

MICROSOMAL AND EXOSOMAL GLUTAMYL AMINOPEPTIDASE IN URINE ARE EARLY AND PREDICTIVE BIOMARKERS OF RENAL DYSFUNCTION IN CISPLATIN-TREATED RATS

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OBJECTIVES

In previous studies we have demonstrated that glutamyl aminopeptidase (GluAp) is an early and predictive biomarker of renal dysfunction in cisplatin-treated rats, an experimental model of acute kidney injury. The aim of this work is to study if the measurement of GluAp in microsomal and exosomal fractions of urine can improve the early diagnosis of renal dysfunction in this model.

METHODS

Urine samples from control and cisplatin-treated rats (n=10 each group) were collected 24 hours after injection of cisplatin and subjected to differential centrifugation at 17.000 and 200.000 g in order to obtain microsomal and exosomal fractions, respectively. GluAp was measured by ELISA in the different fractions.

RESULTS

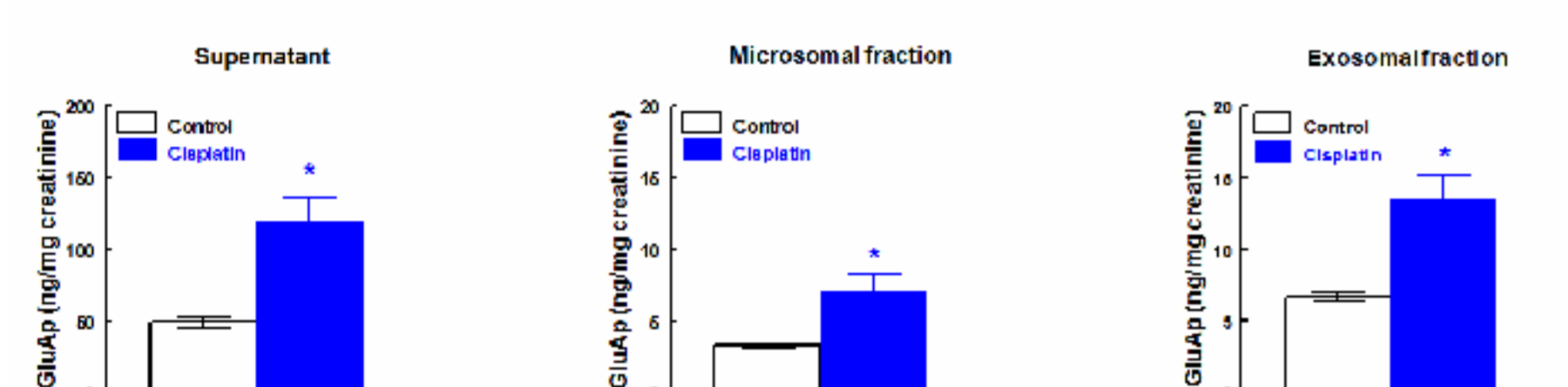


Figure 1. GluAp excretion in supernatant, microsomal and exosomal fraction of urine samples from Control and Cisplatin groups collected 24 hours after injection. Data are expressed in ng/mg creatinine. Data are expressed as mean \pm SEM; * p<0.01 Cisplatin vs. Control (n=10 each group).

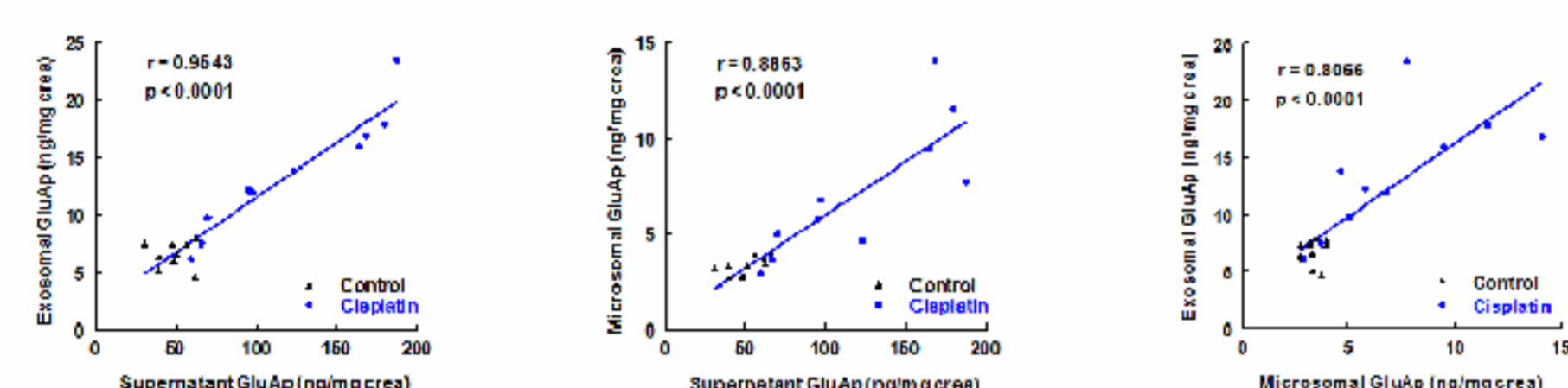


Figure 2. Linear regressions between GluAp excretion (ng/mg creatinine) in supernatant and exosomal fraction (left), supernatant and microsomal fraction (middle), and microsomal and exosomal fractions (right) of urine samples collected 24 hours after injection.

In cisplatin-treated group, GluAp was increased in microsomal and exosomal fractions of urine per mg of creatinine (Fig. 1), per mg of protein content in each fraction and per weight of rat and day.

GluAp content in the different fractions was correlated (Fig. 2), and exosomal fraction was the richest fraction for this enzyme. GluAp excreted in exosomal fraction per mg of creatinine was highly correlated ($r=0.7587$; $p=0.0001$) with serum creatinine (SCr) concentration at the end of the experiment, and it was the best biomarker to distinguish rats that developed concentrations of $SCr \geq 0.61$ (Table 1).

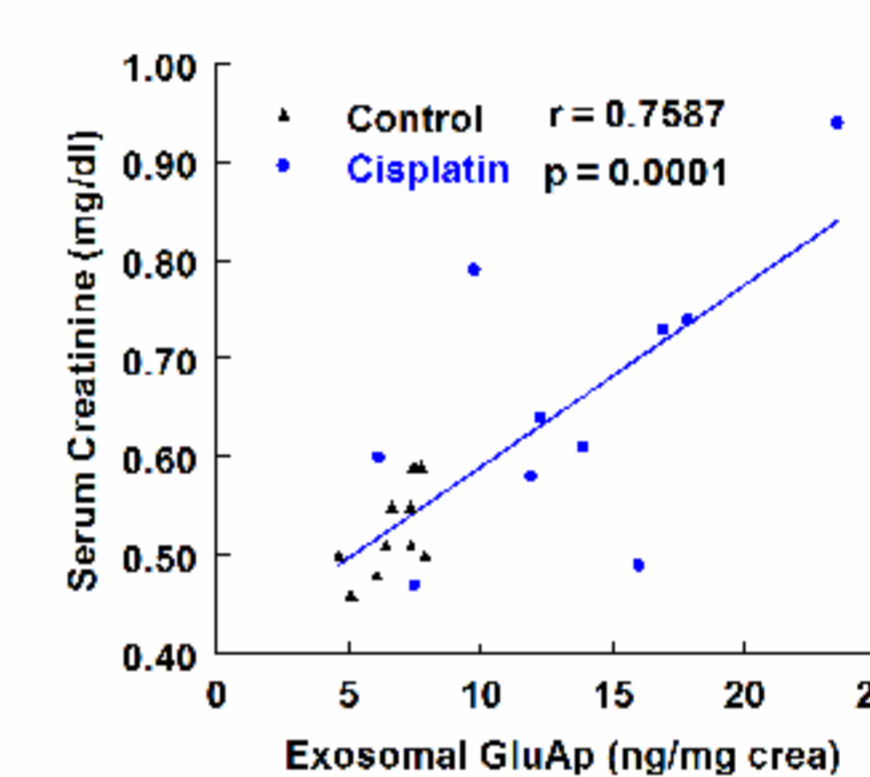


Figure 3. Linear regression between GluAp excretion (ng/mg creatinine) in exosomal fraction of urine samples collected 24 hours after injection with SCr concentration determined at the end of the experiment.

Table 1. ROC-AUC and sensitivity at 95 % of specificity for GluAp measured in supernatant, microsomal and exosomal fractions of urine collected 24 hours after cisplatin injection to distinguish animals with $SCr \geq 0.61$ at the end of the experiment.

	AUC	Sensitivity (%)
Exosomal GluAp (ng/mg Cr)	0.9562	70.6
Supernatant GluAp (ng/mg Cr)	0.9478	63.6
Microsomal GluAp (ng/mg Cr)	0.9340	45.2

CONCLUSIONS

We conclude that microsomal and exosomal GluAp are early and predictive biomarkers of renal dysfunction. Measurement of GluAp in these fractions supposes an improvement in the early diagnosis of this alteration in cisplatin-treated rats. Urine fractionation might be a useful tool in the search of biomarkers for different renal pathologies.



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