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Title: Changes of alveolar oxygen tension in chronic obstructive pulmonary disease (COPD) and effect of variable oxygen tension on hypoxia inducible factor (HIF)-1 α system of alveolar epithelial cells

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Body: In COPD airway obstruction causes hypoventilated areas in the lung leading to alveolar hypoxia. HIF-1 α plays an important role in the response to hypoxia and protection of cells against harmful effects. Role of alveolar oxygen tension and HIF-1 α in the development of COPD are unknown. Healthy volunteers (n=7) and 9 patients with COPD were enrolled into clinical examinations including lung function test and blood gas analysis. Mass spectrometry was used to measure exhaled O₂ on the level of functional reserve capacity (FRC) and residual volume (RV). HIF1 α mRNA and protein expression of alveolar epithelial cells (A549) were analyzed by RT-PCR and flow cytometry using hypoxia (FiO₂: 20,9% (control); 13 \pm 1%; 6 \pm 1%; 1 \pm 1%). Exhaled O₂ on the level of FRC did not change, (C:15.6 \pm 1.2 vs. COPD: 15,8 \pm 1.4 %), while on the level of RV the alveolar FiO₂ was significantly decreased (C: 13,6 \pm 1,8 vs. COPD: 11.6 \pm 2.1%, p<0.05) in patients with COPD and the value correlated to pO₂ and showed negative correlation to RV. HIF-1 α mRNA and protein expression significantly increased in mild hypoxia, extreme hypoxia did not change the mRNA expression. Hypoxia significantly increased the A549 cell count in all treated groups (FiO₂ 13 \pm 1%: 13,33x10⁵; FiO₂ 6 \pm 1%:13,2x10⁵; FiO₂ 1 \pm 1%: 12,86x10⁵ vs. control FiO₂ 20,9%: 7,73x10⁵; p<0.01). In COPD the exhaled O₂ level is decreased in parallel to hyperinflation, demonstrating that there are more severe hypoxic areas in the lungs compare to physiological conditions. Mild hypoxia increases HIF1 α mRNA and protein expression, while in severe hypoxia these changes are absent.