(WT:  $-15.6 \pm 2.1$ , PPAR- $\alpha$ -/-:  $-28.0 \pm 3.8\%$ ; p<0.05), but unaltered in Nox2-/- mice. Interestingly, associated increases in PPAR- $\alpha$ mRNA (real-time RT-PCR) in WT TAC versus sham m ice (1.31  $\pm 0.08$  vs  $1.01 \pm 0.05$  arbitrary units: p<0.05) were reversed in Nox2 -/- mice (0.83±0.11 vs 1.11±0.10; p<0.05), whilst parallel reductions in Nox2 mRNA were evident in WT (0.49±0.03 vs 1.03  $\pm 0.09$ ; p<0.05) but not PPAR- $\alpha$ -/- mice. These data clearly suggest that cross-talk between PPAR- $\alpha$  and Nox2 plays an important role in LVH. To elucidate underlying mechanisms, a combined proteomic/transcriptomic approach using DIGE gel-LC-MS proteomics and Illumina mouse Ref-8 beadchips was employed in LV tissue (n=4/group). Data analysis by DAVID functional annotation tools identified several genes whose TAC-regulated differential expression (proteomics: EC>1.2, p<0.05; transcriptomics: EC>1.2, p<0.001) was significantly altered in the absence of PPAR- $\alpha$  and/or Nox2, including integrin- $\alpha$ /- $\beta$  subunits, desmin, and AP-1 subunits c-Fos and c-Jun. These potential key mediators provide exciting new avenues of investigation which may uncover novel mechanisms underlying important interaction between PPAR- $\alpha$  and Nox2 in LVH.

## S5

## INVESTIGATION OF MECHANISMS UNDERLYING THE INTERACTION BETWEEN NOX2 NADPH OXIDASE AND PPAR- $\alpha$ in left ventricular hypertrophy

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NADPH oxidases and peroxisome proliferator–activated receptor- $\alpha$  (PPAR- $\alpha$ ) play key roles in left ventricular hypertrophy (LVH) with emerging evidence supporting an important interaction. To investigate the nature of this interplay, gene-modified mice lacking PPAR- $\alpha$  (PPAR- $\alpha$ –/–) or Nox2 (Nox2–/–), and wild-type (WT) controls underwent thoracic aortic constriction (TAC) or sham surgery (n>8) before study at 7 days. TAC-induced increases in LV/ body weight were abolished in both PPAR- $\alpha$ –/– and Nox2–/– mice (WT: 10.8±2.1, PPAR- $\alpha$ –/–: 1.6±1.8, Nox2–/–: 1.7±3.0%; p<0.05), whereas LV contractile dysfunction (echocardiographic fractional shortening) was accentuated in PPAR- $\alpha$ –/– mice