

# European Respiratory Society Annual Congress 2012

**Abstract Number:** 1548

**Publication Number:** P3179

**Abstract Group:** 4.3. Pulmonary Circulation and Pulmonary Vascular Disease

**Keyword 1:** Pulmonary hypertension **Keyword 2:** Cell biology **Keyword 3:** Animal models

**Title:** A critical role for p130<sup>Cas</sup> in the progression of pulmonary hypertension in humans and rodents

Dr. Ly 5815 Tu ly.tu@inserm.fr<sup>1,2</sup>, Dr. Frances 5816 de Man francesdeman@gmail.com<sup>1,2,4</sup>, Dr. Barbara 5870 Girerd barbara.girerd@abc.aphp.fr<sup>1,2,3</sup>, Dr. Marie-camille 5871 Chaumais mcamillechaumais@gmail.com<sup>1,2</sup>, Ms. Florence 5872 Lecerf florence.lecerf@u-psud.fr<sup>1,2</sup>, Ms. Charlene 5873 Francois charlene.francois@yahoo.fr<sup>1,2</sup>, Dr. Frederic 5874 Perros frederic.perros@gmail.com<sup>1,2</sup>, Dr. Peter 5877 Dorfmuller peter.dorfmuller@u-psud.fr<sup>1,2</sup>, Dr. Elie 5878 Fadel fadel@ccml.fr<sup>1,2</sup>, Dr. David 5879 Montani david.montani@abc.aphp.fr<sup>1,2,3</sup>, Prof. Marc 5880 Humbert marc.humbert@abc.aphp.fr<sup>1,2,3</sup>, Dr. Eddahibi 5881 Saadia saadia.eddahibi@inserm.fr<sup>1,2</sup> and Dr. Christophe 5886 Guignabert christophe.guignabert@inserm.fr<sup>1,2</sup>. <sup>1</sup> Centre Chirurgical Marie Lannelongue, INSERM UMR 999, Le Plessis-Robinson, France ; <sup>2</sup> Faculté de Médecine, Univ Paris-Sud, Orsay, France ; <sup>3</sup> Service de Pneumologie, AP-HP, Clamart, France and <sup>4</sup> Institute for Cardiovascular Research (ICaR-VU), VU University Medical Center, Amsterdam, Netherlands .

**Body:** Pulmonary arterial hypertension (PAH) is a progressive and fatal disease characterized by pulmonary arterial muscularization due to excessive pulmonary vascular cell proliferation and migration, a phenotype dependent upon growth factors and activation of receptor tyrosine kinases (RTKs). p130<sup>Cas</sup> is an adaptor protein involved in several cellular signaling pathways that control cell migration, proliferation and survival. We hypothesized that in experimental and idiopathic PAH p130<sup>Cas</sup> signaling is over-activated, thereby facilitating the intracellular transmission of signal induced by fibroblast growth factor (FGF)2, epidermal growth factor (EGF), and platelet derived growth factor (PDGF). In iPAH patients, levels of p130<sup>Cas</sup> protein are higher in the serum, in walls of distal pulmonary arteries, in cultured smooth muscle (PA-SMCs) and pulmonary endothelial cells (P-ECs) than controls. These abnormalities in the p130<sup>Cas</sup> signaling were also found to be in the chronically hypoxic mice and monocrotaline-injected rats. We next obtained evidence for convergence and amplification of the growth-stimulating effect of EGF, FGF2 and PDGF signaling pathways via p130<sup>Cas</sup> signaling pathway. Finally, we found that daily treatment with each of the EGF-R inhibitor gefitinib, the FGF-R inhibitor dovitinib and the PDGF-R inhibitor imatinib started 2 weeks after a subcutaneous monocrotaline injection substantially attenuate the abnormal increase in p130<sup>Cas</sup> and ERK1/2 activation and regress established PH. Our findings demonstrate that p130<sup>Cas</sup> signaling plays a critical role in iPAH by modulating pulmonary vascular cell migration, proliferation and by acting as an amplifier of RTKs downstream signals.