

**Introduction** Pulmonary hypertension (PH) is characterised by elevated pulmonary arterial pressures, inappropriate apoptosis and vascular remodelling. Animal models fail to replicate such cellular changes. Current therapies target several mediators including endothelin-1 (ET-1). Mortality rates remain high, suggesting other influential biochemical pathways have been overlooked. Intermedin is a potent pulmonary vasodilator acting on receptor complexes comprising calcitonin receptor-like receptor (CRLR) and one of three receptor-activity modifying proteins (RAMPs).

**Aims** (i) Characterise Intermedin, Adrenomedullin and receptor component distribution across human pulmonary cell-types; (ii) examine effects of simulated hypertension±IMD on pulmonary smooth muscle cell (PSM).

**Methods** The Flexcell apparatus was used to simulate hypertension. Cell viability was measured by trypan blue assay. Gene expression was quantified by qRT-PCR. Protein levels were assessed by indirect-immunofluorescence techniques and immunoblotting.

**Results** IMD and AM were most abundant in pulmonary microvascular endothelial cells (PMVEC) and PSM respectively. CRLR was expressed less abundantly than RAMPs1-3; RAMP2 predominated in all cell types. PreproET-1 and preproIMD mRNAs increased maximally 19 fold ( $p<0.0001$ , 48 h) and 2-fold ( $p<0.01$ , 72 h) respectively in PSM after simulated hypertension. IMD 20 pmol l<sup>-1</sup> improved cell viability in flexed cells and CRLR/RAMP mRNA up-regulation was also observed ( $p<0.01$  vs control), maximally at 48 h.

**Discussion** IMD and its receptor components were each distributed differentially across human pulmonary cell-types. PH was evidenced in flexed cells by up-regulated ET-1 expression and reduced cell viability. Delayed up-regulation of IMD expression supports a counter-regulatory cytoprotective function for this peptide in human PH.

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#### THE ROLE OF THE PEPTIDE INTERMEDIN IN A NOVEL MODEL OF PULMONARY HYPERTENSION

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