

load. Circumferential RS can be estimated ex-vivo via the opening angle (OA), by subjecting an aortic ring to a radial cut. Although the underlying mechanism for RS remains poorly understood, our recent efforts have demonstrated strong correlations between the amounts of sulfated glycosaminoglycans (sGAG) and the OA in healthy aortas. In addition, advanced glycation end products (AGEs) are known to accumulate with age and create crosslinks within the extracellular matrix. Since ruptures are more prevalent in older tissue, the purpose of this study was to compare the effect of sGAG on the OA in intact and glycated aortic tissue.

**METHODS AND RESULTS:** Sets of four adjacent aortic rings were excised from the upper thoracic regions of 9 porcine aortas. One ring served as a control, while a second ring underwent enzymatic sGAG depletion, a third underwent glycation, and the fourth ring underwent a combination of glycation followed by enzymatic sGAG depletion. A 100mM ammonium acetate buffer, pH 7.0 was used. Glycation and sGAG depletion were induced by incubating samples in 700mM of ribose, and 15U/mL hyaluronidase, 0.075U/mL chondroitinase ABC, 0.75U/mL heparinase for 48 hours at 37°C, respectively. The OA was then measured and the sGAG and general AGE contents were quantified. The quantification of sGAG contents in control and treated samples confirmed the successful removal of sGAG, with reductions by  $94 \pm 2.5\%$  (average  $\pm$  standard deviation). In addition, a  $93 \pm 27\%$  increase in general AGEs was achieved. Statistically significant differences were found between the OAs of control and sGAG depleted, glycated, and glycated combined with sGAG depleted samples (paired sample t-test,  $p < 0.001$ ). Specifically, the OA was reduced by  $34 \pm 12\%$  after sGAG depletion,  $14 \pm 8\%$  after glycation, and  $45 \pm 15\%$  after combined glycation and sGAG depletion. In addition, the OAs in sGAG depleted samples, as well as in combined glycated and sGAG depleted samples, were found to be significantly smaller than samples that underwent glycation only (paired sample t-test,  $p = 0.002$ ), being  $22 \pm 15\%$  and  $34 \pm 18\%$  smaller respectively.

**CONCLUSION:** These findings supported that sGAG depletion causes a reduction in the OA, in both intact and glycated tissue, and that AGEs may also affect the magnitude of the RS.

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**P006  
EICOSAPENTAENOIC ACID (EPA) DECREASES  
CYTOKINE RELEASE AND EXPRESSION OF  
INFLAMMATORY AND PRO-THROMBOTIC  
PROTEINS IN BRAIN VASCULAR ENDOTHELIUM**

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**BACKGROUND:** Brain vascular endothelial cell (EC) dysfunction contributes to ischemic stroke due to inflammation and release of pro-thrombotic factors. Treatment with icosapent ethyl (IPE), the ethyl ester of the omega-3 fatty acid,

eicosapentaenoic acid (EPA), reduced first and total ischemic strokes each by 36%, in statin-treated patients with elevated cardiovascular risk (REDUCE-IT). We tested the effects of EPA on cytokine release and expression of inflammatory proteins from brain microvascular ECs during inflammation.

**METHODS AND RESULTS:** Human brain microvascular endothelial cells were pretreated with the cytokine IL-6 at 12 ng/ml for 2 h before treatment with EPA (40  $\mu$ M) for 24 h. Proteomic analysis was performed using LC/MS to capture relative expression levels. Only significant changes in protein expression between treatment groups  $>1$ -fold were analyzed. Levels of soluble intercellular adhesion molecule-1 (sICAM-1) and tumor necrosis factor- $\alpha$  (TNF- $\alpha$ ) were measured by immunochrometry (ELISA). IL-6 exposure produced increased levels of sICAM-1 and TNF- $\alpha$  by 102% and 147% ( $p < 0.001$ ), respectively, in brain ECs compared with vehicle. EPA treatment reduced release of sICAM-1 by 43% ( $p < 0.001$ ) and TNF- $\alpha$  by 52% ( $p < 0.001$ ) compared to IL-6 alone. EPA also decreased expression of 43 proteins involved in the “neutrophil degranulation” pathway in brain ECs ( $p$ -adjusted =  $2.63 \times 10^{-12}$ ). EPA also decreased expression of prothrombin by 1.3-fold ( $p = 2.10 \times 10^{-24}$ ) relative to IL-6 alone.

**CONCLUSION:** EPA significantly reduced cytokine release and expression of inflammatory and pro-thrombotic proteins in brain ECs during inflammation. The ability of EPA to reverse brain EC dysfunction and inflammation may contribute to reductions in stroke risk, as demonstrated in large outcome trials.

*Amarin Pharma Inc., Elucida Research LLC*

**Young Investigator Award Winner — Basic  
Science**

**P007  
ENDOTHELIAL COLONY-FORMING CELL-  
DERIVED EXTRACELLULAR VESICLES AND  
CARDIAC REPAIR AFTER MYOCARDIAL  
INFARCTION**

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**BACKGROUND:** Despite improvements in therapeutics, ischemic heart disease remains a leading cause of death. Cardiac remodeling after myocardial infarction (MI), predominantly due to loss of cardiomyocytes and coronary vasculature, leads to a progressive decline in cardiac function resulting in heart failure. Current therapies for cardiac repair and heart failure are of limited benefit. Cell transplantation therapy upon MI is a very promising therapeutic strategy to replace dead myocardium, reducing scarring and improving cardiac performance.

**METHODS AND RESULTS:** Our research focuses on endothelial colony-forming cell-derived exosomes (ECFC-exosomes), which are actively secreted endocytic nanovesicles (30-100