MICROCIRCULATION

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GESTATIONAL AGE DEPENDENCE OF REGIONAL PROLIFERATION IN FETAL KIDNEYS Myar M. Khine, Paul D. Sibbons, Charles V. Howard, Fiona McGill, Dick

van Velzen (spn. by Richard W. Cooke) Department of Fetal and Infant Pathology, University of Liverpool, RLCH Alder Hey Liverpool, UK Background: Having established a glomerular number deficit in fetal growth retardation(1), human fetal kidneys were studied with the aim of determining periods of specific vulnerability related to prolifera-

of determining periods of specific scales that the determining periods of specific scales and the specific scales and Methods: 24 Fetus, evenly distributed between 13 and 22 weeks gestational age were used. Tissue was routinely fixed and embedded. Monoclonal antibodies (DAKO, PCIO, MIB-1) were used (2,3) to separately assess proliferation of renal blastema, stroma and glomeruli and epithelial components such as tubuli, Henle's loops and collecting

ducts. Results, Discussion: Proliferative activity remains high in the epithelial components of the nephrogenic zone, with glomerular and blastematous tissue showing reduced activity after week 18. A period of significantly increased activity for collecting ducts, thick and thin segments of lienle's loops and stroma was found between weeks 16 and 18 for both cortex and medulla.

Conclusion: Proliferation related vulnerability of glomerulogenesis is a period for particular to a specific particular in the property of the p

limited to a specific period of intrauterine development in contrast to the development of the remainder of the nephrons, which may be especially vulnerable between 16 and 18 weeks of gestation.

Ref.: 1: Br J Obst Gynaecol 1992; 99:296-301, 2. J Pathol 1990; 162: 285-294, 3. J Pathol 1992; 168:357-363

INFECTIOUS DISEASES

NITRIC OXIDE (NO) PRODUCTION BY PULMONARY ALVEOLAR MACROPHAGES (AM) FROM NEONATAL, INFANT AND ADULT RATS. Michael P. Sherman and Louis J. Ignarro, Depts. of Pediatrics and Pharmacology, University of California, UCLA Medical Center, Los Angeles, California, U.S.A.

Objectives: This study addresses whether an age-related reduction in inducible NO synthase (iNOS) activity by AM causes the high incidence of opportunistic pneumonias in infants who have human immunodeficiency virus (HIV) infection. Opportunistic pathogens (e.g., Mycobacterium spp.) are inhibited or killed by NO. Design and setting: A rodent study preformed in an university research laboratory.

Subjects: Four litters of newborn or infant rats, and 4 adult rats, were used. Interventions: Cultured AM lavaged from newborn (3-day-old), infant (10-day), or

adult rats were stimulated with interferon $-\gamma$ and lipopolysaccharide.

Measurements: Supernatants from AM had NO production determined as its end products, nitrite [NO₂-, Griess assay] and nitrate [NO₃-, nitrate reductase enzyme method]. iNOS activity by AM was equated to superoxide anion (O2-) production

method]. INOS activity by AM was equated to superoxide anion (O_2^-) production [ferricytochrome c assay] and lysozyme content [lysoplate method]. Results: Micromolar content of $NO_2^- \approx NO_3^-$ were: $114\pm4 \approx 59\pm15^*$ (3-day), $40\pm9 \approx 37\pm6$ (10-day), and $36\pm5 \approx 42\pm6$ (adult). O_2^- production (nmol/106 AM/10 min) was: 18 ± 1 (3-day), 15 ± 1 (10-day), and 16 ± 2 (adult). Lysozyme content (ng lysozyme/µg cell protein) was: $6\pm1^*$ (3-day), 13 ± 4 (10-day), and 27 ± 6 (adult). Data presented as mean $\pm SEM$; = p < 0.05 v. adult. Conclusions: Indusible NO production by AM is altered in the second s Conclusions: Inducible NO production by AM is elevated in newborns compared to adults suggesting that infantile susceptibility to opportunistic pneumonias associated with HIV infection is not due to an age-related reduction in iNOS expression.

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MACROPHAGE CANDIDACIDAL ACTIVITY IN HUMAN NEONATES: DECREASED SENSITIVITY TO MODULATION BY IEN-

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In an attempt to understand the mechanisms of host defense in the term neonate against candida, we studied interaction between Calbicans and monocyte-derived macrophages (MDM) cultured for 5 days from the cord blood. In the presence of 2.5% normal adult serum, the extent of phagocytosis of candida was equivalent by newborn and adult MDM. In the absence of serum, phagocytosis of of candida was reproached by newborn and adult MDM. In the absence of serum, phagocytosis of candida was reduced by about half but was still equivalent with cord or adult MDM. In contast to candida, MDM and not phagocytose non-opsonized group B <u>Streptoreacus</u> type III, Mannasylated BSA (ManilSA, molar ratio of mannose to BSA = 23:1) inhibited non-opsonic mgestion of candida by cord and adult MDM in a concentration-dependent manner (with cord MDM, 57 and 84 inhibition and with adult MDM 74 and 87 inhibition by 64 and 320 (ig mannose/ml. respectively, after 60 mm incubation; means, n=6), suggesting a role for the mannose receptor, Cord MDM killed both opsonized and imopsonized <u>Callarging</u> as effectively as did adult MDM (n=7). However, exposure of adult nod road MDM in TSEs (ILESO) Units or recommitments adultant mannose in the second condition in the Second condition of the second condition in the Second condition of the second condition in the second condition of the second condition in the second condition in the second condition of the second condition in the second condition of the second of adult and cord MDM to IFN-y (10-500 U/ml) gave quantitatively different results in candida-killing and O release: maximal increase in these functions with adult MDM were achieved with 100 U/ml IFN-y, whereas no enhancement with cord MDM could be detected after treatment with 100 U/ml, and at 500 U/ml there was still a significantly lower killing and O release by cord MDM compared to adult cells. These data suggest that: 1, clearance of candida from the blood stream may configuration among creations are managed as the control of the managed control of the control of the control of the control of the control of cond MDM to the effect of IFN-y may represent a developmental miniaturity of burnari monomiclear phagocytes

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THE EFFECT OF IBUPROFEN (IB) ON RETINAL (RBF) AND CHOROIDAL (ChBF) BLOOD FLOW DURING NORMOXIA AND HYPEROXIA IN NEWBORN PIGLETS. Tom A. Stiris¹, Cleidi Suguihara², Eduardo Bancalari², José Quero¹, Divs. of Neon. ¹Autónoma Univ. of Madrid and ²Univ. of Miami. Previously we demonstrated that indomethacin (IND) reduced basal RBF, but had no effect on ChBF and did not modify the hyperoxic response. We speculated that inhibition of cyclooxygenase was the mode of action, but could not exclude other pharmacological properties of IND. To establish if this effect during normoxia was due to cyclooxygenase inhibition, the effect of IB, a specific cyclooxygenase blocker, was investigated in newborn piglets, age ≤7 days old. We also wanted to verify possible role of the prostanoids as mediators of hyperoxic vasoconstriction. Ocular blood flow was examined before (RA_1) and after (RA_2) either saline (controls; S, n=7), or ibuprofen infusion (30mg/kg) (IB, n=9), and after 90 min of hyperoxia (O2). Radiolabelled microspheres were used to measure blood flow. Results: (ml/min/100g tissue±SEM):

 RBF_{18} $ChBF_{S}$ RBF_8 $ChBF_{IB}$ 61±4 50±4* RA_1 60 ± 8 3048 ± 333 3126±388 *p<0.05 (RA2 vs RA1), 59 ± 3 3055 ± 395 RA_2 2589 ± 455 #p<0.05 (O2 vs. RA2) $43 \pm 7 \#$ 36±4# 2035±363# 1648±222#

RBF was significantly reduced by IB whereas ChBF was not. Further, hyperoxia significantly decreased RBF and ChBF in both groups. Thus, our results suggest that prostanoids play a role in maintaining basal retinal vascular tone. However, the response to hyperoxia is mediated through mechanisms other than the byproducts of arachidonic acid metabolism.

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DETECTION SENSIBILITY OF LIGHT-SENSE AND FLICKER PERIMITRY IN DIABETIC RETINOPATHY

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In order to study the sensibility of 2 functional tests, Light-sense(LSP) Humphrey. Perimeter: prog. 24-21 and Flicker perimetry (FP) (Perimex). Central Programs 30 diabetics, 20 without and 20 with functioning organishies signs of retinipathy, have been exclaimed. Then meanissd oge was 121 ± 4.7 (range 10.1–17.4) years, duration of disease 6.7 ± 2.9 (2.0–9.1) years, glycated beemoglobin (10.04). trange in FP-years, durant in threads By 2.9 (2.0-2.1) years, giyeared natinogroom (HbArts). It is 2 groups of patients (with and without retinopathy) were sex, age, duration of the disease and HbArtsmatched. Visual field mean sensitivity (MS) in 3 sections for ISP and MS for IP have been evaluated. Retinopathy a patient showed lower sensibility both at LSP and IP in 7 eyes LSP and in 6 eyes IP showed not loss of retinal sensitivity in comparison with diabetic without retinopathy (tab.1). The concordance of flooroung/open-pline signs of retriagrathy with LSP and FP was 82.5% and 85% respectively. Association between LSP and FP allowed a concordance of 97.5% and seems to be iseful to detect retinal damage, particularly when retinal angiography cannot be performed frequently

	LSP	11	LSP(FP
False +	4 (10 0%)	4 (10%)	0
Talse -	7 (175%)	6 (15%)	L(2.5%)

THE RESPONSE OF TOTAL AND REGIONAL CEREBRAL BLOOD FLOW TO DEXAMETHASONE (DEX) INFUSION IN NEWBORN PIGLETS DURING NORMONIA, Tom A. Stiris, Alfredo Garcia-ALix, Dorotea Blanco, Fernando Cabañas, Adelina Pellicer, José Quero. (spn. by Dag Bratlid) Div. of Neonatology, Autónoma University of Madrid, Spain. We questioned the effect of DEX (a phospholipase A inhibitor) on total and regional cerebral blood flow during normoxia in spontaneously breathing newborn piglets, age ≤ 7 days old. The animals were randomly assigned to either a control group receiving saline infusion, serving as controls (n=7), or a dexamethasone group (DEX) (n=9) receiving DEX 2mg/kg IV. We have shown that this dose reduces the prostanoids in cerebrospinalfluid (CSF). The organ blood flow was measured with the radiolabelled microsphrere technique. The results were (flow expressed as ml/min/100g tissue \pm SEM): A significant increase (p<0.05) after DEX infusion in total cerebral blood flow (CBF) (105 \pm 12 to 149 \pm 22), brainstem (158 \pm 22 to 232 \pm 40), diencephalon (129 \pm 18 to 185 \pm 33), periventricular area (76 \pm 9 to 101 \pm 16) and hypocampus (74 \pm 7 to 100 \pm 16). In the cortex, caudate notecus and cerebellum, DEX did not alter blood flow. In the control group there was no differences in blood flow before and after saline infusion, neither in total cerebral nor regional cerebral blood flow. In conclusion, the cerebrum shows regional differences in its response to DEX. Whereas in some parts regional blood flow significantly increased, others did not demonstrate this phenomenon. Thus, the pharmacological properties of DEX do not modulate the cerebral vascular tone equally in all cerebral regions.