 0.77±0.05, p-MYPT Y696(灰度值):0.54±0.05 比 0.87±0.06, 均 P<0.05〕;给予 UO126 预处理后 2 h,肺组织 p-VE-cad Y658 表达较 HVT 组明显降低(灰度值:0.74±0.04 比 1.32±0.07),且 p42/44MAPK 及其下游效应分子 MLC、MYPT 的磷酸化水平亦明显降低〔p-p42/44MAPK Y202/Y204(灰度值):0.38±0.07 比 0.61±0.03, p-MLC(灰度值):0.37±0.04 比 0.77±0.05, p-MYPT Y696(灰度值):0.55±0.05 比 0.87±0.06, 均 P<0.05〕。**结论** 抑制 c-Abl 激酶可阻断 Pxn Y31、Pxn Y118 磷酸化,稳定黏附连接处的 VE-cad,并有可能通过阻断 Pxn- 鸟嘌呤核苷酸交换因子 H1(GEF-H1)-p42/44MAPK 信号小体的形成而抑制 Rho 信号链的活化、MLC 的磷酸化及继发的肺血管屏障渗透性增加。

【关键词】 桩蛋白磷酸化; 血管内皮 - 钙黏蛋白; p42/44 丝裂素活化蛋白激酶; Rho; 呼吸机相关性肺损伤

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Regulation of paxillin tyrosine phosphorylation via inhibition of c-Abl kinase to protect ventilator induce lung injury in vivo in rats Zhong Rong, Xiao Jun, Dai Chenguang, Yu Zihui

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【Abstract】Objective To determine whether the inhibition of paxillin tyrosine residues 31 and tyrosine residues 118 (Pxn Y31 and Pxn Y118) phosphorylation via inhibition of c-Abl kinase will effectively block its downstream effector molecules vessel endothelium-cadherin (VE-cad), and whether Rho/Rho kinase activation which will induce the vascular barrier dysfunction. **Methods** Ninety healthy male Sprague-Dawley (SD) rats were randomly divided into nine groups (each n =10). Only tracheotomy was undergone in the sham group. Groups of protective ventilation were set at a volume tidal (VT) of 6 mL/kg, a positive end-expiratory pressure (PEEP) of 5 cmH₂O (1 cmH₂O = 0.098 kPa) for 1 hour or 2 hours (namely group PVT 1 h and group PVT 2 h), respectively. Groups of high VT were put on mechanical ventilation (MV) at high VT 30 mL/kg, PEEP 0 for 1 hour or 2 hours (namely group HVT 1 h and group HVT 2 h), respectively. Groups UO126 and AG957 pretreatment were set on MV at HVT for 1 hour or 2 hour respectively, but

they were given p42/44 mitogen-activated protein kinase (p42/44MAPK) inhibitor UO126 1 mg/kg by intraperitoneal injection or c-Abl kinase inhibitor AG957 10 mL/kg by intragastric injection 1 hour before HVT ventilation. All the animals were sacrificed after experiments and specimens of lung tissues and bronchoalveolar lavage fluid (BALF) were harvested. Pulmonary vascular permeability was measured by Evans blue (EB). The levels of tumor necrosis factor- α (TNF- α) in BALF were measured by enzyme linked immunosorbent assay (ELISA). Then the change of lung tissue pathology was observed with light microscope, diffuse alveolar damage system (DAD) score and lung wet/dry ratio (W/D) were estimated. The myeloperoxidase (MPO) activity was measured by colorimetric analysis, phosphorylations of c-Abl Y245, Pxn Y31, Pxn Y118, VE-cad Y658, p42/44MAPK Y202/Y204, myosin light chain (MLC) and myosin-associated phosphatase Y696 (MYPT Y696) were determined by Western Blot. **Results** ① There were no obvious pathological changes in the lung tissue in the sham group and PVT 1 h or 2 h group, and also there were no significant differences in all the parameters between above groups. However, the injury in lung tissue was severe in the HVT groups. In addition, DAD score, lung W/D ratio, EB content, the activity of MPO, and TNF- α in BALF in HVT groups were significantly higher than those in sham group and PVT groups. After pretreatment with AG957 or UO126, all the parameters were significantly decreased as compared with those of groups HVT. ② The levels of phosphorylation of the proteins in lung tissue in HVT groups were increased as compared with those of group sham and groups PVT, especially at 2 hours of MV. However, compared with groups HVT, the level of p-VE-cad Y658 in lung tissue decreased significantly in group AG957 and group UO126 at 2 hours after HVT. However, the levels of all phosphorylated proteins at 2 hours were significantly lowered in the AG957 group compared with those of the HVT group [p-c-Abl Y245 (gray value): 0.29±0.04 vs. 0.42±0.04, p-Pxn Y31 (gray value): 0.51±0.03 vs. 0.70±0.05, p-Pxn Y118 (gray value): 0.65±0.04 vs. 0.91±0.04, p-VE-cad Y658 (gray value): 0.77±0.07 vs. 1.32±0.07, p-p42/44MAPK Y202/Y204 (gray value): 0.38±0.06 vs. 0.61±0.03, p-MLC (gray value): 0.37±0.04 vs. 0.77±0.05, p-MYPT Y696 (gray value): 0.54±0.05 vs. 0.87±0.06, all $P < 0.05$]. After pretreatment with UO126, the phosphorylation level of VE-cad in lung tissue at 2 hours was significantly lower than that of HVT group (gray value: 0.74±0.04 vs. 1.32±0.07), and the phosphorylation levels of p42/44MAPK and its downstream effector molecules MLC and MYPT Y696 were also significantly decreased [p-p42/44MAPK Y202/Y204 (gray value): 0.38±0.07 vs. 0.61±0.03, p-MLC (gray value): 0.37±0.04 vs. 0.77±0.05, p-MYPT Y696 (gray value): 0.55±0.05 vs. 0.87±0.06, all $P < 0.05$]. **Conclusions** Pxn Y31 and Pxn Y118 phosphorylation could be blocked by inhibition of c-Abl kinase, which could strengthen VE-cad at attachment junction and might block formation of Pxn-guanine nucleotide-exchange factor H1 (GEF-H1)-p44/42MAPK signalosome which induce activation local Rho signaling, lead to activation of MLC phosphorylation, actomyosin contraction, and increase endothelial permeability.

【Key words】 Phosphorylation of paxillin; Vessel endothelium-cadherin; p42/44 mitogen-activated protein kinase; Rho Ventilator-induced lung injury

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研究证实,非受体酪氨酸激酶中的 Abl 家族激酶(包括 c-Abl 及 Arg)对调节血管屏障功能的完整性有极其重要的作用^[1-2]。Abl 激酶可激活(磷酸化)黏着斑蛋白及细胞支架的效应蛋白,包括桩蛋白(Pxn)、非肌肉肌球蛋白轻链激酶(nmMLCK)、皮动蛋白、纽蛋白及 β -连环蛋白,这些效应蛋白可调节血管屏障功能及渗透性,对细胞与细胞之间、细胞与基质之间的动态连接亦有重要调节作用^[2, 3-7]。有研究证实,抑制 Abl 家族激酶可减弱 Pxn 酪氨酸磷酸化及肺的高渗透性,并显著减轻脂多糖(LPS)所致的肺部炎症及损伤^[2, 8]。然而,并无研究证实大潮气量(VT)通气是否可在活体通气损伤模型中激活 c-Abl,以及抑制 c-Abl 是否可阻止通气损伤所致的 Pxn 磷酸化和继发 Rho 信号链的激活,改善血管内皮-钙黏蛋白(VE-cad)不稳定及内皮屏障渗透性增加。因此,本研究拟在通气损伤模型中检测 c-Abl 激酶是否被激活,探讨特异性抑制剂是否可减少 c-Abl 激酶,从而抑制通气损伤所致的 Pxn

磷酸化,最终通过降低 Pxn-鸟嘌呤核苷酸交换因子 H1(GEF-H1)及 p42/44 丝裂素活化蛋白激酶(p42/44MAPK)复合物水平,阻断 Rho 信号链激活及继发内皮屏障渗透性增加,从而为机械通气损伤的防治提供新的理论机制和靶向治疗药物。

1 材料与方法

1.1 实验动物及分组: 健康雄性 SD 大鼠 90 只,体重 220~250 g,由广西医科大学实验动物中心提供,许可证号:SCXK 桂 2009-0002。按随机数字表法将大鼠分为 9 组,每组 10 只。

1.2 模型制备及处理: 腹腔注射 10% 水合氯醛 3 mL/kg 麻醉大鼠,行气管插管。假手术(Sham)组仅行气管切开。机械通气各组呼吸机参数设置:呼吸频率 60 次/min,吸呼比 1:2;保护性通气 1 h、2 h 组(PVT 1 h、2 h 组)VT 为 6 mL/kg,呼气末正压(PEEP)为 5 cmH₂O(1 cmH₂O=0.098 kPa);大 VT 通气 1 h、2 h 组(HVT 1 h、2 h 组)VT 为 30 mL/kg,PEEP 为 0;p42/44MAPK 抑制剂 UO126 预处理 1 h,

2 h 组(UO126 1 h、2 h 组)于大 VT 通气前 1 h 腹腔注射 UO126 1 mg/kg; c-Abl 激酶抑制剂 AG957 预处理 1 h、2 h 组(AG957 1 h、2 h 组)于大 VT 通气前 1 h 灌胃 AG957 10 mg/kg。

本实验中动物处置方法符合动物伦理学标准。

1.3 检测指标及方法: Sham 组在气管切开后、其他各组在通气至预定时间后经颈动脉放血处死大鼠。

1.3.1 伊文思蓝(EB)法测定肺血管渗透性: 各组取 5 只大鼠,于通气结束后经颈外静脉插管注入 1% EB 2 mg/kg, 1 h 后处死,向左心房缓慢注人生理盐水至无明显血性液体流出。取右肺中叶,置于试管中,加甲酰胺,50 ℃抽提 24 h,浸出液用 752 型分光光度计定量。左肺称湿重后剪碎,60 ℃干烤 72 h 称干重。以每克肺组织干重含 EB 质量表示。

1.3.2 酶联免疫吸附试验(ELISA)检测肿瘤坏死因子- α (TNF- α)水平: 收集支气管肺泡灌洗液(BALF),采用 ELISA 试验检测 TNF- α 水平,严格按试剂盒说明书进行。

1.3.3 肺组织病理学观察及评分: 取左肺上叶,10% 多聚甲醛溶液固定,苏木素-伊红(HE)染色,光镜下观察,并计算弥漫性肺泡损伤系统(DAD)评分。

1.3.4 肺湿/干重比值(W/D)测定: 取左肺中叶称湿重,置于 60 ℃干烤箱中 72 h,烘烤至恒重后称干重,计算肺 W/D 比值。

1.3.5 肺组织髓过氧化物酶(MPO)活性测定: 取-80 ℃冻存的肺组织制成 10% 肺组织匀浆,用比色法测定 MPO 活性,严格按照试剂盒说明书进行。

1.3.6 蛋白质免疫印迹试验(Western Blot)检测肺组织 c-Abl Y245、Pxn 酪氨酸残基位点 Y31 和 Y118(Pxn Y31、Pxn Y118)、VE-cad Y658、p42/44MAPK Y202/Y204、肌球蛋白轻链(MLC)及肌球蛋白磷酸

酯酶目标亚基 Y696(MYPT Y696)的磷酸化情况:取 100 mg 左肺下叶提取总蛋白,BCA 法定量。取 50 μ g 蛋白,加上样缓冲液,行十二烷基硫酸钠-聚丙烯酰胺凝胶电泳(SDS-PAGE),转至聚偏二氟乙烯(PVDF)膜,5% 牛血清白蛋白(BSA)常温封闭 1 h,按 1:1000 稀释一抗抗体;4 ℃过夜后 Tris-HCl 缓冲盐溶液(TBST)洗膜,按 1:10000 稀释二抗,室温孵育 1 h 后 TBST 洗膜,发光、显影、拍照,以磷酸化蛋白与相应非磷酸化蛋白灰度值比值作为表达量。

1.4 统计学分析: 应用 SPSS 18.0 软件进行数据分析。采用 Kolmogorov-Smirnov 法对计量资料进行正态性检验,正态分布的计量资料以均数 \pm 标准差($\bar{x} \pm s$)表示,多组间比较采用单因素方差分析,两两比较方差齐时采用 LSD 检验,方差不齐时采用 Tamhane T2 检验。 $P < 0.05$ 为差异有统计学意义。

2 结 果

2.1 各组大鼠肺组织病理学观察及 DAD 评分比较(图 1;表 1): Sham 组肺组织正常;PVT 组肺组织无明显损伤;HVT 组肺组织损伤明显,以 2 h 组损伤更加严重,且 DAD 评分明显高于 Sham 组及 PVT 组(均 $P < 0.05$);与 HVT 组比较, UO126 及 AG957 预处理组肺损伤均明显减轻,且 DAD 评分均显著下降(均 $P < 0.05$),但两个预处理组间无明显差异。

2.2 各组大鼠肺 W/D 比值、EB 渗出量、BALF 中 TNF- α 含量及肺组织 MPO 活性比较(表 1): Sham 组与 PVT 组各项指标差异均无统计学意义(均 $P > 0.05$);与 Sham 组及 PVT 组比较, HVT 组肺 W/D 比值、EB 渗出量、BALF 中 TNF- α 水平及肺组织 MPO 活性显著升高(均 $P < 0.05$);UO126 及 AG957 预处理组上述指标均较 HVT 组显著降低(均 $P < 0.05$),但两个预处理组间差异无统计学意义(均 $P > 0.05$)。

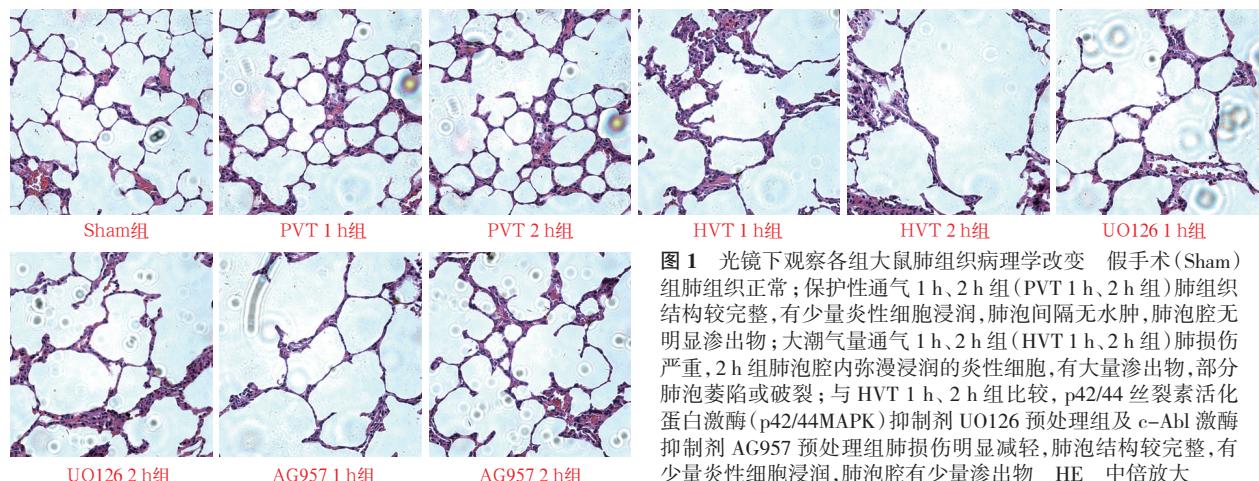


图 1 光镜下观察各组大鼠肺组织病理学改变 Sham 组肺组织正常;保护性通气 1 h、2 h 组(PVT 1 h、2 h 组)肺组织结构较完整,有少量炎性细胞浸润,肺泡间隔无水肿,肺泡腔无明显渗出物;大潮气量通气 1 h、2 h 组(HVT 1 h、2 h 组)肺损伤严重,2 h 组肺泡腔内弥漫浸润的炎性细胞,有大量渗出物,部分肺泡萎陷或破裂;与 HVT 1 h、2 h 组比较, p42/44 丝裂素活化蛋白激酶(p42/44MAPK)抑制剂 UO126 预处理组及 c-Abl 激酶抑制剂 AG957 预处理组肺损伤明显减轻,肺泡结构较完整,有少量炎性细胞浸润,肺泡腔有少量渗出物 HE 中倍放大

2.3 各组大鼠肺组织蛋白表达比较(表2;图2): Sham组及PVT组大鼠肺组织p-c-Abl Y245、p-Pxn Y31、p-Pxn Y118、p-VE-cad Y658、p-p42/44MAPK Y202/Y204、p-MLC、p-MYPT Y696表达差异无统计学意义(均 $P>0.05$);与Sham组及PVT组比较,HVT组蛋白表达均明显上调(均 $P<0.05$);与HVT组比较, UO126预处理组仅p-p42/44MAPK及其下游效应分子p-MLC、p-MYPT表达明显下调,AG957预处理组各蛋白表达均明显下调(均 $P<0.05$)。

3 讨 论

由黏附连接、紧密连接构成的旁细胞结构对血液和间质组织水分、电解质转运及渗透性的控制具有极其重要的作用^[9-10],多种信号链通路参与对旁细胞途径的调节^[11-13]。Abl家族激酶是内皮屏障及旁细胞结构的重要调节因子。Fu等^[2]研究证实,c-Abl激酶对LPS致肺损伤及内皮功能紊乱有重要的调节作用。然而有实验证实,Abl家族激酶对内

毒素及呼吸机致肺损伤的调节效果不一致^[8]。该研究者发现,Abl激酶抑制剂伊马替尼通过抑制血管细胞黏附分子-1(VCAM-1)表达及炎性因子分泌,降低了LPS所致肺损伤的内皮细胞渗透性,恢复了VE-cad连接并减轻了肺部炎症;然而,对呼吸机通气致肺损伤,伊马替尼却降低了VE-cad表达,破坏了细胞-细胞连接,并促进了炎性因子分泌。说明损伤刺激不同,引发的初始信号链活化可能完全不同,即肺内皮细胞可能通过完全不同的机制感受不同刺激;同时也说明Abl家族激酶对通气损伤的机制值得进一步研究。本研究证实:大VT通气损伤可激活c-Abl激酶,使Pxn在Y31及Y118特异位点的酪氨酸残基磷酸化(激活),此时肺血管渗透性明显增高,肺泡有大量血性渗出液及弥漫性浸润的炎性细胞,EB渗出量及肺W/D比值明显增加;但用特异性抑制剂抑制c-Abl激酶活化后,c-Abl激酶不能被激活,Pxn Y31、Pxn Y118磷酸化减弱,伴

表1 UO126或AG957预处理对大潮气量(VT)通气大鼠肺DAD评分、肺W/D比值、EB渗出量、BALF中TNF- α 含量及肺组织MPO活性的影响($\bar{x} \pm s$)

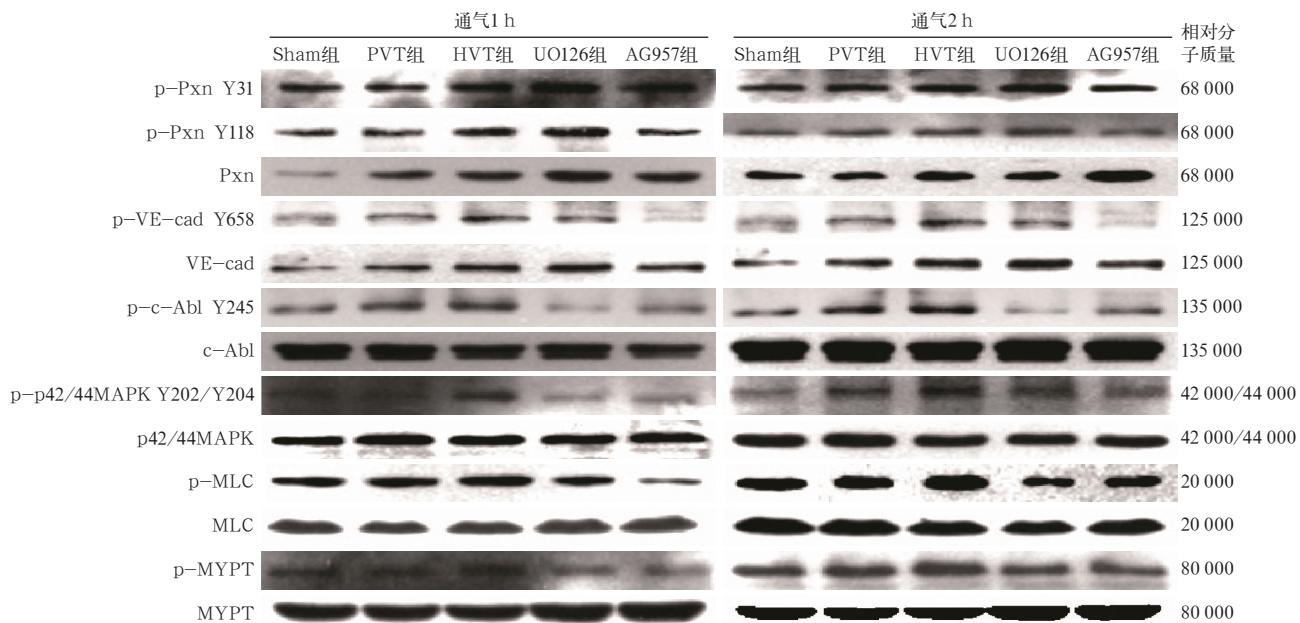
组别	DAD评分(分)	肺W/D比值	EB渗出量(μg/g)	TNF- α (ng/L)	MPO(U/g)
Sham组	0.59±0.03(10)	4.58±0.46(10)	12.88±0.58(5)	50.53±3.43(10)	0.77±0.06(10)
PVT 1 h组	0.60±0.06(10)	4.58±0.55(10)	13.02±0.47(5)	52.03±3.90(10)	0.78±0.05(10)
PVT 2 h组	0.63±0.03(10)	4.60±0.38(10)	13.42±0.37(5)	52.26±4.03(10)	0.77±0.04(10)
HVT 1 h组	5.87±0.45(10) ^a	6.07±0.32(10) ^a	18.81±0.56(5) ^a	368.83±7.83(10) ^a	2.20±0.09(10) ^a
HVT 2 h组	9.24±0.68(10) ^a	6.55±0.08(10) ^a	21.36±1.29(5) ^a	458.08±7.51(10) ^a	2.62±0.14(10) ^a
UO126 1 h组	5.01±0.41(10) ^b	5.11±0.13(10) ^b	16.07±0.32(5) ^b	293.87±6.52(10) ^b	1.31±0.04(10) ^b
UO126 2 h组	7.24±0.54(10) ^b	5.56±0.13(10) ^b	18.28±0.98(5) ^b	402.33±13.65(10) ^b	1.56±0.05(10) ^b
AG957 1 h组	5.08±0.33(10) ^b	5.32±0.24(10) ^b	14.52±0.46(5) ^b	310.05±5.61(10) ^b	1.32±0.03(10) ^b
AG957 2 h组	7.50±0.49(10) ^b	5.79±0.23(10) ^b	18.35±0.68(5) ^b	388.52±14.49(10) ^b	1.91±0.05(10) ^b

注:UO126为p42/44丝裂素活化蛋白激酶(p42/44MAPK)抑制剂,AG957为c-Abl激酶抑制剂,DAD为弥漫性肺泡损伤系统,肺W/D比值为肺湿/干重比值,EB为伊文思蓝,BALF为支气管肺泡灌洗液,TNF- α 为肿瘤坏死因子- α ,MPO为髓过氧化物酶;Sham组为假手术组,保护性通气1 h、2 h组(PVT 1 h、2 h组)VT为6 mL/kg,大VT通气1 h、2 h组(HVT 1 h、2 h组)VT为30 mL/kg;与Sham组及PVT相同通气时间组比较,^a $P<0.05$;与HVT相同通气时间组比较,^b $P<0.05$;括号内为动物数

表2 UO126或AG957预处理对大潮气量(VT)通气大鼠肺组织蛋白磷酸化的影响($\bar{x} \pm s$)

组别	动物数 (只)	蛋白表达(灰度值)						
		p-c-Abl Y245	p-Pxn Y31	p-Pxn Y118	p-VE-cad Y658	p-p42/44MAPK Y202/Y204	p-MLC	p-MYPT Y696
Sham组	10	0.18±0.03	0.50±0.06	0.62±0.05	0.71±0.06	0.34±0.04	0.43±0.05	0.57±0.04
PVT 1 h组	10	0.19±0.04	0.51±0.04	0.63±0.06	0.73±0.05	0.32±0.05	0.42±0.04	0.56±0.05
PVT 2 h组	10	0.20±0.04	0.53±0.04	0.63±0.03	0.73±0.06	0.35±0.03	0.45±0.05	0.58±0.05
HVT 1 h组	10	0.41±0.03 ^a	0.69±0.06 ^a	0.88±0.03 ^a	1.21±0.08 ^a	0.57±0.03 ^a	0.74±0.08 ^a	0.79±0.05 ^a
HVT 2 h组	10	0.42±0.04 ^a	0.70±0.05 ^a	0.91±0.04 ^a	1.32±0.07 ^a	0.61±0.03 ^a	0.77±0.05 ^a	0.87±0.06 ^a
UO126 1 h组	10	0.43±0.05	0.65±0.04	0.89±0.04	0.78±0.05	0.34±0.06 ^b	0.35±0.05 ^b	0.53±0.06 ^b
UO126 2 h组	10	0.43±0.04	0.67±0.03	0.86±0.02	0.74±0.04 ^b	0.38±0.07 ^b	0.37±0.04 ^b	0.55±0.05 ^b
AG957 1 h组	10	0.28±0.03 ^b	0.52±0.04 ^b	0.61±0.03 ^b	0.76±0.06 ^b	0.40±0.03 ^b	0.39±0.06 ^b	0.52±0.04 ^b
AG957 2 h组	10	0.29±0.04 ^b	0.51±0.03 ^b	0.65±0.04 ^b	0.77±0.07 ^b	0.38±0.06 ^b	0.37±0.04 ^b	0.54±0.05 ^b

注:UO126为p42/44丝裂素活化蛋白激酶(p42/44MAPK)抑制剂,AG957为c-Abl激酶抑制剂,p-c-Abl Y245为磷酸化c-Abl Y245,p-Pxn Y31、p-Pxn Y118为磷酸化组蛋白酪氨酸残基位点Y31和Y118,p-VE-cad Y658为磷酸化血管内皮-钙黏蛋白Y658,p-p42/44MAPK Y202/Y204为磷酸化p42/44MAPK Y202/Y204,p-MLC为磷酸化肌球蛋白轻链,p-MYPT Y696为磷酸化肌球蛋白磷酸酯酶目标亚基Y696;Sham组为假手术组,保护性通气1 h、2 h组(PVT 1 h、2 h组)VT为6 mL/kg,大VT通气1 h、2 h组(HVT 1 h、2 h组)VT为30 mL/kg;与Sham组和PVT相同通气时间组比较,^a $P<0.05$;与HVT相同通气时间组比较,^b $P<0.05$



Sham 组为假手术组,保护性通气(PVT)组潮气量(VT)为 6 mL/kg,大 VT 通气(HVT)组 VT 为 30 mL/kg, UO126 组为 p42/44 丝裂素活化蛋白激酶(p42/44MAPK)抑制剂预处理组,AG957 组为 c-Abl 激酶抑制剂预处理组;p-c-Abl Y245 为磷酸化 c-Abl Y245,p-Pxn Y31、p-Pxn Y118 为磷酸化斑点蛋白酪氨酸残基位点 Y31 和 Y118,p-VE-cad Y658 为磷酸化血管内皮-钙黏蛋白 Y658,p-p42/44MAPK Y202/Y204 为磷酸化 p42/44MAPK Y202/Y204,p-MLC 为磷酸化肌球蛋白轻链,p-MYPT Y696 为磷酸化肌球蛋白磷酸酯酶目标亚基 Y696

图 2 蛋白质免疫印迹试验(Western Blot)检测各组大鼠肺组织蛋白磷酸化

有肺血管渗透性明显降低,肺泡渗出液及炎性细胞浸润明显减少,EB 渗出量及肺 W/D 比值亦明显降低。说明通过抑制 c-Abl 激酶而减弱 Pxn 在 Y31 及 Y118 特异位点磷酸化对降低肺血管渗透性及减轻通气性肺损伤有明显的作用。Fu 等^[2]研究证实,在 LPS 致肺损伤模型,抑制 Pxn 磷酸化可明显改善 LPS 引发的内皮屏障功能紊乱。而本研究在活体实验证实,抑制 Pxn 磷酸化对通气损伤亦可取得相同效果,即 c-Abl 激酶调控 Pxn 磷酸化无论是对 LPS 损伤或通气损伤都有不可替代的作用。既往研究者普遍认为,黏着斑激酶(FAK)及酪氨酸激酶是使 Pxn Y31、Pxn Y118 磷酸化的激酶^[14~17]。但本研究却证实大 VT 通气可激活 c-Abl 激酶,且抑制 c-Abl 激酶可明显抑制 Pxn Y31、Pxn Y118 磷酸化,证明在活体通气模型中,c-Abl 激酶是调控 Pxn 磷酸化的主要激酶。

VE-cad 的酪氨酸磷酸化是一种控制黏附连接完整性及内皮细胞屏障功能的机制^[18]。Fu 等^[2]发现,LPS 刺激可通过独立方式引发 VE-cad Y658 位点磷酸化,诱发 VE-cad 从黏附连接处脱落,最终导致内皮屏障功能紊乱。但如通过 siRNA 使 Pxn 静默,可以显著抑制 VE-cad 磷酸化;换句话说,LPS 诱导 VE-cad 磷酸化取决于 Pxn 及其在 Y31 及 Y118 位点酪氨酸磷酸化。本实验证实,在大 VT 通气组,当 Pxn 磷酸化明显增加时,VE-cad Y658 磷酸化亦明

显增加;但特异性抑制剂 AG957 抑制 Pxn 磷酸化时,VE-cad Y658 磷酸化则明显降低。VE-cad 磷酸化是诱发 VE-cad 从黏附连接处脱落并导致内皮屏障功能紊乱的重要环节,因此,在通气损伤中,Pxn 与 VE-cad 交互反应是引起肺血管渗透性增加的重要因素。此外,给予 UO126 抑制 p42/44MAPK 也可降低 VE-cad 磷酸化,与 Zhang 等^[19]研究结果一致。

在通气损伤中,Rho/Rho 激酶对控制肺血管渗透性有重要作用^[20~23],但 Rho 激酶被机械力精确调节的机制尚不清楚。Gawlak 等^[24]研究表明,不合理通气导致的致病性肺部扩张(或牵拉)可活化酪氨酸激酶及 FAK,引起 Pxn Y31、Pxn Y118 磷酸化,激活 p42/44MAPK,使 Pxn、GEF-H1、p42/44MAPK 结合形成信号小体,激活 Rho 信号链,导致 MLC 磷酸化及内皮屏障渗透性增加;抑制 Pxn 磷酸化可降低牵拉所致 Pxn 与 GEF-H1 结合、GEF-H1 活化,继发 Rho 活化。因此,Pxn Y31、Pxn Y118 磷酸化是引起 GEF-H1 活化并形成 Pxn-GEF-H1-p42/44MAPK 复合物,以及继发激活 Rho 信号链、MLC 磷酸化和内皮屏障渗透性增加的关键。p42/44MAPK 活化对其与 Pxn-GEF-H1 发生交互反应也是必需的。有研究结果表明,p42/44MAPK 抑制剂可阻止牵拉引发的 Pxn-GEF-H1-p42/44MAPK 复合物形成,从而抑制 Rho 激酶激活^[24]。本实验证明,大 VT 通气可使 Pxn

Y31、Pxn Y118发生磷酸化, p42/44MAPK激活,Rho激酶底物MLC及MYPT磷酸化,说明Pxn磷酸化及p42/44MAPK激活后,Pxn-GEF-H1-p42/44MAPK信号小体形成的可能性很大,进一步激活Rho激酶,并导致MLC磷酸化、肌球蛋白收缩及继发的血管渗透性增加^[25]。抑制Pxn磷酸化及p42/44MAPK酶的活性均可阻止Rho激酶的激活,并减轻Rho激酶引发的血管屏障功能紊乱。这从反方向证明了Pxn磷酸化及p42/44MAPK酶的活化对Rho激酶的激活是不可或缺的。然而,本实验与Gawlak等^[24]的实验不同的是,引起Pxn磷酸化的激酶是c-Abl而不是酪氨酸激酶及FAK。

综上所述,本实验证实在活体大VT通气损伤模型中,抑制c-Abl激酶可预防Pxn特异位点磷酸化,稳定黏附连接处的VE-cad,并有可能通过抑制GEF-H1活化及Pxn-GEF-H1-p42/44MAPK复合物形成而阻断Rho激酶活化及继发的肺血管屏障功能紊乱,为肺损伤的靶向药物研究提供了新的方向。

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