

Serum sIL-6R α Predicts Impairments in Cutaneous Nitric Oxide-Dependent Vasodilation in Humans.

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Purpose: Interleukin-6 (IL-6) contributes to atherosclerotic plaque development and plaque destabilization by promoting inflammation. Soluble IL-6 receptors (sIL-6R) are capable of stimulating a variety of cellular responses through trans-signaling including activation of inflammatory processes inducing endothelial dysfunction in the vasculature. The aim of the present study was to determine if sIL-6R α was related to impairments in nitric oxide (NO)-dependent cutaneous vasodilation in humans across a broad range of serum low-density lipoprotein (LDL) concentrations. **Methods:** In 19 men and women, with a broad range of serum LDL concentrations (LDL: 75-233 mg/dl), skin blood flow (SkBF) was measured by laser-Doppler flowmetry during a standardized local heating protocol (42°C) to induce eNOS-dependent vasodilation. After full expression of SkBF during sustained local heating, NO-dependent vasodilation was quantified by perfusion of the NOS inhibitor L-NAME. All data were normalized as a percentage of maximum cutaneous vascular conductance (%CVC_{max} = laser-Doppler flux/ mean arterial pressure: 28mM sodium nitroprusside). Serum samples were analyzed for the inflammatory cytokines IL-6, sIL-6R α and TNF α using a customized cytometric bead assay. **Results:** NO-dependent vasodilation ranged from 22 to 82 %CVC_{max} and sIL-6R α values were measured from 13.8 to 31.6 ng/ml. NO-dependent vasodilation was negatively related to sIL-6R α ($R^2 = 0.368, p = 0.006$) and to serum LDL concentrations ($R^2 = 0.328, p = 0.01$). IL-6 and TNF α were not related to NO-dependent vasodilation. Stepwise regression revealed that sIL-6R α was the best predictor of NO-dependent vasodilation. **Conclusion:** Both sIL-6R α and low-density lipoproteins are independently associated with impairments in cutaneous microvascular function. **Research funded by NIH Grant HL-089302-05.**