

real-time PCR (q-PCR). NADPH oxidase (NOX) 2 and NOX4 mRNA and protein expression of left ventricular tissues was detected using q-PCR and western blot analysis that are associated with oxidative stress.

RESULTS AVE 0991 displayed a significant reduction in the left ventricular weight (15.96 ± 0.68 vs. 22.21 ± 0.75 , $P < 0.01$) and left ventricular end-diastolic diameter (3.48 ± 0.19 vs. 4.32 ± 0.20 , $P < 0.05$), and a significant elevation in left ventricular ejection fraction (58.16 ± 2.78 vs. 41.82 ± 5.58 , $P < 0.05$) when compared to the vehicle-treated AB group. Moreover, we found that the mean myocyte diameter (13.53 ± 0.56 vs. 15.46 ± 0.21 , $P < 0.01$) and the gene expression of the hypertrophic markers atrial natriuretic peptide (ANP) ($P < 0.01$) and β -MHC ($P < 0.01$) were markedly decreased in the AVE0991 group. Furthermore, AVE 0991 inhibited the mRNA and protein expression of NOX 2 ($P < 0.01$) and NOX 4 ($P < 0.01$) when compared to the vehicle-treated AB group.

CONCLUSIONS Our data showed that AVE 0991 treatment could attenuate cardiac hypertrophy and improve heart function, which may be attributed to reducing the oxidative stress.

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Nicotine Exposure Causes GATA4 and Tbx5 Gene Repression by DNA Hypermethylation during Cardiac Myogenesis

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OBJECTIVES Maternal nicotine exposure caused alteration of gene expression patterns and programming of cardiovascular dysfunction. This study was to investigate effect of nicotine on cardiac gene expression and epigenetic regulation during cardiac myogenesis.

METHODS To study effect of nicotine on cardiac myogenesis, in vitro and in vivo cardiac developmental model were established respectively. Mouse embryonic bodies (EBs) derived from mouse embryonic stem cells were induced to 12-day cardiac differentiation with or without nicotine treatment. As in vivo cardiac myogenic model, pregnant Sprague-Dawley rats were exposed to nicotine through gestation, hearts were isolated from neonatal offspring for further molecular study after echocardiography for heart function.

RESULTS In vitro study shows nicotine exposure selectively inhibited expression of two cardiac genes (GATA4 and *Tbx5*) in both mRNA and protein expression level. Persistent nicotine exposure resulted in up-regulation of 5-methylcytosine, DNMT1 and DNMT3A but decreased GATA4 and *Tbx5* gene expression due to promoter DNA hypermethylation. However, no significant effect has been found on mESCs proliferation and two embryonic biomarkers (Oct4 and Nanog) mRNA expression with nicotine treatment. Nicotine exposure also decreased amounts of beating EBs and reduced GATA4 positive cells at 12-day EBs. This nicotine-induced suppression was reversed by general nicotinic acetylcholine receptors (nAChRs) inhibitor, suggesting the involvement of nAChRs in the direct adverse impact of nicotine on cardiac differentiation. Consistent results of GATA4 and *Tbx5* gene suppression and promoter DNA hypermethylation by maternal nicotine treatment were obtained from in vivo cardiac development model. Echocardiography showed impaired cardiac function in offspring including reduced ejection fraction (EF%), systolic and diastolic left ventricular anterolateral wall (LVAW;s and LVAW;d) as well as systolic and diastolic left ventricular posterior wall (LVPW;s and LVPW;d).

CONCLUSIONS This study presents a direct repressive effect of nicotine on cardiac transcriptional factors (GATA4 and *Tbx5*) by promoter DNA hypermethylation during cardiac myogenesis. Reduction of spontaneous beating EBs and impaired cardiac function in offspring heart has been found with nicotine exposure.

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Ca²⁺/calmodulin-dependent protein kinase modulation of torsade de pointes arrhythmogenesis and identification of targeted sites of antiarrhythmic therapy in human Timothy Syndrome arising from a new CACNA1C mutation

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OBJECTIVES Timothy syndrome (TS) is a malignant form of congenital long QT syndrome with excessive cellular Ca²⁺ entry and torsade

de pointes (TdP) arrhythmias often triggered by a variety of neuro-hormonal and second-messenger pathways. We sought to explore mechanisms by which Ca²⁺/calmodulin-dependent protein kinase (CaMKII) modulates arrhythmogenesis and to identify potential targeted sites of antiarrhythmic therapy in TS arising from a novel mutation (CACNA1C, p.G1911R).

METHODS A 15 mm×15 mm two-dimensional (2D) multicellular transmural tissue model was developed by integrating an anatomically ventricular geometry of the human ventricular tissue sheet and a dynamic human ventricular myocyte model incorporated with a detailed CaMKII module in the format of mono-domain model. To better understand the TS, L-type Ca²⁺ current (I_{CaL}) equations of the myocyte model were modified based on experimental conditions (current density increased ~20%, V_{1/2} of activation shifted ~-5mV, V_{1/2} of inactivation shifted ~+6 mV, tau of inactivation increased ~20%). To explore ionic mechanisms of CaMKII-dependent TdP, proarrhythmic substrates were compared and analyzed. In addition, in order to investigate mechanisms initiating and maintaining TdP, the spatial organization of repolarization and arrhythmogenesis were determined in the 2D transmural tissue model.

RESULTS TS ventricular myocytes exhibited more activated CaMKII (~50%), increased I_{CaL} facilitation (~55%), higher peak Ca²⁺ transient (~83%), augmented frequency of Ca²⁺ sparks (~200%), enhanced maximum SR Ca²⁺ content (~34%), prolonged action potential duration (APD) and afterdepolarizations. On the one hand, CaMKII-dependent SR overload resulted in SR Ca²⁺ leak for triggering delayed afterdepolarizations (DADs); on the other hand, CaMKII-dependent I_{CaL} facilitation contributed to excessive action potential prolongation in midmyocardial (M) cells (from 413.6 to 1133.9 ms) which favors the generation of early afterdepolarizations (EADs). The excessive prolongation of APD in the M cells caused an abrupt rise in transmural dispersion of repolarization (from 33.06 ms/mm to 52.99 ms/mm) and M cells formed zones of increased refractoriness, producing steep spatial gradients of repolarization that were directly responsible for conduction block and self-sustained intramural reentrant circuits underlying TdP. However, CaMKII inhibition reversed an increase in intracellular Ca²⁺, normalized action potential and prevented TdP.

CONCLUSIONS These computer simulations suggest that TS-mediated Ca²⁺ influx is an upstream initiating event for arrhythmia phenotypes that are ultimately dependent on CaMKII activation, the M region of TS can increase intrinsic heterogeneities of cardiac tissue and result in the generation and maintenance of reentrant excitations underlying TdP, and CaMKII blockers may provide additional antiarrhythmic effect in patients with TS.

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Intravenous infusion of drag-reducing polymers protects against acute myocardial ischemia and reperfusion injury

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OBJECTIVES Drag-reducing polymers (DRPs) are blood-soluble macromolecules that can increase blood flow and reduce vascular resistance. It has been widely used in petroleum transportation, irrigation, navigation and other industrial pipeline. In recent years, the potential medical application of DRPs had been explored in cardiovascular disease, atherosclerosis, shock and other fields. The purpose of the present study is to observe the effect of DRPs on myocardial ischemia/reperfusion (I/R) injury in rat model.

METHODS Adult Wistar rats were randomly divided into three groups (n=16): DRP group, Control group and Sham group. Acute myocardial infarction achieved by occluding left anterior descending coronary artery (LAD). After 30 min of ischemia, the LAD was released 120 min to induce I/R injury. Sham animals underwent left thoracotomy only. Rats in DRP group were injected with 5×10^{-5} g/ml DRP solution through the right jugular vein at a constant rate of 3.5 ml/h for 30 min during reperfusion. Saline was administered in control group and sham group. Ejection fraction was measured by echocardiography after 120 min reperfusion. A catheter inserted into left ventricle to measure left ventricular systolic pressure (LVSP) and left ventricular end-diastolic pressure (LVEDP). Myocardial infarct size were also been measured.

RESULTS All rats in sham group survived through 150 min observation period, the survival rate in DRP group was 81.25% (13/16),