

Xanthine Oxidase Inhibitor Attenuates TGF- β Expression and Epithelial-mesenchymal Transition in Type 2 Diabetic Nephropathy

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Background: Recently, lowering uric acid (UA) with allopurinol could slow the progression of renal disease in patients with hyperuricemia and chronic kidney disease. In the present study, we hypothesized that the xanthine oxidase inhibitor, allopurinol, attenuate renal injury in type 2 diabetic mice.

Methods: In vivo, KK-Ay/Ta mice were divided into two groups: (1) Control group; (2) Allopurinol group (13 mg/dL in drinking water). In vitro, normal rat kidney tubular epithelial cells (NRK-52E) were stimulated with 1, 5 and 10 mg/dL UA with or without allopurinol 100 μ M.

Results: The allopurinol group showed a lower urinary albumin creatinine ratio than that of the control group. The upregulation of TGF- β and Smad pathway in diabetic kidney was ameliorated by allopurinol treatment. Allopurinol attenuated UA-mediated TGF- β activation in NRK-52E cells. UA-induced mitogen activated protein kinase signaling activation was also attenuated by allopurinol in the NRK-52E cells. The increase of UA-induced α -smooth muscle actin, vimentin was decreased by allopurinol.

Conclusion: In conclusion, xanthine oxidase inhibitor prevents not only TGF- β and Smad pathway upregulation, but also tubular epithelial-mesenchymal transition. These findings provided a new perspective on the renoprotective effects of the xanthine oxidase inhibitor in diabetic nephropathy.

Key Words: Xanthine oxidase 억제제, 당뇨병성 신증

Xanthine oxidase inhibitor, Diabetic nephropathy, EMT, TGF- β