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## The State Of Vascular Disaggregation Effects On Neutrophils In Patients With Arterial Hypertension With Type 2 Diabetes Mellitus.

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### ABSTRACT

The growth of pathological complications in the population of industrially developed countries leads to a wide prevalence in different ages of arterial hypertension and type 2 diabetes. This contingent of patients has a high incidence of thrombosis. It is revealed that the basis of this is most often the disturbance of the vascular functions, especially their disaggregation capabilities with respect to the blood constituents. The goal is to assess the disaggregation capacity of the vessels in relation to neutrophil aggregation in patients with arterial hypertension with type 2 diabetes mellitus. We examined 42 patients of the second mature age (mean age  $49.3 \pm 2.9$  years) with arterial hypertension of the 1st-2nd degree, with type 2 diabetes mellitus. The control group was composed of 26 clinically healthy people of the same age. All the examined persons gave written informed consent on participation in the research. There were applied biochemical, hematological and statistical methods of investigation. High thromboses' frequency of various localizations at arterial hypertension with type 2 diabetes mellitus is closely connected with angiopathy development against their background. Weakening of plasma antioxidant protection with activation of lipids' peroxidation processes in it leading to alteration of vascular wall, is noted in conditions of arterial hypertension combination with type 2 diabetes mellitus. The persons with arterial hypertension and type 2 diabetes mellitus are detected to have evident weakening of disaggregating vascular impacts of vascular wall on strengthening aggregative ability of neutrophils. In the result of it given patients get sharply increased risk of thromboses of any localization which can lead to invalidism and lethal outcome.

**Keywords:** neutrophils, arterial hypertension, type 2 diabetes mellitus, vascular wall, antiaggregation.

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## INTRODUCTION

The presence of frequent occurrence of hereditary complications in the violation of carbohydrate metabolism provides a high level of prevalence of type 2 diabetes mellitus against arterial hypertension (AH) [1,2]. Often, their combination is present in the working population, leading to early vascular complications with subsequent disability and early death [3]. It is recognized that a high incidence of thrombosis, incl. with AH and type 2 diabetes mellitus is associated with a pronounced weakening of vascular disaggregation control over different blood elements [4,5]. This condition is inevitably accompanied by activation of hemostasis, which causes the development of thrombosis [6,7,8]. It is believed that the decrease in blood levels of prostacyclin and nitric oxide is triggered by this process [9,10]. In view of the high prevalence of combination of AH and type 2 diabetes mellitus and great importance for microcirculation processes of neutrophil aggregation, it was important to clarify the features of vascular control over the aggregation of neutrophil leukocytes in this contingent of patients [11].

The aim of the study is to assess the disaggregation capacity of the vessels in relation to neutrophil aggregation in patients with type 2 diabetes mellitus.

## MATERIALS AND METHODS

The research was approved by the Ethics Committee of Russian State Social University (record №5 from 12.05.2014).

We examined 42 patients of the second mature age (mean age  $49.3 \pm 2.9$  years) with AH of the 1<sup>st</sup>-2<sup>nd</sup> degree [12] with type 2 diabetes mellitus. The control group was composed of 26 clinically healthy people of the same age. All the examined persons gave written informed consent on participation in the research. All participants in the study gave their written consent to participate in it [13].

Intensity of lipids' peroxidation (LPO) processes in plasma was estimated according to the content of thiobarbituric acid (TBA)-active products by a kit "Agat-Med" and acylhydroperoxides (AHP) [14]. Antioxidant abilities of liquid part of blood were determined according to the level of its antioxidant activity [15].

LPO activity in studied regular blood elements was determined according to the quantity of malondialdehyde (MDA) in reduction reaction of thiobarbituric acid in washed and resuspended cells and the content of AHP in them [14]. In studied washed and resuspended regular blood elements we estimated the levels of cholesterol by enzymatic colorimetric method with the help of a kit "Vital Diagnostikum" and CPL according to the content of phosphorus in them.

Evidence of vascular wall's control over neutrophils' aggregation was detected according to its weakening in the test with temporal venous occlusion [16].

The disaggregation effects of the vessels on neutrophils were evaluated in plasma taken after temporary venous occlusion and without it. Aggregation of neutrophils was recorded on a photoelectrocolorimeter. Inductors were used lectin wheat germ at a dose of  $32 \mu\text{g} / \text{ml}$ , concanavalin A -  $32 \mu\text{g} / \text{ml}$  and phytohemagglutinin -  $32 \mu\text{g} / \text{ml}$ .

The results were processed by Student's criterion (t). Statistical processing of received information was made with the help of a program package "Statistics for Windows v. 6.0", "Microsoft Excel". Differences in data were considered reliable in case of  $p < 0.05$ .

## RESULTS AND DISCUSSION

The patients were noted to have evident plasma LPO activation – the content of AHP in it surpassed the control value in 2.35 times, TBA-active products – in 1.54 times, being accompanied by suppression of antioxidant plasma activity in 1.5 times (Table).

The observed patients were noted to have increased CS content in neutrophils membranes which was accompanied by the decrease of CPL in them and LPO activation on behalf of weakening of their antioxidant protection (Table).

In patients, the process of neutrophil aggregation with applied inducers occurred earlier than in control (with lectin 60.2%, with concanavalin A 43.9%, with phytohemagglutinin 43.1%) (Table).

All the patients were noted to have the decrease of vessels' disaggregative impacts on neutrophils (Table).

**Table: Registered indicators in the surveyed**

| Registered parameters  | Patients, n=42, M±m | Control, n=26, M±m     |
|--|---------------------|------------------------|
| Acylhydro peroxides plasma, D <sub>233</sub> /1ml                                | 3.34±0.09           | 1.42±0.09<br>p<0.01    |
| TBA-compounds, mcmol / l   | 5.47±0.16           | 3.56±0.07<br>p<0,01    |
| Antioxidant activity plasma, %   | 21.3±0.18           | 32.9±0.12<br>p<0.01    |
| biochemical parameters of neutrophils  |                     |                        |
| cholesterol of neutrophils, mkmol/10 <sup>9</sup> neutrophils                    | 0.88±0.007          | 0.62±0.004<br>p<0.01   |
| common phospholipids of neutrophils, mkmol/10 <sup>9</sup> neutrophils           | 0.33±0.012          | 0.51±0.003<br>p<0.01   |
| acylhydroperoxides of neutrophils, D <sub>233</sub> /10 <sup>9</sup> neutrophils | 3.78±0.05           | 2.36±0.05<br>p<0.01    |
| malonicdialdehyde of neutrophils, nmol/10 <sup>9</sup> neutrophils               | 1.55±0.07           | 0.73±0.03<br>p<0.01    |
| catalase of neutrophils, ME/10 <sup>9</sup> neutrophils                          | 5050.0±22.70        | 9950.0±19.77<br>p<0.01 |
| superoxidismutase of neutrophils, ME/10 <sup>9</sup> neutrophils                 | 1110.0±4.85         | 1780.0±4.21<br>p<0.01  |
| aggregation of neutrophils in intact plasma                                      |                     |                        |
| Aggregationwithlectin, %   | 25.0±0.16           | 15.6±0.07<br>p<0.01    |
| Aggregation withconcanavalin A, %  | 21.3±0.11           | 14.8±0.04<br>p<0.01    |
| Aggregationwithphytohemagglutinin, %   | 43.8±0.15           | 30.6±0.09<br>p<0.01    |
| vascular control of aggregation neutrophils                                      |                     |                        |
| Aggregationwithlectinafter temporary venous occlusion, %                         | 22.9±0.22           | 11.8±0.06<br>p<0.01    |
| Aggregation withconcanavalin Aafter temporary venous occlusion, %                | 20.6±0.06           | 11.0±0.07<br>p<0.01    |
| Aggregationwithphytohemagglutininafter temporary venous occlusion, %             | 40.6±0.10           | 24.1±0.03<br>p<0.01    |

Note: p - reliability of differences in the indices of a group of patients and a control group.

In plasma obtained after a temporary venous occlusion, a significant increase in neutrophil aggregation was found in patients. It exceeded the control values with all the applied inducers (from lectinon 94.1%, from concanavalin A on 87.3%, from phytohemagglutininon 68.5%).

Important significance in the development of rheological disturbances and thrombophilia in persons with AH and type 2 diabetes mellitus belongs to aggregation increase of regular blood elements and especially

– neutrophils [17,18]. At combination of AH and type 2 diabetes mellitus the depression of plasma antioxidant activity is formed which provides the increase of LPO activity in it [19]. The increase of freely radical processes in liquid part of blood inevitably promotes the damage of neutrophils' membranes [20]. The development of these manifestations in combination with found in these patients' neutrophils lipid imbalance leads to their hyperaggregability. The level of disaggregating impacts from the side of vascular wall [21,22] lowers simultaneously with it in respect of neutrophils [23].

The increase in neutrophil aggregation in hypertension with type 2 diabetes mellitus revealed in the study is largely due to the weakening of the production in the vessel wall of physiological disaggregants against the background of an increase in the density of leukocyte receptors interacting with lectins used as aggregation inducers [24,25]. The intensification of lectin- and concanavalin A-induced aggregation of neutrophils in plasma taken against a background of temporary venous occlusion in patients with AH with type 2 diabetes mellitus is associated with an increase in the number of adhesion receptors on neutrophils, including many sites with N-acetyl-D-glucosamine, N-acetyl-neuraminic acid and mannose [26, 27]. The growth of neutrophil aggregation with phytohemagglutinin is caused by an increase in the portion of their receptors with bDgalactose [28,29], with pronounced weakening of the formation in the vessels of prostacyclin and NO patients [30,31,32].

### CONCLUSION

The high frequency of occurrence in a modern society of a combination of arterial hypertension with type 2 diabetes requires further study of this pathology. The greater danger of this combination is associated with a high incidence of thrombosis on its background. In the conducted study, it was established that in these patients lipid peroxidation in plasma was sharply increased. It causes the progression of vasopathy with a weakening of vaginal antiplatelet production. This is associated with the weakening of vascular control in these patients over the excessive aggregation of neutrophils. Simultaneous depression of the disaggregation capacity of vessels and active aggregation of neutrophils weakened trophism of tissues and increased the risk of thrombosis in people with arterial hypertension and type 2 diabetes.

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