



Effect of Trimetazidine on Myocardial Disorders in Rats

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Abstract

Cardiac muscle anemia affects the functions of mitochondria that results in ion disparity. The condition called cardiac arrhythmia. The research aims to study the effect of antianginal medication of trimetazidine on myocardial disorders in rats. The study was conducted on the rats. They were fed with 10 mg trimetazidine per Kg weight of mice each day for seven days. Tests were done for the effect of the moderator on mitochondrial metabolism in severe cardiac muscle anemia affected rats. Acute cardiac muscle anemia results in an injury to mitochondrial functions. So, when anemia cluster without trimetazidine treatment was observed, a major reduction within the infarction range was ascertained in trimetazidine-treated anemia cluster ($31\pm 3\%$ vs. $52.8\pm 4.89\%$). Trimetazidine maintained the mitochondrial organization. And, thus, better the metabolic process management, magnitude relation, and sophisticated activity. Moreover, the mitochondrial biosynthesis and division or fusion of the cells improved. The indubitable Promote the activated receptor gamma peroxisome proliferators (PPAR γ), the Joint Co-1 α (PGC-1 α), mitofusins one (Mfn1), dynamin-related super molecule one (Drp1), Optic nerve atrophy one (OPA1) emerge in rats with acute cardiac muscle anemia. Therefore, the incontestable heart defending effects of trimetazidine was shown to preserve mitochondrial metabolic process, increased biogenesis, and split/union of cells. And, thus, this rat model of cardiac muscle anemia may be effectively used along with other cardio protective agents.

Keywords: *Trimetazidine, Myocardial disorders, Rats.*

Introduction

Cardiovascular diseases have become one of the major causes of death of people all around the world. The study intends to examine the consequences of trimetazidine on the respiratory system within mitochondria for the synthesis, nuclear fission, and fusion in heart of rats with severe heart muscle anemia [1]. Cardiac muscle anemia affects mitochondrial function, resulting in ionic imbalance leading to cardiac arrhythmia. Trimetazidine metabolic factor is used clinically as anti-anginal drug. Trimetazidine has maintained the mitochondrial structure has improved the relationship and sophisticated functioning of the metabolic process.

Moreover, improving Trimetazidine the development of mitochondrial fission and fusion, which is undoubtedly promoted in rats with acute cardiac muscle anemia, by promoting peroxisoma gamma (PPAR β) with activated receptor 1 α co activator (PGC-1 α), mitofusins one (Mfn1), superstructure 1 dynamine-related molecules (Drp1), and optical atrophy one (OPA1) [2].

Trimetazidine has biogenesis effects in mitochondrial processes, and acute cardiac muscle anemia has been tested for fission and fusion in rats.

Materials and Methods

The Wistar's rat advisement of Ethics Committee report that the 321–349 g employed in the study was purchased from the Experimental Animal Center, Veterinarian College. The experiment was performed in accordance with the recommendations in the Guide to Health Institutes for the Care and Use of Laboratory Animals for Experiments.

The rats separated into four teams of 20 rats per subgroup branch out as sham management (In), anemia (I), Sham Trimetazidine control (Tn), and Ischemia, Trimetazidine (T). Treatment of animals in Trimetazidine teams received 10 mg/kg/d trimetazidine as pre-treatment (Servidier Laboratories, Neuilly, France), while animals received an equivalent quantity of isotonic

saline in non-trimetazidine-treated clusters. Trimetazidine oral mandated feed administration was undertaken for 7 days before anemia induction. The cluster with the sham procedure was operated on a surgical procedure because the various groups apparently did not undergo anemia procedure. The resolution of trimetazidine was prepared every day; it was completely dissolved in saline solution [0.9 percent NaCl (w / v)] and warmed to vital temperature prior to injection.

Total RNA Extraction

RNA was extracted from the pure isolates of both fungi (10 isolates/each). The AccuZol™ Total RNA Extraction Kit (Bioneer, Korea) was utilized to extract the RNA depending on the instructions that accompanied the kit. A NanoDrop was used to read the quantity and the quality of the extracted RNA. The extracted RNA was treated with DNase I to eliminate any remaining DNA.

Gene Expression Analysis

Ribonucleic acid preparation as well as a,, quantitative reverse, transcription, polymerase chain reaction, (RT-PCR)

indicates mRNA expression of genes related to mitochondrial fusion Drp1, Mfn1, Mfn2 and Opa1 in mitochondria isolated from rat heart muscle tissue. Agarose gel electrophoresis was evaluated for the quality of ribonucleic acid and random hexamer (TaKaRa, Osaka, Japan) was used to synthesize DNA (cDNA). The RT-PCR analysis was conducted under the ABI Prism 7500 for \$64000-time. The RT-PCR analysis was conducted out under the ABI Prism 7500 for 64,000 dollars.

A sequence detector (Applied Biosystems, Foster town, CA, USA) is used according to the direction of the manufacturer by using the QuantiTect SYBR Inexperienced RT-PCR Kit (Qiagen, Valencia, CA). A single cycle of 94 ° C lasted 10 min, 95 ° C lasted 15 seconds and 57 ° C lasted 30 sec and 40 cycles of 95 ° C for 15 seconds, 60 ° C lasted one minute and 95 ° C was followed for 15 seconds. And, because of the management β -actin was used (Santa Cruz Biotechnology, CA, USA). The square measurement is shown in Table One of the specific first sequences (Invitrogen, Carlsbad, CA, USA). The square measurement is shown in Table One of the specific first sequences (Invitrogen, Carlsbad, CA, USA).

Table 1: Primers Used In This Study

Gene	Sequence 5'-3'	Product bp
B-actin	F: CCCATCTATGAGGGTTACGC	150
	R: TTTAATGTCACGCACGATTTTC	
Drp1	F: TTTAATGTCACGCACGATTTTC	167
	R: CACAATCTCGCTGTCTCGG	
Mfn1	F: TTGTCGCCTGTCTGTTTGG	150
	R: GCATTGACTTCACTGGTGCA	
Mfn2	F: ACCGCCATATAGAGGAAGGC	203
	R: GCACAGCTTGTCACAGTTCA	
Opa1	F: TACCACAGTCCGGAAGAACC	237
	R: GTGTTGGCAGTGATAGCGAG	

Statistical Findings

The expression of all the data as a standard mean \pm deviation (n=6 for each group). For comparison of cluster information, a Unidirectional Variance Analysis (ANOVA) was carried out with SPSS 19.0 computer code (IBM, Armonk, NY, USA). If ANOVA was vital, the Newman-Keuls test was used in multiple comparisons; p 0.05). However, a major IS decrease in the proportion of trimetazidine treated anemic rats has been found in comparison with un-administered trimetazidine (31.23 \pm 3.0% vs. 31.23 \pm 3.0%). 52.87 \pm 4.89%).

Results

In rats with ischemic acute myocardial, the trimetazidine effects on the heart pathology (IS) is studied. The hearts of anemic rats and anemic rats treated with trimetazidine were isolated and the room for risk (AAR) and IS was established. Results showing that the AAR proportion modified the contact between the ISC and IST cluster (44.4 \pm 4.16 percent versus 47.1 \pm 1.9 percent). It indicates there was no distinction in anemia space (AAR ratio) among 2 clusters (p>0.05). However, a significant decrease in SI share has been determined in trimetazidine-treated anemic

rats ($32\pm 3.03\%$ vs. $52.8\pm 4.9\%$ percent) compared to anemic rats with with no trimetazidine administration. In the case of rats with acute heart muscle anemia, trimetazidine effects on

mitochondrial metastasis showed that complicated anemia pursuits in contrast with those in the conventional blob were substantially rendered inert.

Table 2: The effects of trimetazidine on fission or fusion expression of genes

Groups	Drp1	Mfn1	Mfn2	Opa1
In	1.01±0.00	1.03±0.00	1.01±0.00	1.02±0.00
I	0.34±0.08**	0.39±0.16**	1.08±0.06	0.26±0.16**
Tn	0.96±0.03	1.09±0.41	3.78±0.28	0.86±0.09
T	0.53±0.07#	0.96±0.24##	3.42±0.27##	0.66±0.07#

##, ** signifint., # significant

Histological Finding

The results of the current study showed that trimetazidine has a negative effect on

myocardial infarction; there is degeneration of cardiac muscle fibers with loss of cross striations, infiltration of inflammatory cells with hemorrhage.

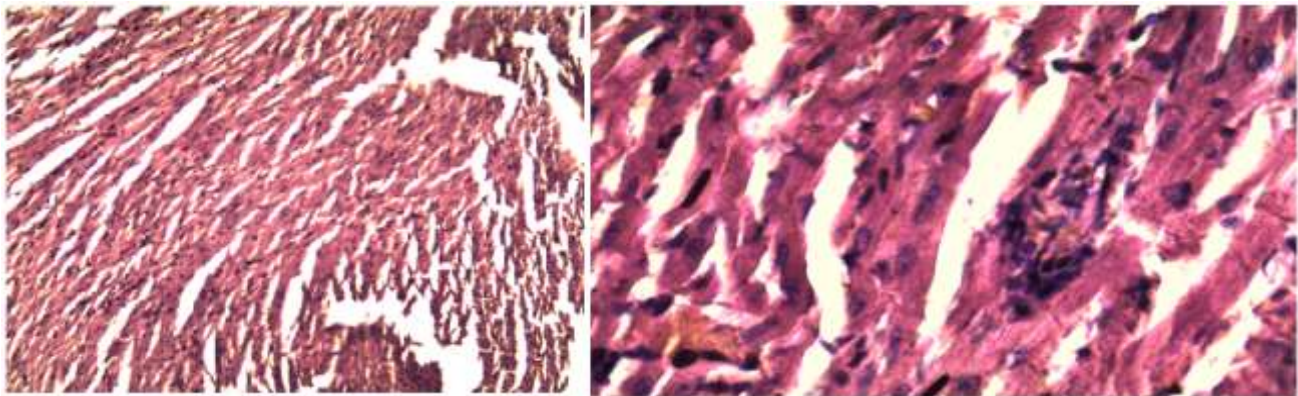


Figure 1: show effect of trimetazidine on myocardial sections

Discussion

The trimetazidine triggered a decrease of IS in rats' heart with acute anemia of the heart muscle and protection of mitochondrial metabolic processes is evaluated, synthesized and fission/fusion are carried out on this research. Trimetazidine singly or as a mixed regime was observed to protect against injuries like Cardiovascular and renal injuries, intestines and liver due to its restricted hemodynamic consequences [3].

Researchers have given new evidence that trimetazidine has an important role to play in an upheaval. As an example, trimetazidine could inhibit the internal organ pathology caused by pressure overload and the reworking of cardiac muscles [4].

Trimetazidine was used in the study of anemia-enlarged heart disorders [5] through increased left ventricular function, reduced T-wave amplitude, QT interval, arrhythmia variations, and periods of oxidation-phosphorylation coupling [6] and the study of the South Asian population [7]. Trimetazidine defends cells against prospective necrobiosis by the growing

membrane resistance and thus reduces dysfunctions in the cavities of the body as a result [8]. We have discovered that trimetazidine encourages RCR in the gift research and complicates I activity in anemic rats and mitochondrial repairs to conventional. Mitochondria account for 45 of the volume of cardiac muscle and are key to the cell production of energy and life cycle. In addition, mitochondria are essential for I / R [9].

Due to their responsiveness to all, or any, changes in the practical nature chain Electron transfer mitochondria (ETC) [10], RCR is considered to have a great deal of value for mitochondrial performance. Dedkova et al. evaluated the cellular mechanisms of trimetazidine cardio protection action using a rabbit model of non-ischemic coronary failure and instituted that trimetazidine guarded coronary failure through ETC at Terrence to ROS generation and unrelated mitochondrial gas synthase. Furthermore, trimetazidine suppressed the increased leakage of the mitochondrial ETC advanced II and enhanced mitochondrial advanced I impaired activity.

In particular, by quantitatively evaluating the RCR at State three (maximum metabolic rate) to State quatre (basal metabolic rate), advanced I activity of mitochondria, and structure of mitochondria we can measure the metabolic performance of the mitochondria. We can also hypothesize that trimetazidine regulated mitochondria from the harmful effects of anemia by controlling PGC-1 α . We can measure PGC-1 α and Tfam macromolecule levels in order to examine the Regulatory functions of trimetazidine in mitochondria synthesis in rats who have acute heart muscle anemia.

In terms of mitochondrial biogenesis and energy metabolism, the PGC-1 α and the Tfam and its downstream problem are crucial. In addition, PGC-1 α can be an important macromolecule co-activator linked to different transcription factors and increases the ability of its cognate target genes to induce expression [11]. Fleshy and several other diseases have been determined to free PGC-1 α template RNA levels [12]. PGC-1 α is primarily attributable to its ability to push aerobic metabolism and increase mitochondrial biogenesis [13].

Therefore, it can also be proven that in rats with heart muscle anemia the PGC-1 α was down-regulated and trimetazidine has greatly modified the outcome. Earlier research showed that medical use of trimetazidine could improve the energy metabolism of the whole anemia method of cardiac muscle [14]. The ATP synthesis [15] could lead to a sweetening of oxoglutarate dehydrogenase behavior with both the

presence of 25-100 nM of extra mitochondrial Ca²⁺ + ready for use by the rat's heart at trimetazidine concentrations of 10-100 μ M. Mitochondrial fission/fusion was classified in the health of mitochondria and cells as important processes [16]. Mitochondrial fission is required throughout the organic process for the cellular heritage of mitochondria, whereas fusion is necessary for mitochondrial genome deployment [17].

Mfn1/2, OPA1, and DRP1, which also maintains the mitochondrial membrane intact, are primarily regulated at the molecular level. OPA1 is an inner membrane super molecule which, by controlling the repairing of the inner membranes, ensures matrix properties simultaneously. Drp1 could be a cytosolic super molecule employed from the cytoplasm to prospective fission Sites on the outer membrane of the mitochondria to stimulate fission mitochondria [18]. Through upregulation of Mfn1, Opa1, and Drp1, trimetazidine can be said to maintain fission/fusion in rats with acute muscle anemia.

Conclusion

To conclude, the study discovered that acute cardiac anemia causes an injury to mitochondrial functions and trimetazidine treatment could help to reverse cardiac anemia by reducing heart disease, improving mitochondrial metastases, promoting mitochondrial biogenesis and preserving mitochondrial fission/fusion. Thus, in patients with cardiovascular disease, trimetazidine is also an honest alternative for cardiac anemia.

References

1. Mozaffari MS, Liu JY, Abebe W, Baban B (2013) Mechanisms of load dependency of myocardial ischemia reperfusion injury. *Am J. Cardiovasc. Dis.*, 3: 180-96.
2. Souidi N, Stolk M, Seifert M (2013) Ischemia-reperfusion injury: beneficial effects of mesenchymal stromal cells. *Curr. Opin. Organ. Transplant*, 18: 34-43. [Cross Ref].
3. Harpey C, Clauser P, Labrid C, Freyria JL, Poririer J (1989) Trimetazidine, a cellular anti-ischemic agent. *Cardiovasc. Drug Rev.*, 4: 292-312.
4. McClellan KJ, Plosker GL (1999) Trimetazidine. A review of its use instable angina pectoris and other coronary conditions. *Drugs*, 58: 143-57. [Cross Ref].
5. Ayyıldız A, Ayyıldız SN, Benli E, Erdem H, Cirrik S, Noyan T, et al (2016) The effect of oral and intraurethral trimetazidine use on urethral healing. *Iran J. Basic Med. Sci.*, 19: 932-9.
6. Mahfoudh Boussaid A, Selmi R, Bejaoui M, Hadj Ayed K, Zaouali MA, Ben Abdennebi H (2016) Effectiveness of a single versus repeated administration of trimetazidine in the protection against warm ischemia/reperfusion injury of rat liver. *Turk. J. Med. Sci.*, 46: 1258-64.

7. Tetik C, Özden A, Calli N, Bilgihan A, Bostanci B, Yis O, et al (1999) Cytoprotective effect of trimetazidine on 60 minutes of intestinal ischemia-reperfusion injury in rats. *Transpl. Int.*, 12: 108-12. [Cross Ref].
8. McCarthy CP, Mullins KV, Kerins DM (2016) The role of trimetazidine in cardiovascular disease: beyond an anti-anginal agent. *Eur. Heart J. Cardiovasc. Pharmacother*, 2: 266-72. [Cross Ref].
9. Ruiz-Meana M, Garcia-Dorado D, Julia M, Gonzalez MA, Inserte J, Soler-Soler J (1996) Pre-treatment with trimetazidine increases sarcolemmal mechanical resistance in reoxygenated myocytes. *Cardiovasc. Res*, 32: 587-92. [Cross Ref].
10. Ma N, Bai J, Zhang W, Luo H, Zhang X, Liu D, et al (2016) Trimetazidine protects against cardiac ischemia/reperfusion injury via effects on cardiac miRNA-21 expression, Akt and the Bcl-2/Bax pathway. *Mol. Med. Rep.*, 14: 4216-22. [Cross Ref].
11. Liu Z, Chen JM, Huang H, Kuznicki M, Zheng S, Sun W, et al (2016) The protective effect of trimetazidine on myocardial ischemia/reperfusion injury through activating AMPK and ERK signaling pathway. *Metabolism*, 65: 122-30. [Cross Ref].
12. Zhang N, Lei J, Liu Q, Huang W, Xiao H, Lei H (2015) The effectiveness of preoperative trimetazidine on myocardial preservation in coronary artery bypass graft patients: a systematic review and meta-analysis. *Cardiology*, 131: 86-96. [Cross Ref].
13. Kim SC, Boehm O, Meyer R, Hoeft A, Knüfermann P, Baumgarten G (2012) A murine closed-chest model of myocardial ischemia and reperfusion. *J. Vis. Exp.*, 65: e3896. [Cross Ref].
14. Johnson CL, Mauritzen CM, Starbuck WC, Schwartz A (1967) Histones and mitochondrial ion transport. *Biochemistry*, 6: 1121-7.
15. Compton SJ, Jones CG (1985) Mechanism of dye response and interference in the Bradford protein assay. *Anal. Biochem.*, 151: 369-74.
16. Birch-Machin MA, Briggs HL, Saborido AA, Bindoff LA, Turnbull DM (1994) An evaluation of the measurement of the activities of complexes I-IV in the respiratory chain of human skeletal muscle mitochondria. *Biochem. Med. Metab. Biol.*, 51: 35-42. [Cross Ref].
17. Skemiene K, Liobikas J, Borutaite V (2015) Anthocyanins as substrates for mitochondrial complex I - protective effect against heart ischemic injury. *FEBS J.*, 282: 963-71. [Cross Ref].
18. Lopaschuk GD, Barr R, Thomas PD, Dyck JR (2003) Beneficial effects of trimetazidine in ex vivo working ischemic hearts are due to a stimulation of glucose oxidation secondary to inhibition of long-chain 3-ketoacyl coenzyme a thiolase. *Circ. Res.*, 93: e33-7. [Cross Ref].