Effect of lisinopril on glomerular and tubular injury in a surgical rat model of progressive chronic kidney disease and kidney failure

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Background & Aim

Development of renal fibrosis is a hallmark of chronic kidney disease (CKD), underlying the progressive loss of kidney function and progression to end-stage kidney disease. The 5/6 nephrectomy (Nx) rat model of CKD displays progressive albuminuria, glomerulosclerosis, tubulointerstitial fibrosis, and loss of kidney function. Here, we characterised the effect of lisinopril, a standard ACE inhibitor, on kidney histopathology, renal biochemical markers, and kidney function in 5/6 Nx rats.

Methods

Male Wistar rats (9 weeks old) underwent either sham operation or 2/3 nephrectomy of the right kidney at week -4 and nephrectomy of left kidney at week -2. Rats were randomised into study groups at week -1 based on plasma urea, creatinine, and body weight. 5/6 Nx rats received either vehicle or Lisinopril (20 mg/kg, PO, QD), for a total of 8 weeks, starting on day 1. The albumin-to-creatinine ratio (ACR) was measured at week 7 and the glomerular filtration rate (GFR) at week 8. Terminal plasma was sampled for analysis of urea and creatinine. The remaining right kidney was harvested for quantitative histological assessment of glomerulosclerosis (PAS staining), macrophage infiltration (CD68), tubular injury (KIM-1), and fibrosis (Col1a1).

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Acclir and ek -4	natizat surge Week	tion ry x -2	eek -1		Chro	onic repeated dosing BW (QD) In vivo study period Week 7	g (PO, QD)	Assay Week 8	y/Histology
Nx	UNx	Randor	mization	First	dose	Spot urine	GFR	Termination	ea and creatinine
		+BW	+BW			+Albumin		+ Kidney his + Glomerul	stology losclerosis (PAS)
day	Route PO: Pe	er oral	Measure BG: Bloo BW: Bod GFR: Glo Nx: Neph	ments d glucose y weight merular fi nrectomy	tration rate			+Tubular ir +Inflamma	njury (KIM-1) tion (CD68)
Anima	I	Genc	der Nur ar	nber of iimals	Treatmen	t Administration route	n Dosing Frequency	Dosing volume	Dosing concentration
Sham		Mal	е	12	-	_	-	_	-

Sham	Male	12	-	-	-	-	-
Nx Vehicle	Male	17	Vehicle	PO	QD	5 ml/kg	-
x Lisinopril	Male	17	Lisinopril	PO	QD	5 ml/kg	20 mg/kg

25% involvement), score 2 (up to 50% involvement), score 3 (up to 75% involvement), and score 4 (global, more than 75% involvement). (A) Distribution of all scores. (B) Glomerulosclerosis score 3 and 4 (mean ±S.E.M.)

(C) Representative photomicrographs (scale bar, 100 µm). ***p<0.001 compared to 5/6 Nx Vehicle rats (Dunnett's test one-factor linear model).



Albuminuria and GFR



Albuminuria and GFR. (A) Urine ACR at week 7. (B) GFR at week 8. **p<0.01, ***p<0.001 compared to 5/6 Nx Vehicle rats (Dunnett's test one-factor linear model).

one-factor linear model).



Plasma creatinine and urea



Plasma creatinine and urea. (A) Plasma creatinine at week 8. (B) Plasma urea at week 8. ***p<0.001 compared to 5/6 Nx Vehicle rats (Dunnett's test one-factor linear model).

Conclusion

The present study in 5/6 Nx rats establishes that lisinopril

- + Improves albuminuria
- + Reduces tubular injury
- + Reduces renal inflammation

These findings support nephroprotective effects of lisinopril in CKD and highlights the applicability of the 5/6 Nx rat model in preclinical drug development.



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