Chronic obstructive pulmonary disease

Competing interests None.

Ethics approval This study was conducted with the approval of the East London and City Health Authority Ethic Committee.

Provenance and peer review Not commissioned; externally peer reviewed.

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Inactivation of the N-terminal of ACE reduces bleomycin-induced lung fibrosis

This study examined bleomycin-induced lung injury in normotensive mice, termed N-KO and C-KO, which have point mutations inactivating the N- or C-terminal catalytic sites of angiotensin converting enzyme (ACE), respectively. N-KO, but not C-KO mice, exhibited a marked resistance to bleomycin-induced lung injury and fibrosis, as assessed by lung histology and hydroxyproline content (46% increase in hydroxyproline content in C-KO lungs compared with 6.9% in N-KO lungs, p<0.001). Furthermore, the N-KO mice showed enhanced survival when exposed to a dose of bleomycin lethal to wild-type mice. The importance of the tetrapeptide N-acetyl-seryl-aspartyl-lysyl-proline (AcSDKP), an ACE N-terminal substrate, was demonstrated when N-KO mice were treated with S-17092, a prolyl-oligopeptidase inhibitor that reduces the concentration of AcSDKP. These mice developed lung fibrosis similar to wild-type mice in response to bleomycin injection. Conversely, the administration of AcSDKP to wild-type mice reduced bleomycin-induced lung fibrosis, as assessed by lung hydroxyproline content (7.7 μ g/mg in mice given AcSDKP compared with 12.47 μ g/mg in mice given saline, p<10⁻⁴).

These results show that the inactivation of the N-terminal of ACE significantly reduces bleomycin-induced lung fibrosis and implicates AcSDKP as a mediator of this protection. A novel means to increase tolerance to bleomycin and to treat fibrosing lung diseases is thus proposed.

Li P, Xiao HD, Xu J, *et al*. Angiotensin-converting enzyme N-terminal inactivation alleviates bleomycin-induced lung injury. *Am J Pathol* 2010;**177**:1113—21.

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