



LSCA=left subclavian artery  
LCCA=left common carotid artery

Fig 7. Computed tomography angiography follow-up

**BASIC SCIENCE, ANIMAL MODELS AND PRECLINICAL STUDIES (TCTAP A-048 TO TCTAP A-053)**

**TCTAP A-048**

**Neural Network Model as the Multidisciplinary Team Member in Clinical Decision Support to Avoid Medical Mistakes (aLYNX concept)**



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**BACKGROUND** The feedback is the essential part of any system. aLYNX concept is an idea to use some fuzzy logic algorithm, for example, a neural network model in decision-making system to avoid possible mistakes in a choice between PCI and CABG.

**METHODS** aLYNX system contains:

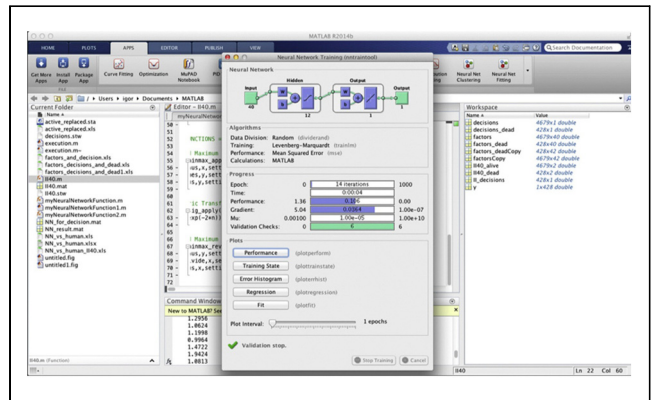
- first - a registry with parameters, decisions, and late results;
- second - machine learning process based on successful cases registry data;
- third - the use of the machine learning results as the adviser.

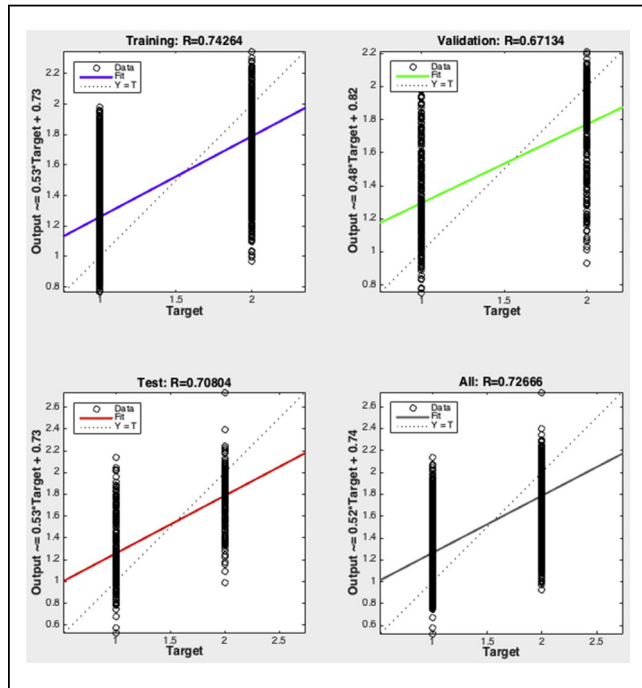
**Objective:** To show a possibility to build a mathematic model as an adviser for making a decision between CABG and PCI based on the experience of 5107 patients.

**RESULTS** The neural network was trained by 4,679 patients who achieved 5-year survival. Among them, 2,390 patients underwent PCI and 2289 CABG. After training, the correlation coefficient ( $r$ ) of the network was 0.74 for training, 0.67 for validation, 0.71 for test and 0.73 for a total. Simulation of the neural network function has been performed after training in the two groups of patients with a known 5-year outcome. The disagreement rate was significantly higher in the dead patient group than that in the survivor group between a neural network model and heart team [16.8% (787/4679) vs. 20.3% (87/428),  $P=0.065$ ].



Fig 8. Computed tomography angiography follow-up





**CONCLUSION** aLYNX concept shows the possibility to use a neural network model in decision-making to remind the doctors to review tactics once more in selected cases. Such system should include registry with significant factors, decisions, and results; machine learning process based on the registry data; using the machine learning results as the adviser.

**TCTAP A-049**

**Cardio Protective Effect of Substance P in a Porcine Model of Acute Myocardial Infarction**

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**BACKGROUND** Substance P (SP) is known to reduce inflammatory reaction and induce mobilization of stem cells, suggesting a potential benefit of reducing ischemia-reperfusion injury and infarct size. We reported the cardio protective effect of SP in a rat and mouse model. We assessed a cardio protective effect of SP in a porcine model of acute myocardial infarction (MI).

**METHODS** A total of 16 pigs were randomly allocated to group 1 (substance P, n=8) and group 2 (placebo, n=8). Acute MI was induced by occlusion of the left anterior descending artery with a 3.0 mm balloon catheter for 50 minutes. Five minutes before reperfusion, substance P (5 nmol/kg) and normal saline were administered intravenously in group 1 and 2, respectively. Two-dimensional echocardiography and myocardial perfusion single photon emission computed tomography (SPECT) with technetium-99 m sestamibi were performed at 1 week and 4 weeks after the procedure to assess left ventricular (LV) function and infarct size. At 4 weeks, the pigs underwent follow-up coronary angiography and were sacrificed for histomorphometric infarct size assessment.

**RESULTS** Baseline LV ejection fraction (LVEF), LV end-diastolic and end-systolic volumes were similar between 2 groups. LVEF at 1 week was significantly higher in group 1 than group 2 (37.9 ± 4.6% vs. 29.4 ± 3.2%, p=0.001). LVEF at 4 weeks was not different between the groups (41.1 ± 8.8% vs. 38.0 ± 4.4%, p=0.427). The number of defect segments and the magnitude of total perfusion defect on SPECT were lower in group 1, compared to group 2 at 1 week (0.5 ± 0.8 vs. 2.1 ± 2.3, p=0.118 and 15.4 ± 8.6% vs. 23.6 ± 18.5%, p=0.313, respectively) and

at 4 weeks (0.5 ± 0.8 vs. 1.1 ± 1.1, p=0.197 and 13.3 ± 10.3% vs. 14.7 ± 12.0%, p=0.803, respectively). Pathologic infarct size (% LV) was significantly lower in group 1, compared to group 2 (2.4 ± 2.3% vs. 5.7 ± 2.5%, p=0.020).

**CONCLUSION** In a porcine model of acute MI, substance P improved LVEF early post-MI and reduced infarct size at 4 weeks. SP might be used for prevention of IR injury in MI.

**TCTAP A-050**

**G2, a Hirsutine Analogue, Could Exert Endothelium-dependent Vasodilatory Effects in Vitro and Endothelial Protection in Vivo**



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**BACKGROUND** Hirsutine, a compound extracted from *Uncaria rhynchophylla*, has been proven to be able to exert vasodilatory effects and cardioprotective effects on hypoxic neonatal rat cardiomyocytes. In order to acquire a deeper insight into the pharmacological functions and clinical applications of hirsutine, we synthesized its analogue, G2, to serve as our drug candidate for the treatment of microvascular dysfunction.

**METHODS** Superior mesenteric arteries isolated from male Sprague-Dawley rats was mounted in myograph chambers (Danish Myo Technology, Aarhus, Denmark) for further functional study. G2, including the enantiomers G2-a and G2-b in G2, was separately subjected to superior mesenteric arteries from rats pre-exposed to 60 mM KCl or 10 μM phenylephrine to confirm their vasorelaxant effects. Rat diabetic model was also established to assess the *in vitro* vasodilatory effect of G2. G2 was also subjected to SD diabetic rats for *in vivo* measurement of endothelium protection and histological assessment.

**RESULTS** G2 and its enantiomers G2-a and G2-b could stimulate apparent vasodilatory effects on KCl and phenylephrine pre-treated mesenteric arteries. Meanwhile, the G2-a (IC<sub>50</sub>=0.092 μM) was 100 fold and 10 fold stronger in vasodilation than the enantiomer G2-b (IC<sub>50</sub>=7.9 μM) and the racemate G2 (IC<sub>50</sub>=0.499 μM) respectively. Endothelium denudation could reduce G2, G2-a, and G2-b-induced vasorelaxant effects. Diabetes triggered endothelium dysfunction and L-NAME pretreatment could lead to similar vasorelaxant effect reduction, which meant that G2-evoked vasodilatory effect was endothelium-dependent. G2 subjected to diabetic rats could attenuate diabetes-damaged acetylcholine-induced endothelium-dependent relaxations. Immunohistochemical staining and western blot showed that eNOS was upregulated and no concentration was increased in diabetic vessels.

**CONCLUSION** G2, and its enantiomers G2-a and G2-b could exert endothelium-dependent vasodilatory effects *in vitro* through and endothelial protection *in vivo*. Meanwhile, the effectiveness of G2-a and G2-b was highly distinguishing in wire myograph assay.

