









Cardioprotective effects of Simvastatin in a

Doxorubicin-induced acute cardiotoxicity model

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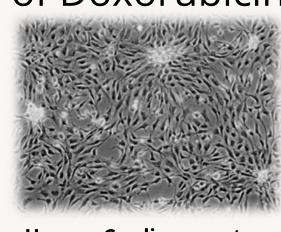
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Cardiotoxicity is the main side effect of Doxorubicin (Doxo) and cardiomyocytes damage can occur as early as the first administration of drug [1,2,3]. Current research is focused on identifying potential drugs that can mitigate cardiac side effects without compromising Doxorubicin's anti-tumor efficacy and statins are particularly promising in this field since their pleiotropic biological effects in addition to their cholesterol lowering activity [4]. Moreover, statins may influence the expression of Cx43, a protein member of the Gap Junctions (GJS) family that plays a crucial role in the early adaptative response to Doxorubicin-induced stress [5].

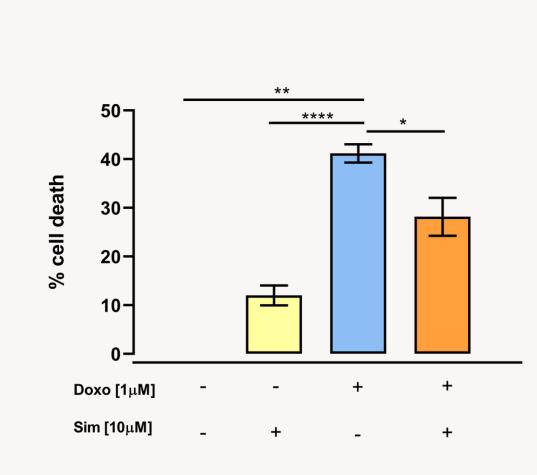
The purpose of this study was to evaluate the protective effects of Simvastatin in a cellular model of Doxorubicin-induced acute cardiotoxicity.

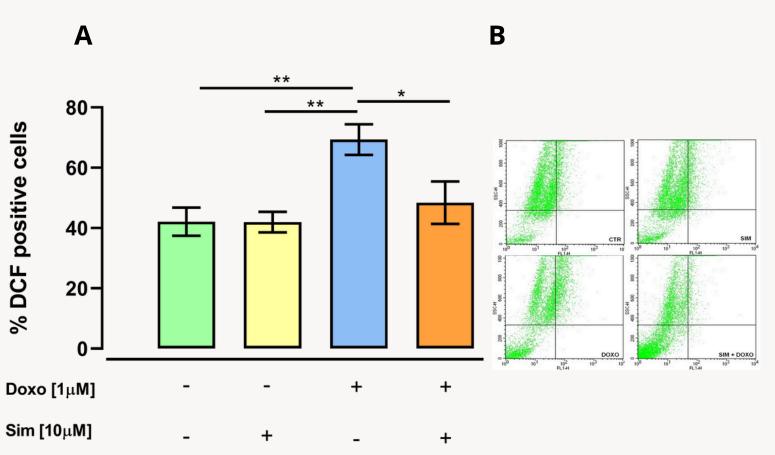


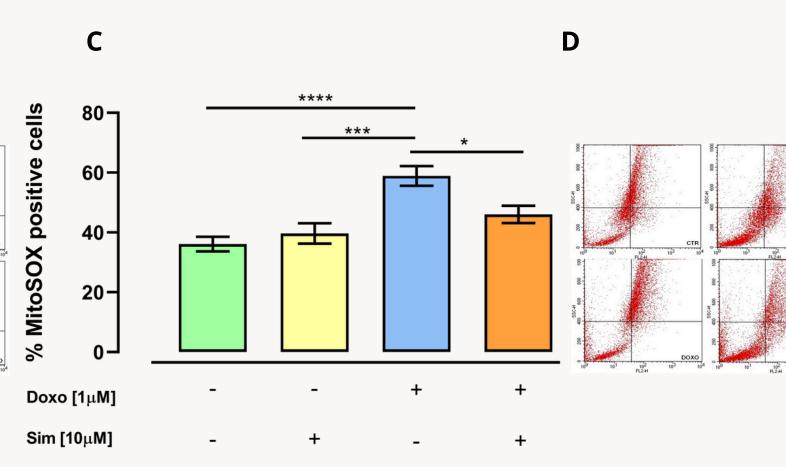
4h pre-treatment Simvastatin \rightarrow (Sim) [10 μ M]

co-administration Doxo[1μ M] + Sim [10μ M].

Results







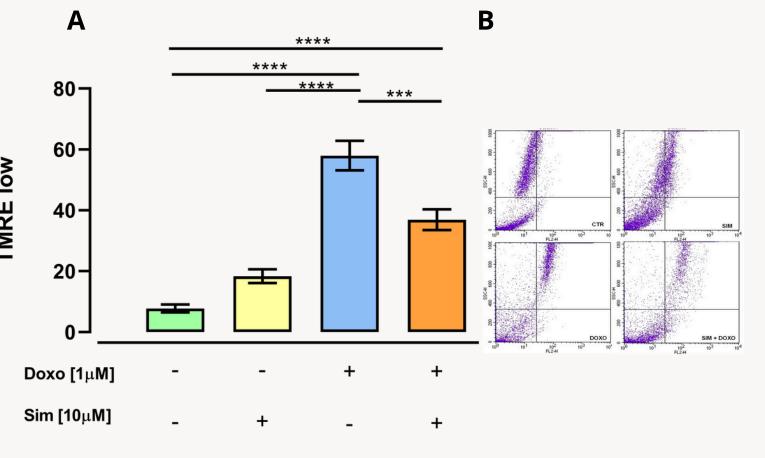
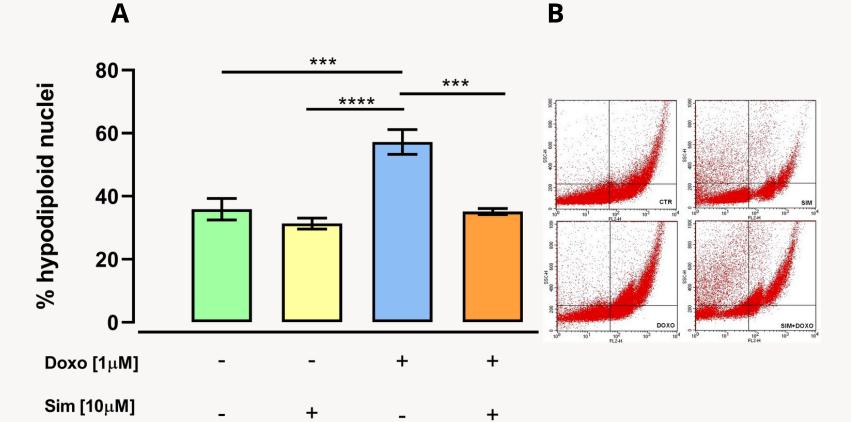
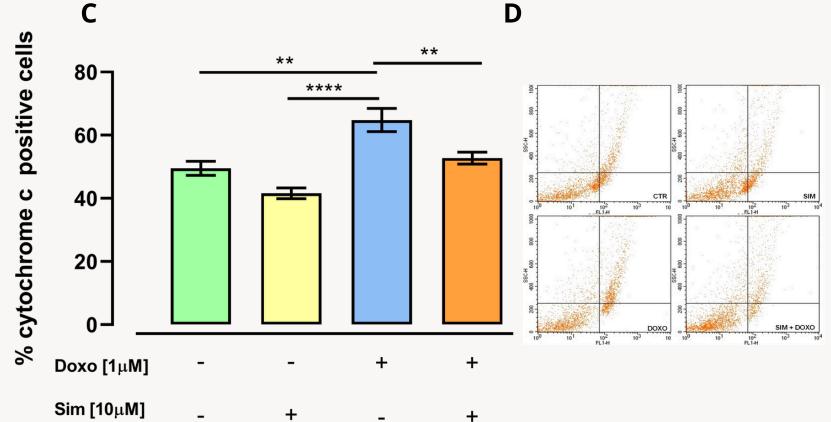


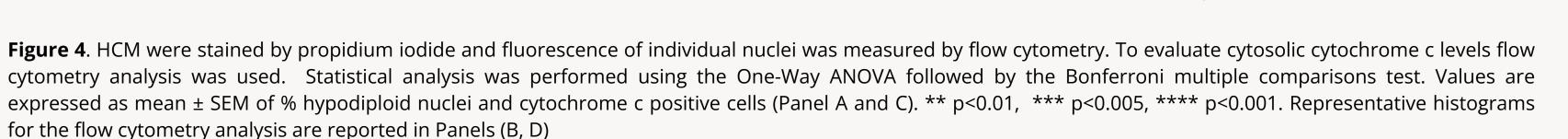
Figure 1. Cellular viability was assessed by MTT assay. Cell viability was calculated as % of 100). Data were analyzed using One-Way ANOVA followed by the Bonferroni multiple comparisons. Values are expressed as mean ± SEM of % cell death. * p<0.05 ** p<0.01, **** p<0.001

Figure 2. The fluorescent probes 2'-7'dichlorofluorescein diacetate (H2DCF-DA) and MitoSOX Red, a Mitochondrial Superoxide Indicator, were used to evaluate cytosolic ROS and mitochondrial superoxide generation, respectively. Data were analyzed by flow cytometry. Statistical analysis was performed using One-Way dead cells = 100 - ([OD treated/ OD control] x ANOVA followed by the Bonferroni multiple comparisons test. Values are expressed as mean ± SEM of the percentage of DCF and MitoSOX positive cells. *p<0.05, ** p<0.01, ***p<0.005, **** p<0.001 (A,C). Representative histograms for the flow cytometry analysis are reported in Panels (B,D).

Figure 3. The fluorescent dye tetramethylrhodamine methyl ester (TMRE) was used to evaluate mitochondrial membrane potential. Data were analyzed by flow cytometry. Statistical analysis was performed using One-Way ANOVA followed by the Bonferroni multiple comparisons test. Values are expressed as mean ± SEM TMRE-positive cells percentage. *** p<0.005, **** p<0.001 (A). Representative histograms for the flow cytometry analysis are reported in Panel (B).







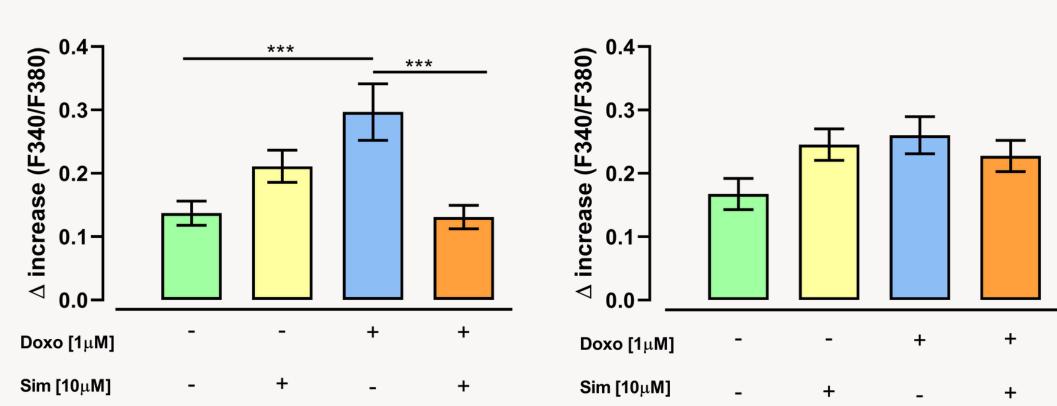
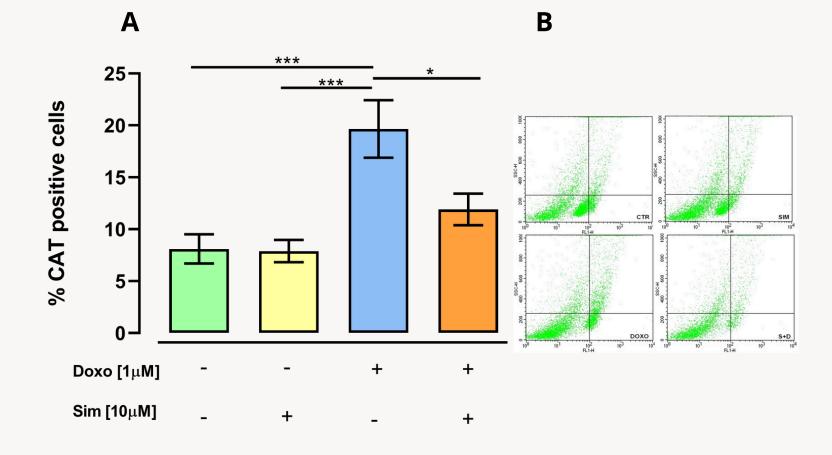
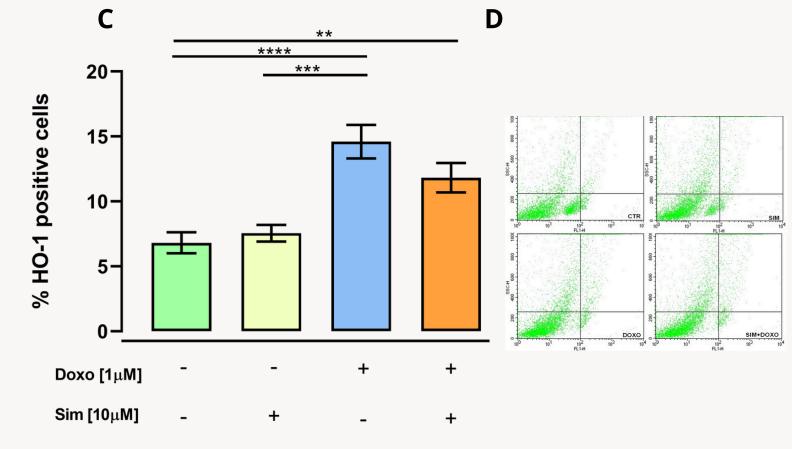


Figure 5. FCCP in calcium-free medium was used to evaluate mitochondrial calcium levels and Ionomycin in calcium-free medium was used to evaluate intracellular calcium levels (Panels A, B). Values are reported as mean ± S.E.M. of percentage of delta increase in FURA2 ratio fluorescence (340/380 nm). *** p<0.05





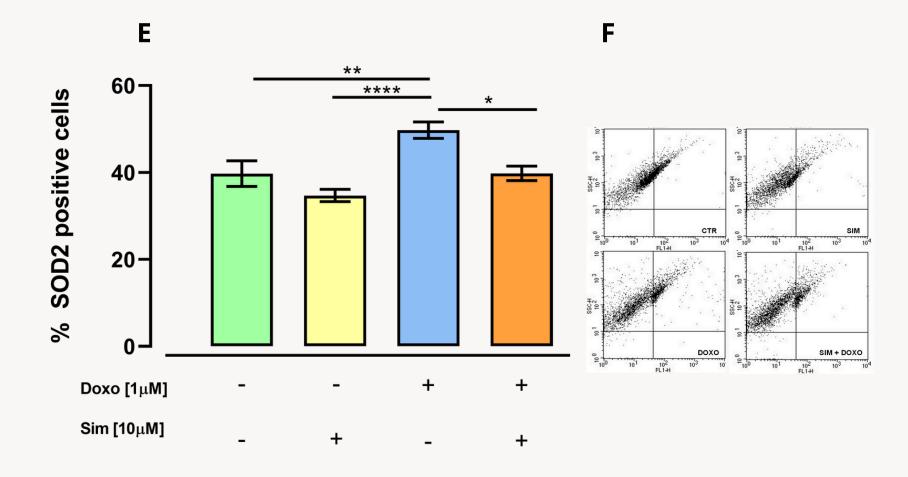
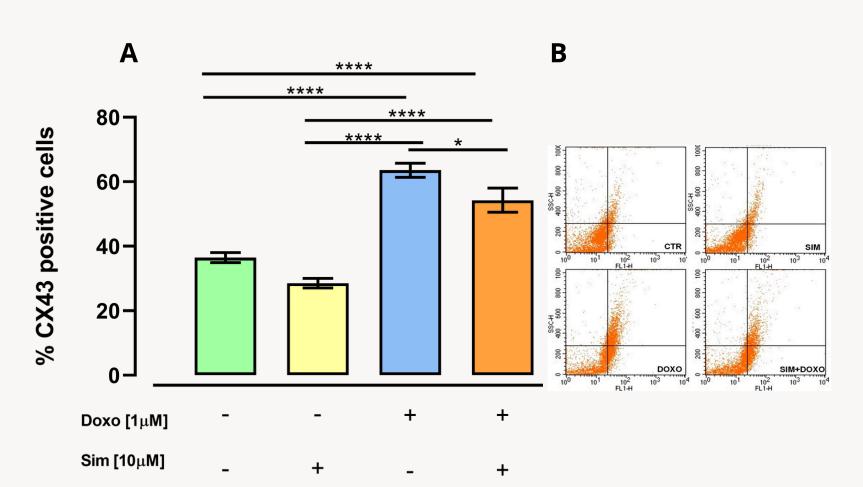


Figure 6. To evaluate CAT, HO-1 and SOD2 level flow cytometry analysis was used. Statistical analysis was performed using One-Way ANOVA followed by the Bonferroni multiple comparisons test. Values are expressed as mean ± SEM of % of CAT, HO-1 and SOD2 positive cells (Panel A, C, E). * p<0.05, ** p<0.01, *** p<0.005, **** p<0.001. Representative histograms for the flow cytometry analysis are reported in Panels (B,D,F).



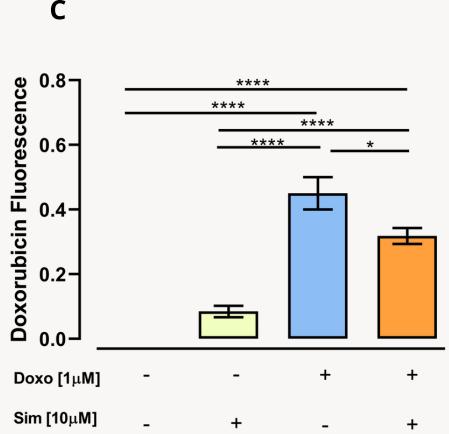
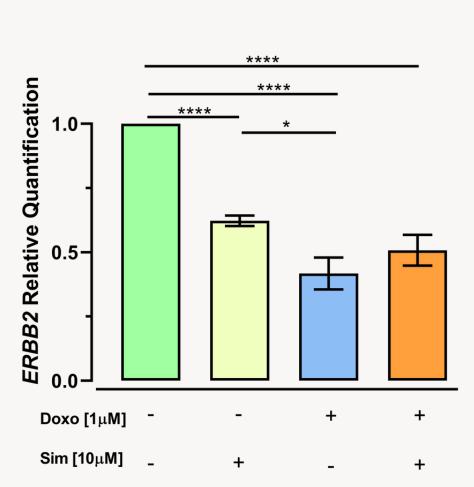


Figure 8. Effects of Sim, Doxo and Sim co-treatment on *ERBB2* relative gene expression in a Human Cardiomyocyte cell line, as determined by real-time RT PCR. Data were calculated using the $2^{-\Delta\Delta Ct}$ method, normalized to GAPDH cDNA levels and then expressed as relative to control (calibrator sample, defined as 1.00). Values are expressed as means \pm SD and were analyzed by analysis of variance (ANOVA) followed by Tukey's multiple comparisons test. * p<0.05, **** p<0.001



Conclusion

Simvastatin co-treatment, our experimental model, oxidative alleviate stress reduce thus leading apoptosis, human cardiomyocytes to reduce their defense responses.

These data indicate that Simvastatin could be a valuable therapeutic approach to mitigate or prevent Doxorubicin-induced acute cardiotoxicity.

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References

Panel (B)

Figure 7. To evaluate membrane level of Cx43 flow cytometry analysis was used. Statistical analysis was performed using One-

Way ANOVA followed by the Bonferroni multiple comparisons test. Values are expressed as mean ± SEM of % Cx43 positive cells

(A). Spectrofluorimetric analysis was used to evaluate Doxorubicin uptake in HCM cells. Values are reported as mean ± S.E.M. of

Fluorescence intensity of Doxorubicin (C). Data were analyzed by variance test analysis and multiple comparisons were made by

Bonferroni's test. * p<0.05 *** p<0.005, **** p<0.001. Representative histograms for the flow cytometry analysis are reported in