

Anti-VEGF agents inhibit activation of PLA₂/COX-2 and expression of VEGF-A induced by high glucose, in human retinal pericytes *in vitro*

G. Giurdanella¹, C.D. Anfuso¹, M. Olivieri¹, G. Lupo¹, N. Caporarello¹, C.M. Eandi^{2,3}, F. Drago¹, C. Bucolo¹, S. Salomone¹

¹Dept. of Biomedical and Biotechnological Sciences, School of Medicine, Catania University, Catania, Italy

²Institut de la Vision,UMRS_968 Inserm/Université Pierre et Marie Curie,Equipe 14 , Paris, France

³Dept. of Surgical Sciences, Eye Clinic, University of Torino, Torino, Italy

Diabetic retinopathy, a major cause of vision loss, is currently treated with anti-VEGF agents, including aflibercept, bevacizumab and ranibizumab, to counteract the detrimental effects of VEGF on retinal vasculature. Because these agents are administered intravitreally, when diffusing to the retinal vessel wall, they reach first, and in a larger proportion the external layer (pericytes), before reaching the inner layer (endothelial cells). In the present *in vitro* study we tested two hypotheses: i) high glucose damages retinal pericytes, *via* VEGF induction, which may be counteracted by anti-VEGFs and ii) activation of PLA₂/COX-2 pathway by high glucose might be upstream and/or downstream of VEGF in pericytes, as previously observed in endothelial cells (Lupo et al., 2013).

Human retinal pericytes were treated with high glucose (25 mM) for 48 h and/or anti-VEGFs (40 µg/ml aflibercept, 25 µg/ml bevacizumab, 10 µg/ml ranibizumab). All anti-VEGFs significantly reduced high glucose-induced cell damage (assessed by LDH release) and improved cell viability (assessed by MTT and Evans blue). High glucose increased VEGF-A expression, as detected both at mRNA (qPCR) and protein (ELISA) level, while receptor (VEGFR₁ and VEGFR₂) expression was unchanged. High glucose also activated the PLA₂/COX-2 pathway, as revealed by increased phosphorylation of cPLA₂, COX-2 protein expression and PGE₂ release. Treatment with cPLA₂ (50 µM AACOCF3) and COX-2 (5 µM NS-392) inhibitors prevented both cell damage and VEGF-A induced by high glucose. Finally, challenge with exogenous VEGF-A (10 ng/ml) induced VEGF-A expression, while anti-VEGFs reduced VEGF-A expression following either high glucose- or VEGF-A-treatment.

These data indicate that high glucose directly damages pericytes through activation of PLA₂/COX-2/VEGF-A pathway. Furthermore, a kind of feed-forward loop between cPLA₂/COX-2/PGE axis and VEGF appears to operate in this system. Thus, anti-VEGFs afford protection of pericytes from high glucose by inhibiting this loop.

Lupo et al. (2013). *Biochem Pharmacol.* 86, 1603-13.