Circulating Endothelial Progenitor Cells in Patients With
Angiogenic Profiling of the Ischemic Human Heart

In commercially available microimmunofluorescence assay (Labsystems), with titers > (excluded by dobutamine stress echocardiography). In all patients we analyzed CP-HS-P60 antibody titers on admission and at 90 days.

Results: Circulating EPC were significantly increased in patients with UA as compared with SA (24.5±2.6 versus 13.3±2.9). 7 pts with UA followed for 3 months after clinical stabilization exhibited a near 50% reduction in number of circulating EPC. Adhesive capacity of EPC from UA and SA did not differ. A positive correlation was found between systemic CRP levels and circulating EPC but not with their adhesive capacity.

Conclusion: Pts with UA and no evidence of cardiac necrosis exhibit increased circulating EPC. System inflammation, in addition torecognized growth factors, could play a role in peripheral mobilization of EPC in patients with anginal-syndromes.

Chlamydia Pneumoniae-Heat Shock Protein 60 Induces a Highly Specific Persistent Immune Response in Patients With Unstable Angina Independently From IgG and IgA Seropositivity

Background: The humoral response against Chlamydia Pneumoniae (CP) is HS-P60, an highly immunogenic molecule with high degree of sequence homology with the human HS-P60, was found to be highly specific for acute coronary syndromes.

Methods: Among 984 patients with unstable angina (UA) included in the SPAI (Stratification Prognostica Angina Instabile) Study, we selected 119 subjects with unfavourable and 119 with good outcome (as combined end point: death, myocardial infarction and cazione Prognostica Angina Instabile) Study, we selected 119 subjects with unfavourable outcome.

Results: In UA, CP-HS60 antibody titers increased significantly at 90 days (median: admission 0.50 (0.3-1.0) vs discharge 0.60 (0.3-1.3) respectively; p < 0.01).

Conclusion: Seropositivity to CP-HS60 is highly specific for UA and increases significantly up to 90 days, despite stability of IgG and IgA antibody titers against CP, most likely suggesting an antigenic mimicry.

Angiogenic Profiling of the Ischemic Human Heart In Vivo

Background: Recent advances in stem cell research have revealed that endothelial progenitor cells (EPCs) from bone marrow play important role in angiogenesis in response to injury and ischemia. The specific mediators involved in the mobilization, recruitment, differentiation and incorporation of EPCs into the blood vessels are not understood.

Methods: Among 984 patients with unstable angina (UA) included in the SPAI (Stratification Prognostica Angina Instabile) Study, we selected 119 subjects with unfavourable outcome.

Results: Circulating EPC were significantly increased in patients with UA as compared with SA (24.5±2.6 versus 13.3±2.9). 7 pts with UA followed for 3 months after clinical stabilization exhibited a near 50% reduction in number of circulating EPC. Adhesive capacity of EPC from UA and SA did not differ. A positive correlation was found between systemic CRP levels and circulating EPC but not with their adhesive capacity.

Conclusion: Pts with UA and no evidence of cardiac necrosis exhibit increased circulating EPC. System inflammation, in addition to recognized growth factors, could play a role in peripheral mobilization of EPC in patients with anginal-syndromes.

Therapeutic Angiogenesis

Monday, March 08, 2004, 3:00 p.m.-5:00 p.m. Morial Convention Center, Hall G Presentation Hour: 3:00 p.m.-4:00 p.m.