

Pretreatment with paricalcitol attenuates inflammation in ischemia-reperfusion injury via upregulation of cyclooxygenase-2 and prostaglandin E2

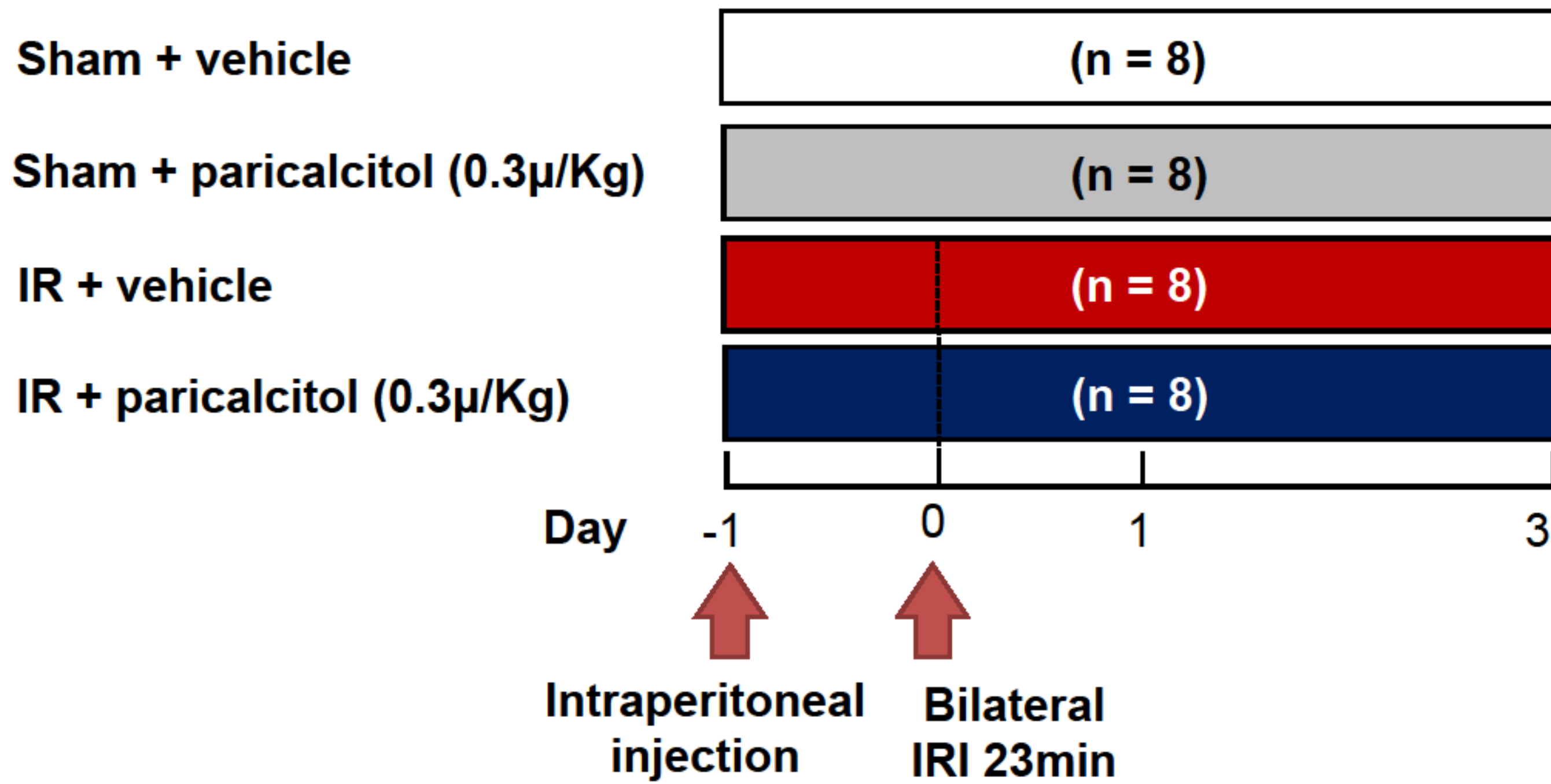
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Introduction

Ischemia-reperfusion injury (IRI) is unavoidable event in renal transplantation, causing the delayed graft function and increased immunogenicity. We investigated whether paricalcitol is renoprotective in a mouse model of IRI, and whether potential mechanism is related with modulation of renal inflammation and prostaglandin E2 (PGE2) synthesis.

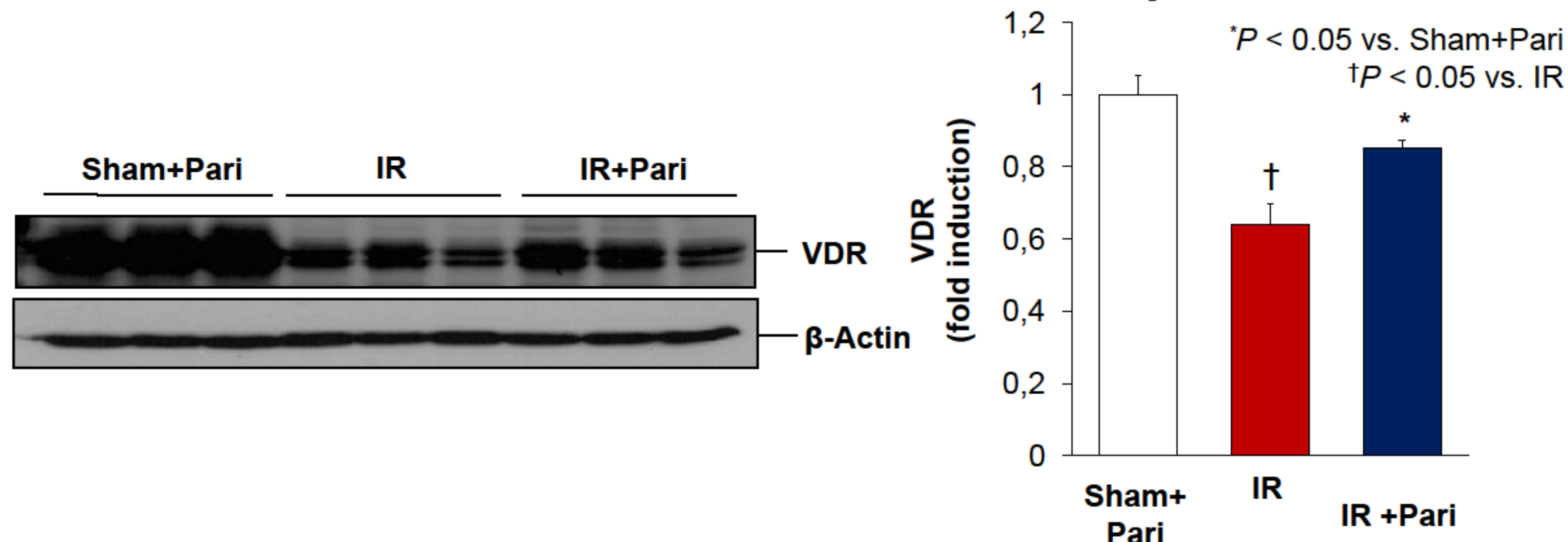
Methods



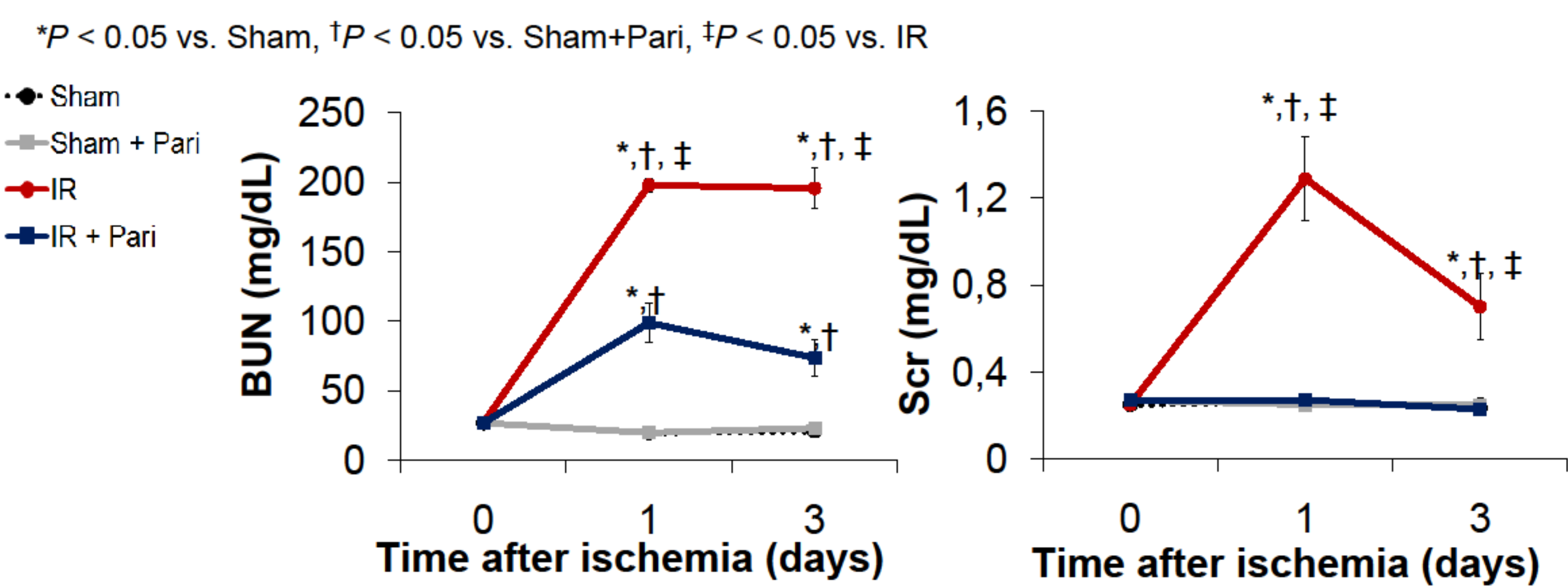
Paricalcitol (0.3 µ/Kg) was administered to male C57BL/6 mice 24 hours before IRI, and mice were killed at 72 hours after IRI

Results

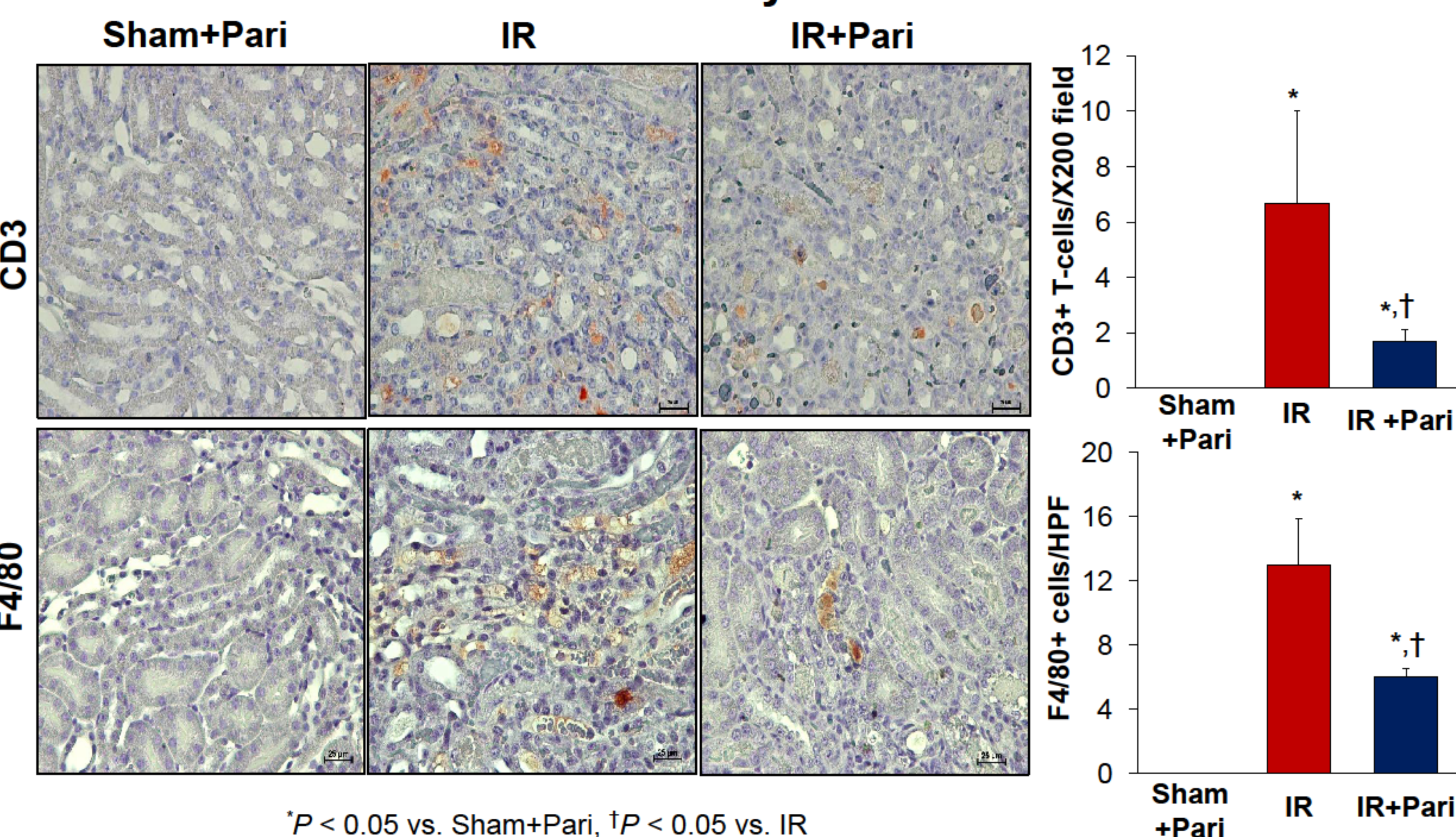
Paricalcitol Restores the Decreased VDR Expression after IRI



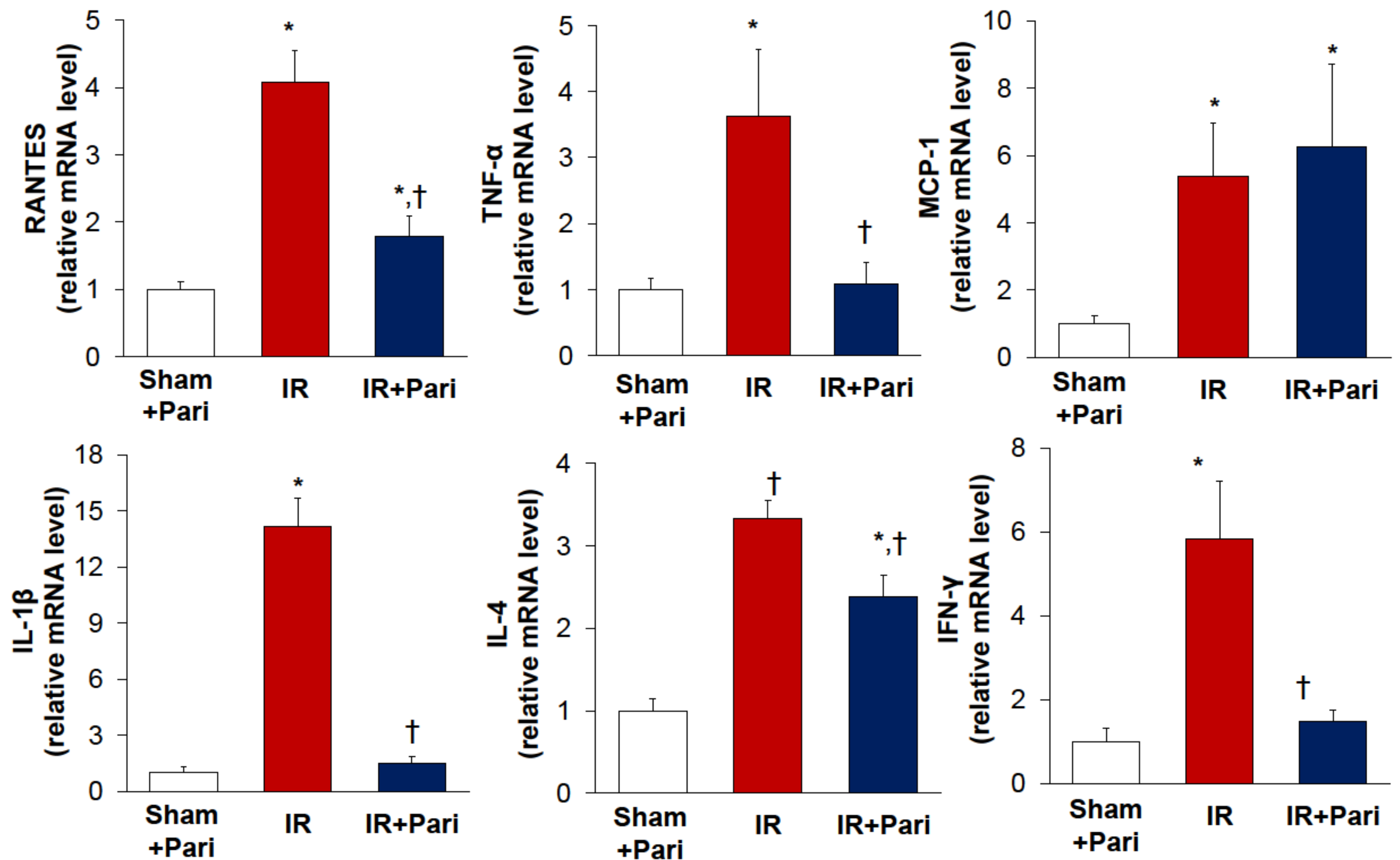
Paricalcitol Protects Renal Function without Hypercalcemia



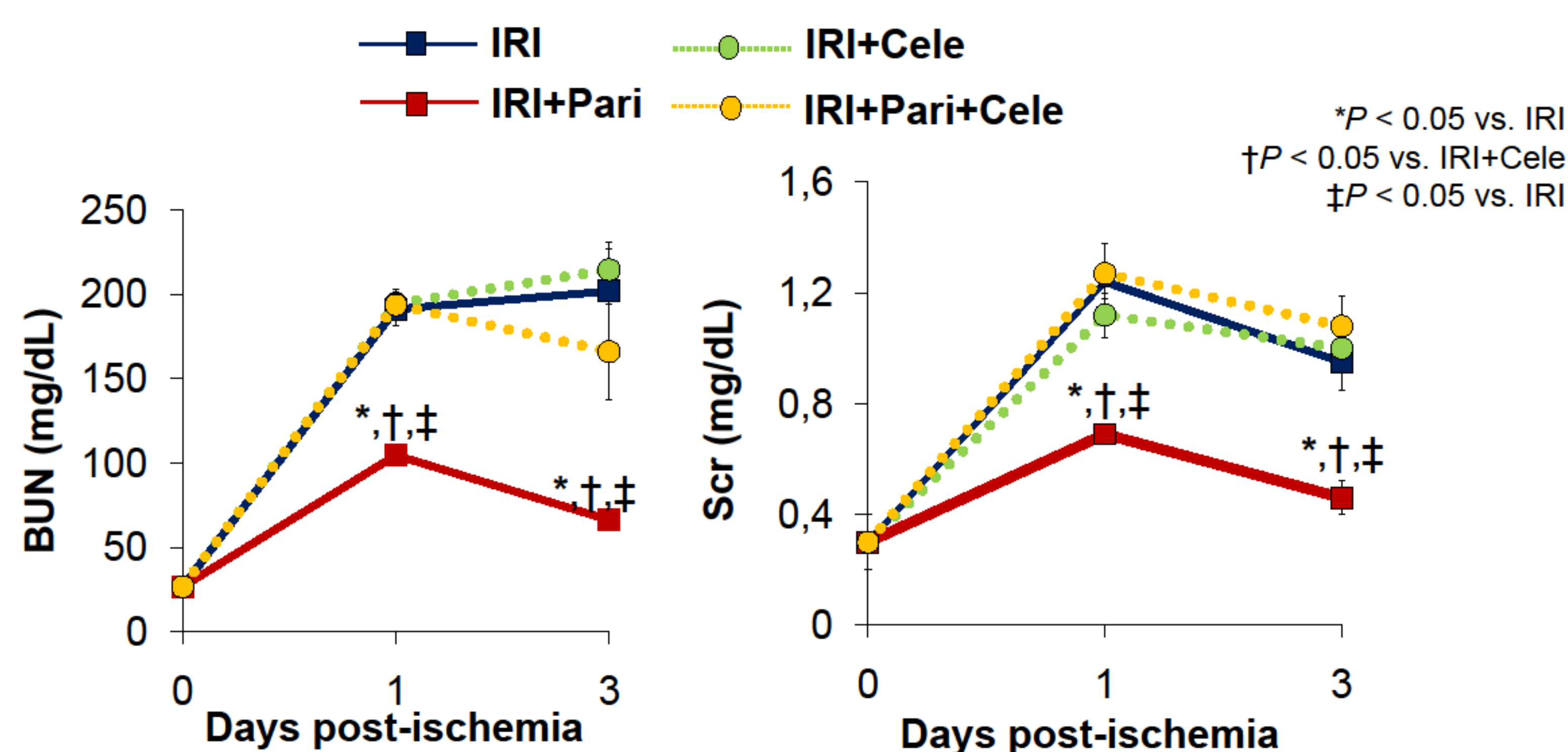
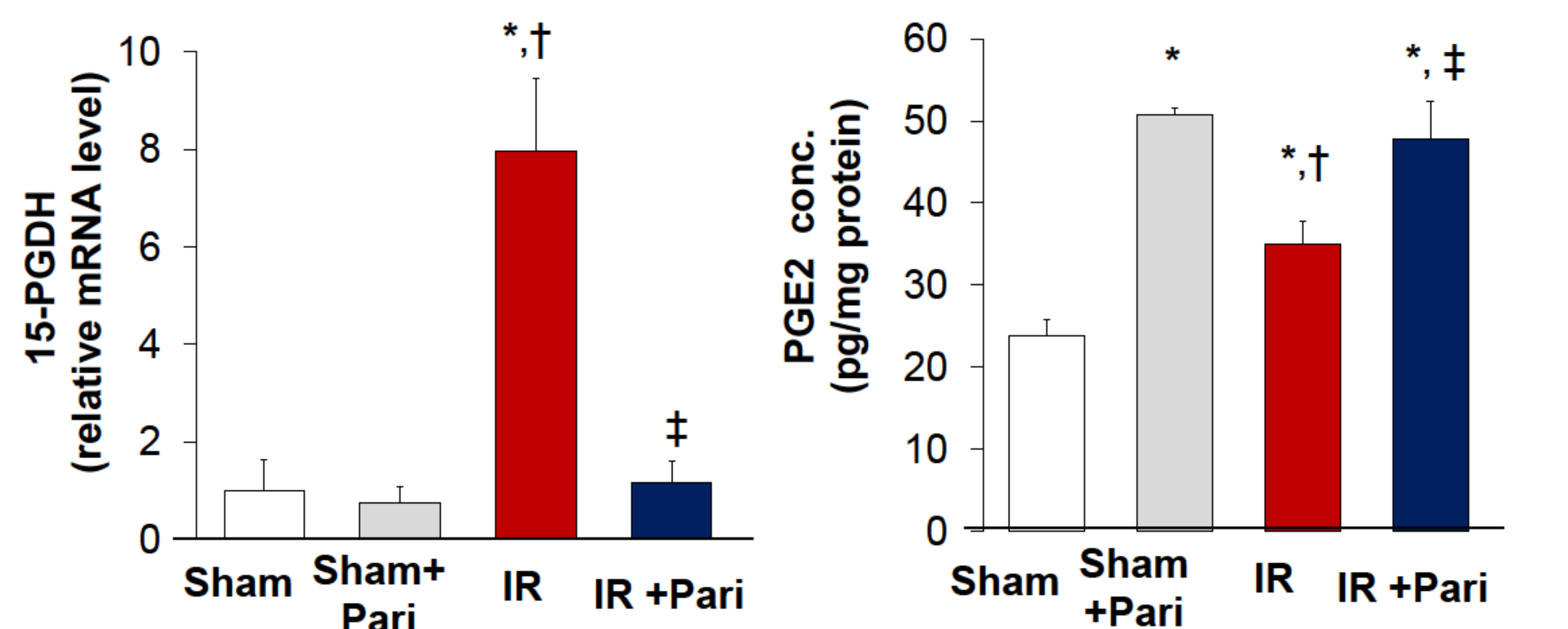
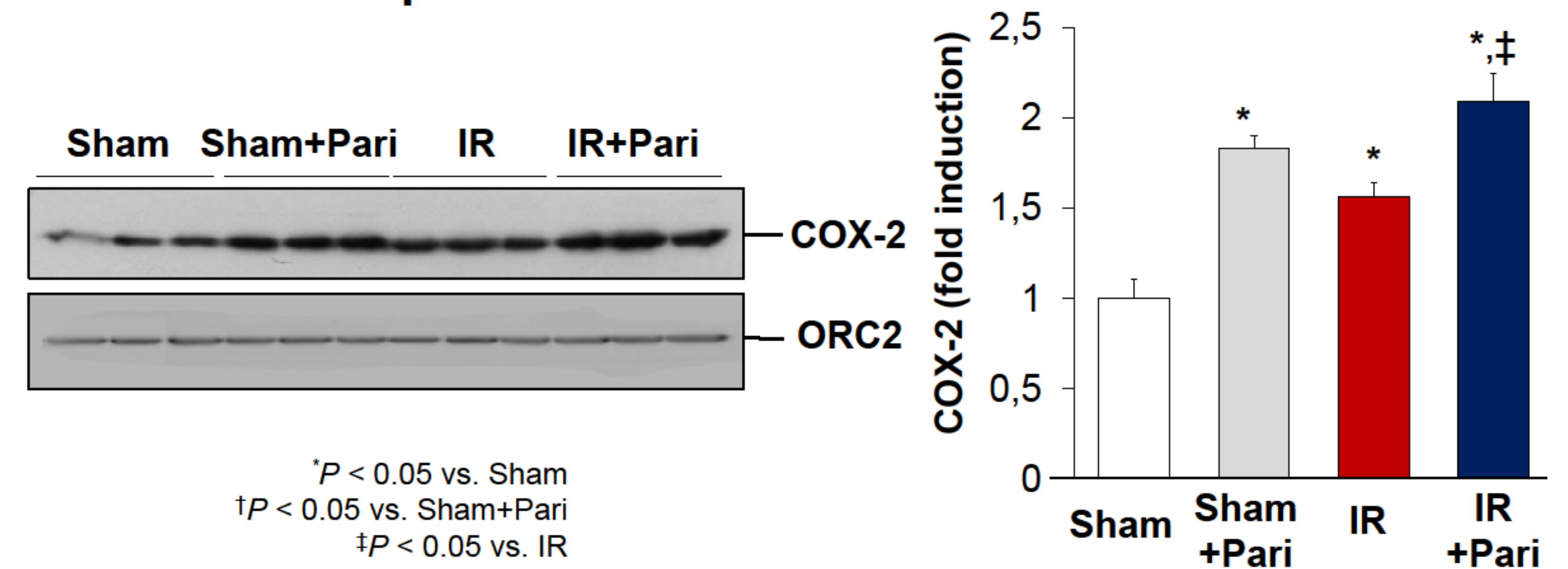
Paricalcitol Inhibits Inflammatory Cell Infiltration



Paricalcitol Inhibits Inflammatory Cytokine Expression



Up-regulation of COX-2 and PGE2 is one of the protective mechanisms of paricalcitol in renal IRI



Summary and Conclusion

- Paricalcitol reduced inflammatory cytokine expression, T-cell and macrophage infiltration in mice kidneys with IRI
- Paricalcitol increased the COX-2, PGE2 and EP4 expression in mice kidneys without IRI
- Up-regulation of COX-2, PGE2 and EP4 expression in IRI kidneys was enhanced by paricalcitol
- Paricalcitol attenuates renal IRI via inhibition of renal inflammation and activation of PGE2 synthesis and its receptor expression

