

A Rat Model of Ischemic Enteritis - Pathogenic Importance of Enterobacteria, iNOS/NO, and COX-2/PGE₂ -

Koji Takeuchi^{1,2}, Yoshino Komatsu¹, and Tohru Kotani¹

¹Department of Pharmacology and Experimental Therapeutics, Kyoto Pharmaceutical University, Yamashina, Kyoto, Japan

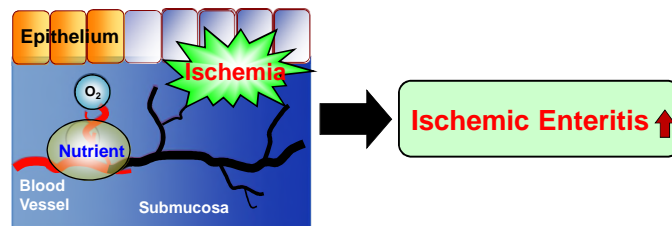
²General Incorporated Association, Kyoto Research Center for Gastrointestinal Diseases, Karasuma-Oike, Kyoto, Japan

Disclosure of COI

In relation to this presentation,
I have no conflict of interest that needs
to be disclosed.

Backgrounds (1)

Ischemic enteritis, one of the most dramatic abdominal emergencies, is caused by a significant decrease of arterial inflow to the small intestine. Patients of various ages are at risk of generating intestinal ischemia since a disorder in the mesenteric circulation may develop as a result of various diseases such as arteriosclerosis and diabetes. The incidence of ischemic enteritis is increasing, and its mortality rate remains very high. However, an animal model of ischemic enteritis that has high clinical predictability has not been available.

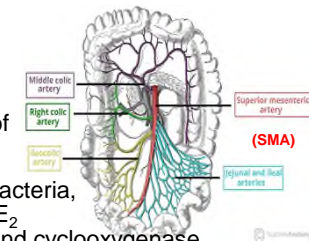


Backgrounds (2)

We recently invented a new rat model of ischemic enteritis caused by partial ligation of the superior mesenteric artery (SMA).

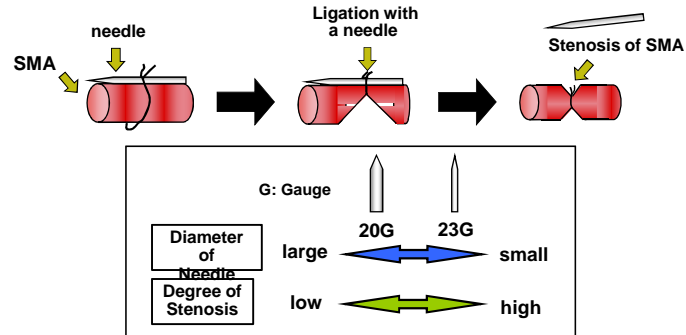
Aim

- We introduce a model of ischemic enteritis in rats induced by stenosis of the SMA made by partial ligation.
- We demonstrate the roles of enterobacteria, nitric oxide (NO), and prostaglandin E₂ (PGE₂), together with NO synthase and cyclooxygenase in the pathogenesis of this lesion model.
- We show which EP receptor subtype is responsible for the protective effects of PGE₂ against this model of ischemic enteritis.

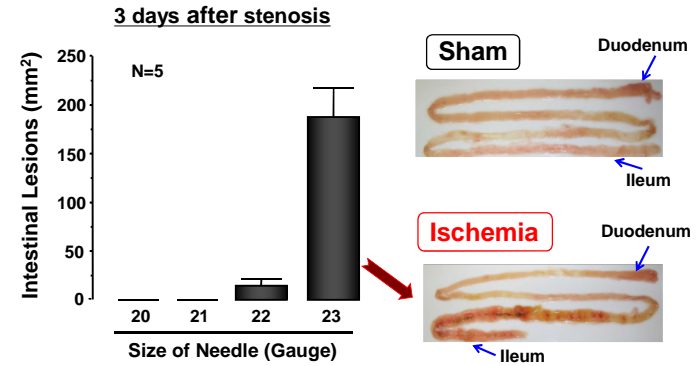


Materials and Methods (1)

Induction of Intestinal Ischemia: Male SD rats (200-230 g) were used after 18 h fasting. Under ether anesthesia, the superior mesenteric artery (SMA) was exposed, and a calibrated stenosis was produced by placing a 20-23 gauge needle on a blood vessel, ligating both the vessel and needle together, and then removing the needle from the ligature. After operation, the animals were fed normally and killed 1-3 days later, and the small intestines were examined for lesions.



Development of Ischemic Enteritis in Rats after Stenosis of SMA



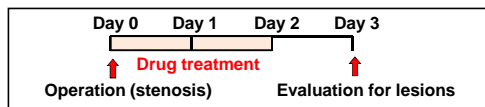
Materials and Methods (2)

Induction of Ischemia
We used a 23-gauge needle to induce stenosis of the SMA, and investigated the pathogenic roles of various factors in this model of ischemic enteritis.

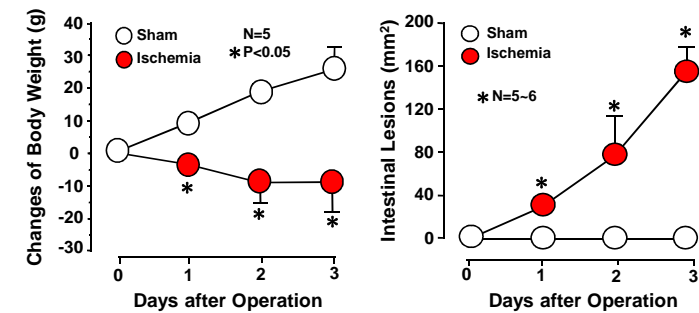
Drugs

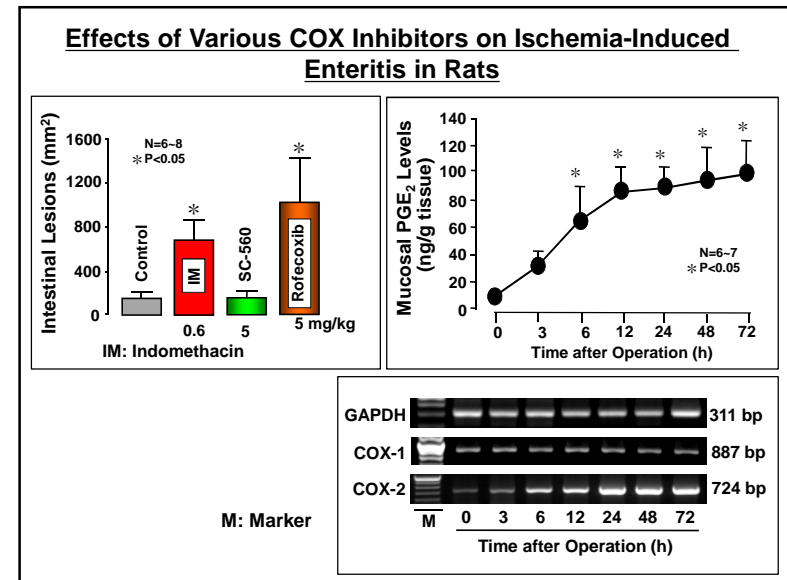
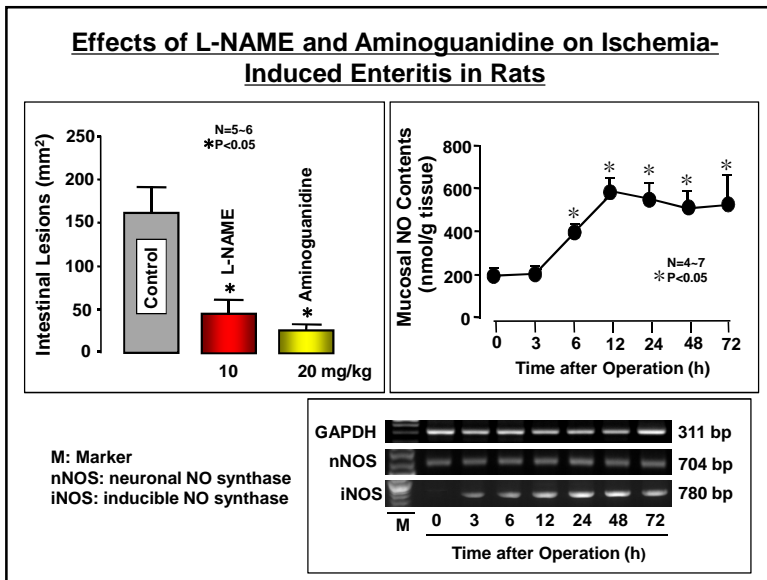
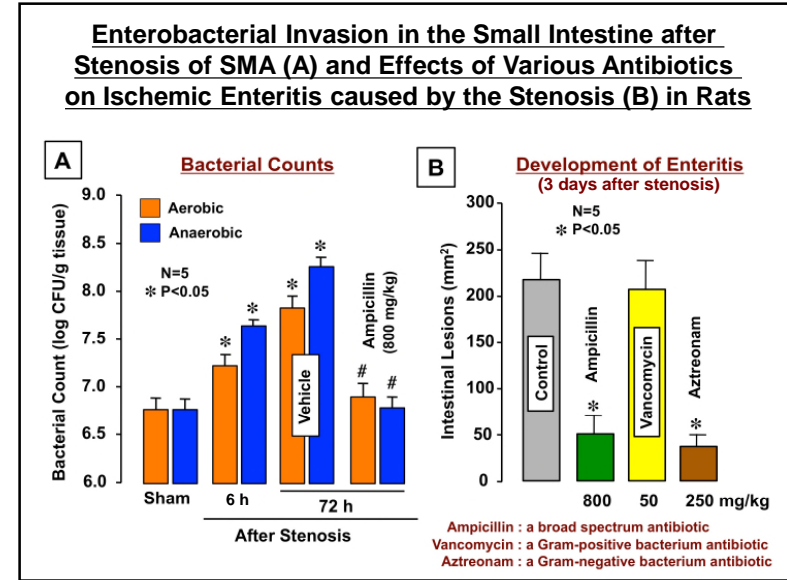
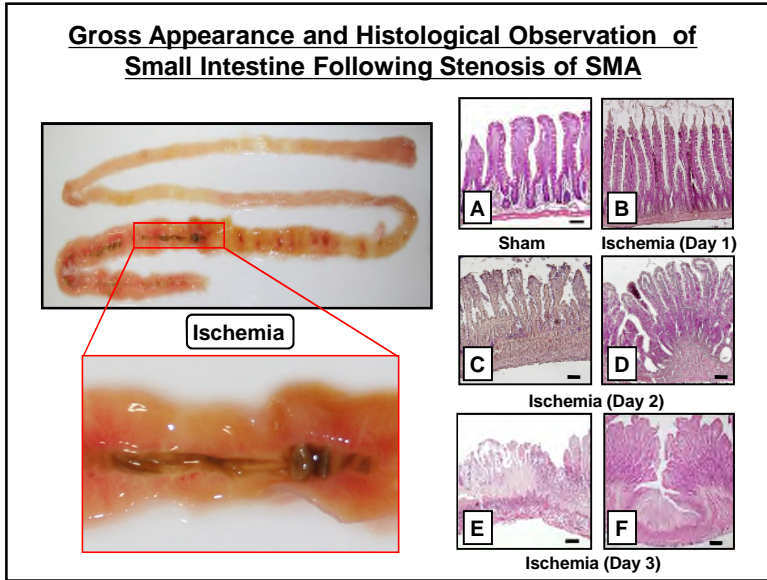
- Ampicillin (a broad spectrum antibiotic: 800 mg/kg, p.o.)
- Aztreonam (a gram-negative bacterium-specific antibiotic: 250 mg/kg, p.o.)
- Vancomycin (a gram-positive bacterium-specific antibiotic: 50 mg/kg x 2, p.o.)
- L-NAME (a nonselective NOS inhibitor: 10 mg/kg, s.c.)
- Aminoguanidine (a selective iNOS inhibitor: 20 mg/kg, s.c.)
- Indomethacin (IM: a nonselective COX inhibitor: 0.6 mg/kg, s.c.)
- SC-560 (a selective COX-1 inhibitor: 5 mg/kg, s.c.)
- Rofecoxib (a selective COX-2 inhibitor: 5 mg/kg, s.c.)
- PGE₂ (0.01-0.1 mg/kg, i.p.)
- AE-829 (a selective EP1 antagonist: 3 mg/kg, i.p.)
- AE5-599 (a selective EP3 antagonist: 10 mg/kg, i.p.)
- AE3-208 (a selective EP4 antagonist: 3 mg/kg, i.p.)
- 17-phenyl PGE₂ (a selective EP1 agonist: 0.03 mg/kg, i.p.)
- NT-012 (a selective EP3 agonist: 1 mg/kg, i.p.)
- AE1-329 (a selective EP4 agonist: 1 mg/kg, i.p.)

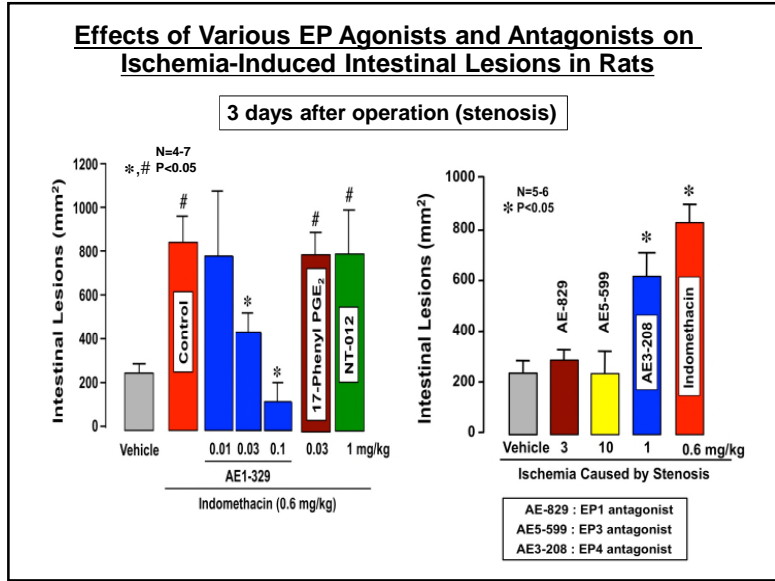
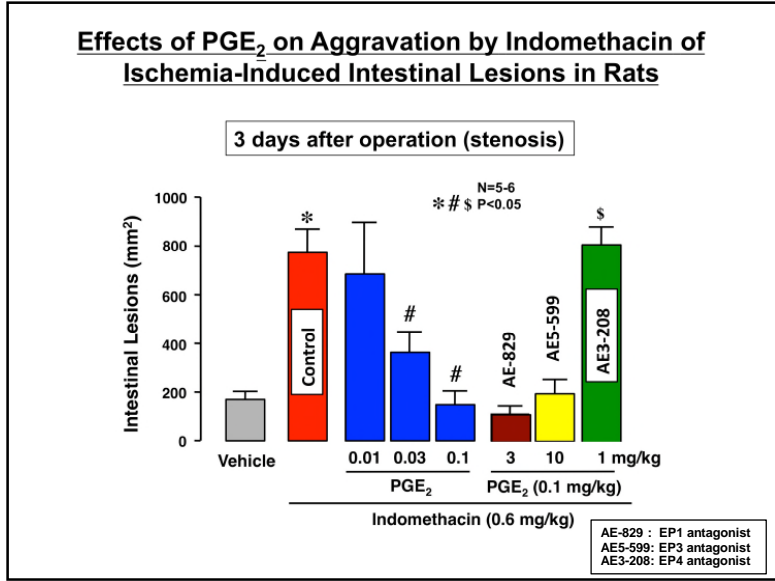
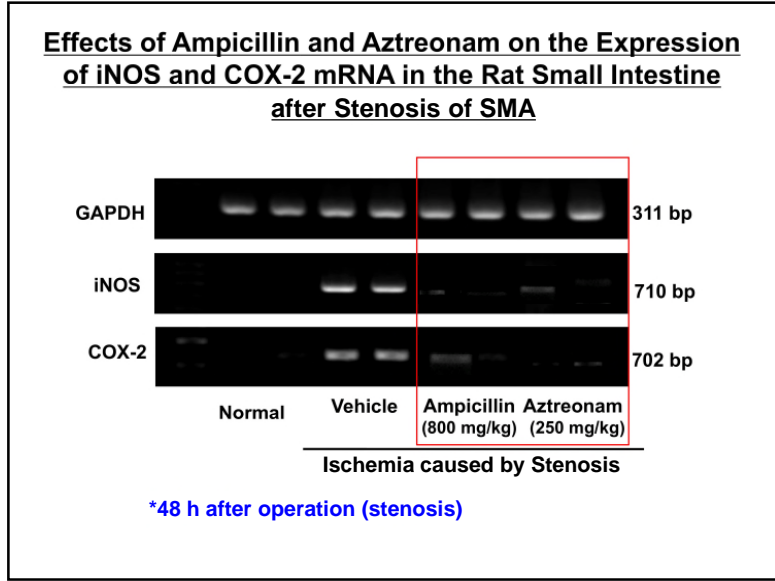
Experimental Schedule



Time-Course Changes in Body Weight (A) and Intestinal Lesions (B) in Rats with or without Stenosis of SMA







Conclusion

- Intestinal ischemia caused by stenosis of SMA generated intestinal lesions, accompanied by enterobacterial invasion, the up-regulated expression of iNOS and COX-2 in the small intestine, together with increases in the mucosal production of NO and PGE₂.
- The development of these lesions was prevented by repeated treatment with antibiotics as well as iNOS inhibitors, suggesting the involvement of enterobacteria, especially gram-negative bacteria, and iNOS/NO in the pathogenesis of these lesions.
- PGE₂, either administered exogenously or generated endogenously by COX-2, contributes to intestinal mucosal defense during ischemia via the activation of EP4 receptors, while indomethacin or rofecoxib aggravated the ischemic enteritis caused by the stenosis of SMA.
- This model may be useful for screening drugs against ischemic enteritis.

Acknowledgements

Kikuko Amagase, PhD

Graduate students: Yuka Nakamori, MS

Shinji Kojima, MS, Naoko Abe, MS, Aiko Kumano, MS

Undergraduate Students at Department of
Pharmacology and Experimental Therapeutics,
Kyoto Pharmaceutical University