

# Advancing Nephrology Through 2-Photon Microscopy

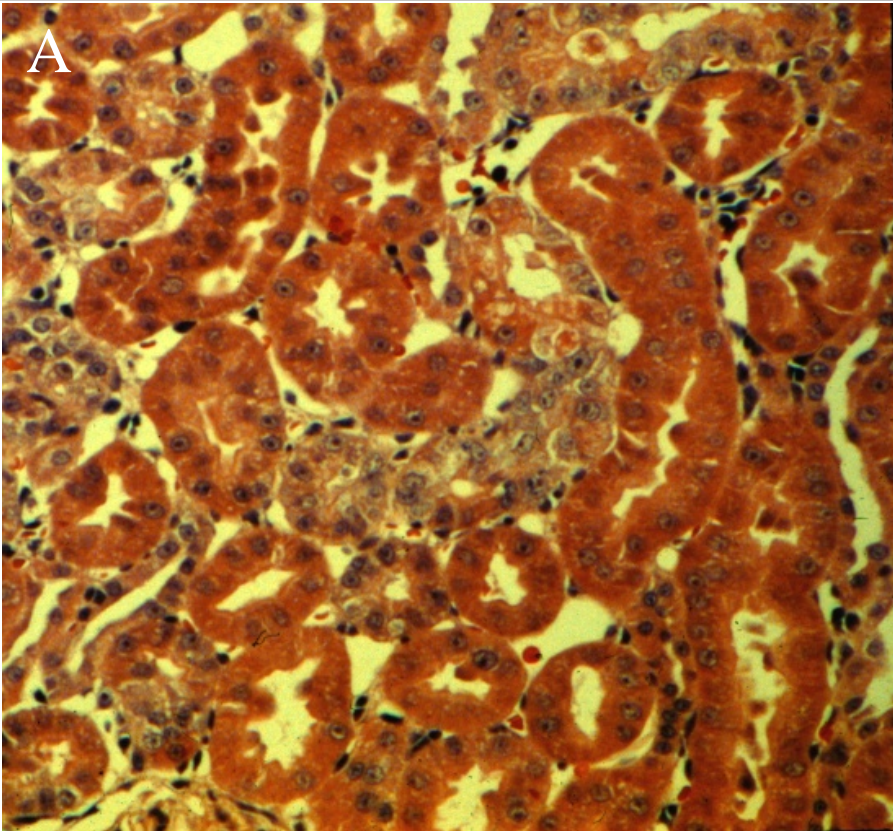
**Bruce A. Molitoris**

Department of Medicine

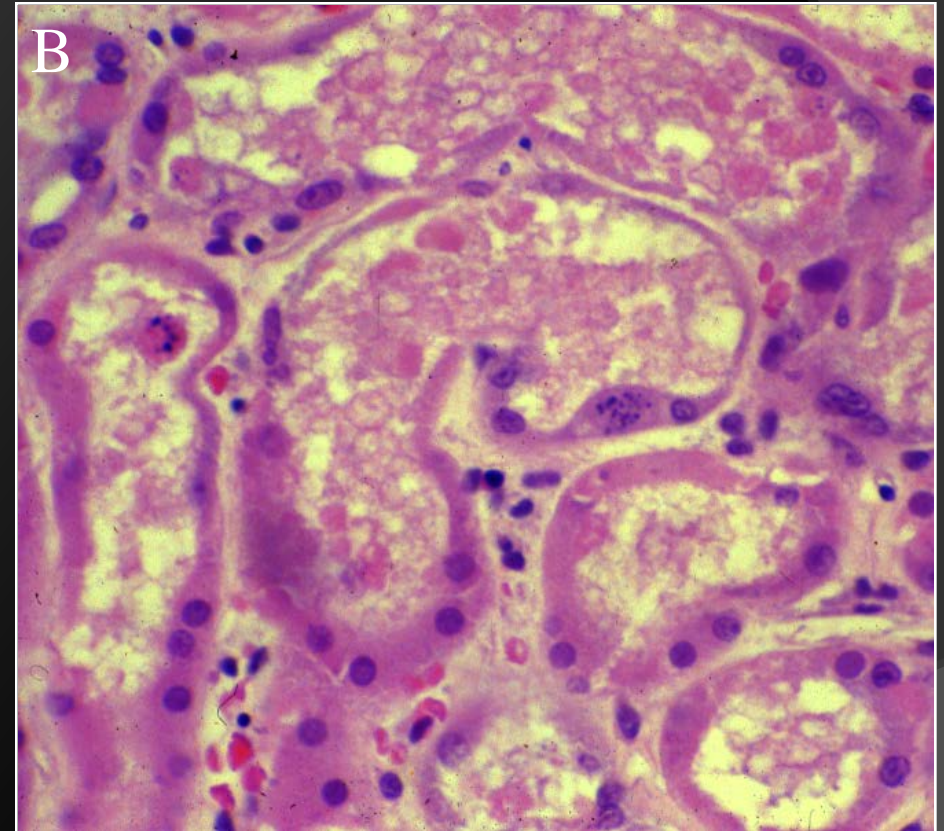
Indiana Center for Biological Microscopy

Indiana University School of Medicine

# Human Renal Ischemia



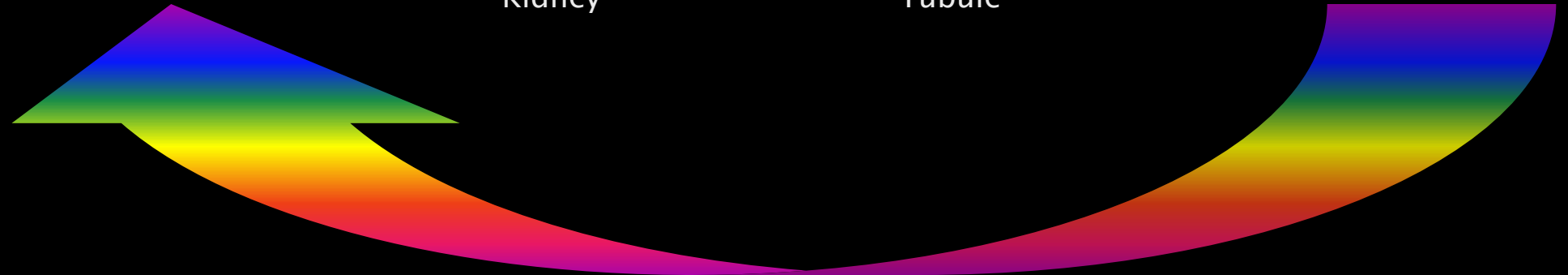
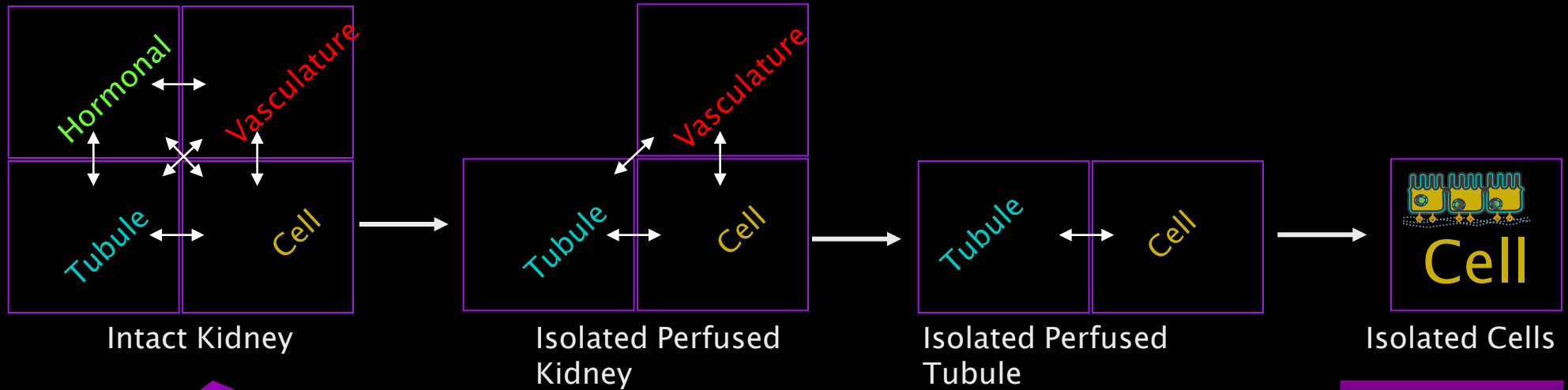
Control



Ischemic

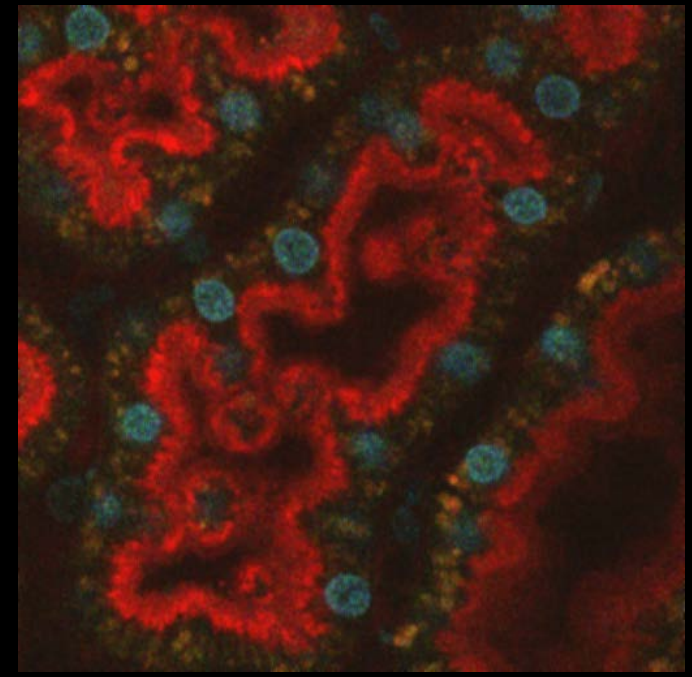
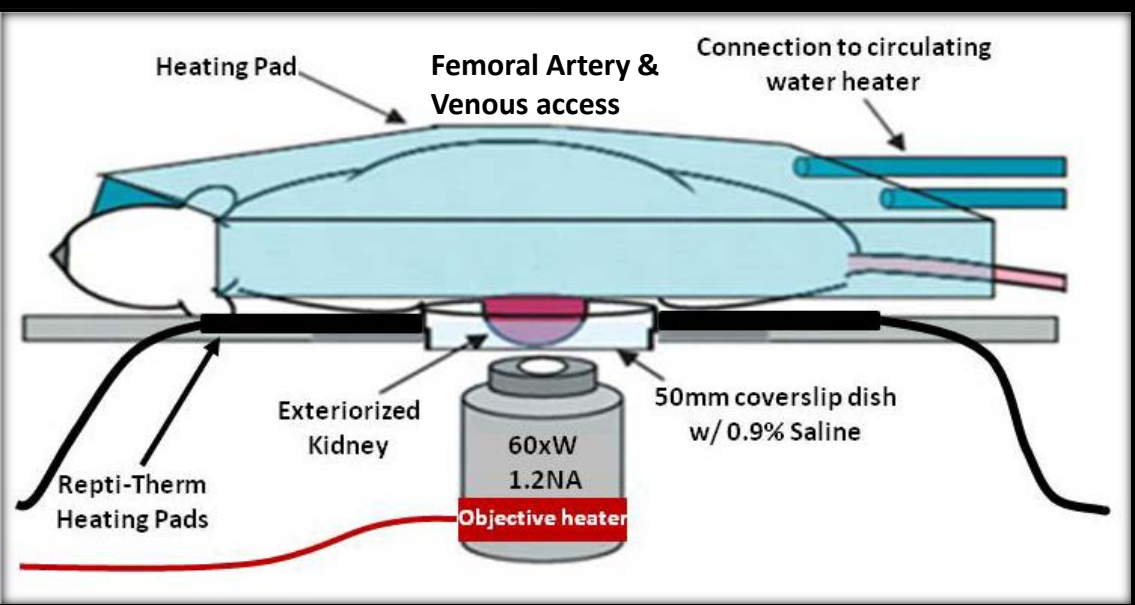
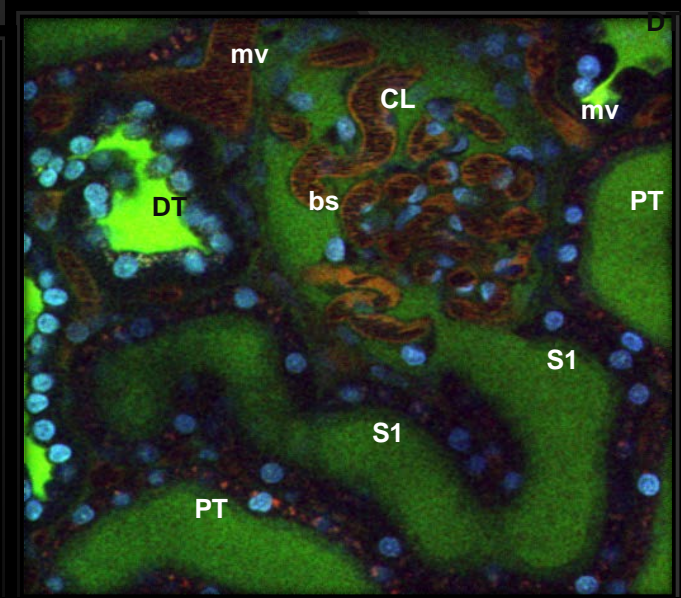
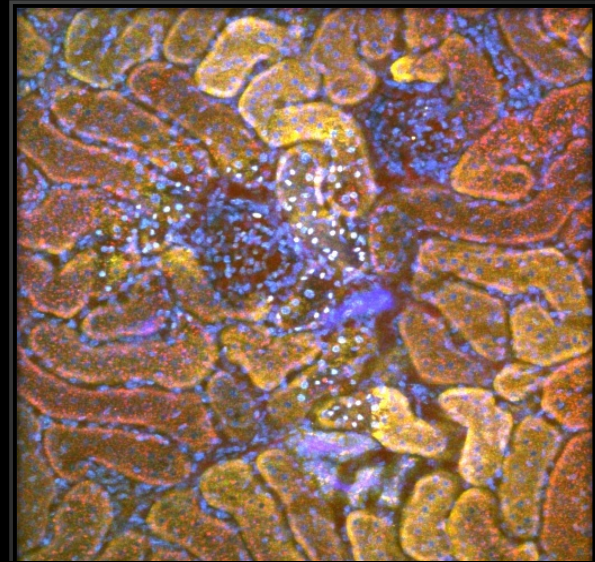
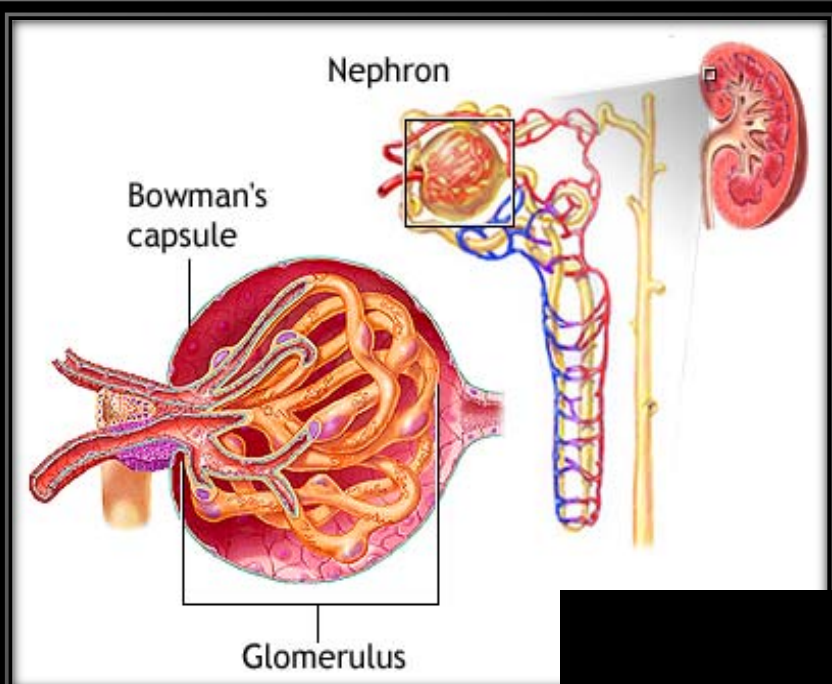
**Available Clinical Data Insufficient to Understand the Disease !**

# Reversing Reductionism

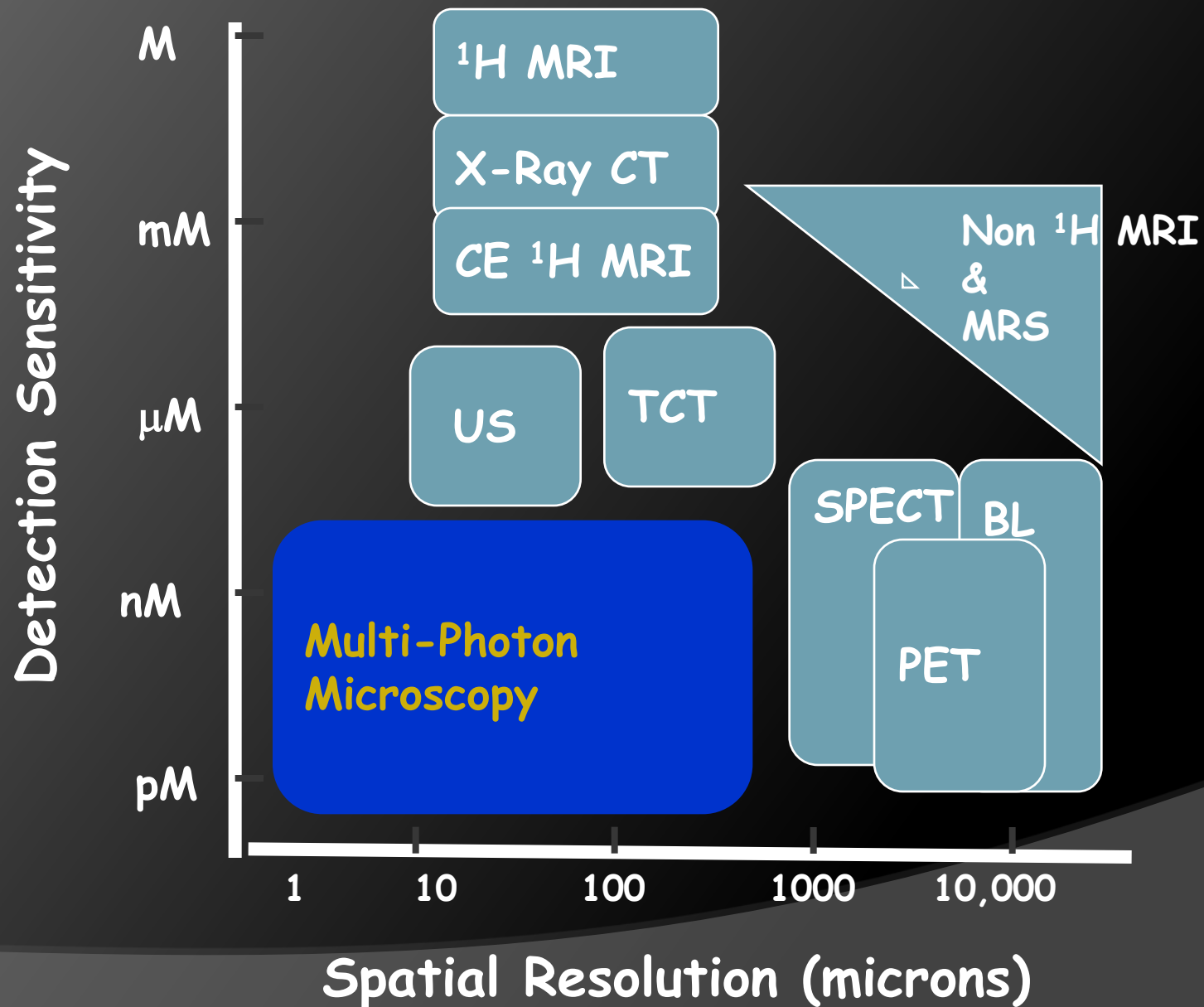


Multi-photon microscopy

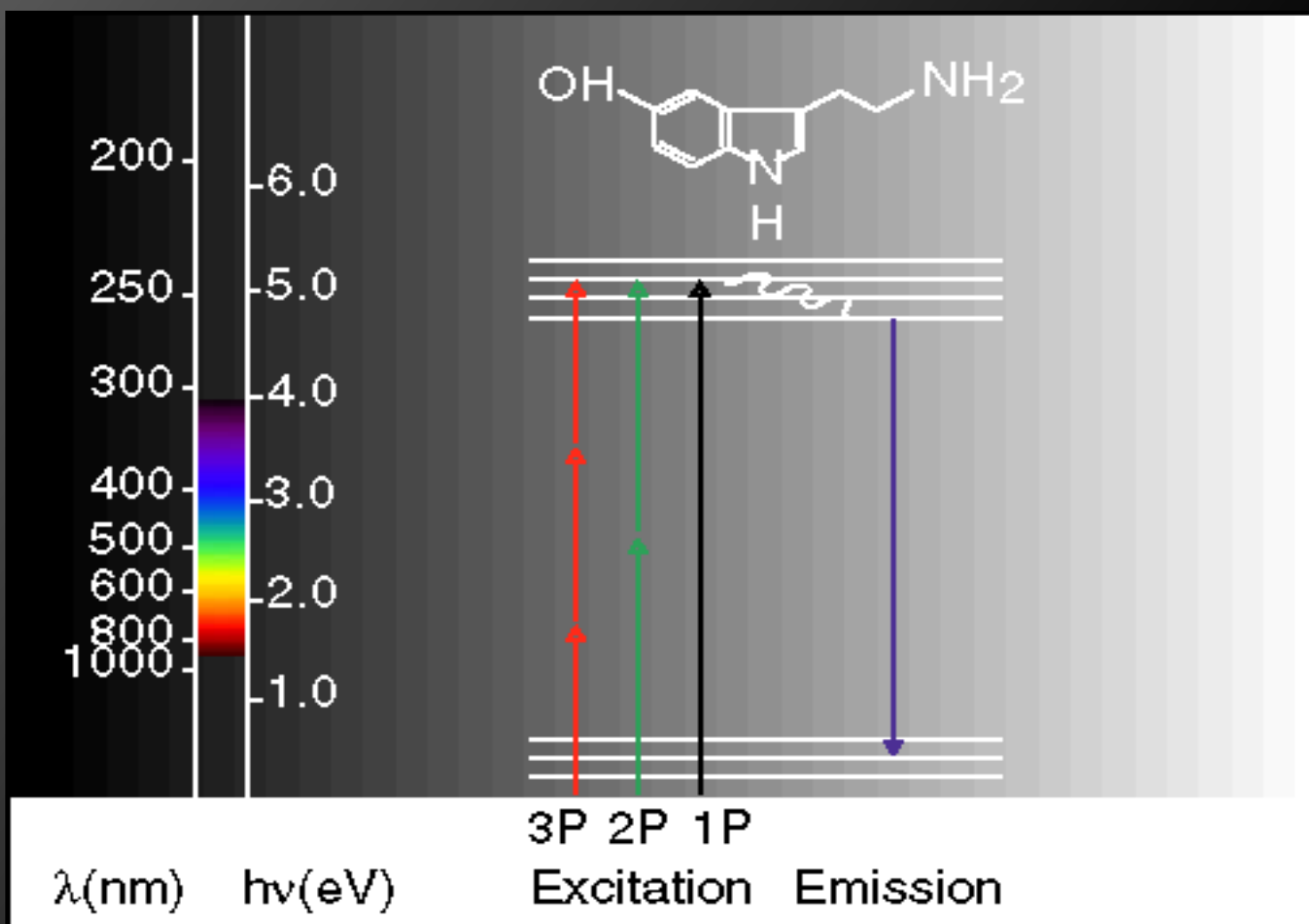
# Visualizing Glomerular & Nephron Function

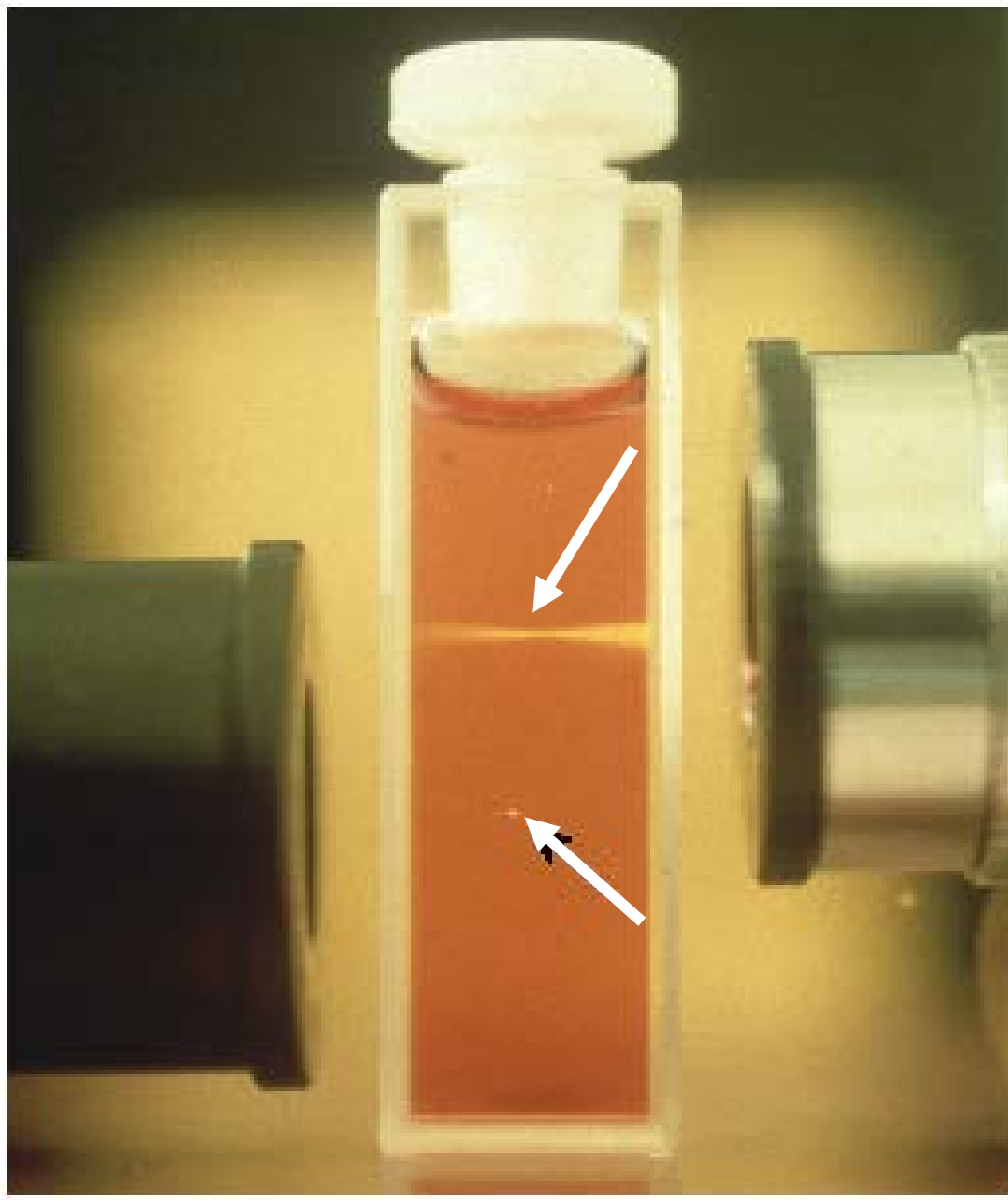


# Intra-Vital Imaging Sensitivity vs Resolution



# TWO-PHOTON MICROSCOPY PRINCIPLE:



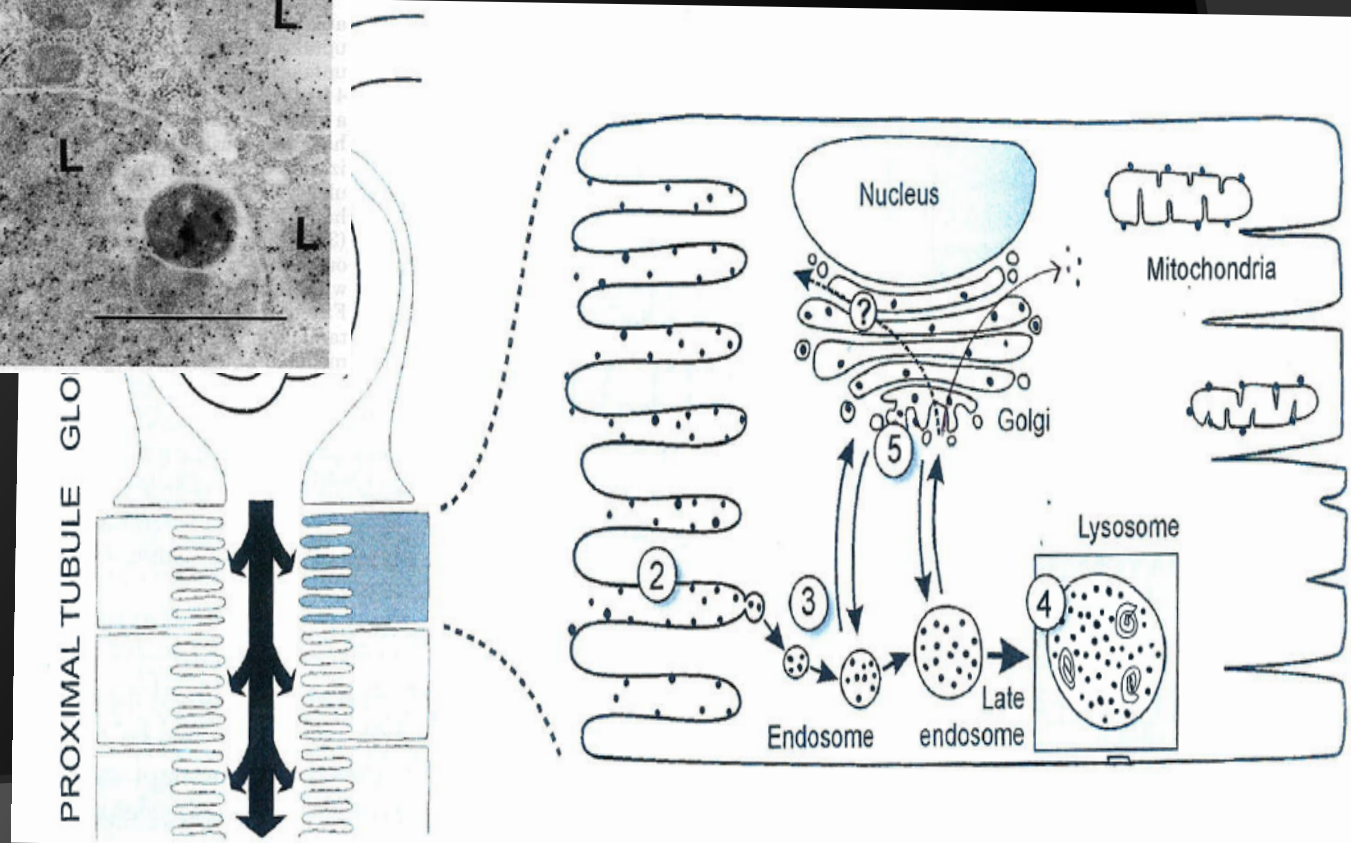
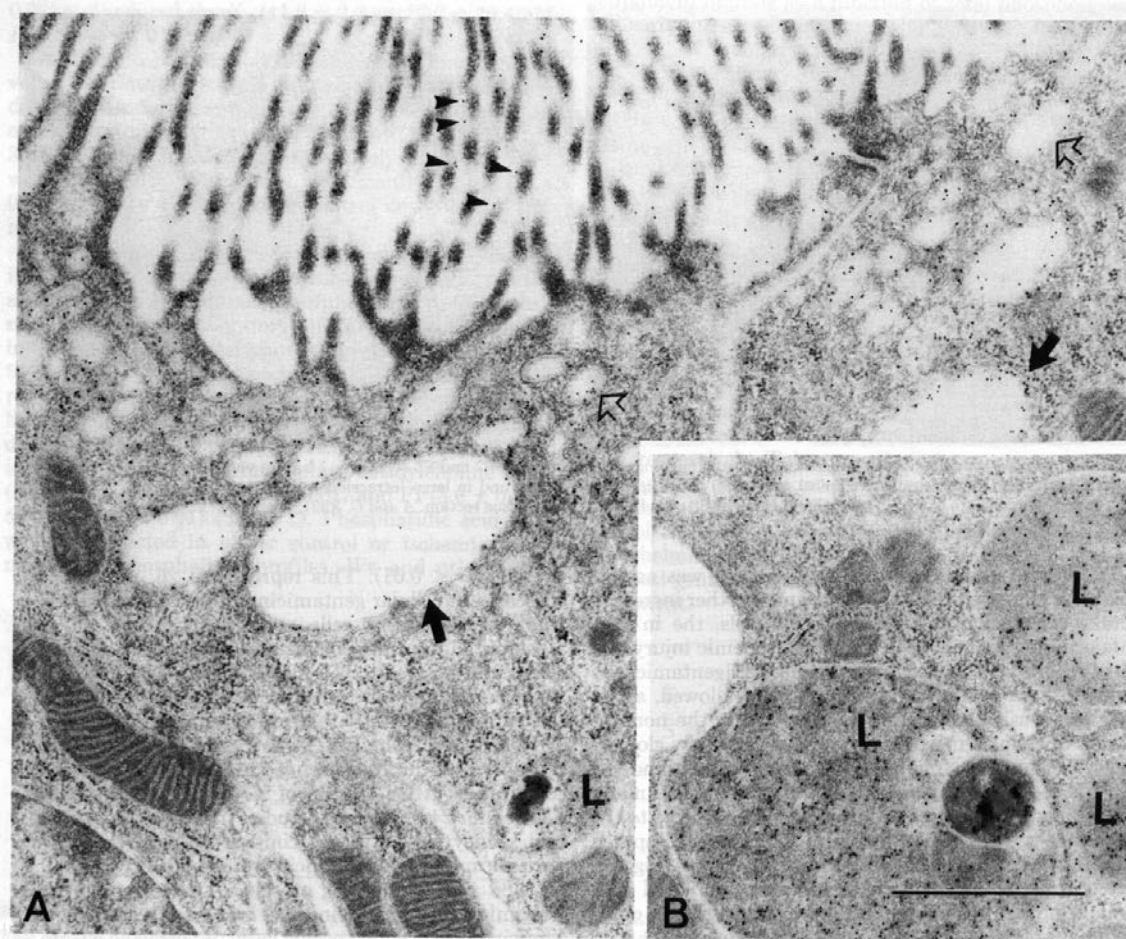


**Volume of fluorescence  
excitation –**

**Confocal versus 2-photon  
microscopy**

Figure courtesy of Brad Amos, MRC Laboratory

**High Oxygen**  
**Aerobic metab.**  
**Minimal anaerobic metab**  
**Fatty acids, acetoacetate**  
**No glycogen**  
**Fluid Phase and Receptor Mediated**  
**Endocytosis**  
**Sensing environment, TLR**  
**Long lived cell**



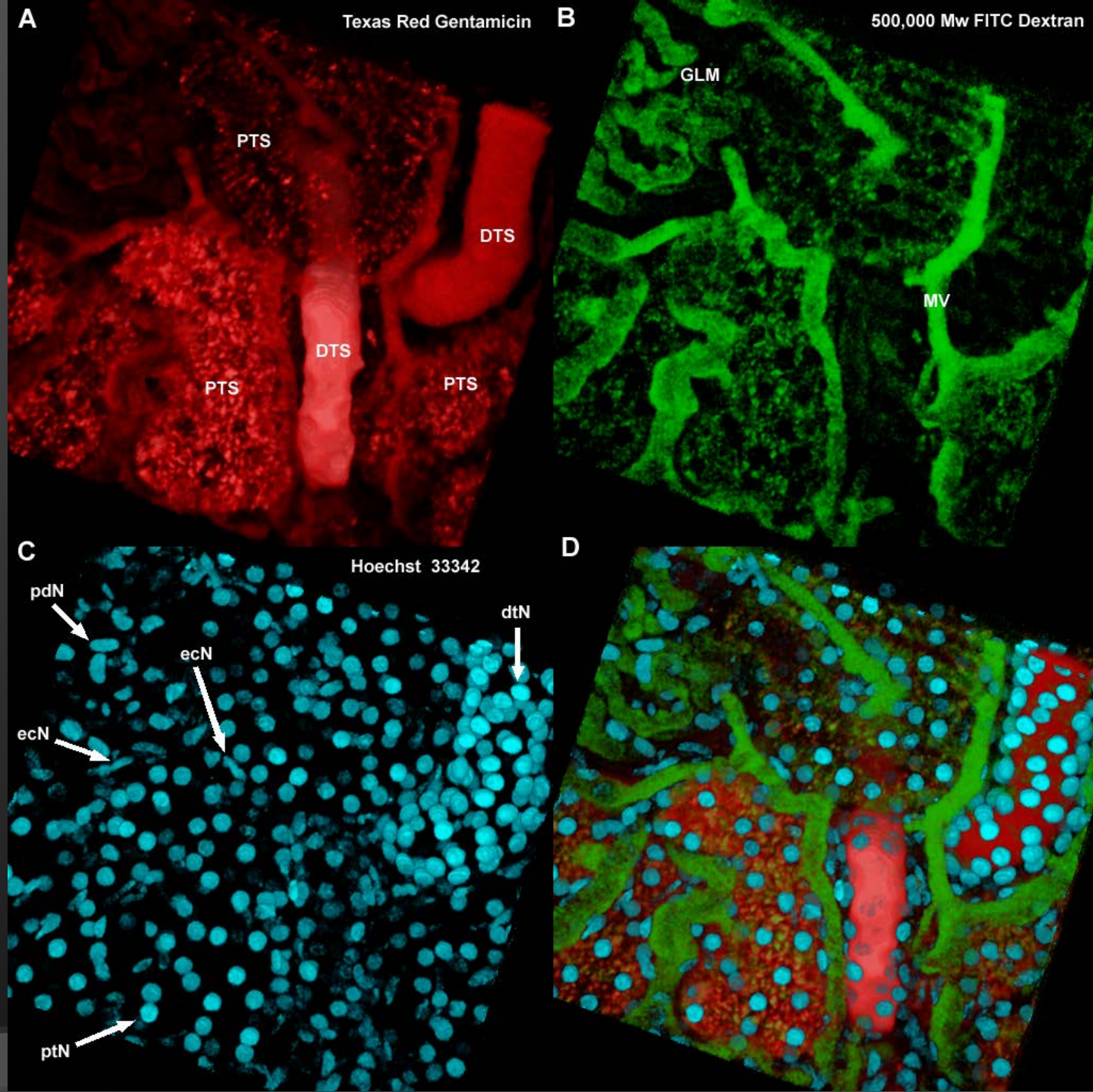


# Gentamicin Uptake

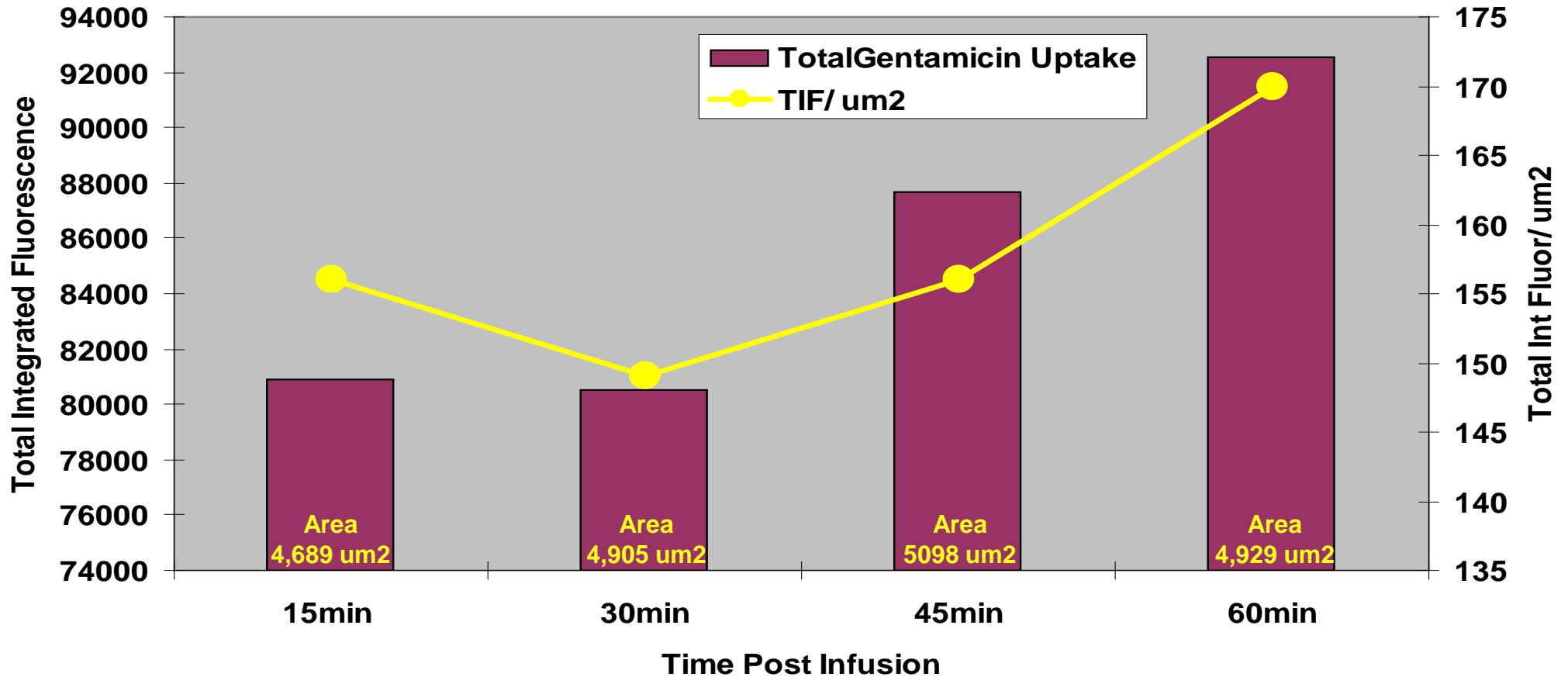
Up to 4 different  
fluorescent probes

Interrelate dynamic  
processes

Structure function  
correlations



# Total Texas Red Gentamicin Uptake-Day 1



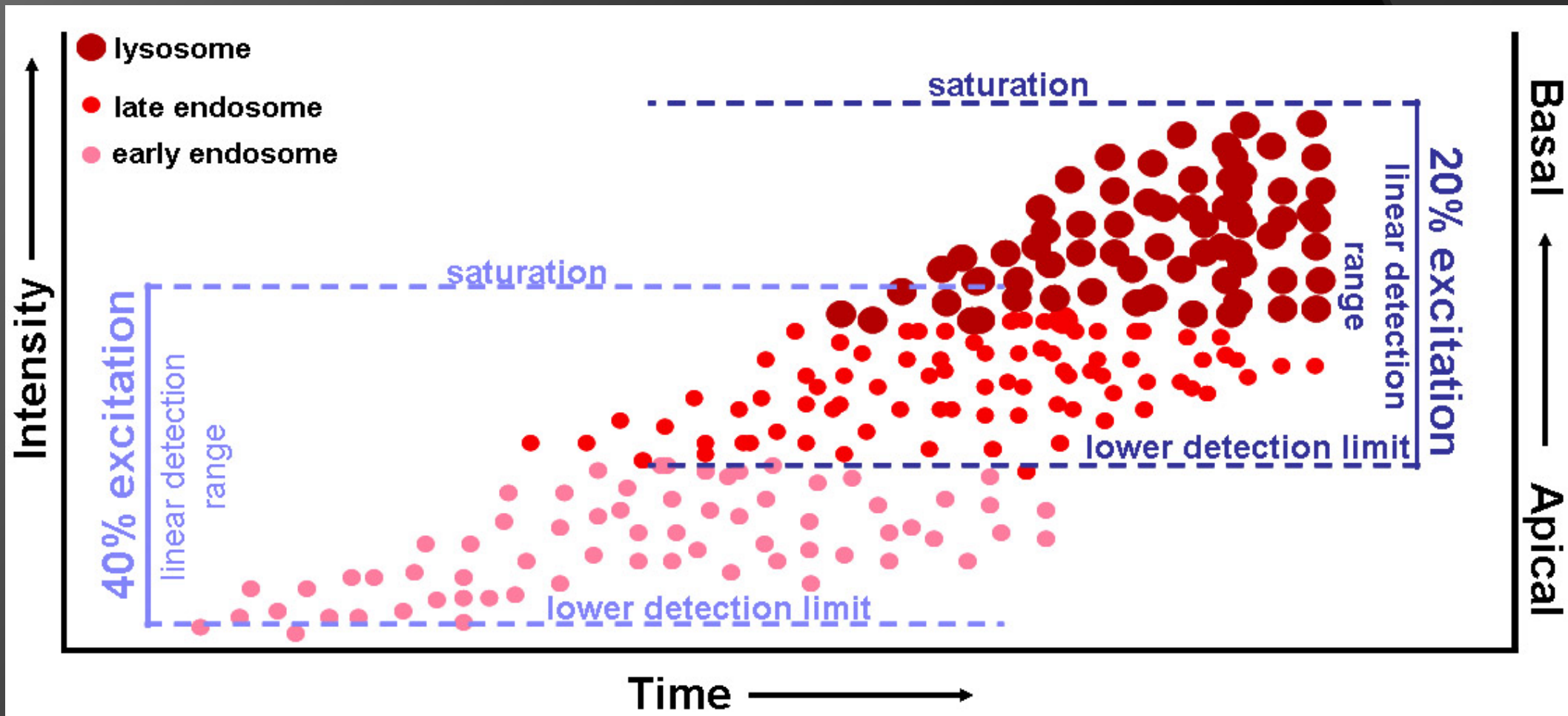


Figure 4

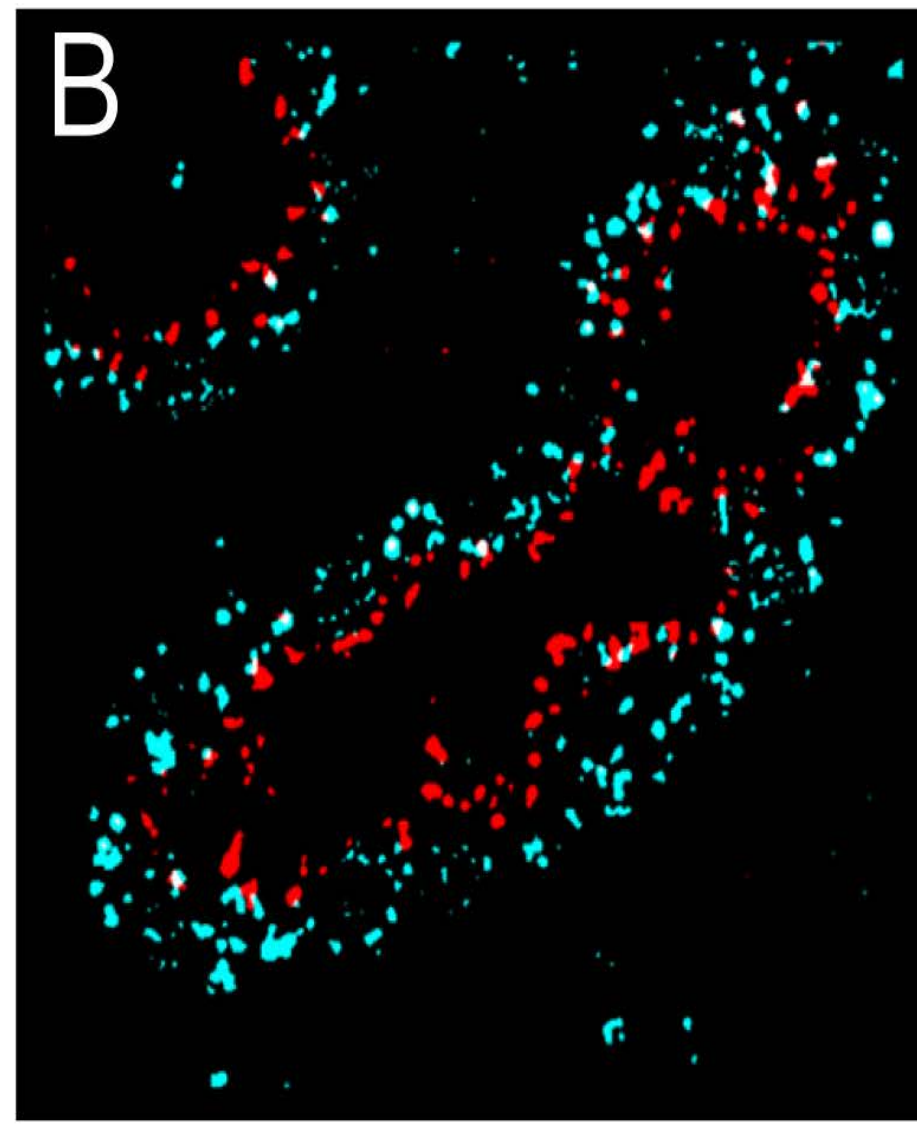
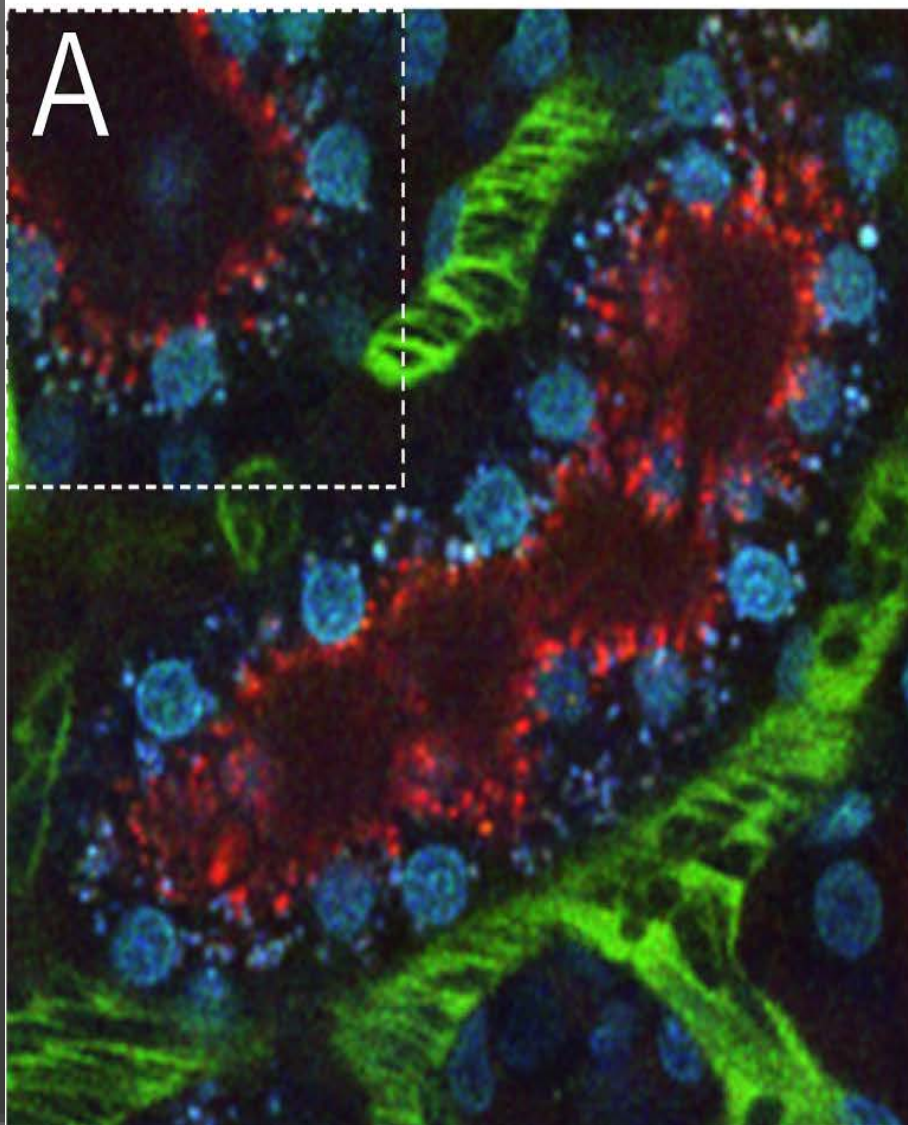
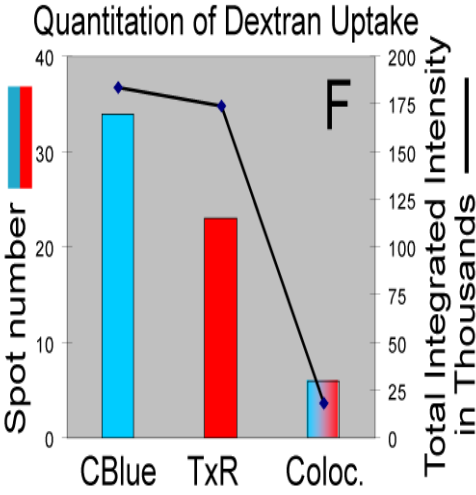
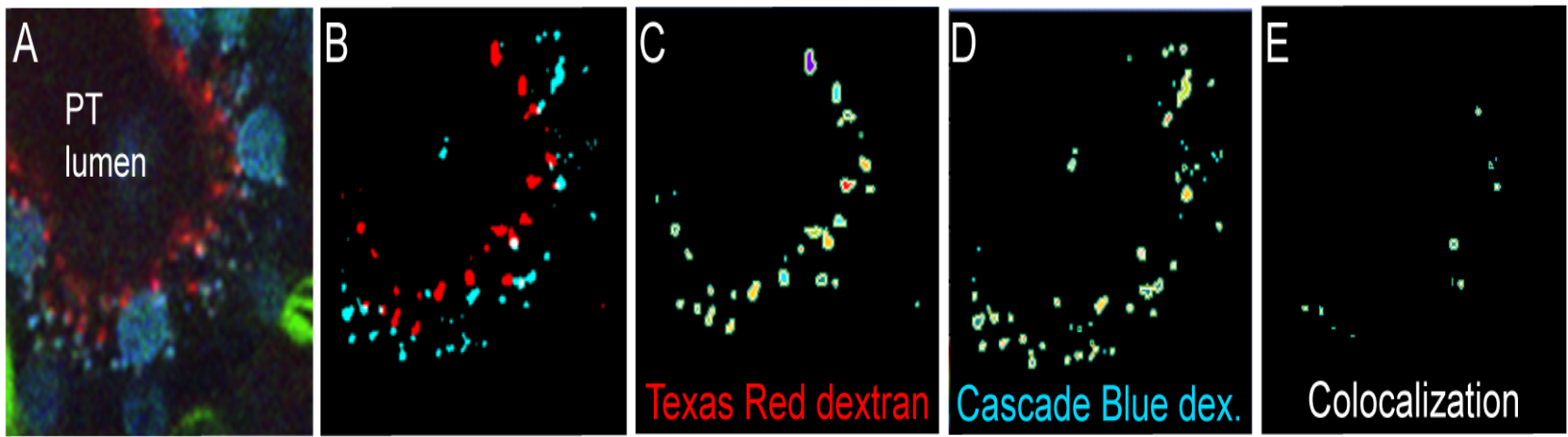
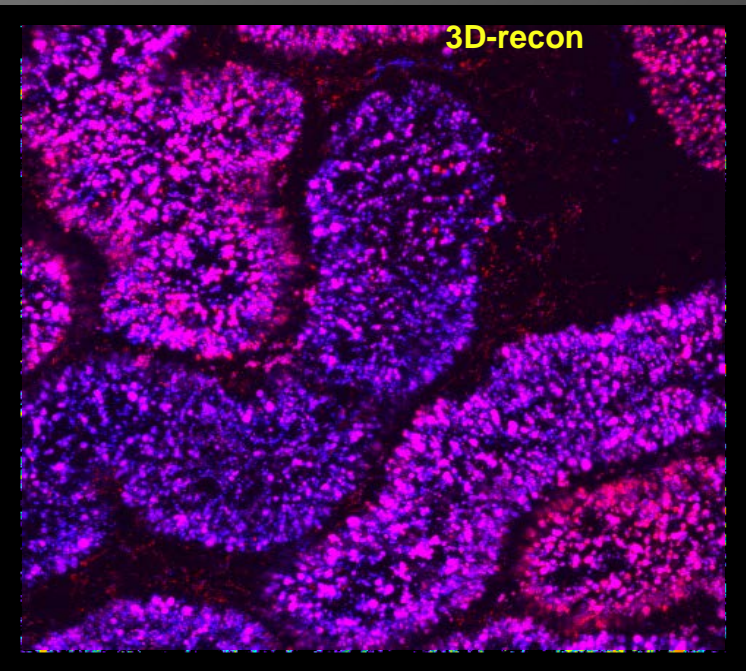
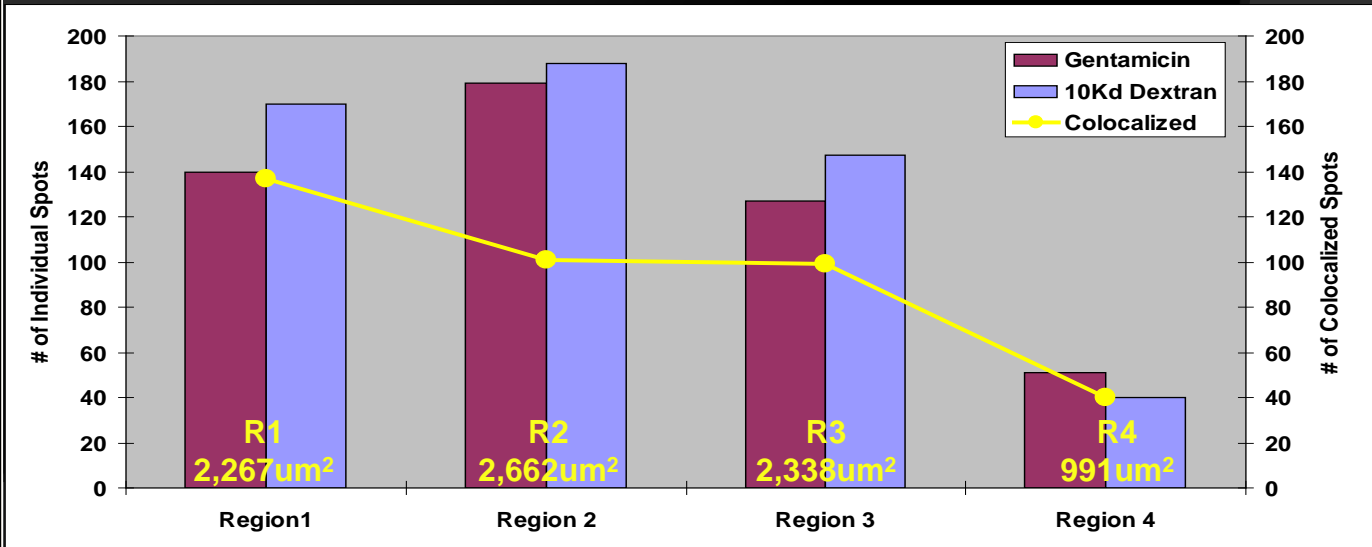
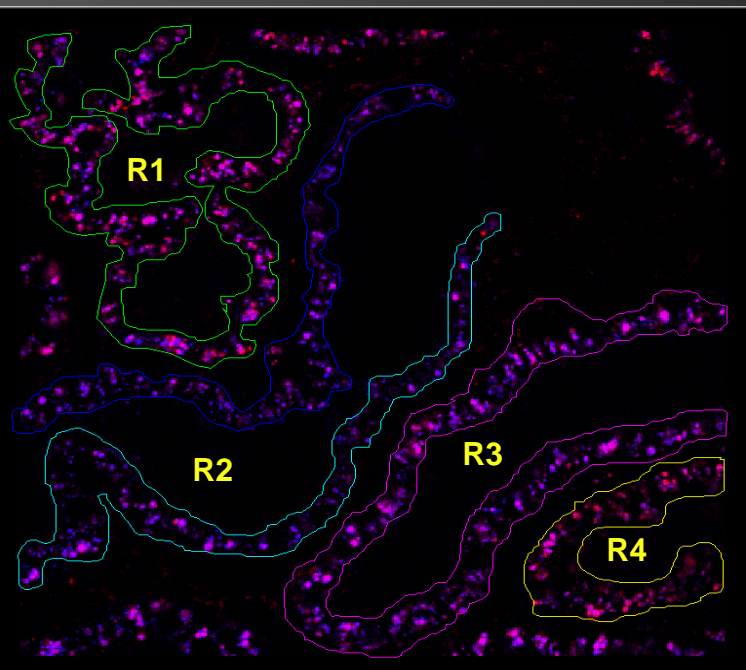
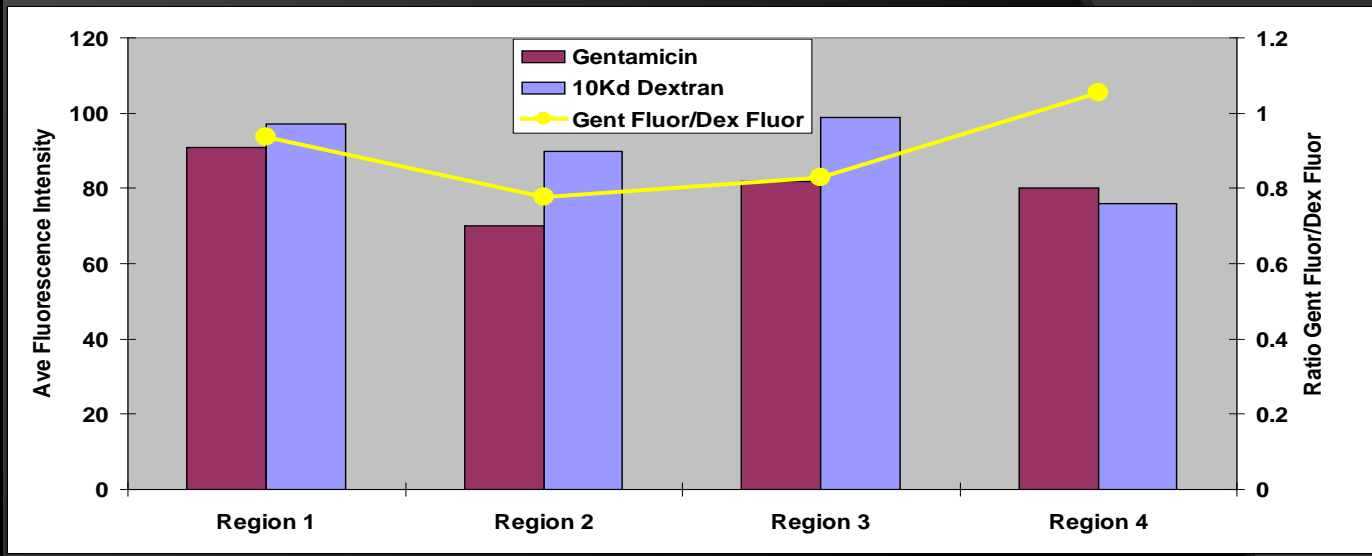


Figure 33 In vivo uptake of Cascade Blue (24 hrs) and Texas Red dextrans (15 min) by PTCs

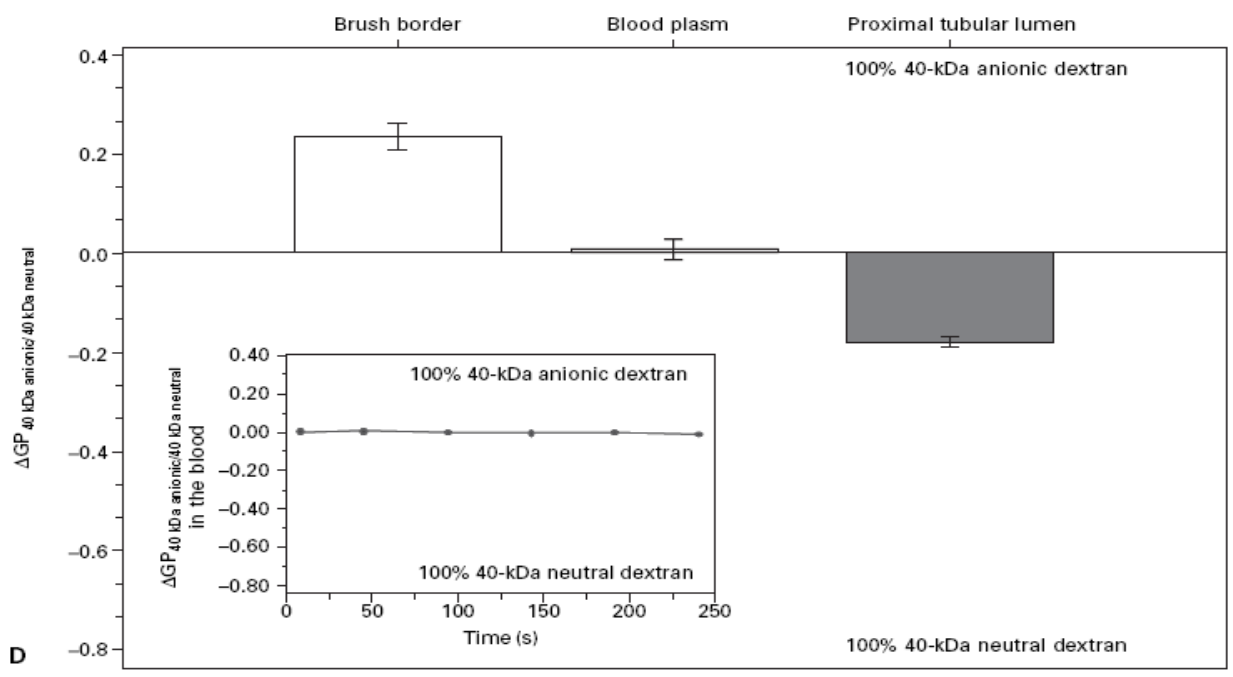
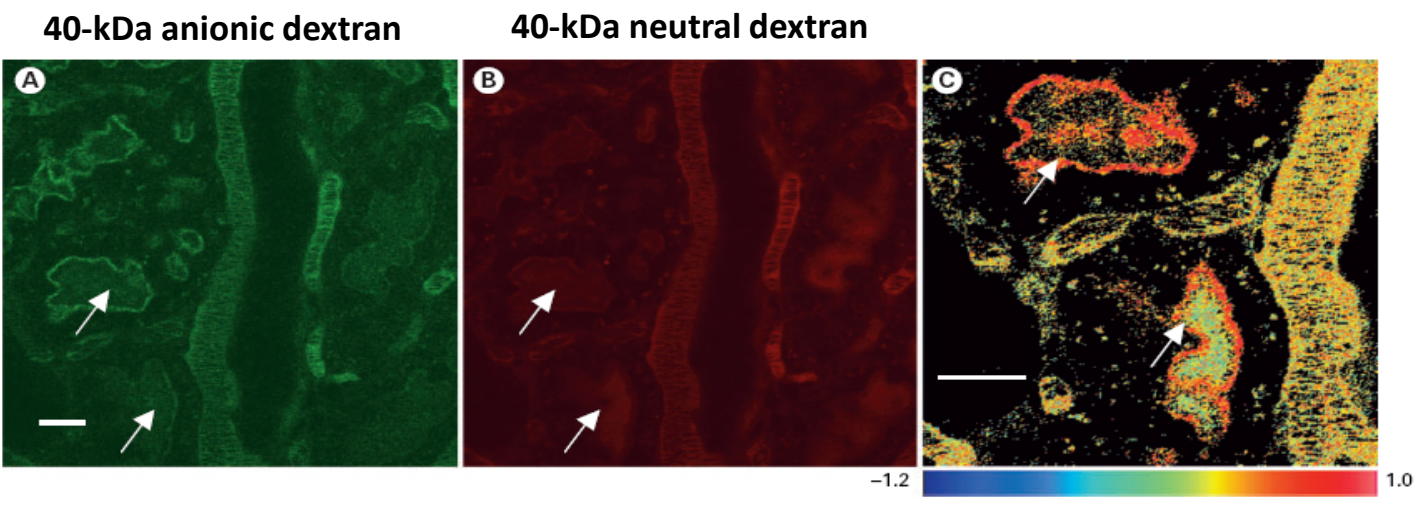




**Texas Red Gentamicin, 10,000 MW Cascade Blue Dextran  
24 hr post injection**

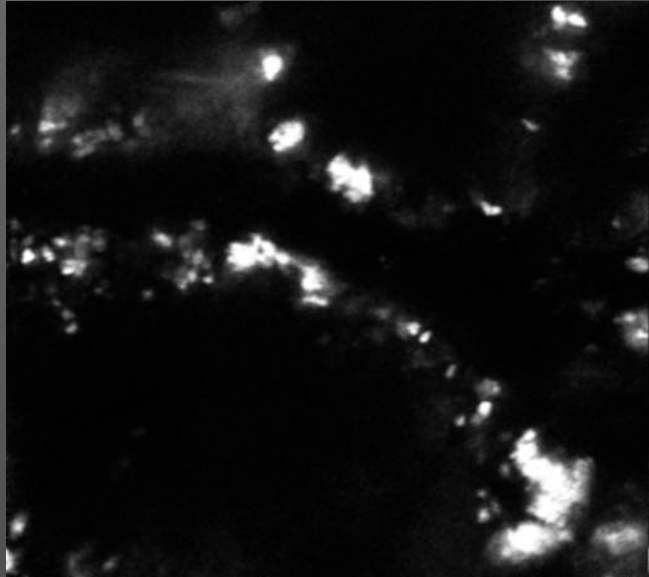


# Proximal Tubule Uptake Explains Differential Filtration



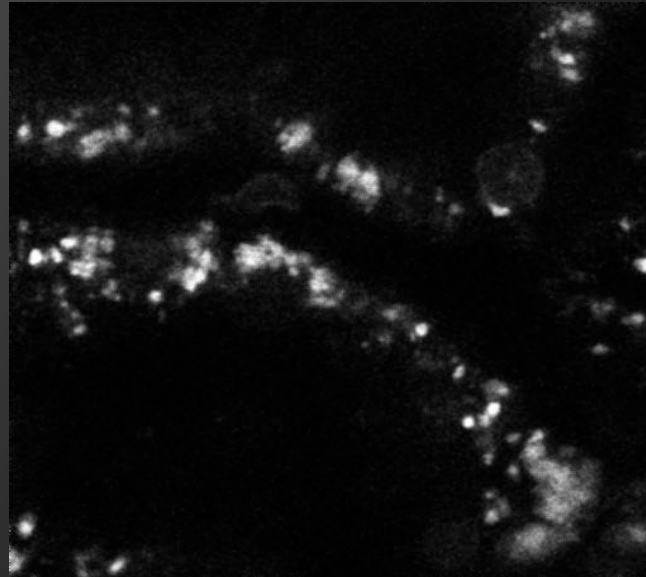
# Evaluating for Functional Impairment

Red Channel Alone



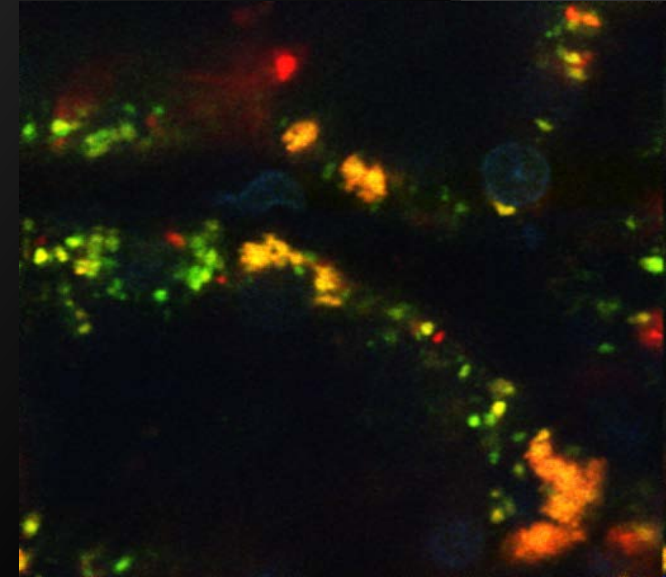
TAMRA Oligo (red)

Green Channel Alone



Beta-2-microglobulin  
(green)

Color Combine



Long Term 25mg/Kg 10% TAMRA 24Hrs Post Injection of  $\beta$ 2M



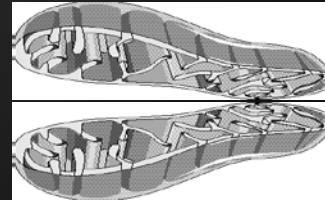
Ischemia



GTP ↓



p53



Cyto c



Caspases



Apoptosis

guanosine



Pifithrin



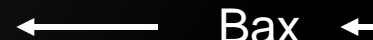
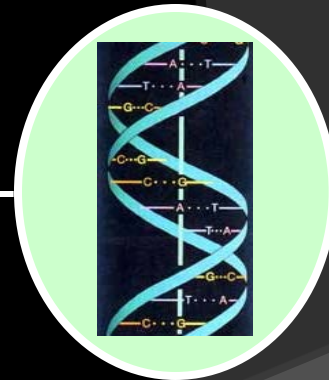
minocycline



siRNA to p53



Bax



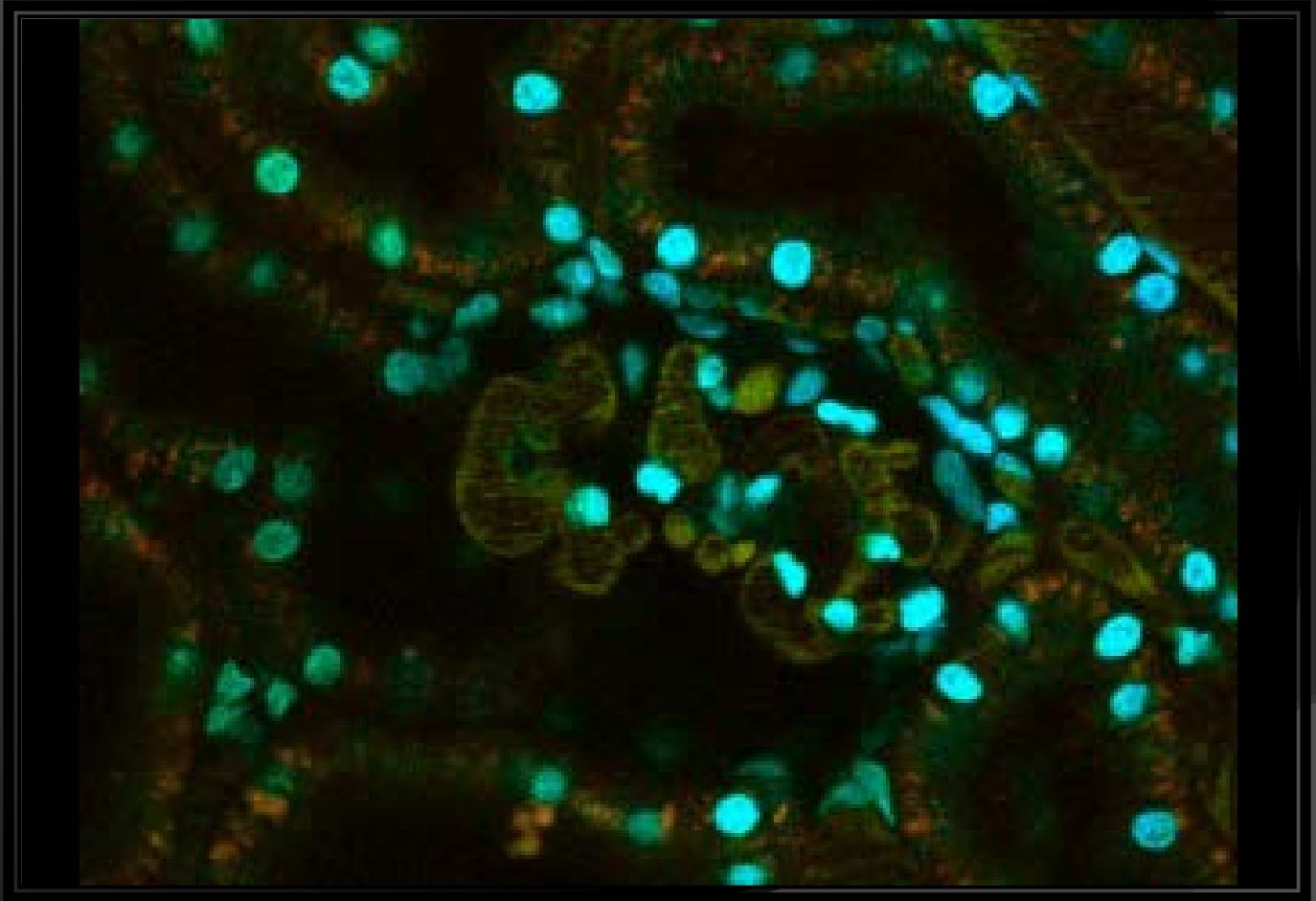
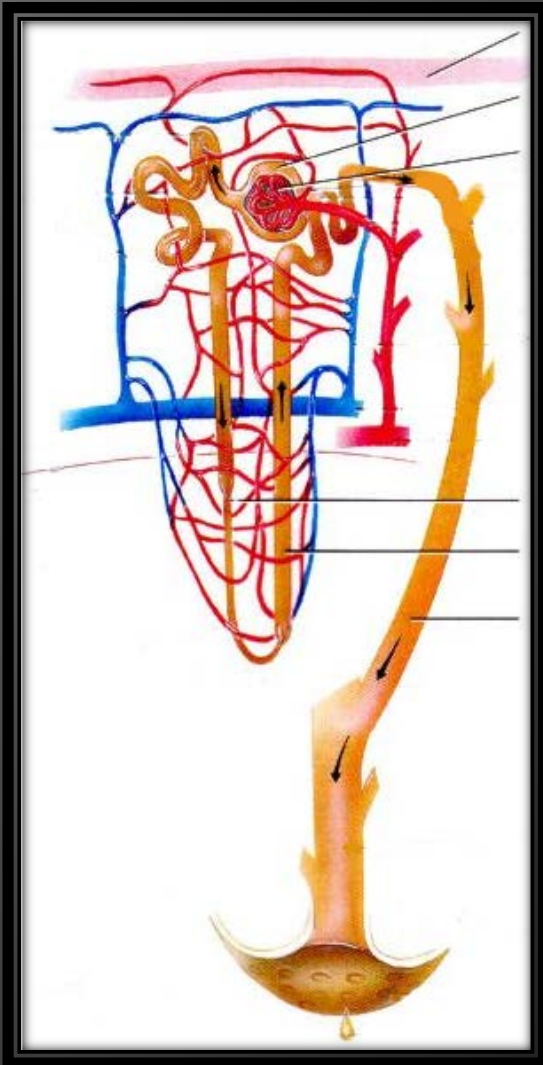
caspase inhibitors



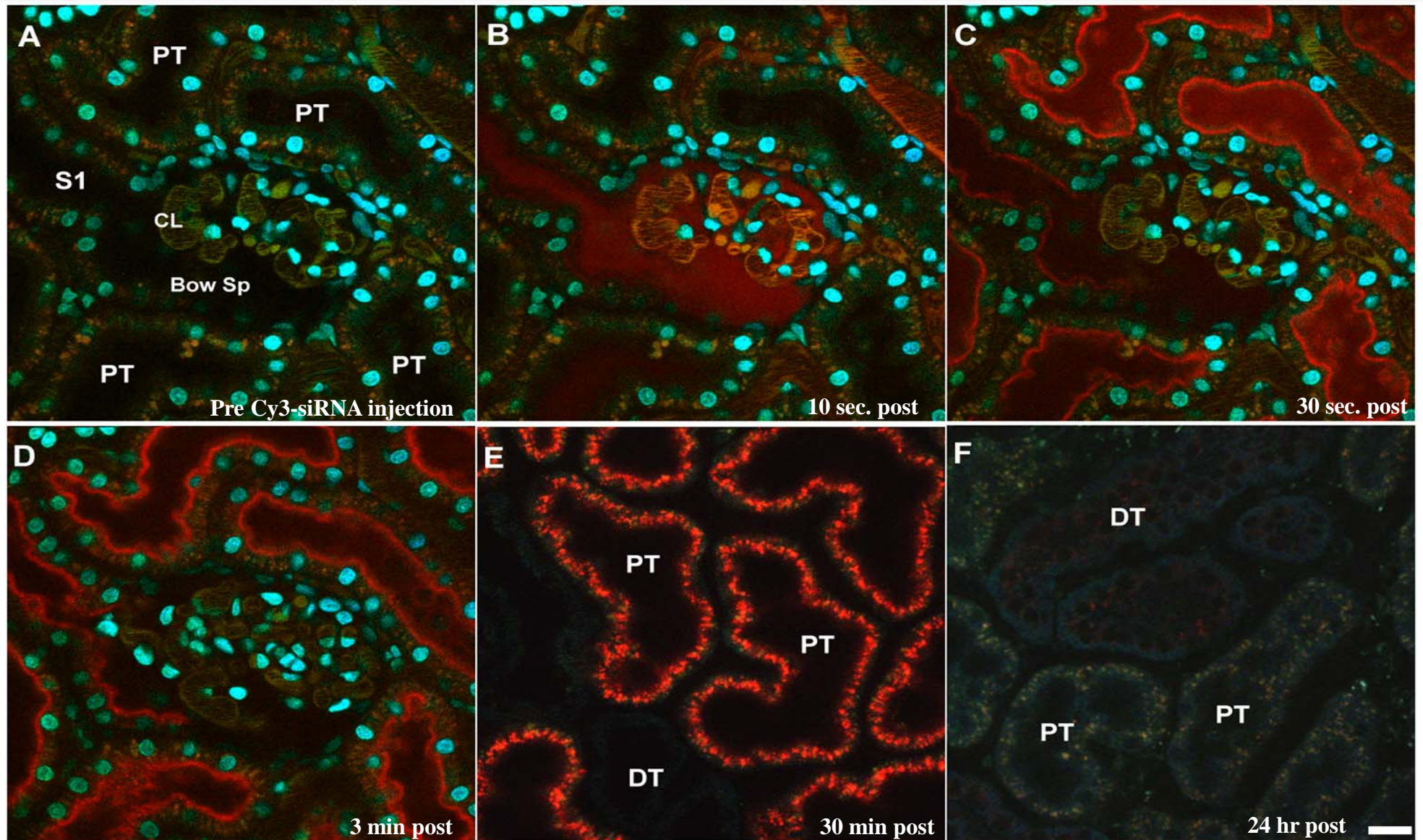
Inflammation

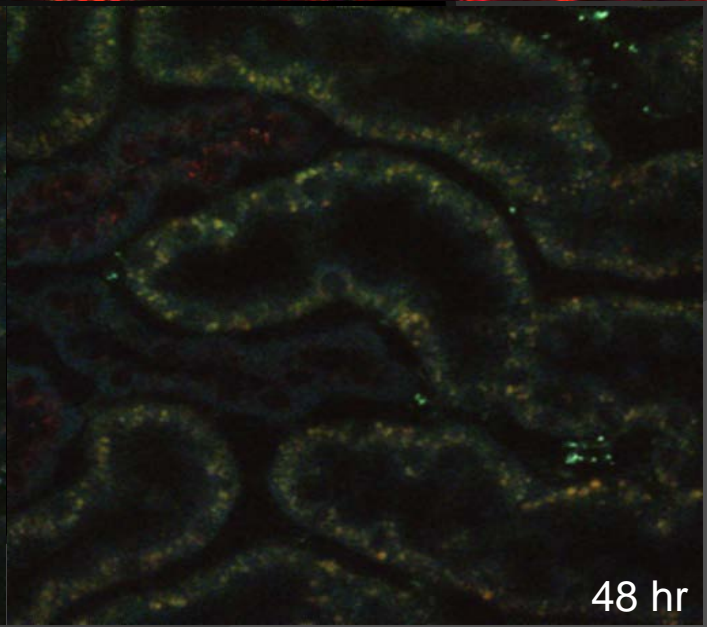
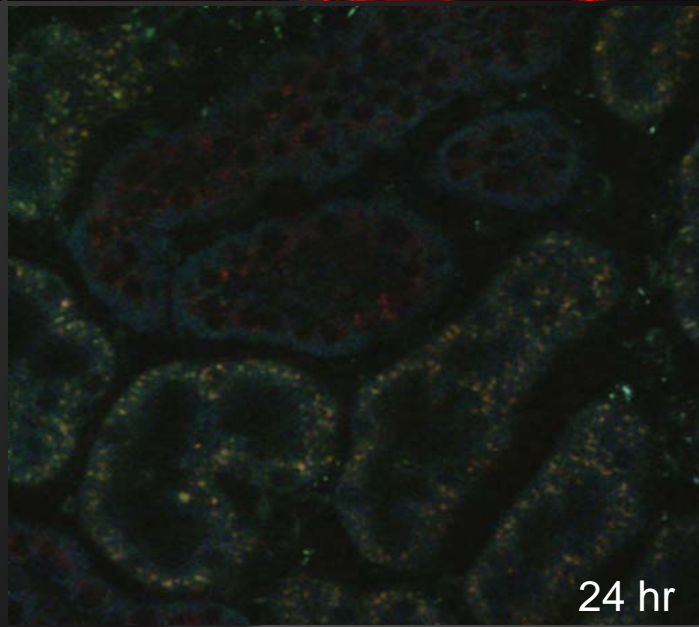
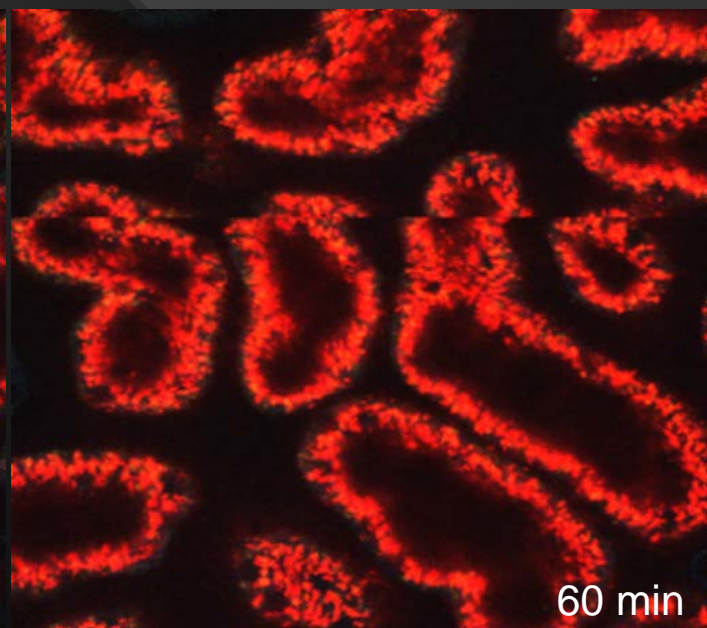
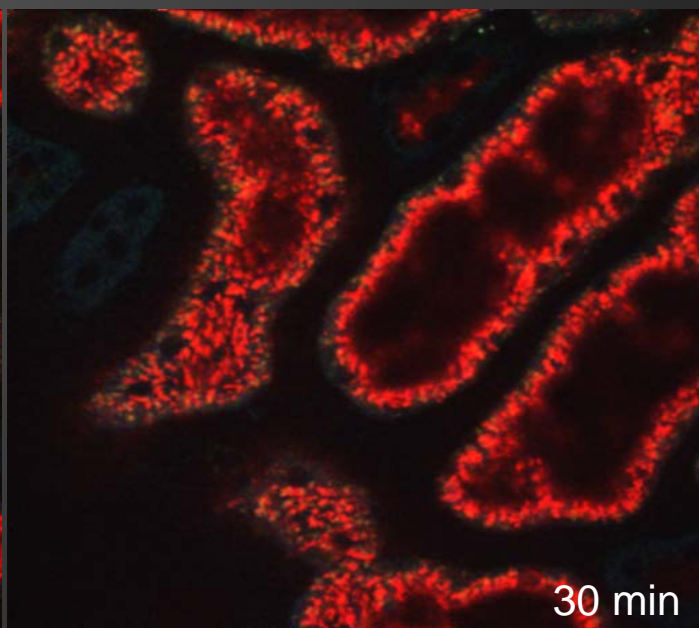
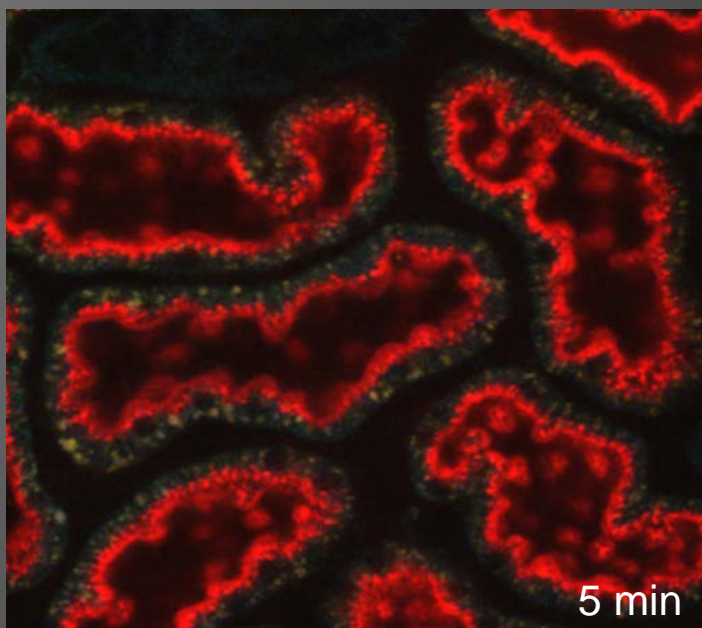


# Cy3-siRNA Filtration and Reabsorption by PTCs

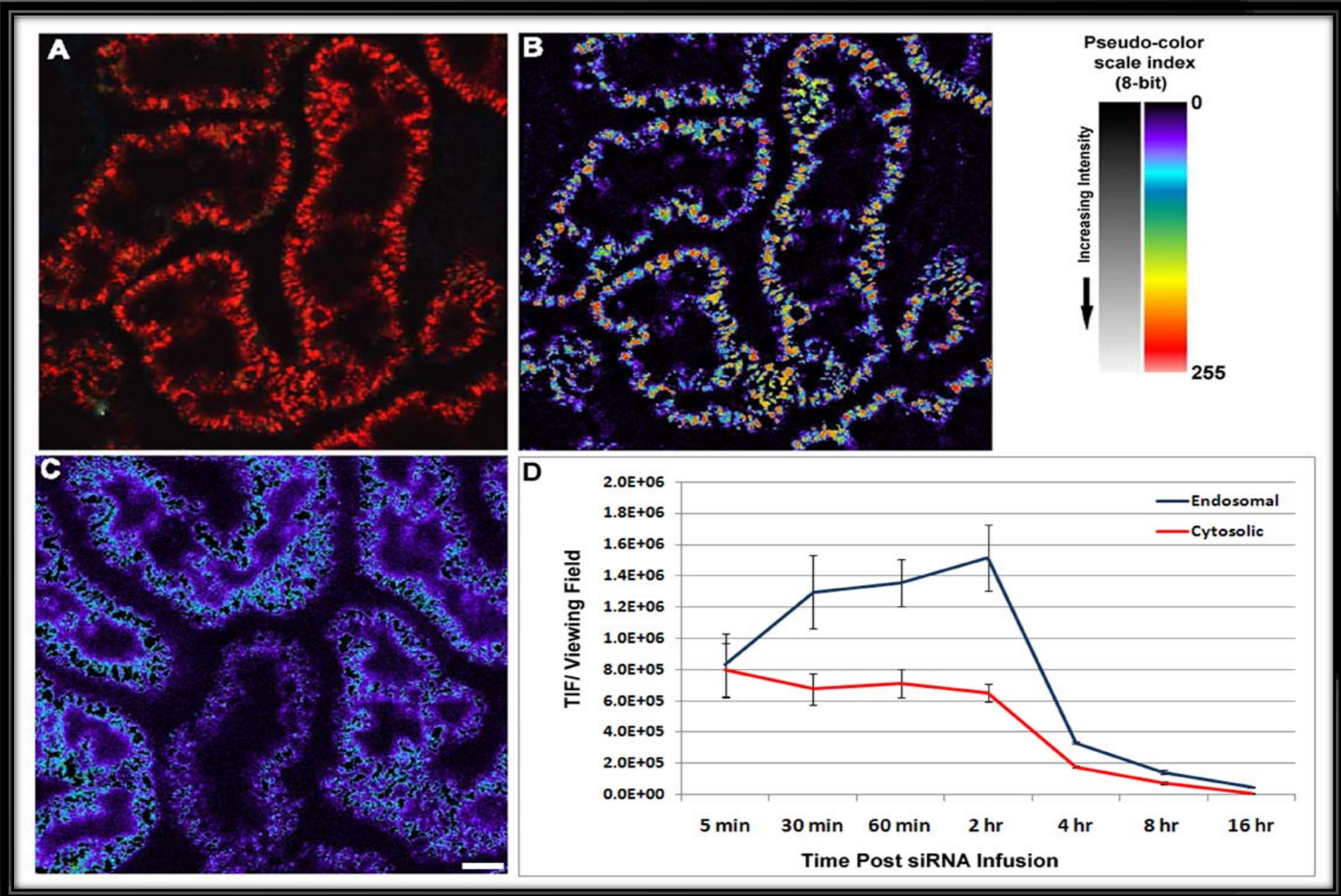


# PTC Uptake and Metabolism of Cy3-siRNA

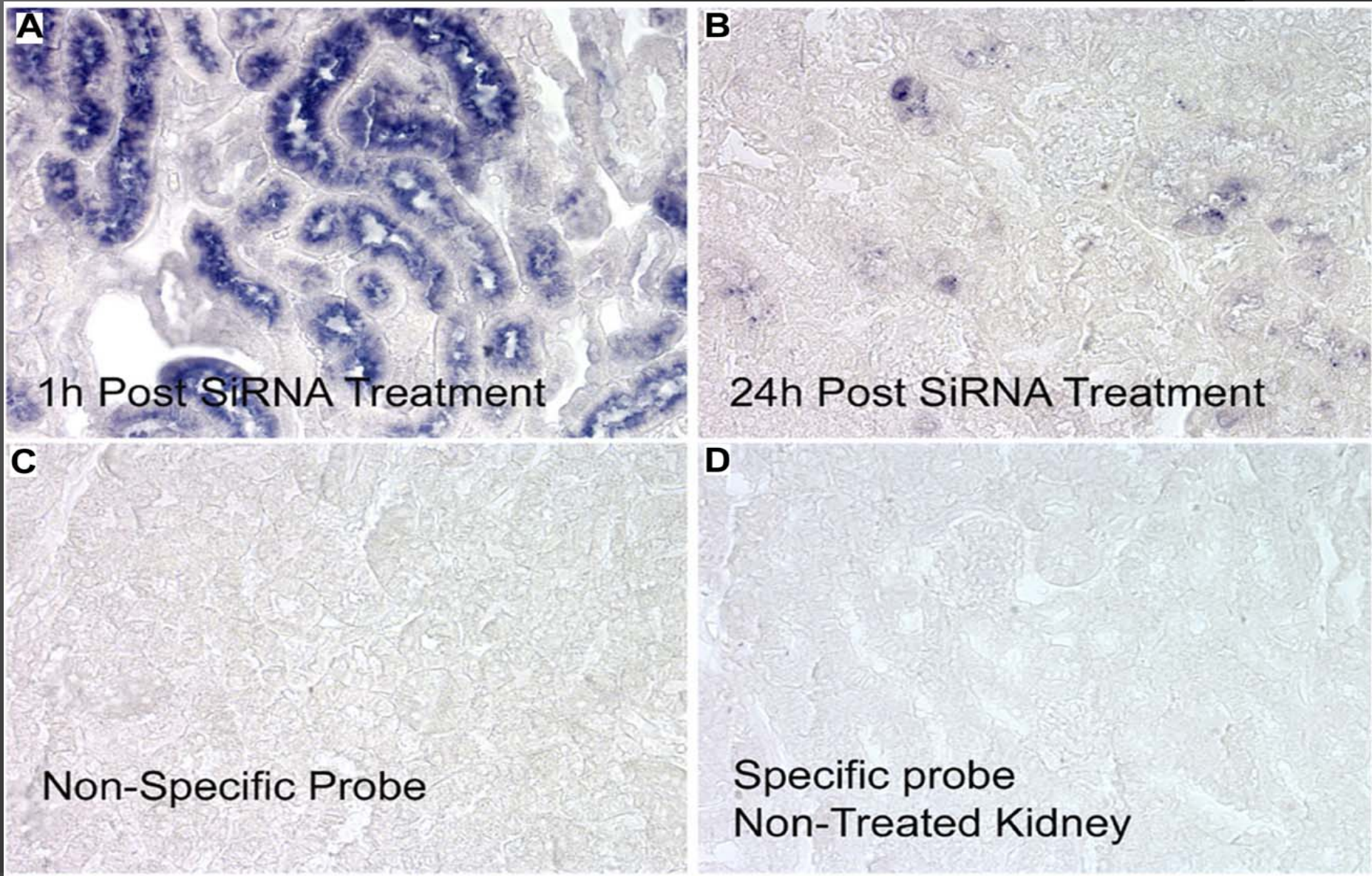


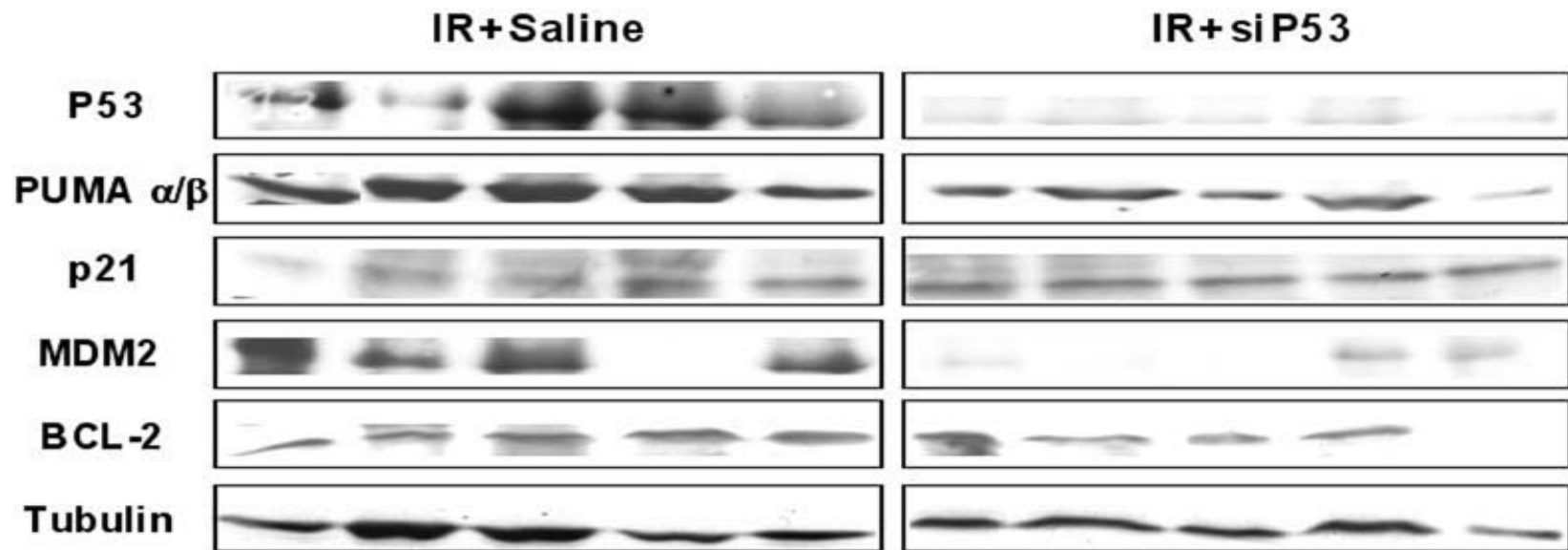
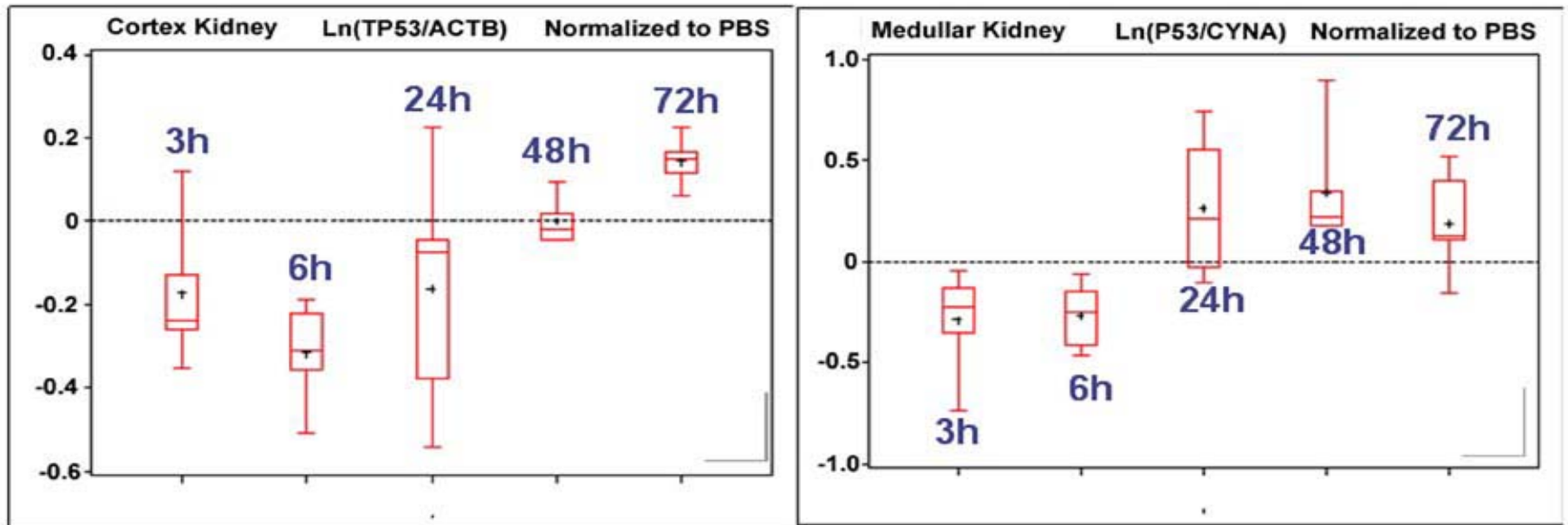


# Quantifying Vesicular vs Cytosolic Cy3-siRNA in PTCs

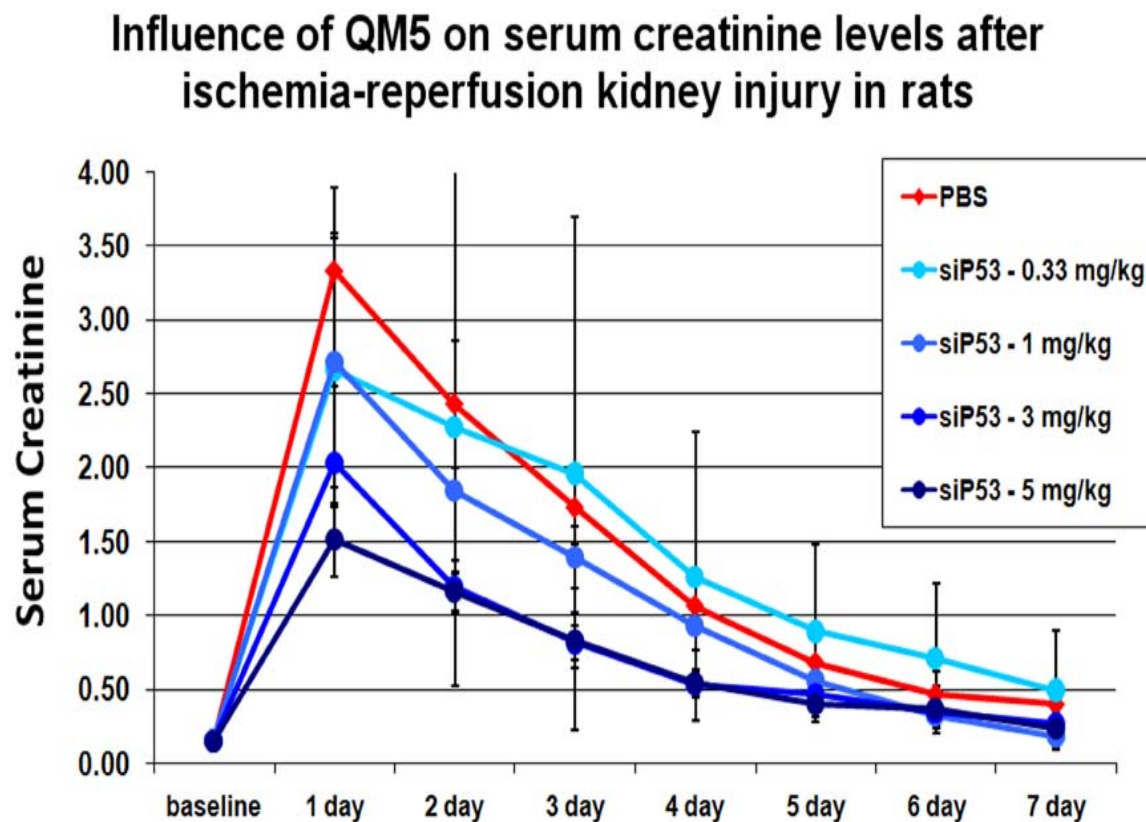
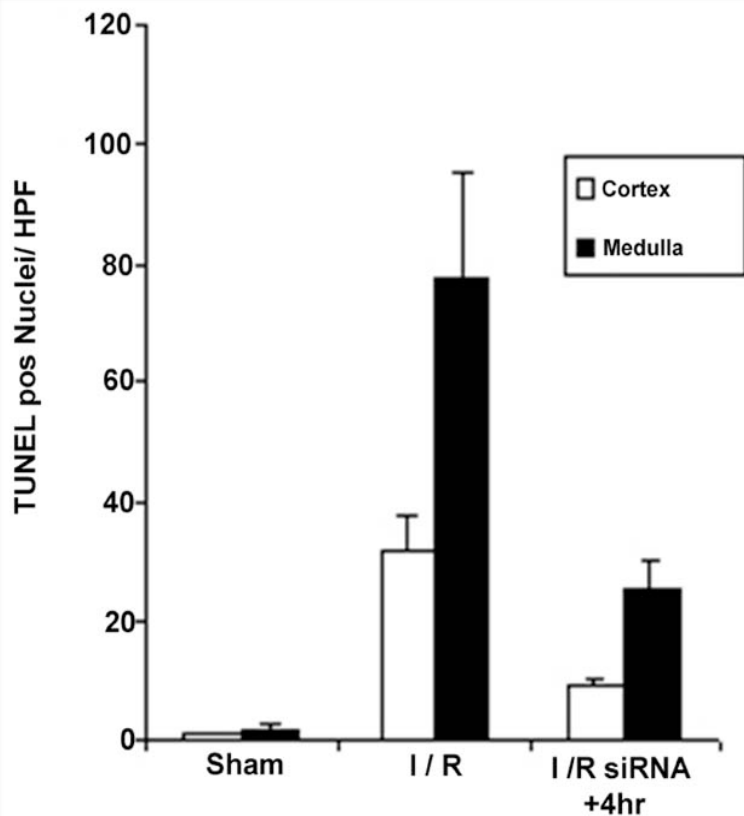


# Rapid Metabolism of siRNA in PTC by In situ Hybridization



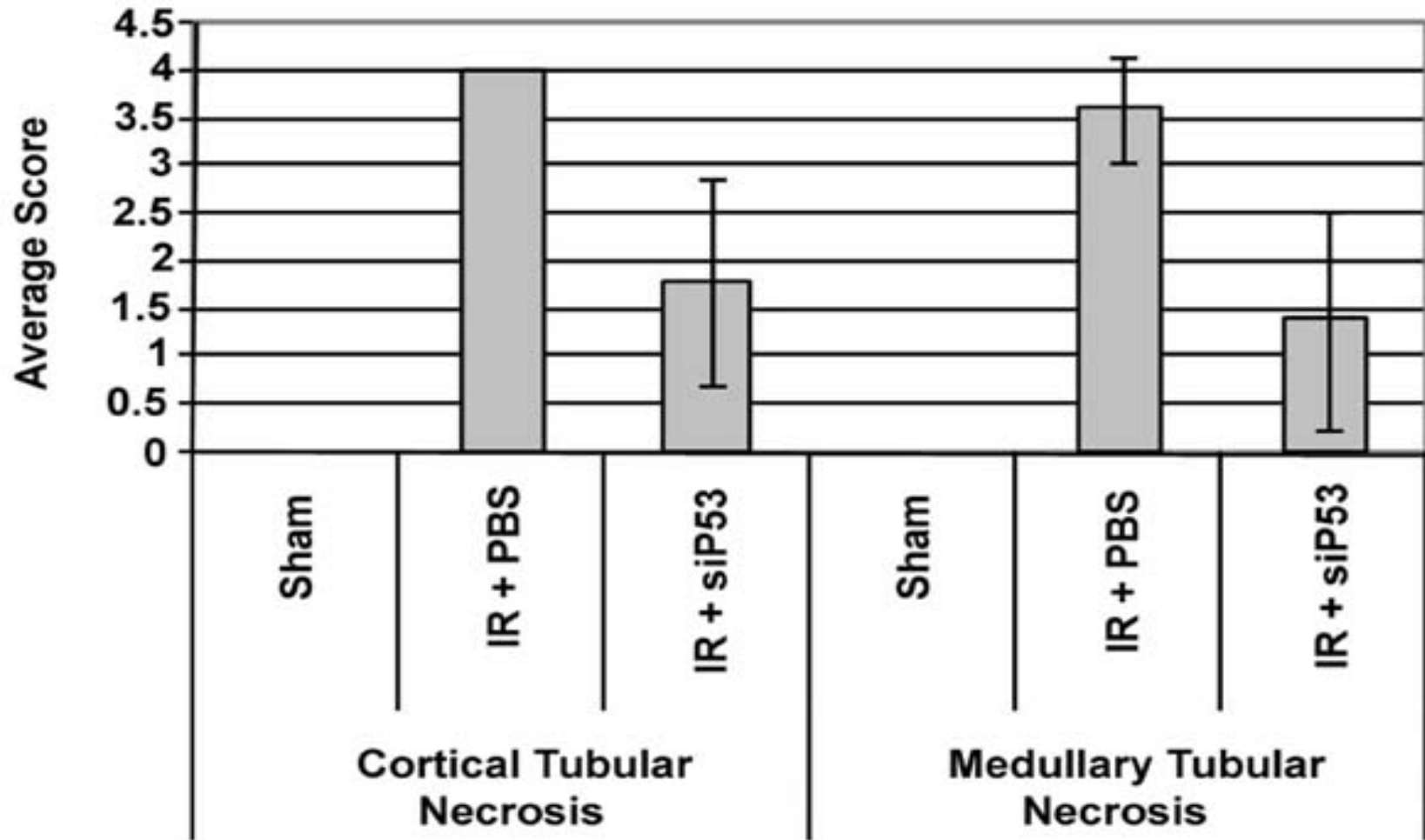
**A****B**

# Effect of siRNA to P53 on Expression, Apoptosis and Kidney Function

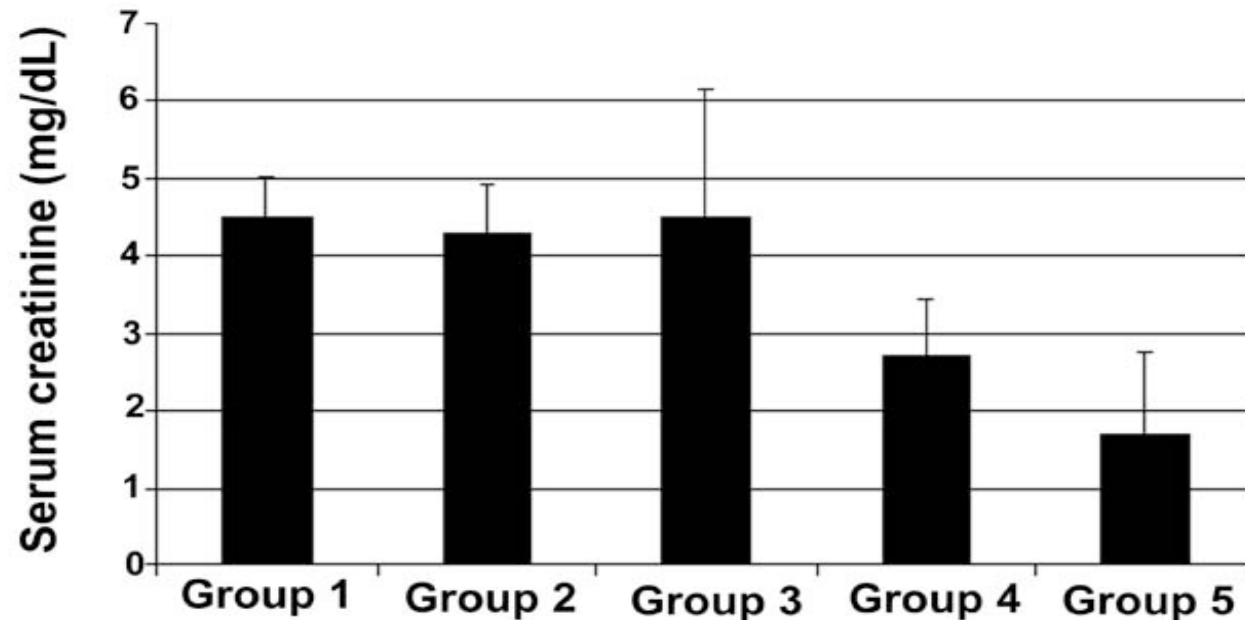
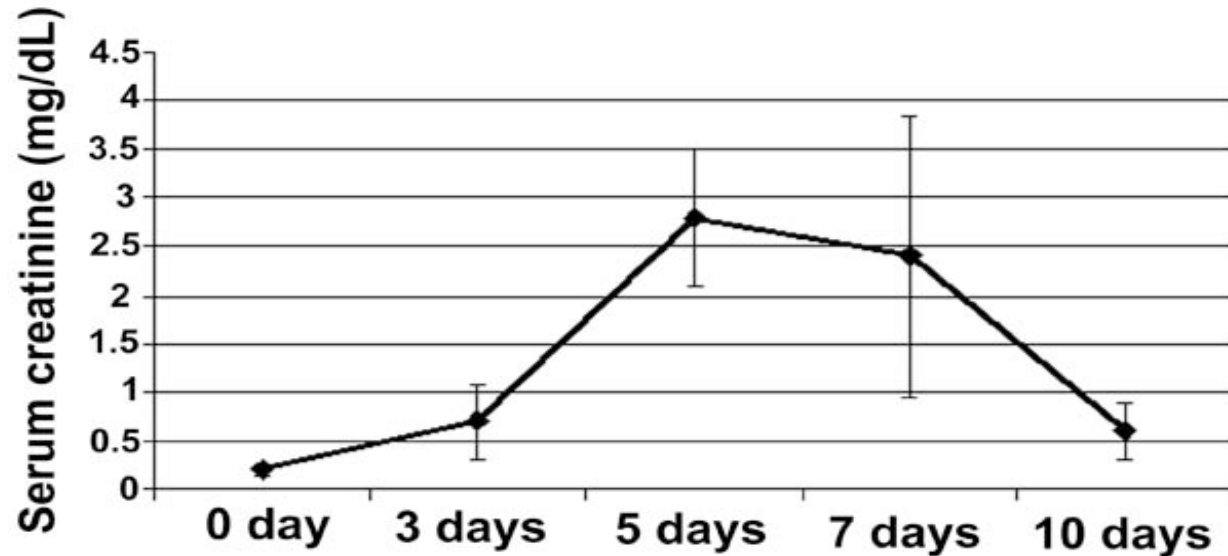




## Acute Kidney Injury Morphological Scoring



# siP53 Protects Against Cisplatin Induced Kidney Injury

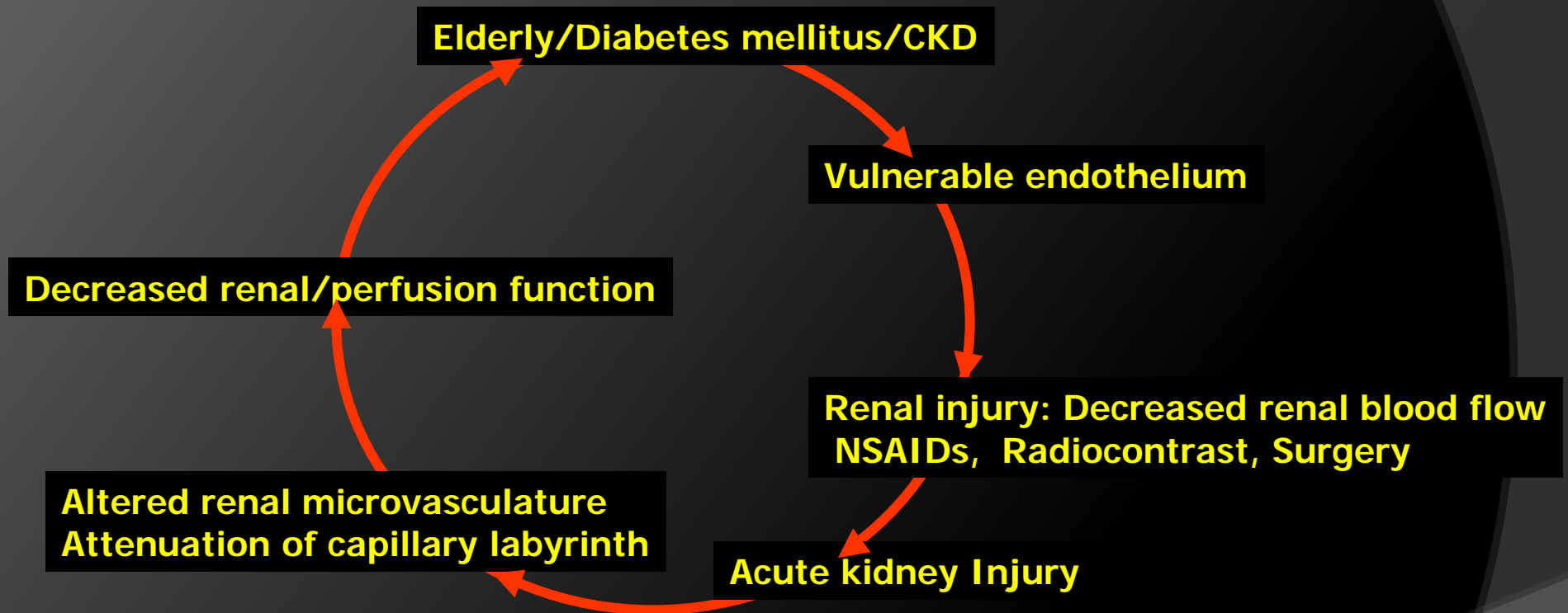


**Time Course of Injury Without Therapy**

**Effect of siP53 Therapy at Day 5**

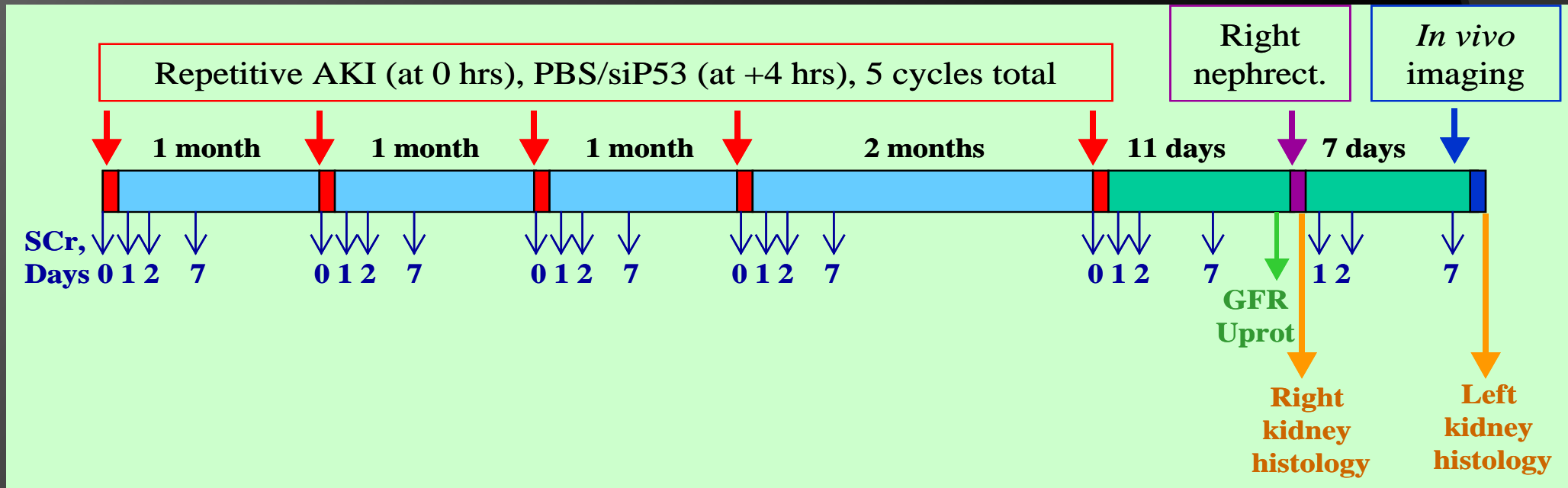
- Group 1 No Therapy
- Group 2 12 mg/Kg 30 prior to cisplatin
- Group 3 siP53 4 hours post cisplatin
- Group 4 Group 2 plus Doses on Days 2,3
- Group 5 Group 3 plus Doses on Days 2,3

# A vicious cycle

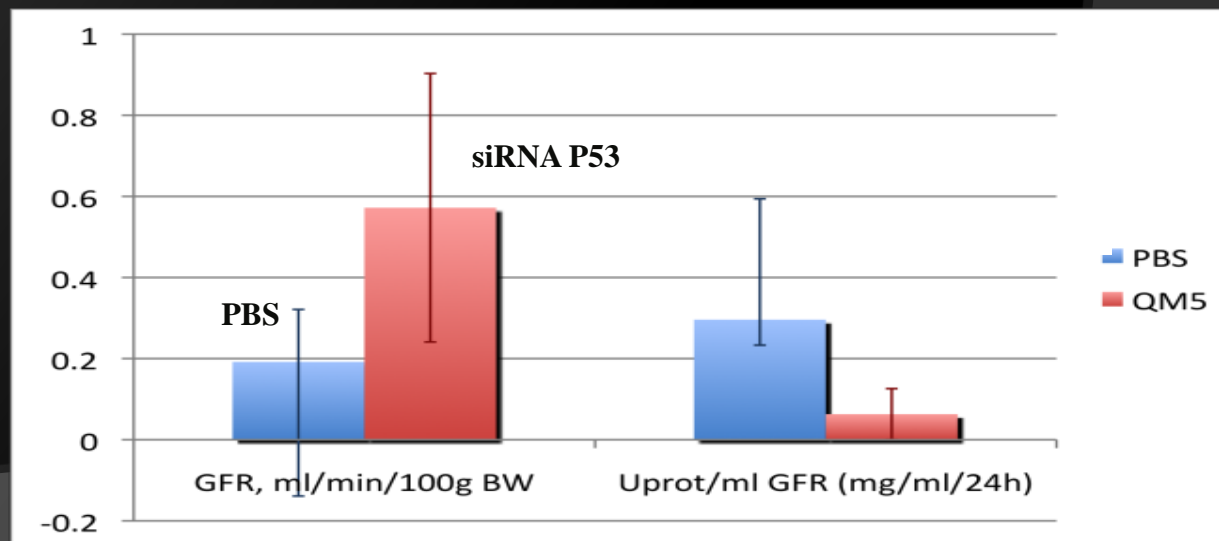
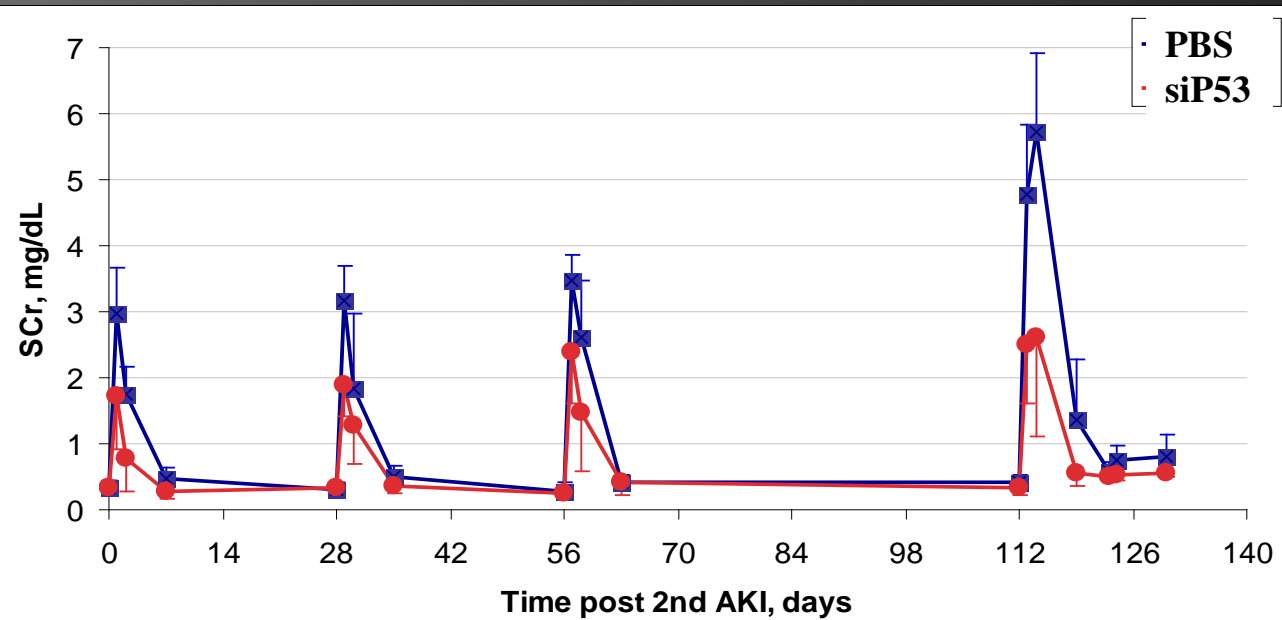


# Study 1. Repetitive AKI

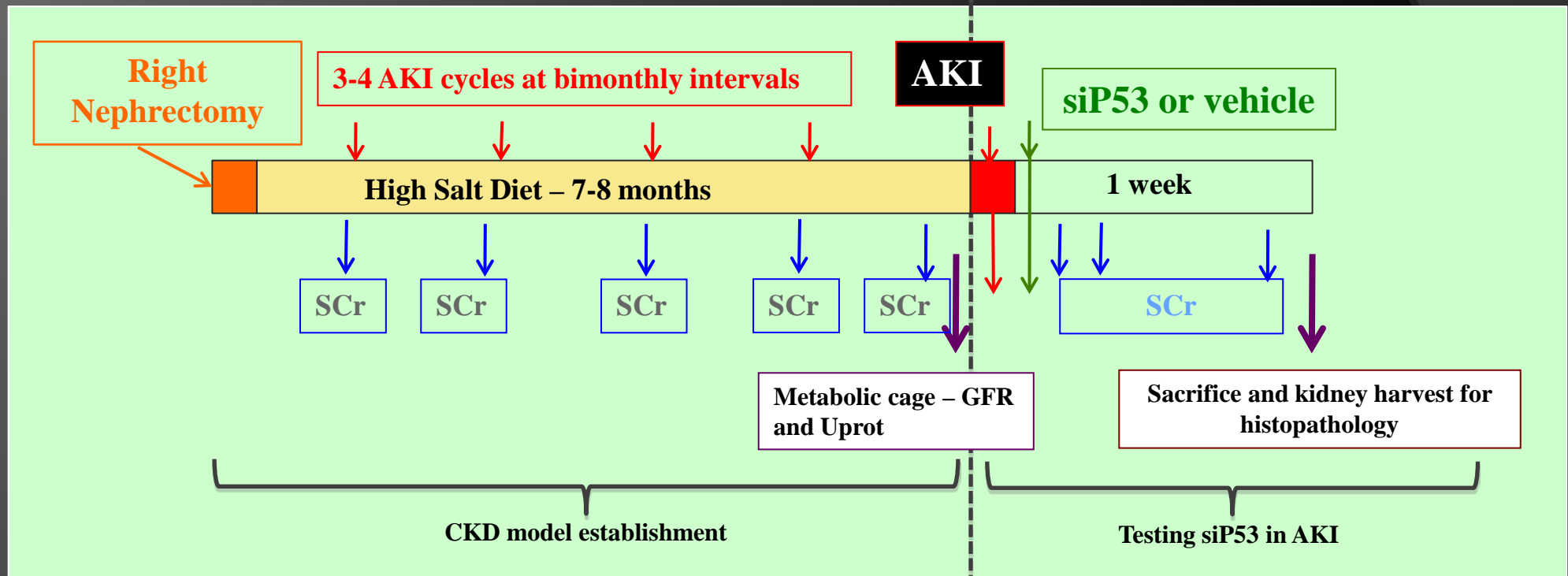
Rationale and Study Design:



# siP53 Protects GFR and Minimizes Proteinuria



# Study 2. siP53 in pre-existing CKD

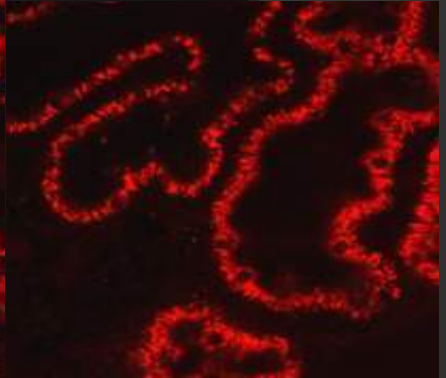
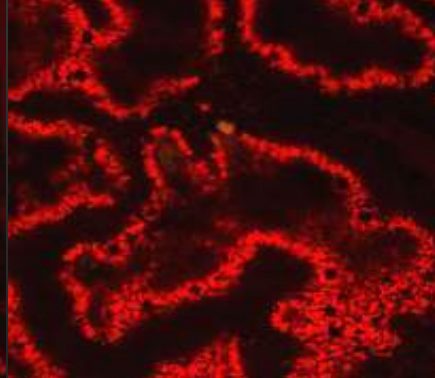
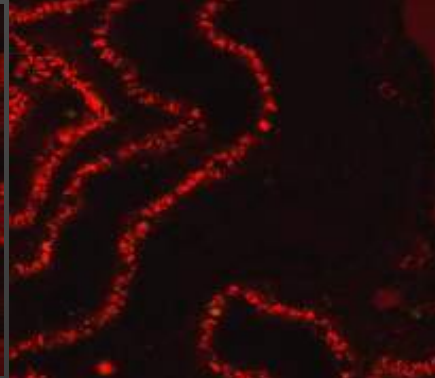
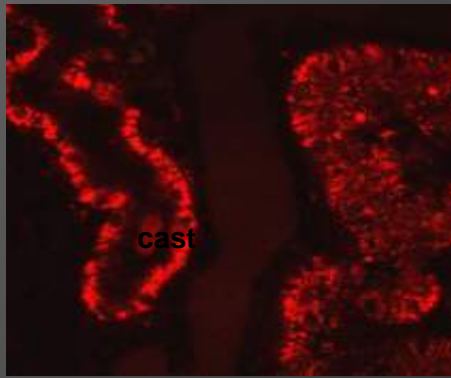


	SCr, mg/ml	GFR, ml/min/100g BW	Uprot, mg/24h
Normal rats (historical and published data)	0.2-0.3	0.8-0.9*	
Uninephr rats after 3 AKI cycles (N=3), HS diet	1.13 ± 0.05	0.16 ± 0.03	221 ± 21
Uninephr rats after 4 AKI cycles (N=4), HS diet	0.98 ± 0.17	0.19 ± 0.03	646 ± 160

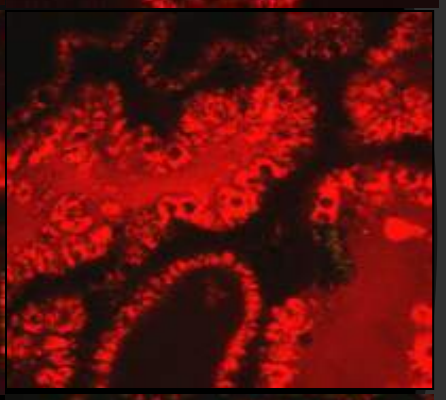
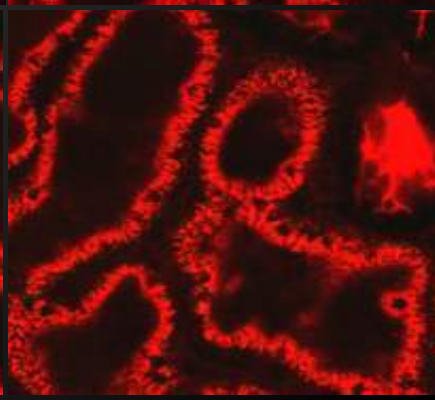
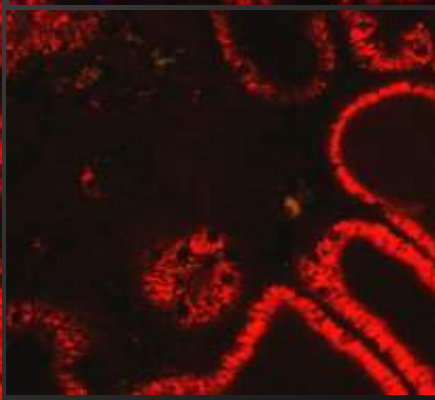
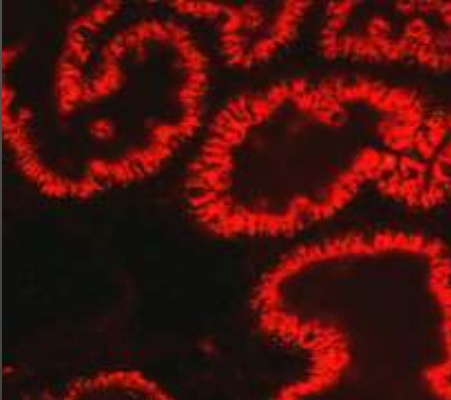
Proteinuric CKD model

# siRNA is Reabsorbed by PTC in CKD Proteinuric Rats

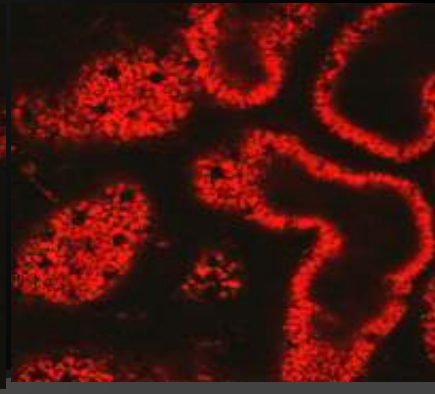
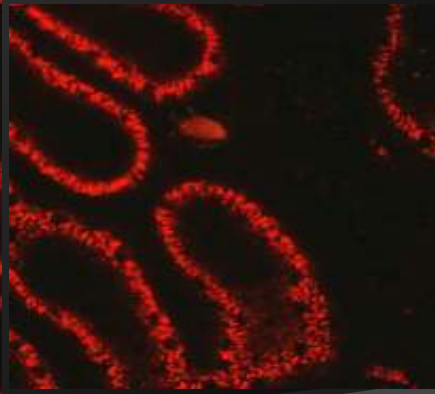
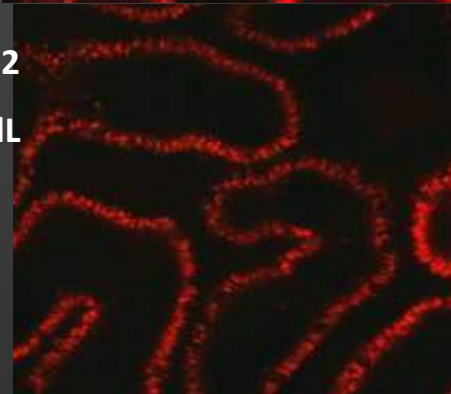
Rat1-  
Normal  
SCr 0.4  
mg/dL



Rat6-  
Group1  
SCr 1.2  
mg/dL  
Saline

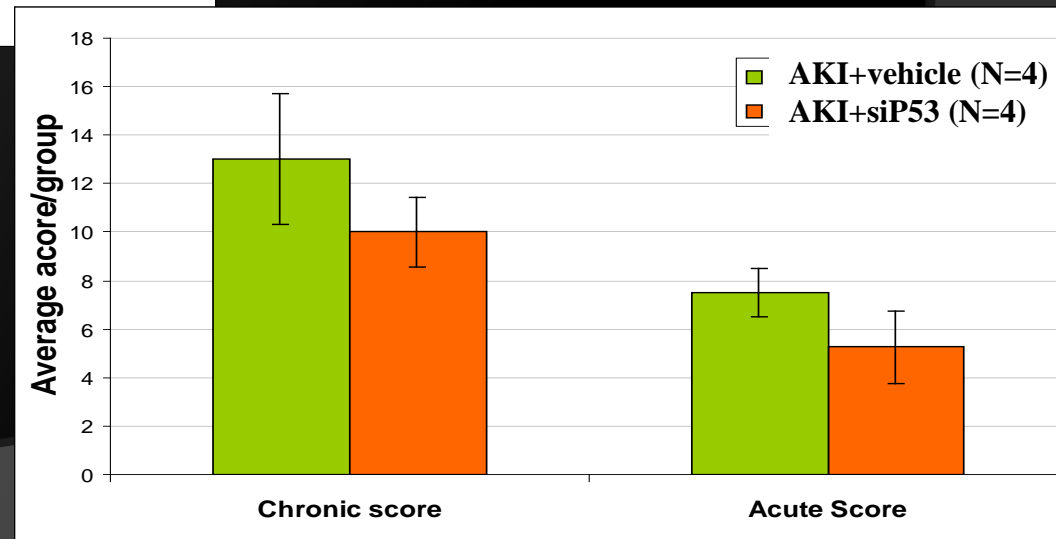
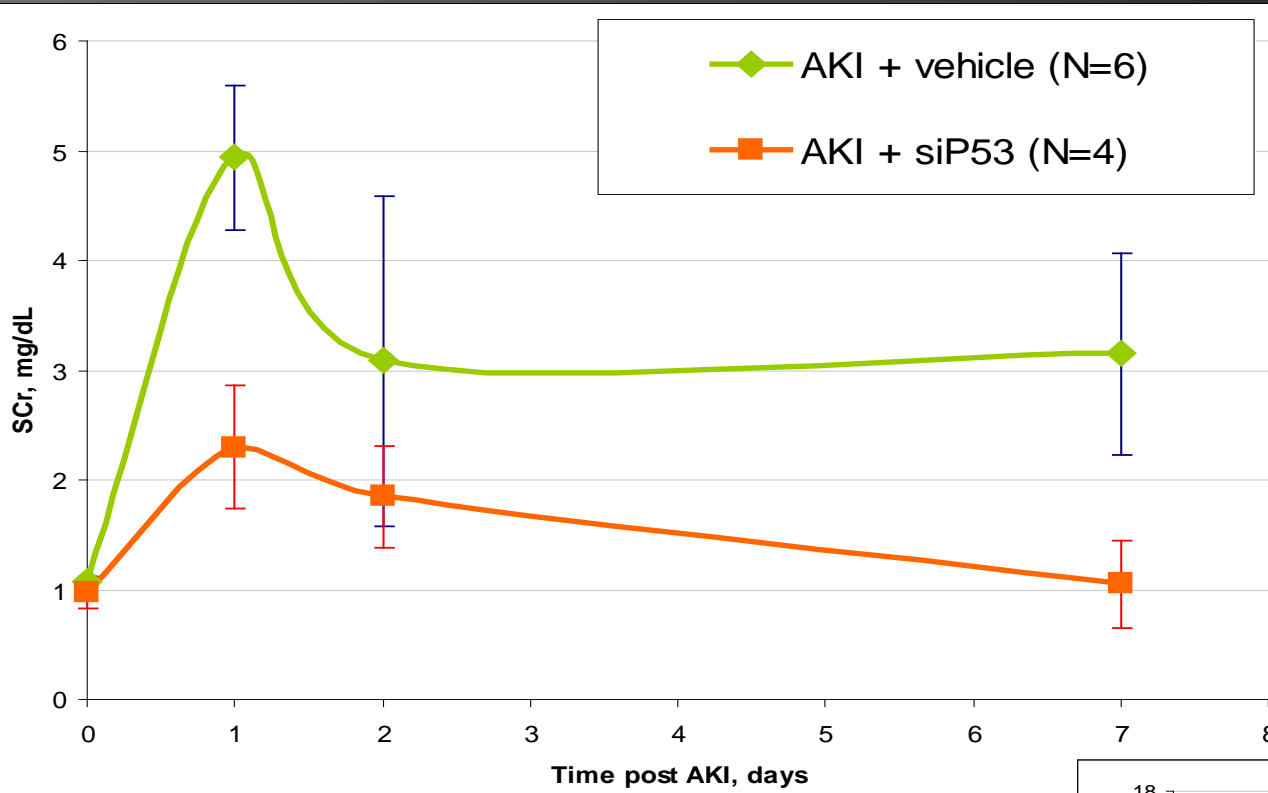


Rat7- Group2  
SCr 0.6mg/dL  
QM5



0.9mg Cy3-siRNA 1 hr post Injection Cy3-siRNA

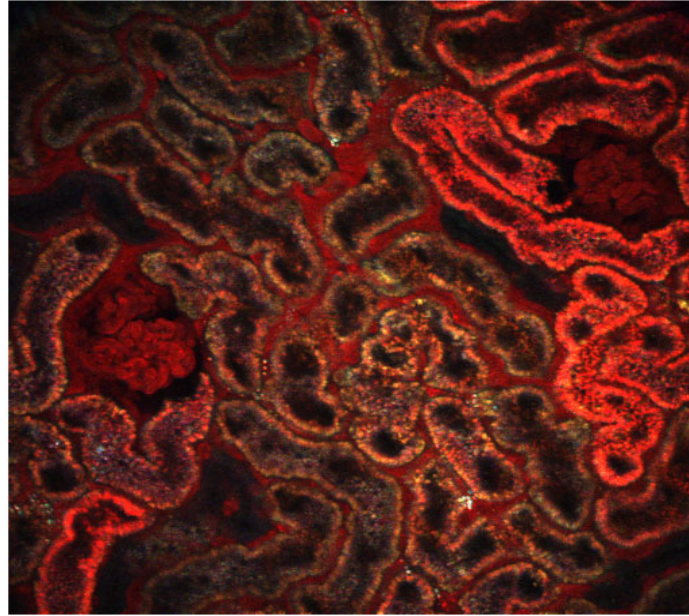
# siP53 Attenuates AKI in pre-existing CKD



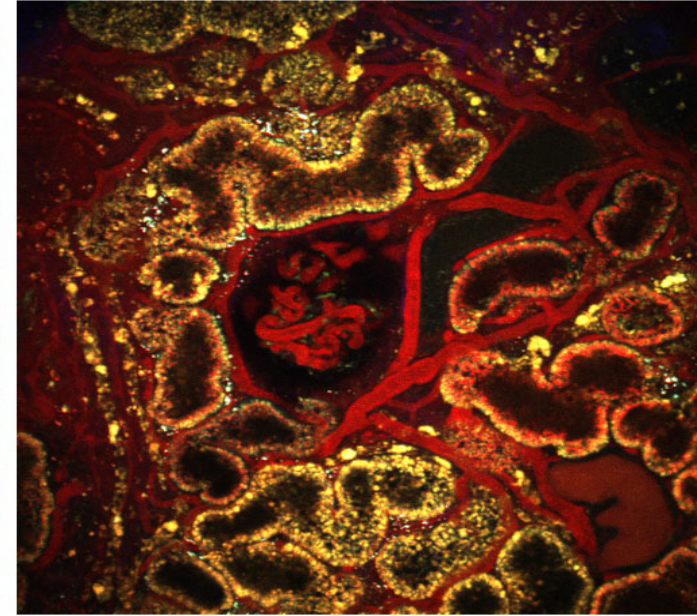


# Proteinuric Model Post AKI and Atrophy

Untreated



CKD

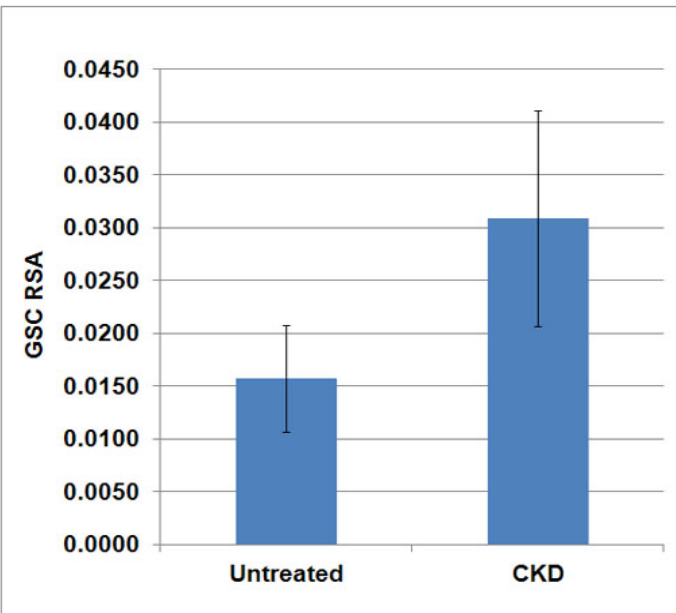


**Male MW-F CKD rats,**

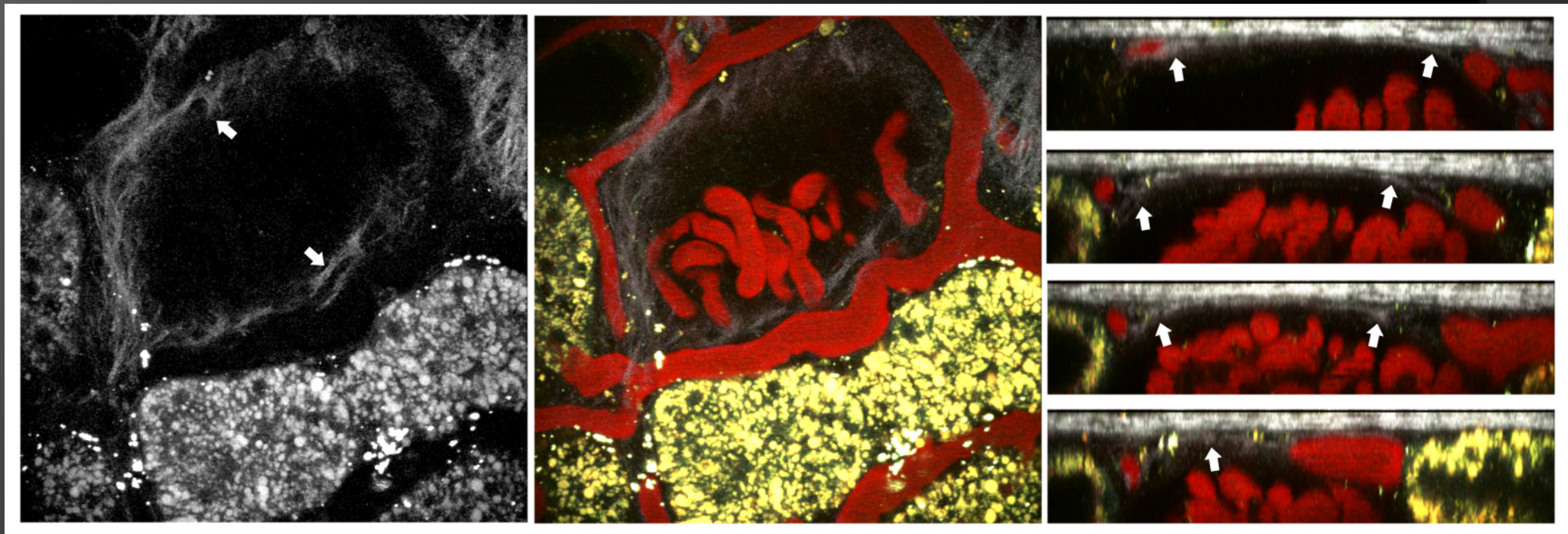
**Mean SCr 1.4 (n=3)**

**GFR 0.18 ml/min/100g**

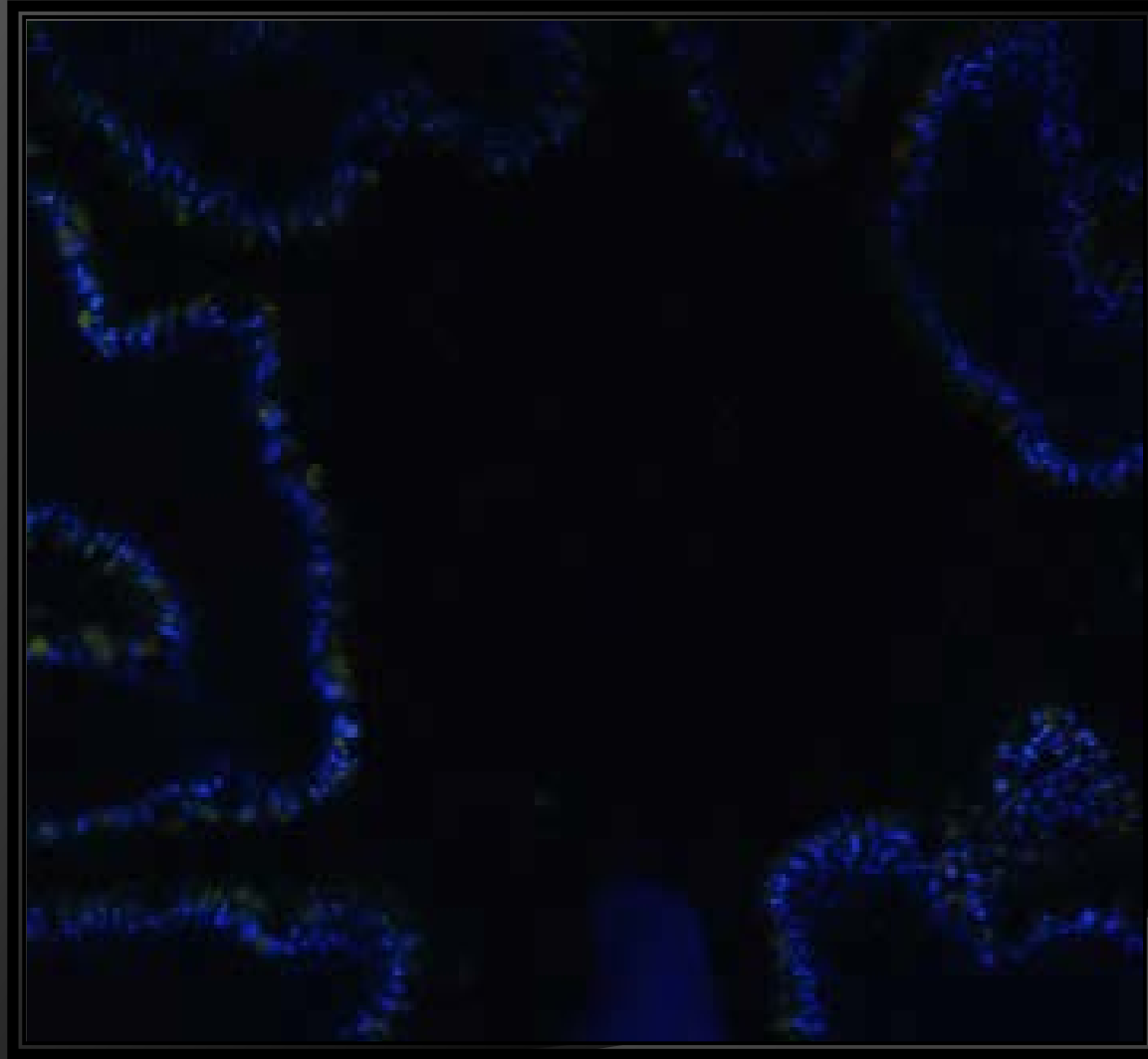
**Uprot 230 mg/24 hr**



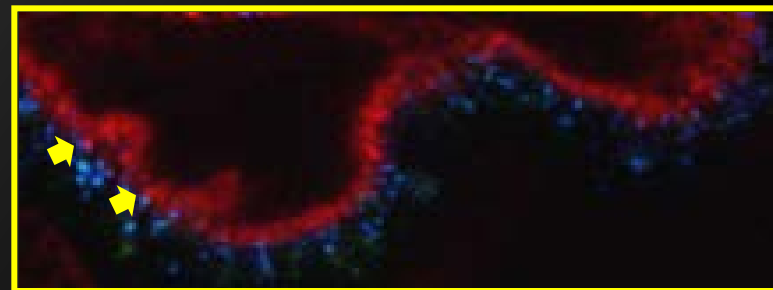
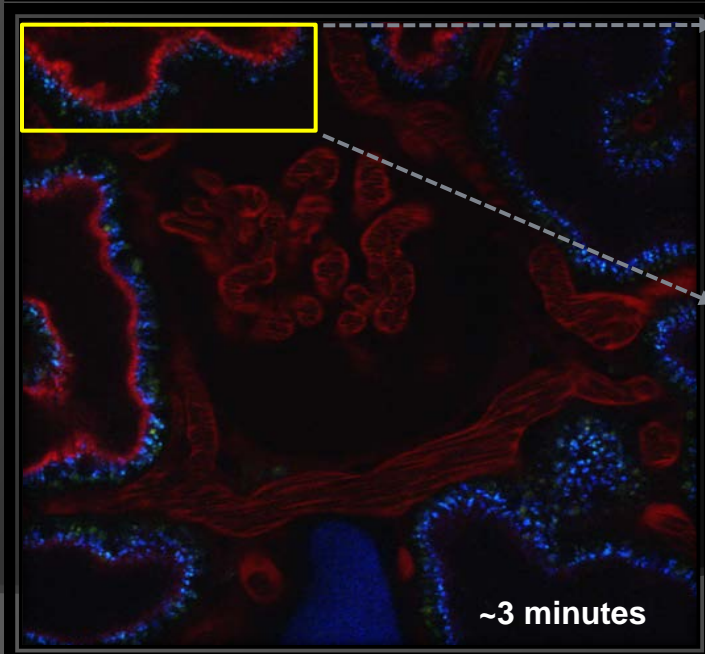
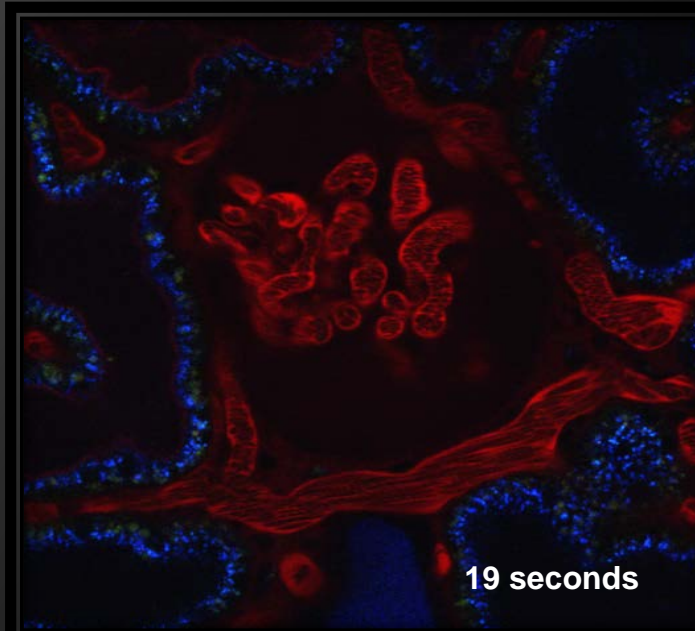
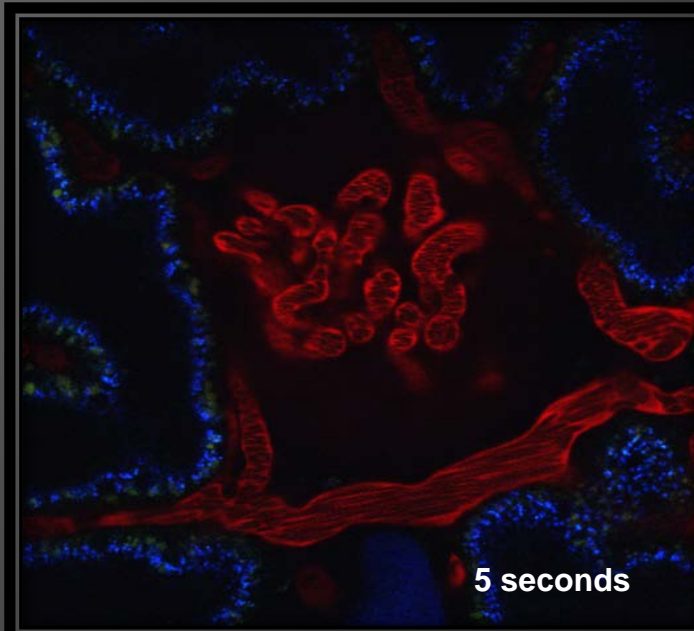
# Intravital Delineation of Fibrosis



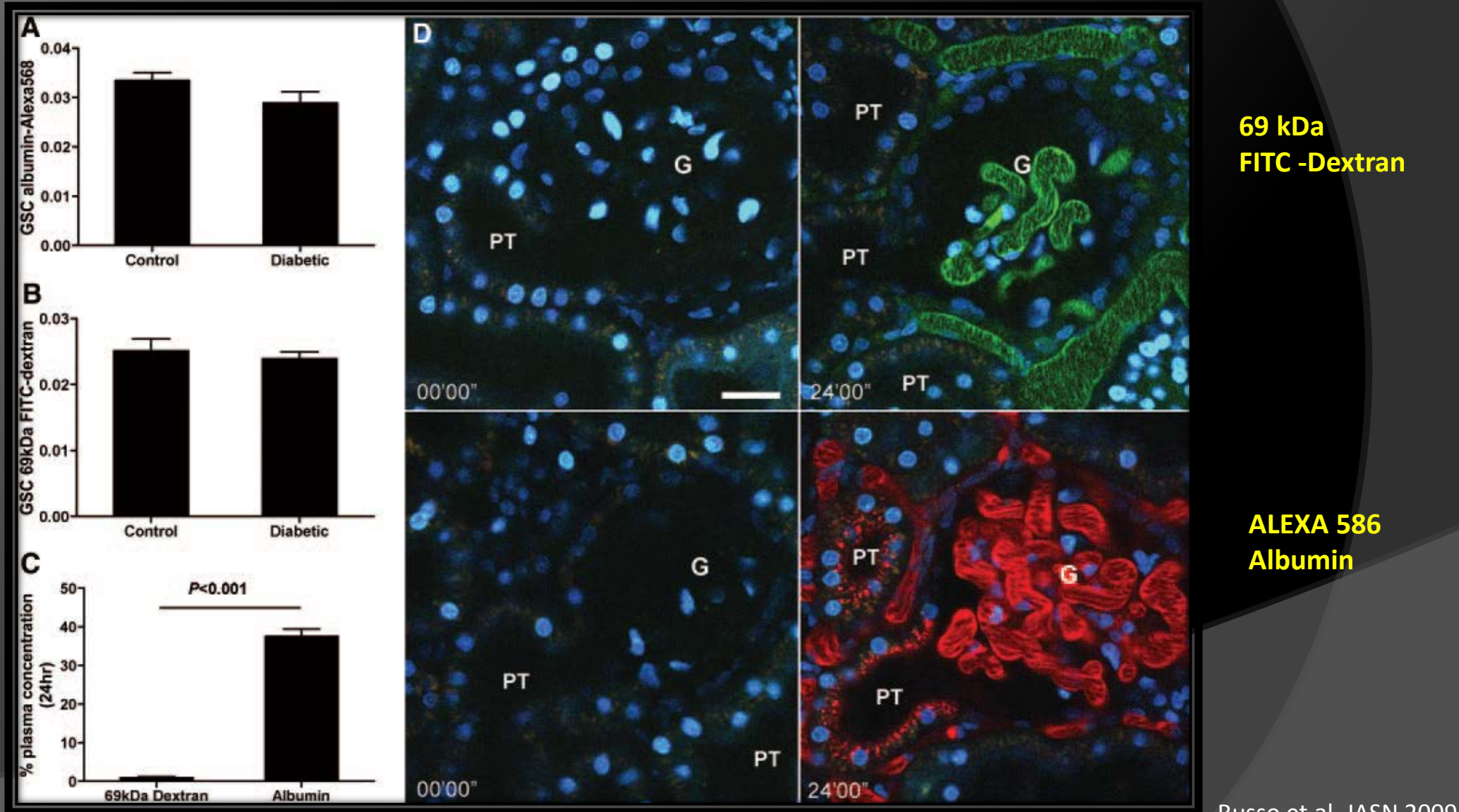
# Albumin Filtration and Reabsorption in the Rat



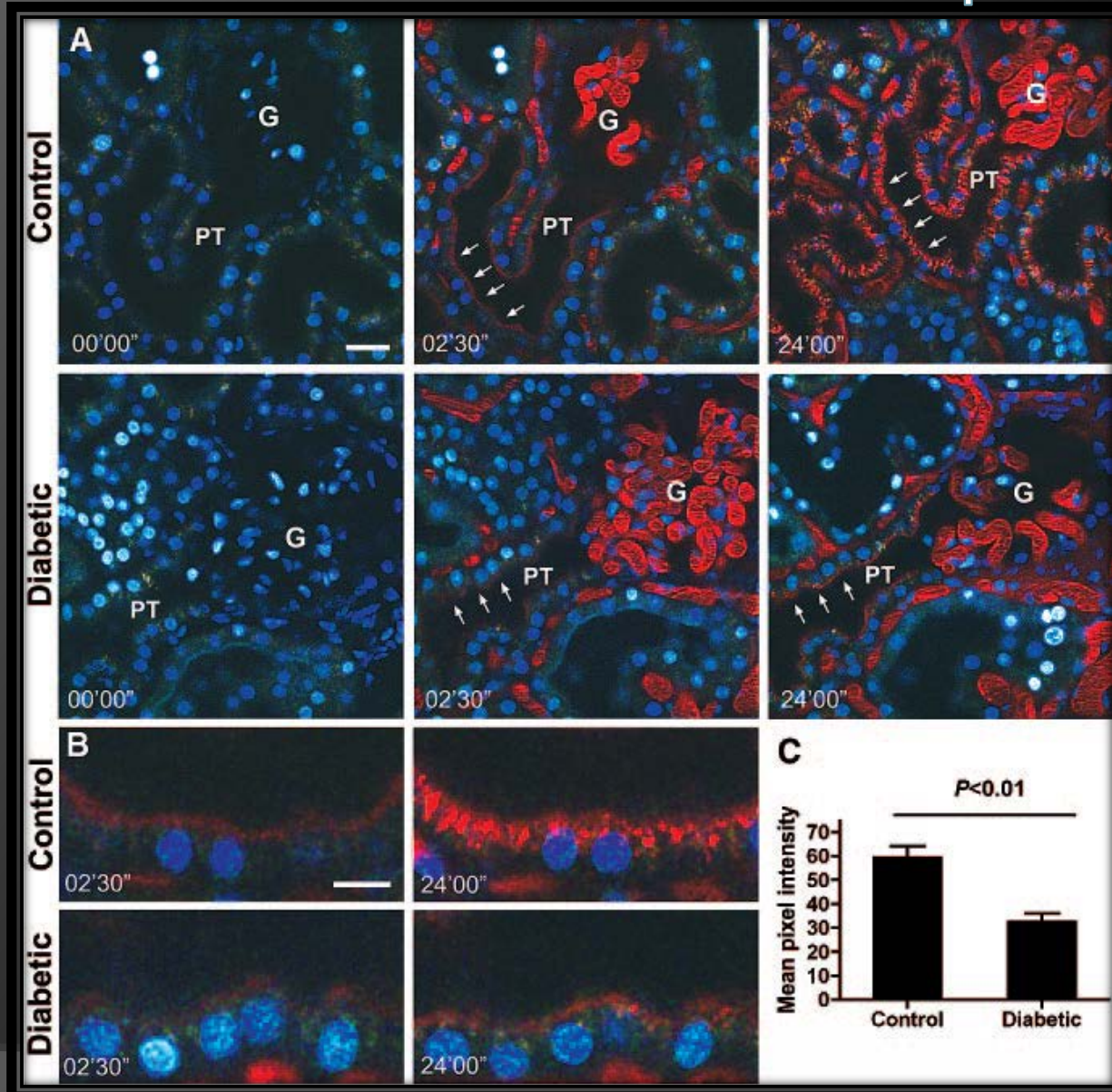
# Albumin Filtration and Reabsorption in the Rat



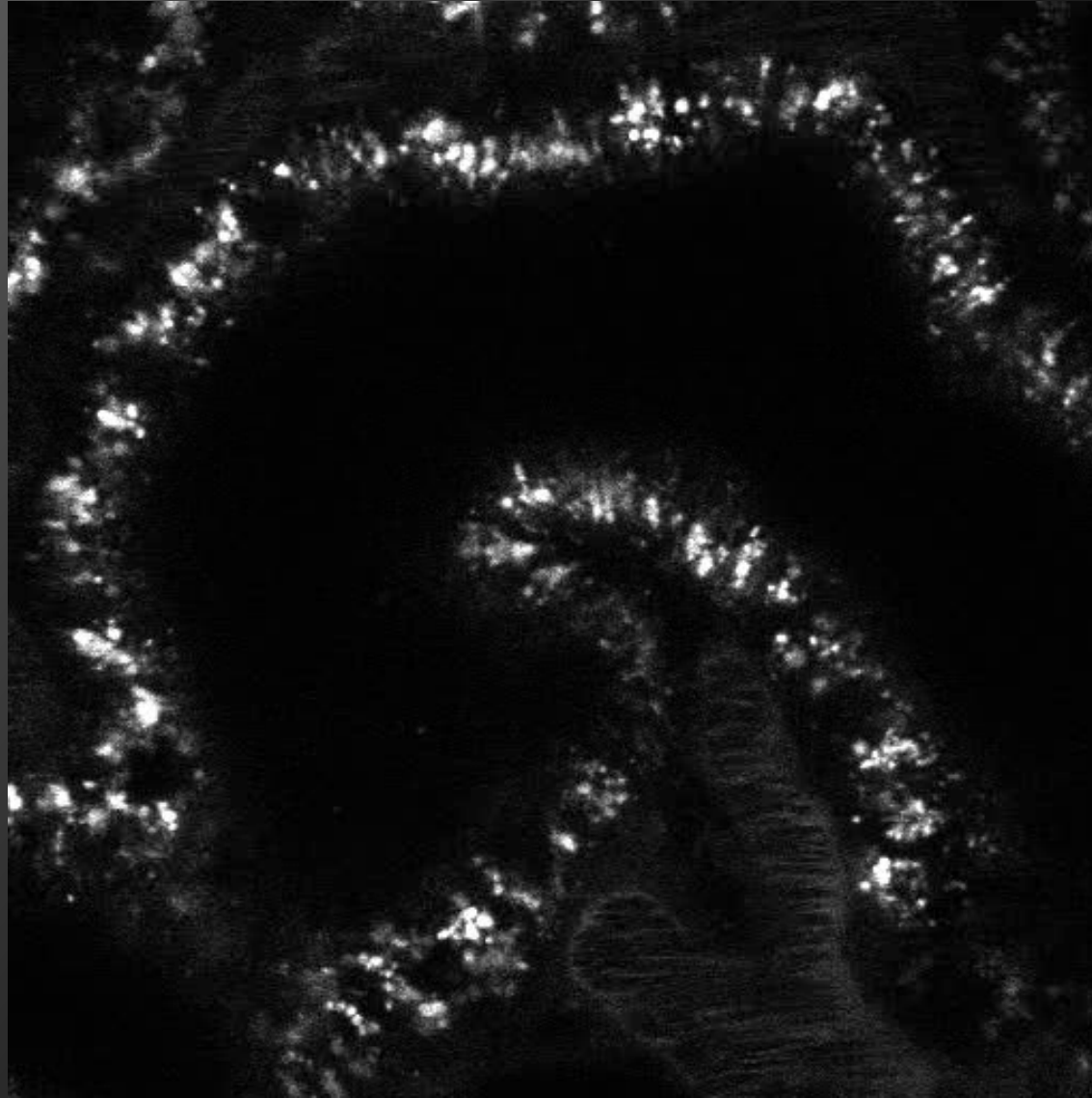
# Effect of Early Diabetes in the Rat on Albumin Filtration and Reabsorption



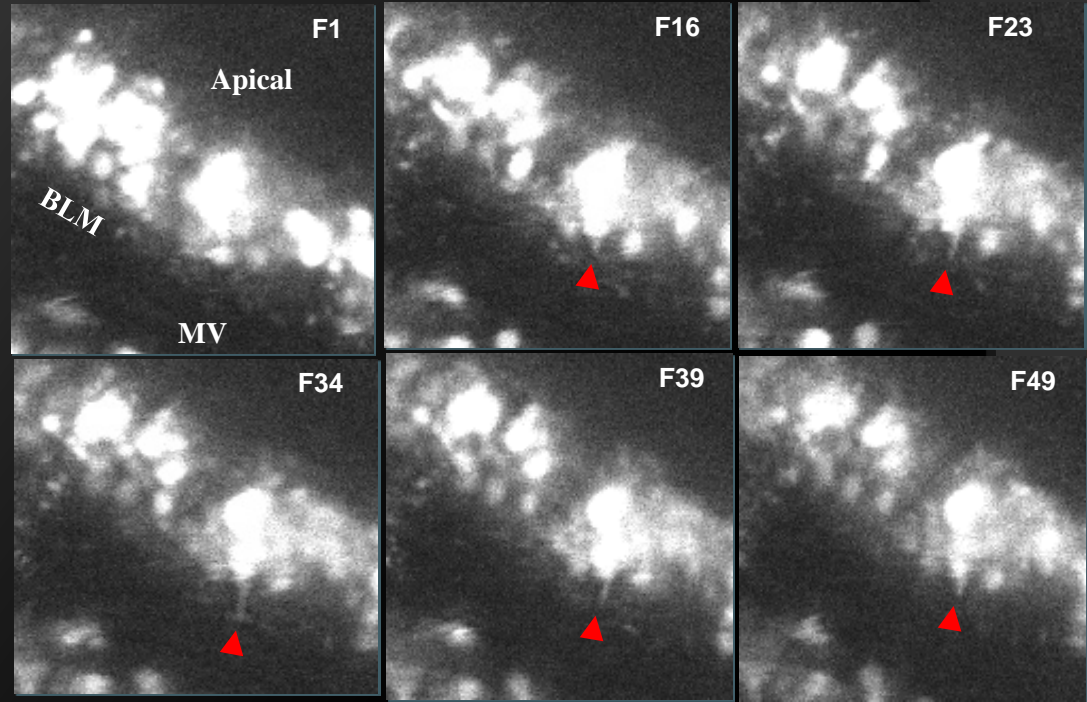
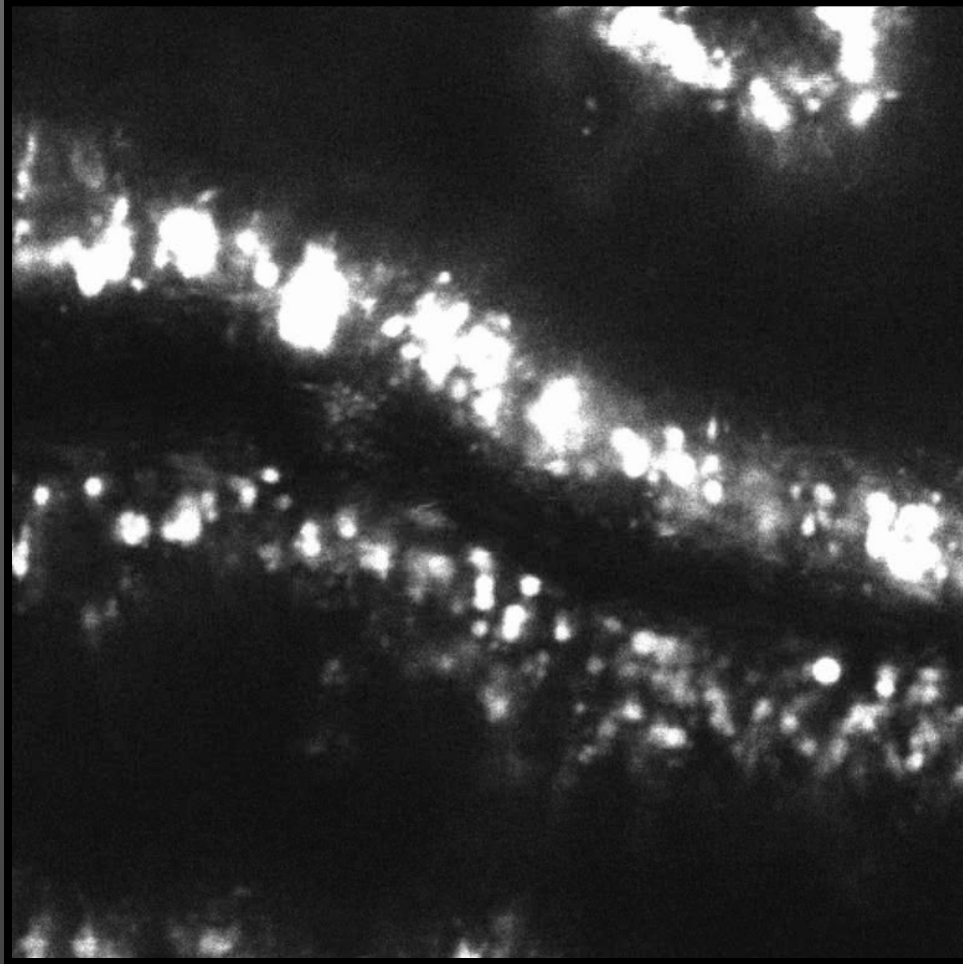
# Effect of Early Diabetes in the Rat on Albumin Filtration and Reabsorption



# Albumin Transcytosis

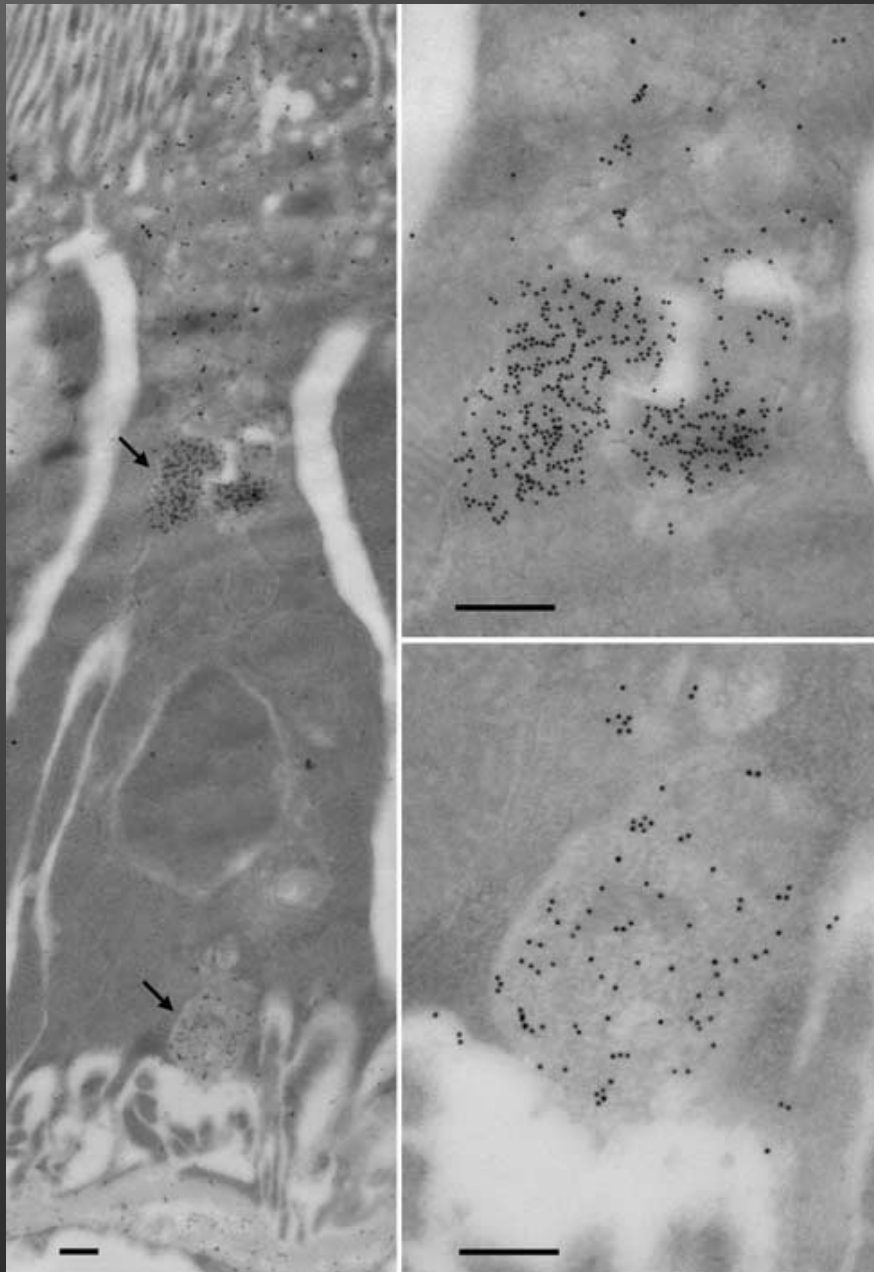


# PTC Albumin Transcytosis





## EM Gold Visualization of RSA Endocytosis and Transcytosis in a Rat PTC



# Summary

**The Proximal Tubule cell is a long lived cell with avid endocytosis**

**Endocytosis is necessary for recycling filtered materials**

**Unfortunately, this includes toxins that accumulate and cause cell injury**

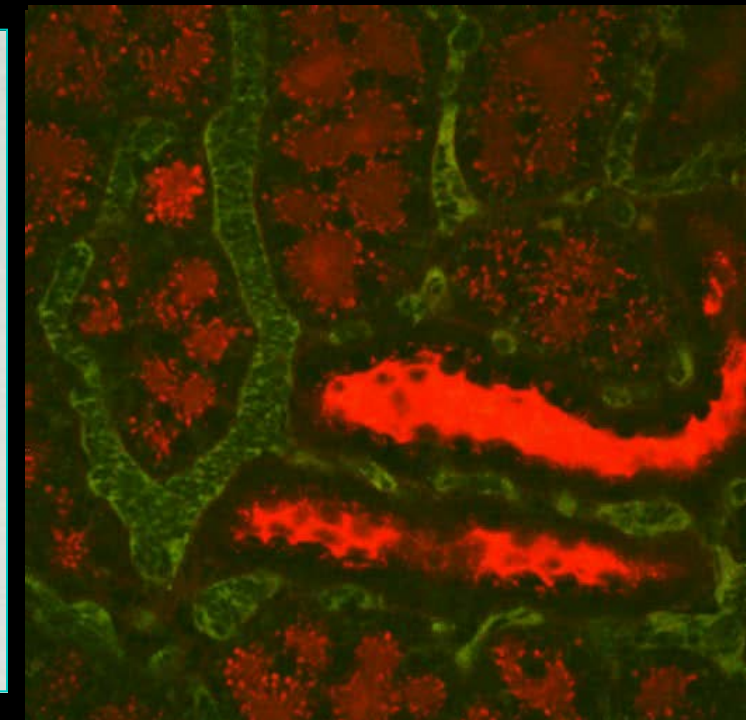
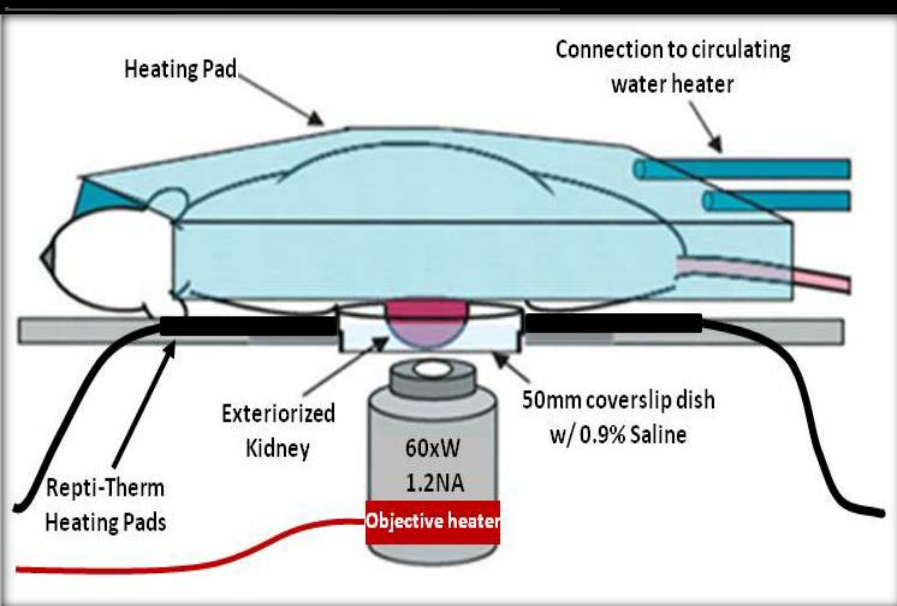
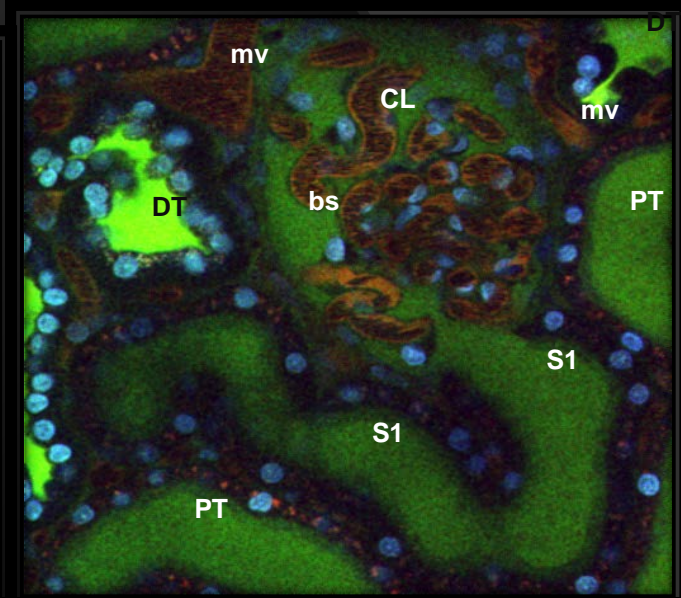
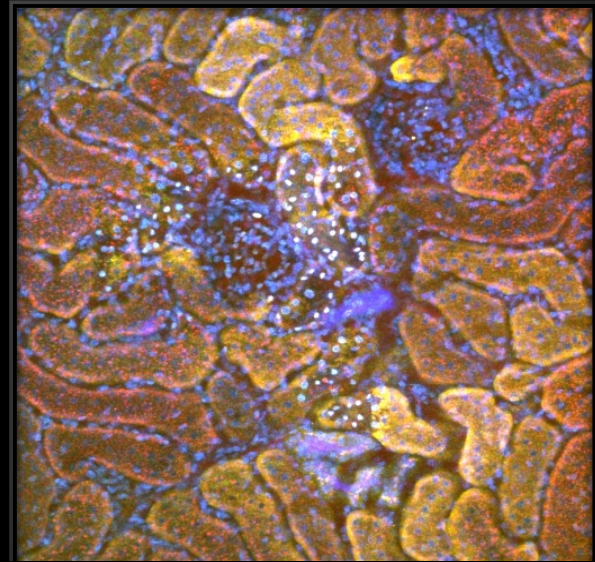
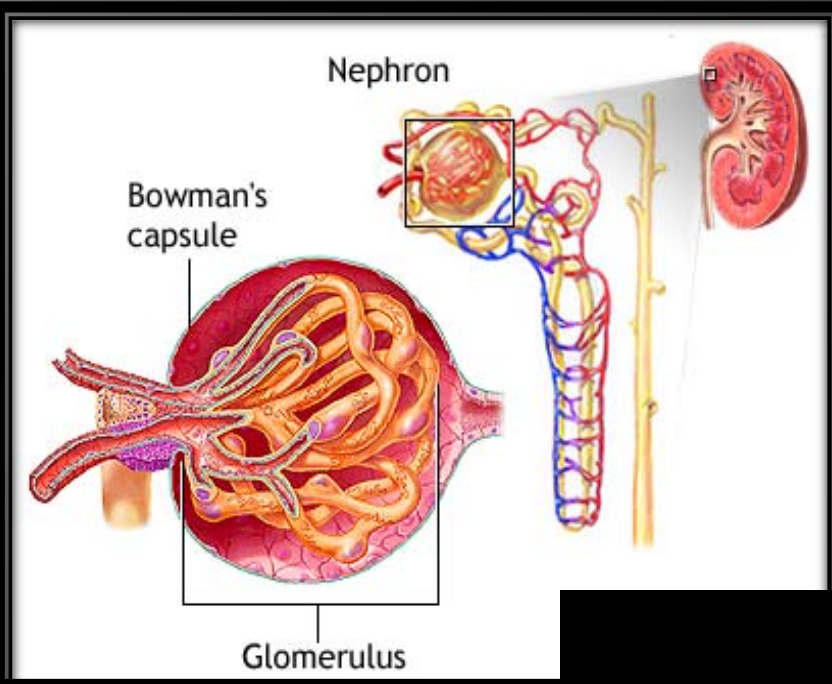
**RNAi therapy is perhaps best applied to the Proximal Tubule**

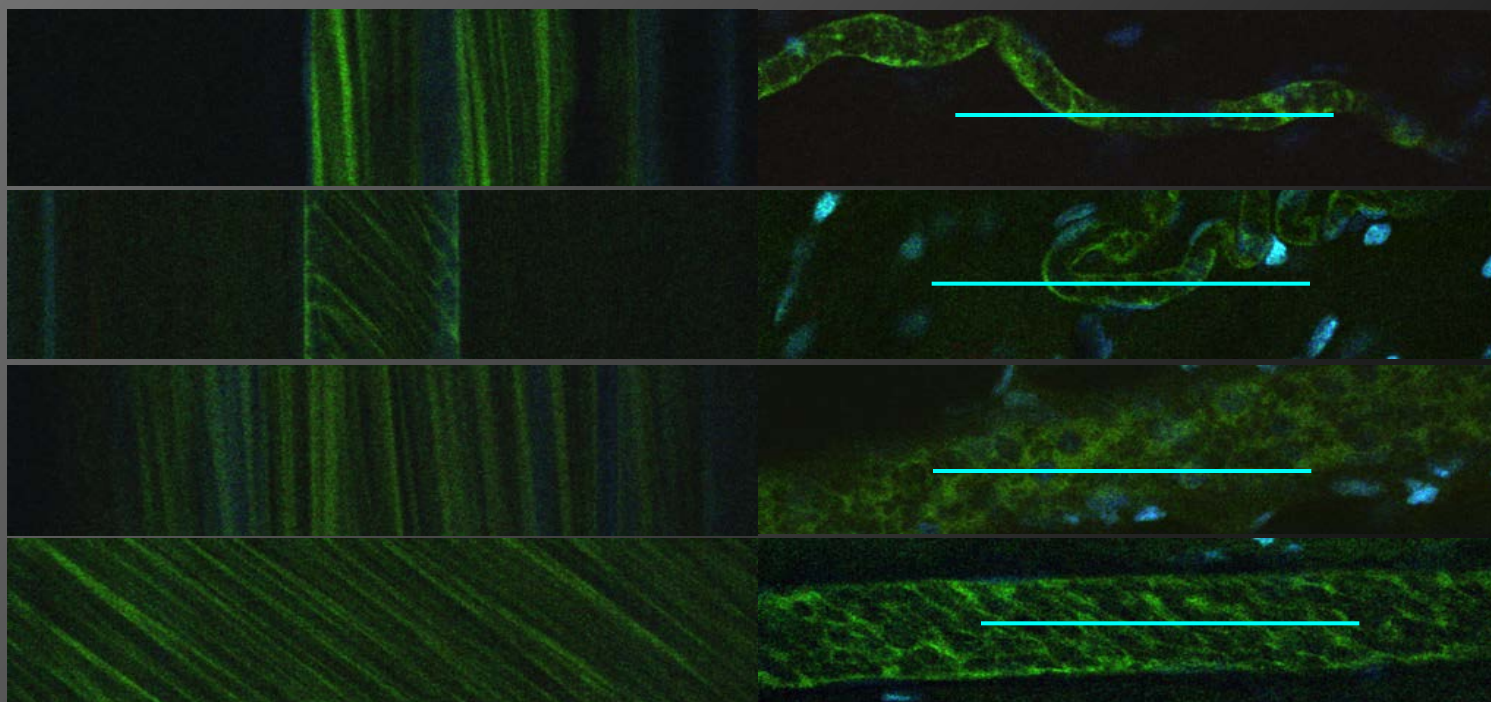
**Presently it is possible to inhibit upregulation of specific proteins**

**It is also possible to down regulate specific proteins**

**There are many untested potential targets for endocytic processes in PTCs**

# Visualizing Vascular, Glomerular & Nephron Function



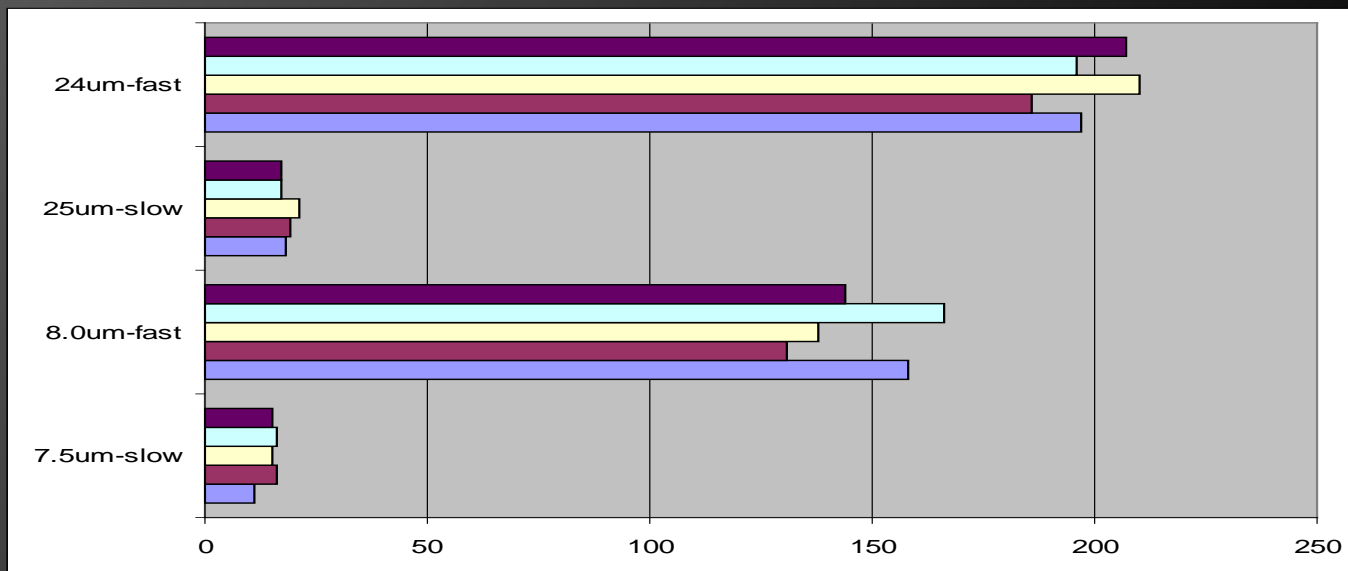


Vessel Diam.=7.5  $\mu\text{m}$   
Ave.Speed=14 $\mu\text{m}/\text{sec}$

Vessel Diam.=8  $\mu\text{m}$   
Ave Speed=147 $\mu\text{m}/\text{sec}$

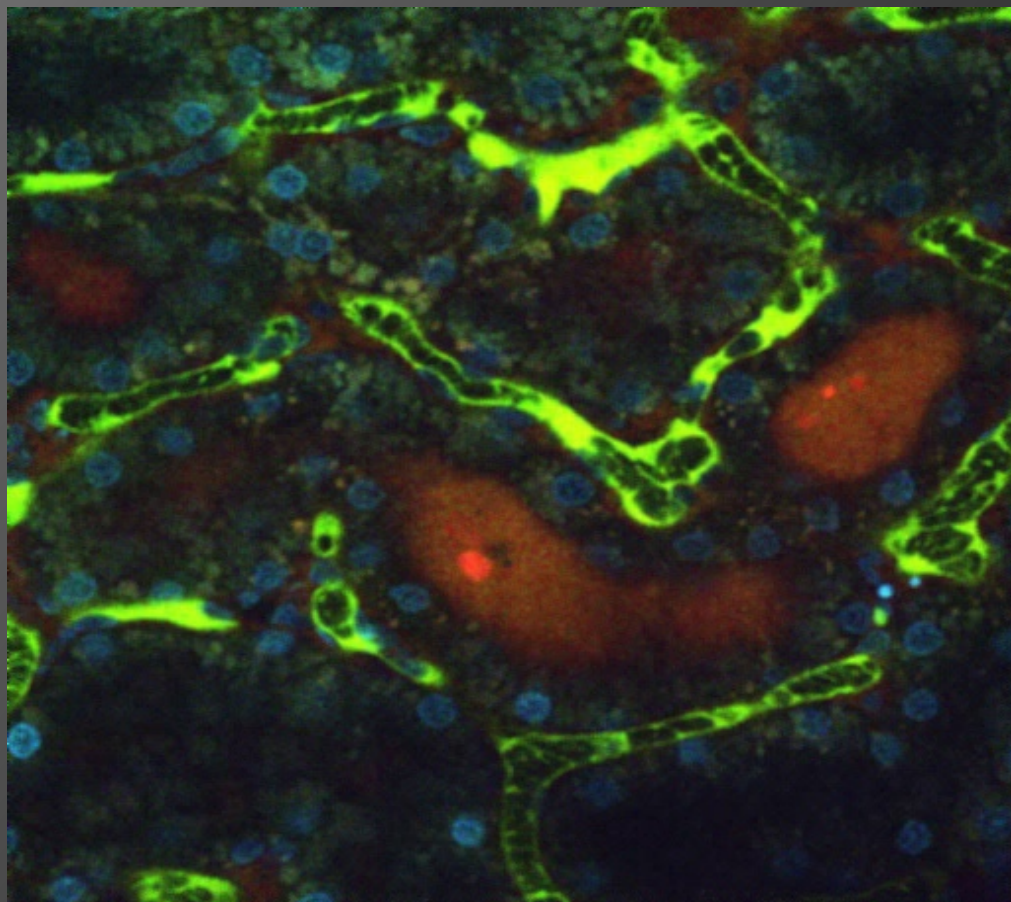
Vessel Diam.=23  $\mu\text{m}$   
Ave Speed=18 $\mu\text{m}/\text{sec}$

Vessel Diam.=24  $\mu\text{m}$   
Ave Speed=199 $\mu\text{m}/\text{sec}$

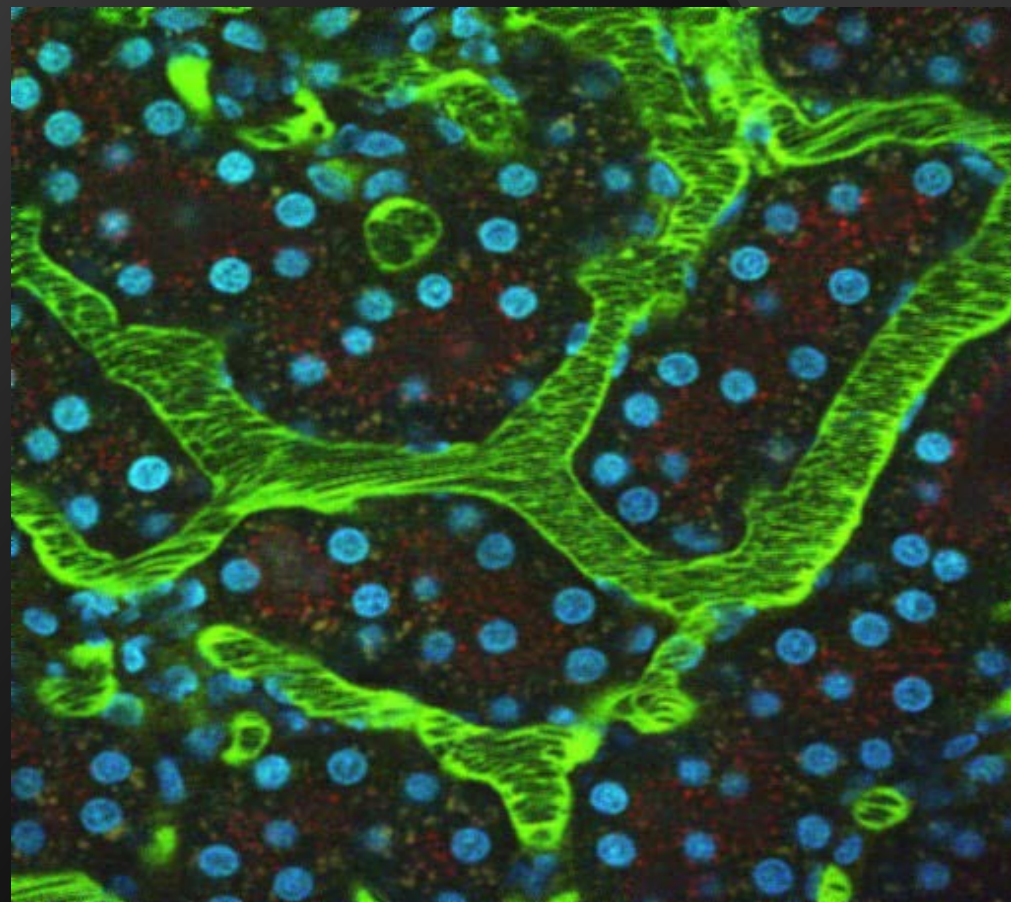


Vessel Diam.	Ave Speed	St. Dev
relative speed	in $\mu\text{m}/\text{sec}$	
7.5 $\mu\text{m}$ -slow	14.6	2.07364414
8.0 $\mu\text{m}$ -fast	147.4	14.3805424
25 $\mu\text{m}$ -slow	18.4	1.67332005
24 $\mu\text{m}$ -fast	199.2	9.5760117

# Microvascular Blood Flow at 24h Post Ischemia Effect of sTM



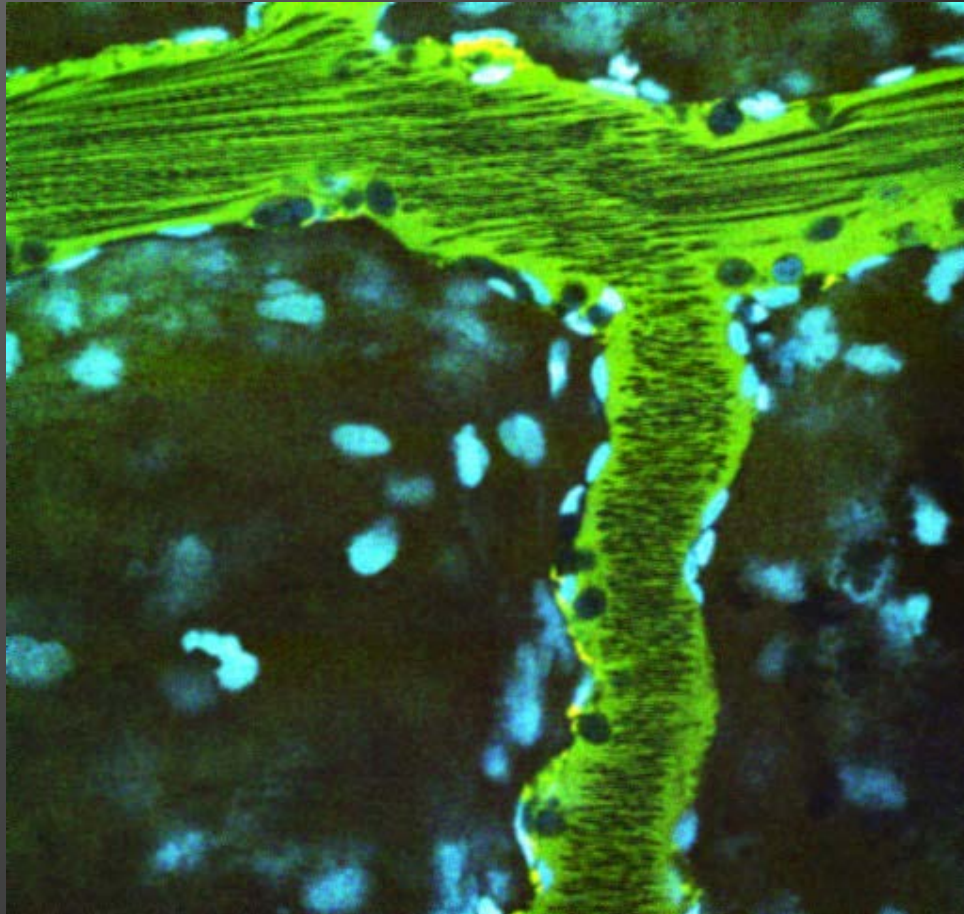
**Saline treated**



**sTM treated**

Blood Flow velocity ( $\mu\text{m}/\text{sec}$ )	253.36 $\pm$ 95.01	786.75 $\pm$ 280.75 *
		*P < 0.05

# Leukocyte-Endothelial Interactions – Intra-Vital 2-Photon

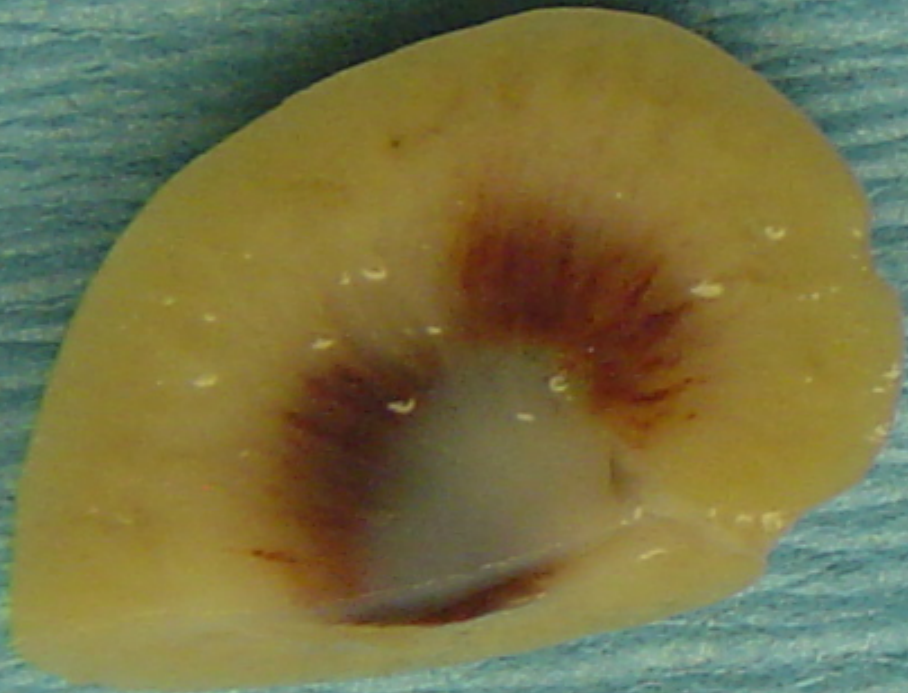


	Saline	sTM treated
Flowing (%)	69.5	88.3 *
Rolling (%)	18.2	8.3 *
Static (%)	12.9	3.3 *

\* p<0.05

Ischemic – Saline treated rat at 24h

# with/without sTMGross Specimens



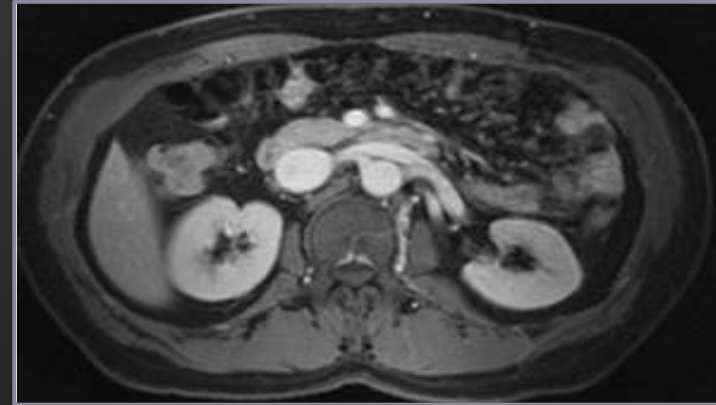
**Control**



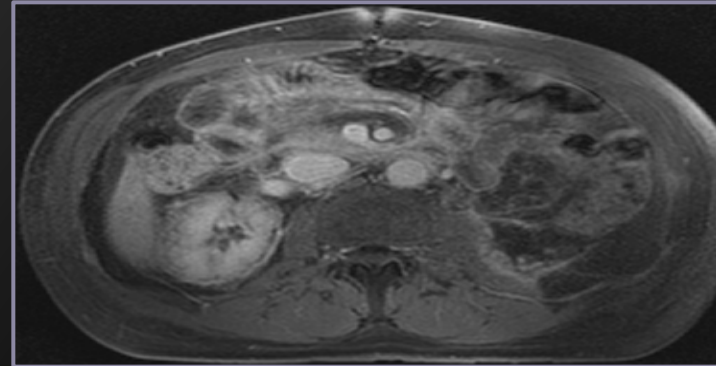
**sTM treated**

# Effect of sTM Therapy on Kidney Function in Acute Kidney Injury

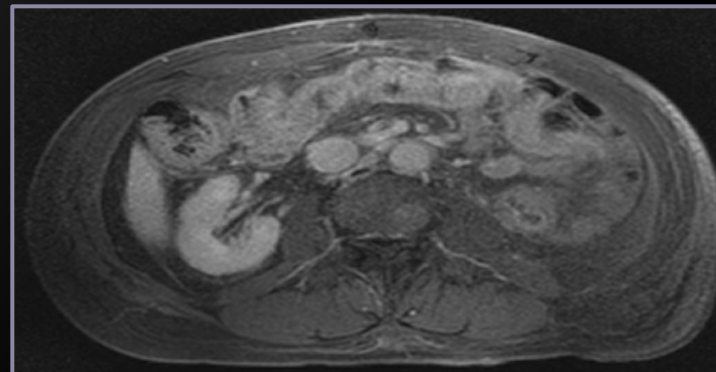
NMR Prior to Kidney Donation



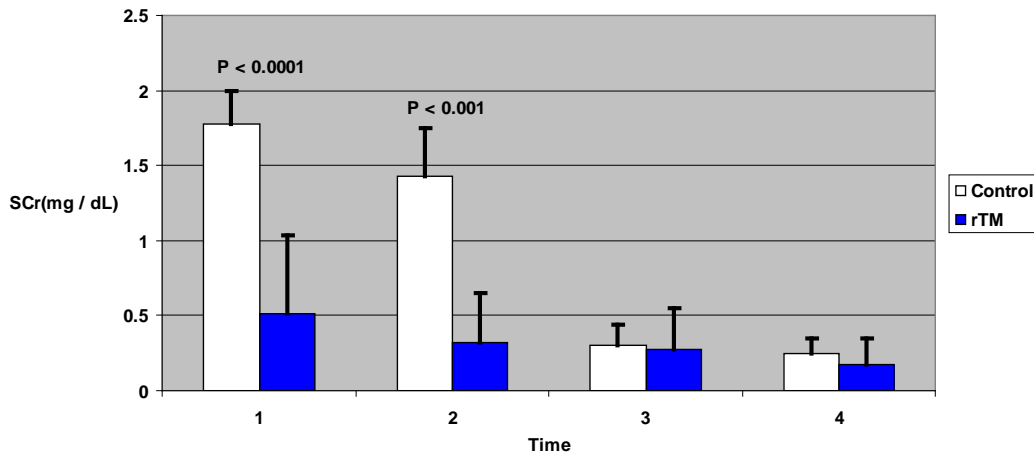
Acute Kidney Injury



Resolution of AKI



Effect of Pre-treatment with Soluble Rat Thrombomodulin on AKI

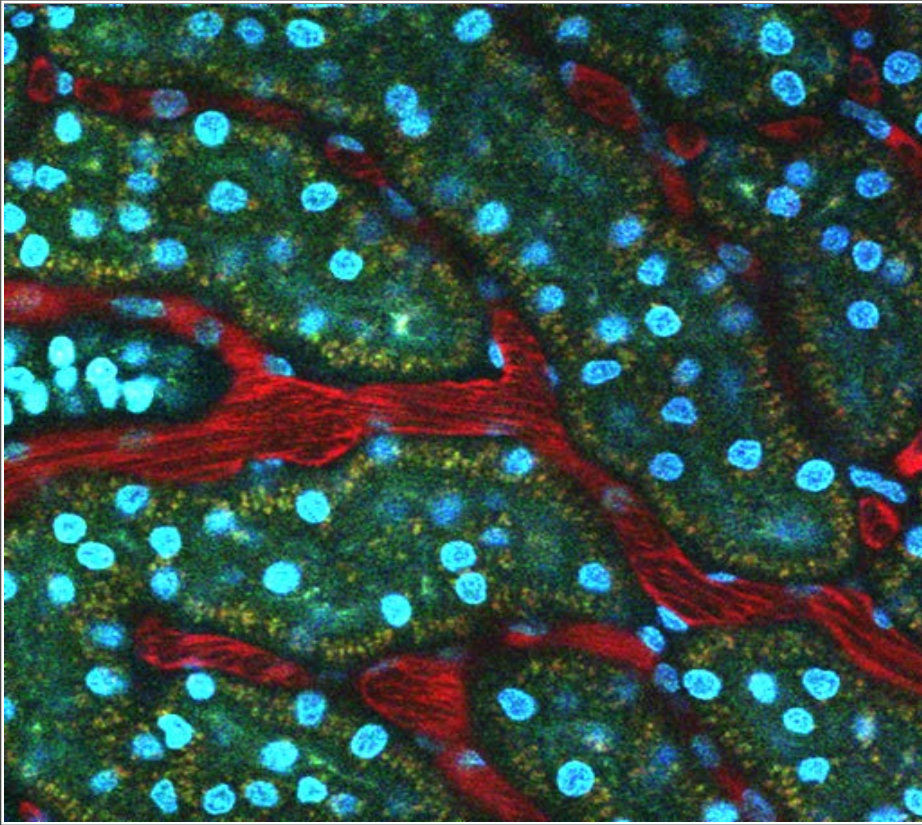


Sharfuddin et.al. JASN 2009

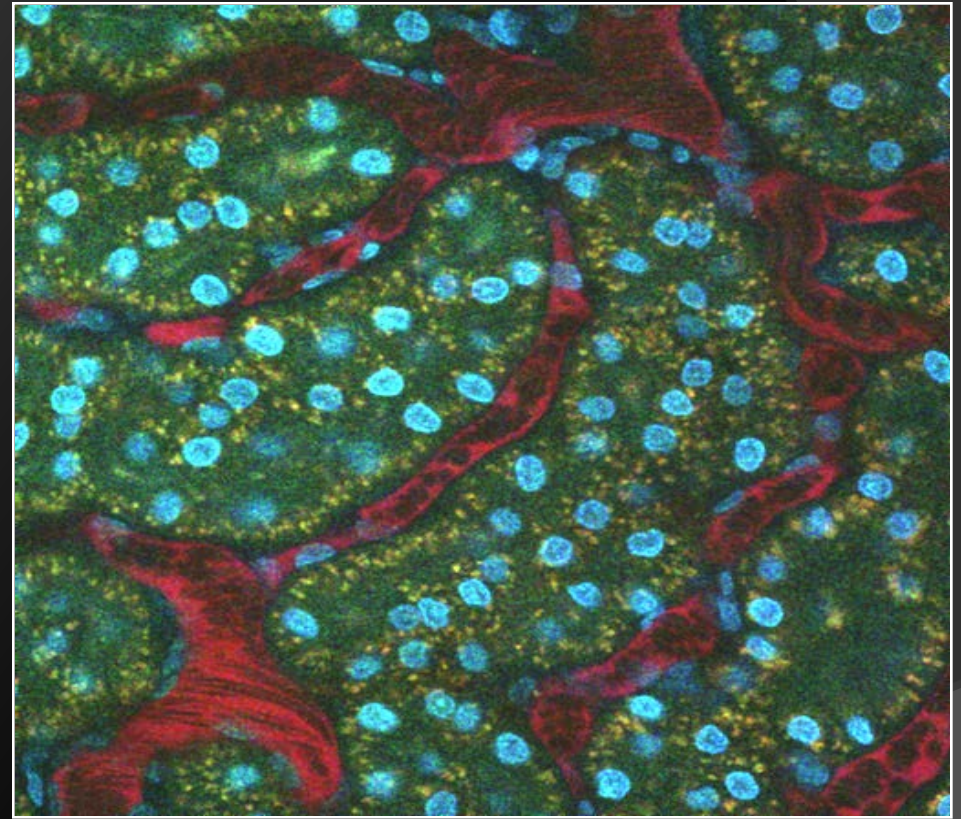
Rosenthal et.al JASN, 2003



# Microvascular Flow in CLP

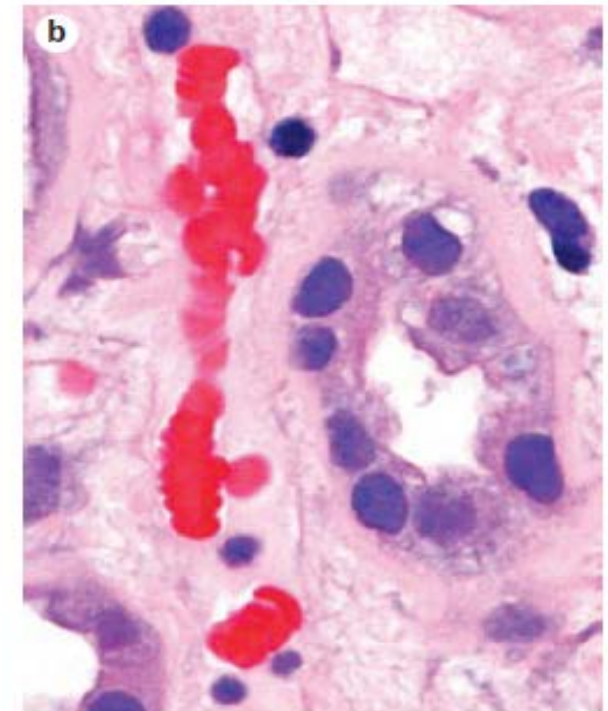
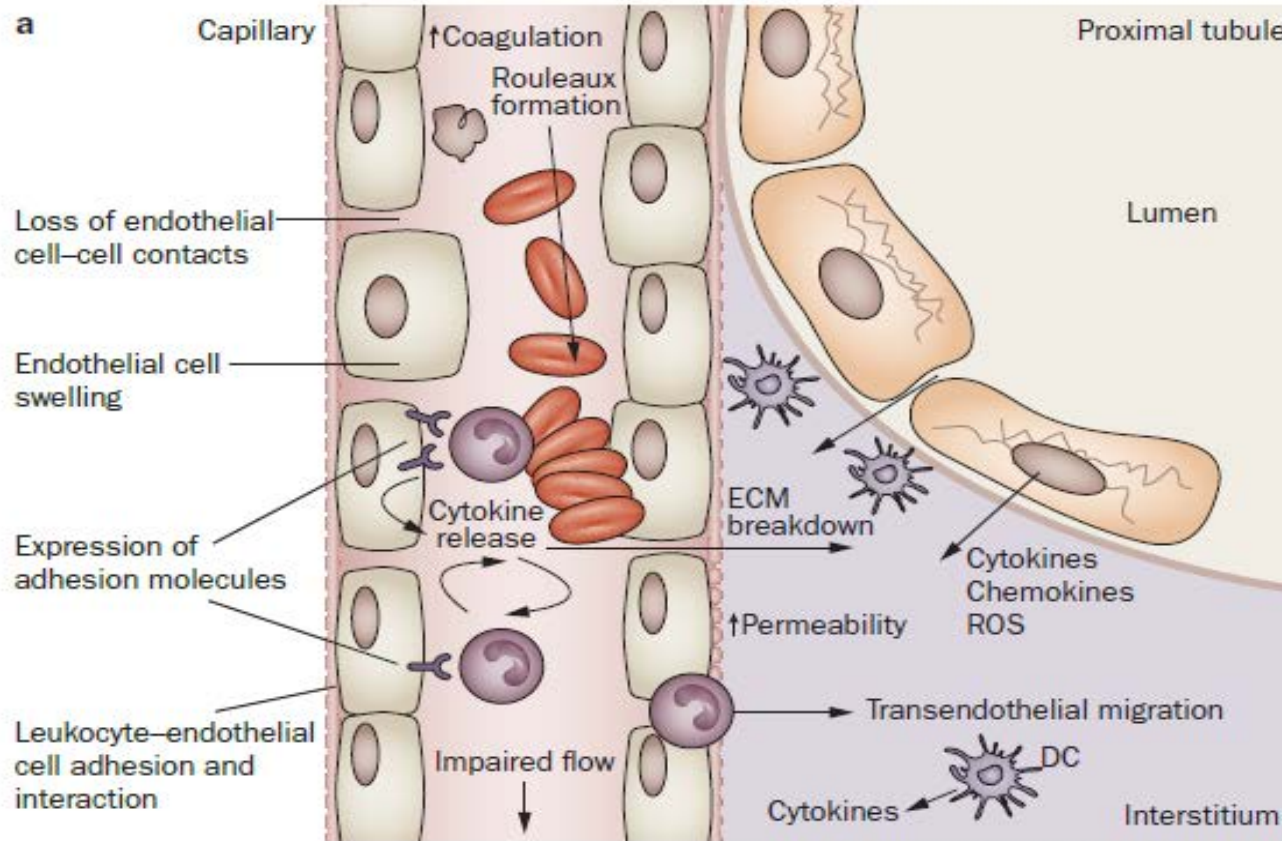


4Hr CLP

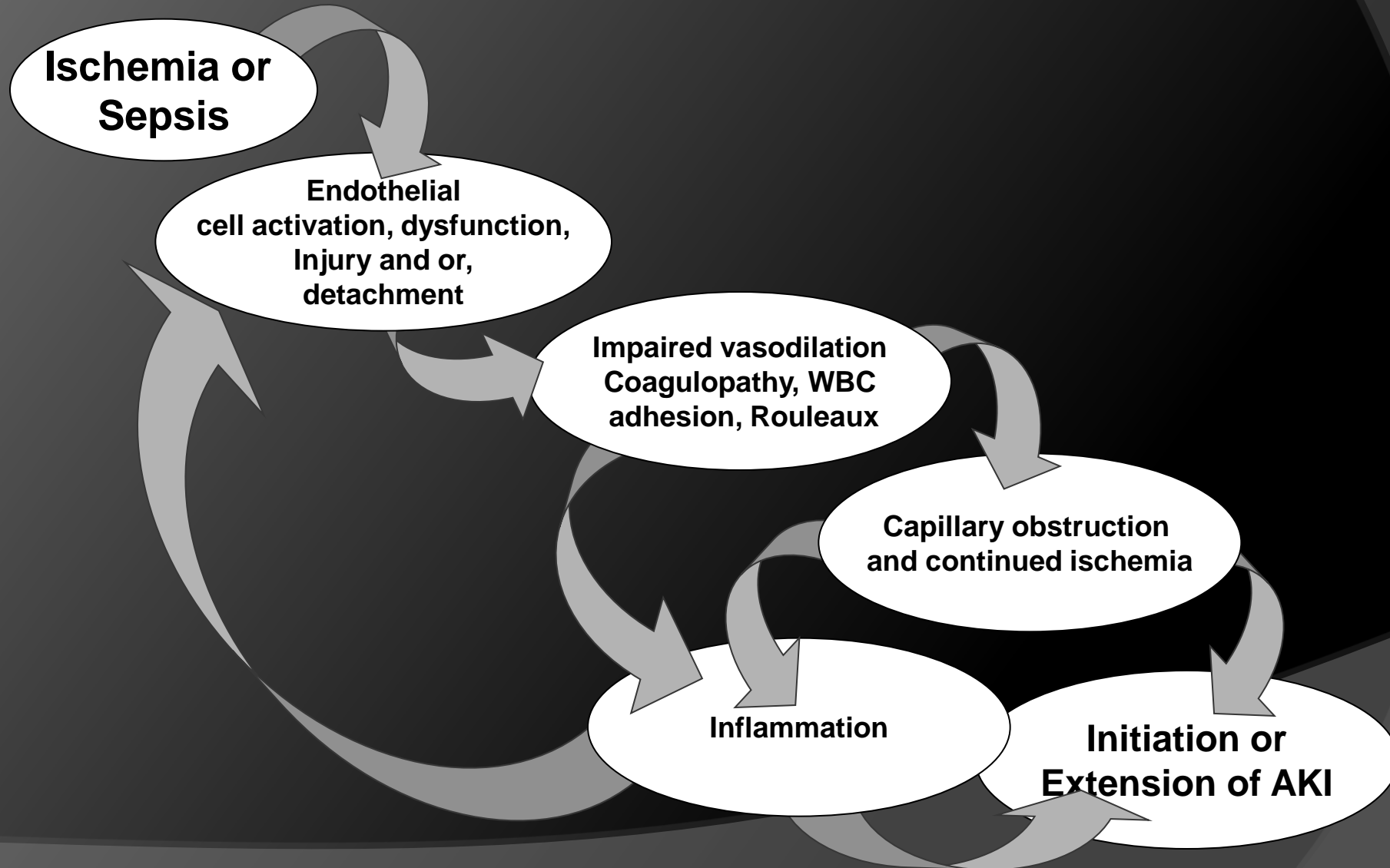


24Hr CLP

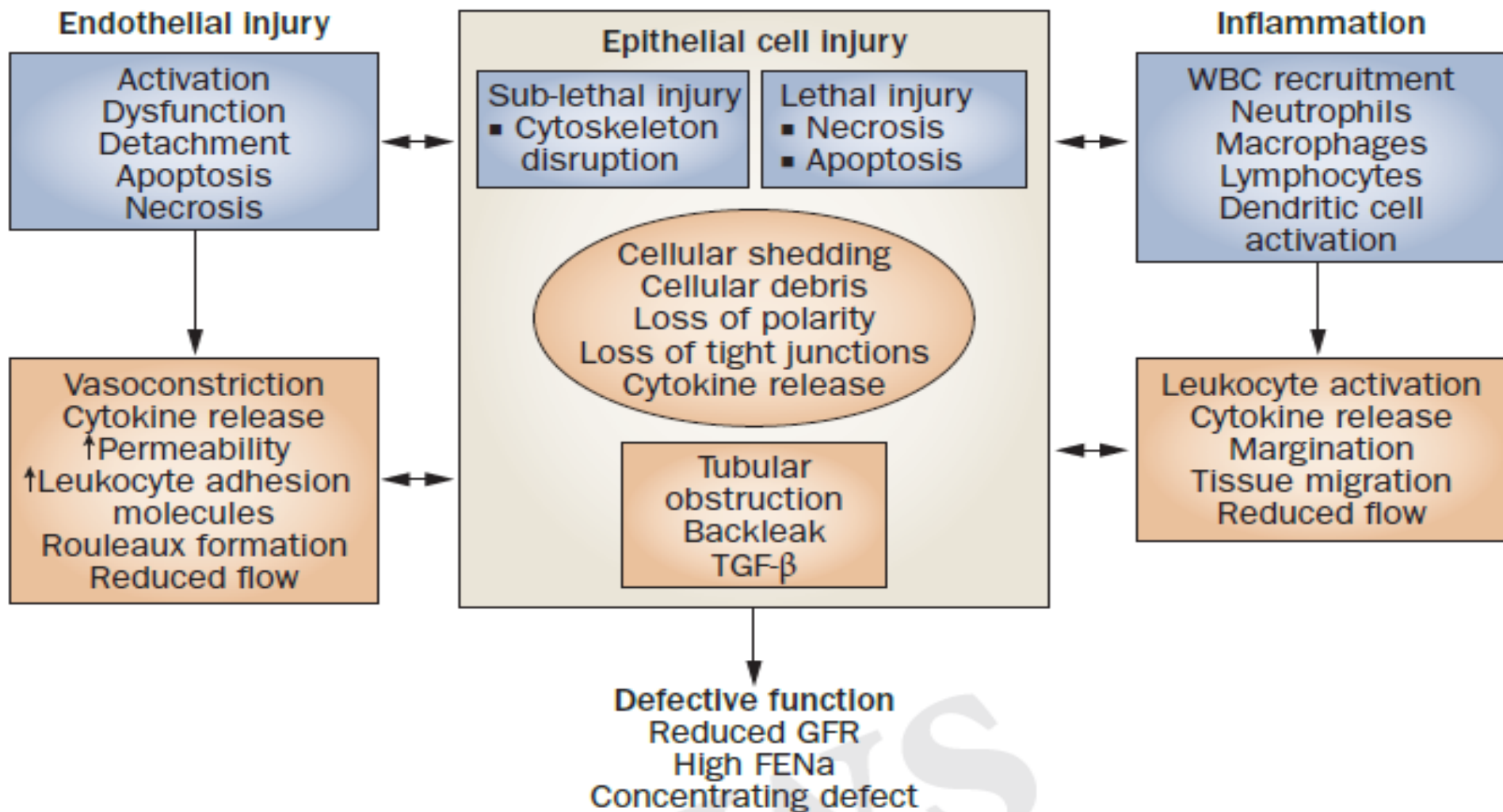
# Endothelial Pathophysiologic Events in AKI



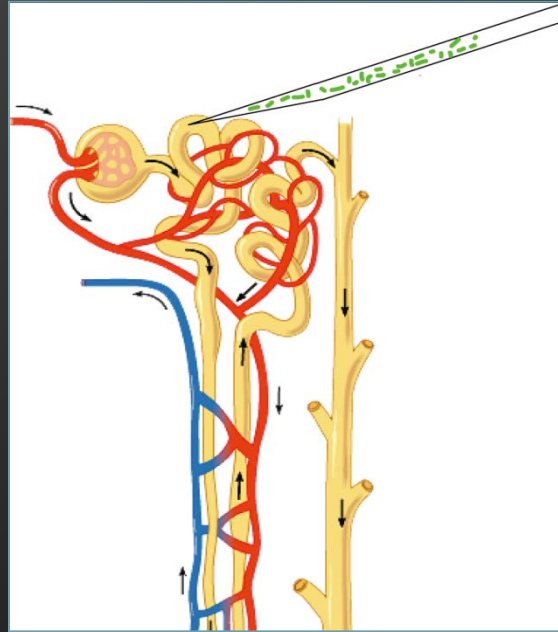
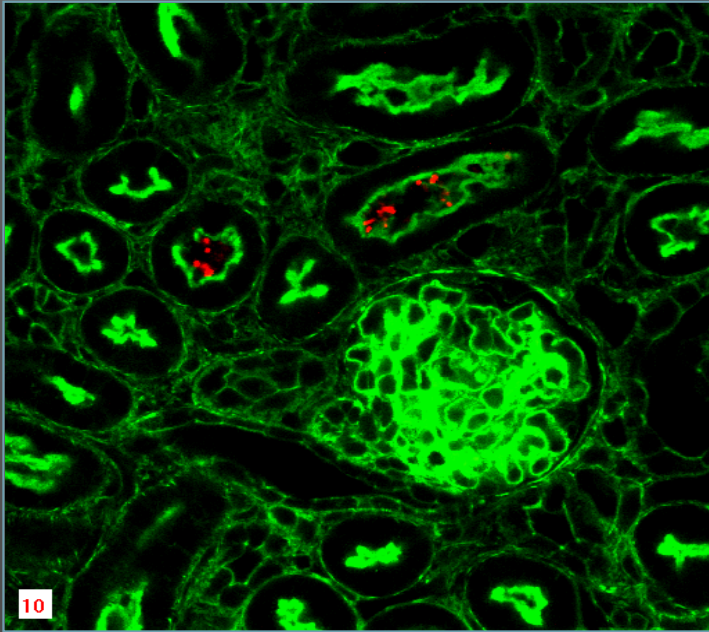
# Small Vessel Injury in Acute Kidney Injury



# Major Cellular Components and Physiologic Effects of AKI

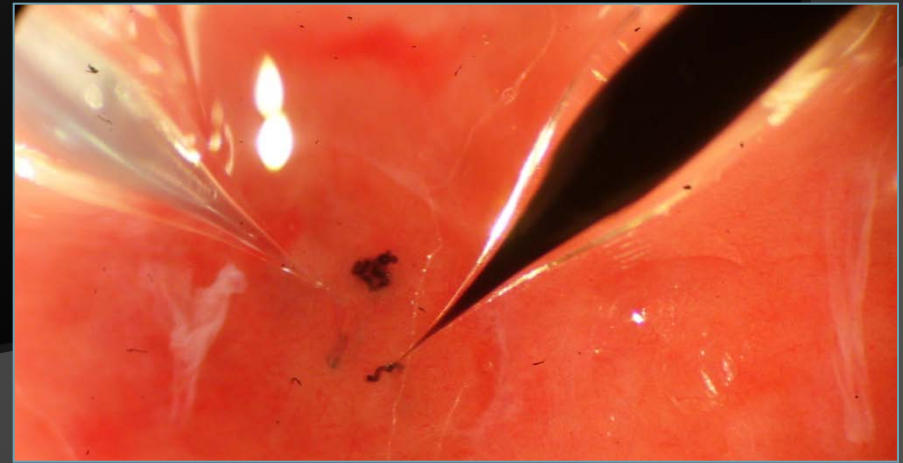
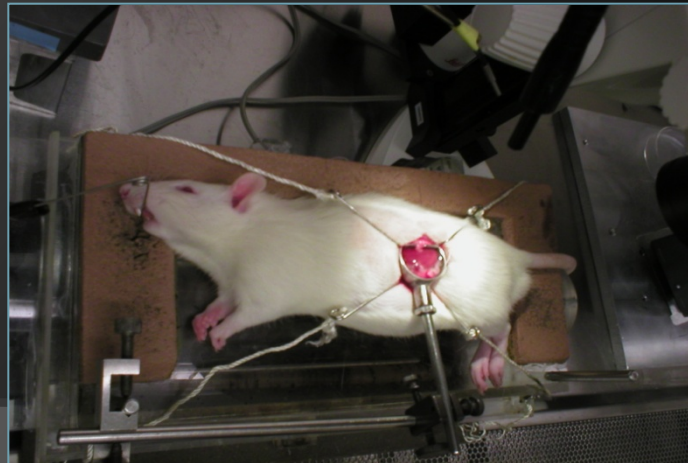


# Spatial Specificity Achieved by Micro-Infusion of Bacteria into Proximal Tubules



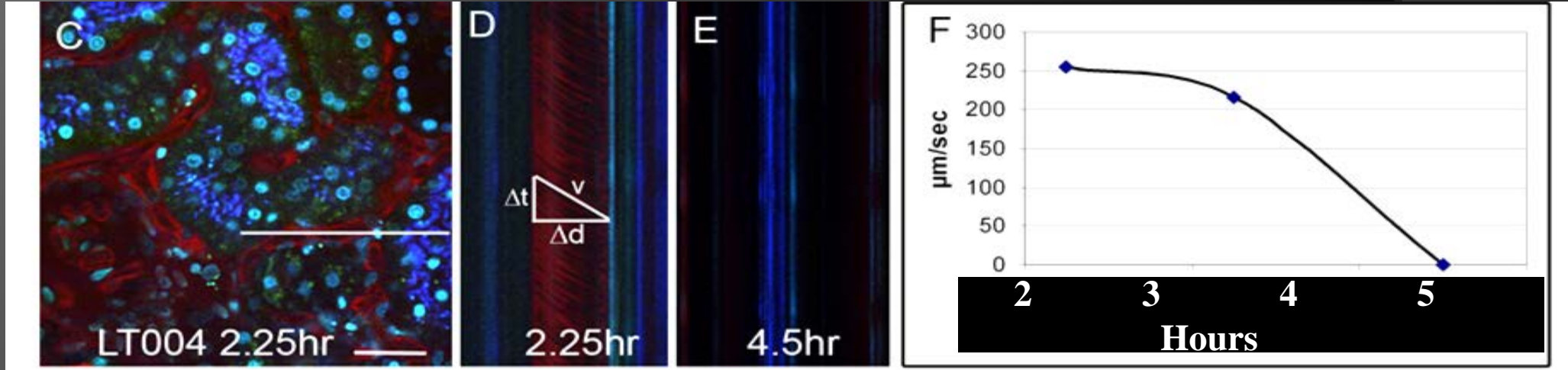
- $10^5$  cfu UPEC GFP<sup>+</sup>
- 0.1 to 0.7  $\mu$ l injected

Agneta Richter-Dahlfors,  
Lisa E. Mansson and Keira Melican  
Karolinska Institutet

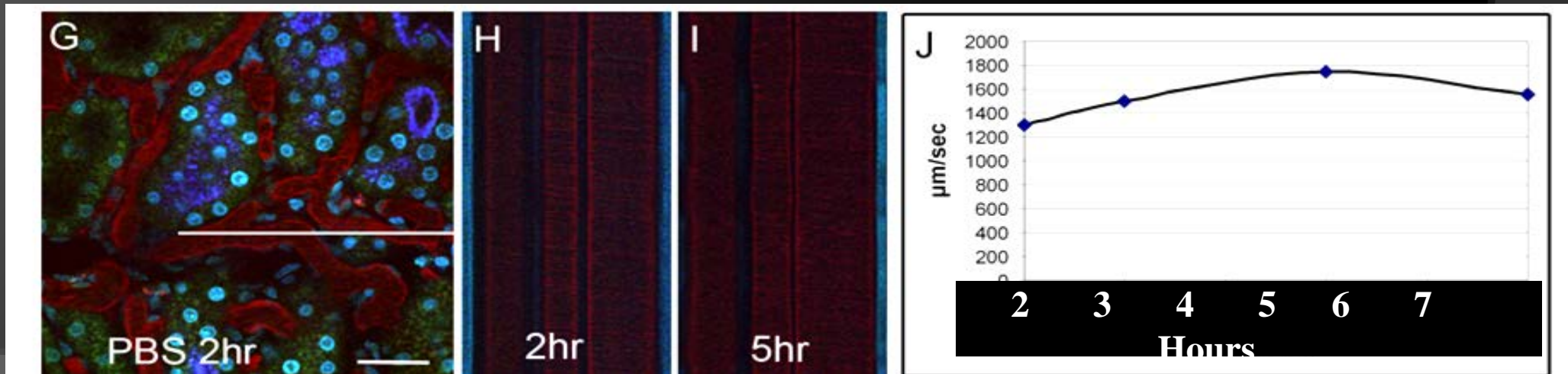


# Determining blood flow rates *in vivo*

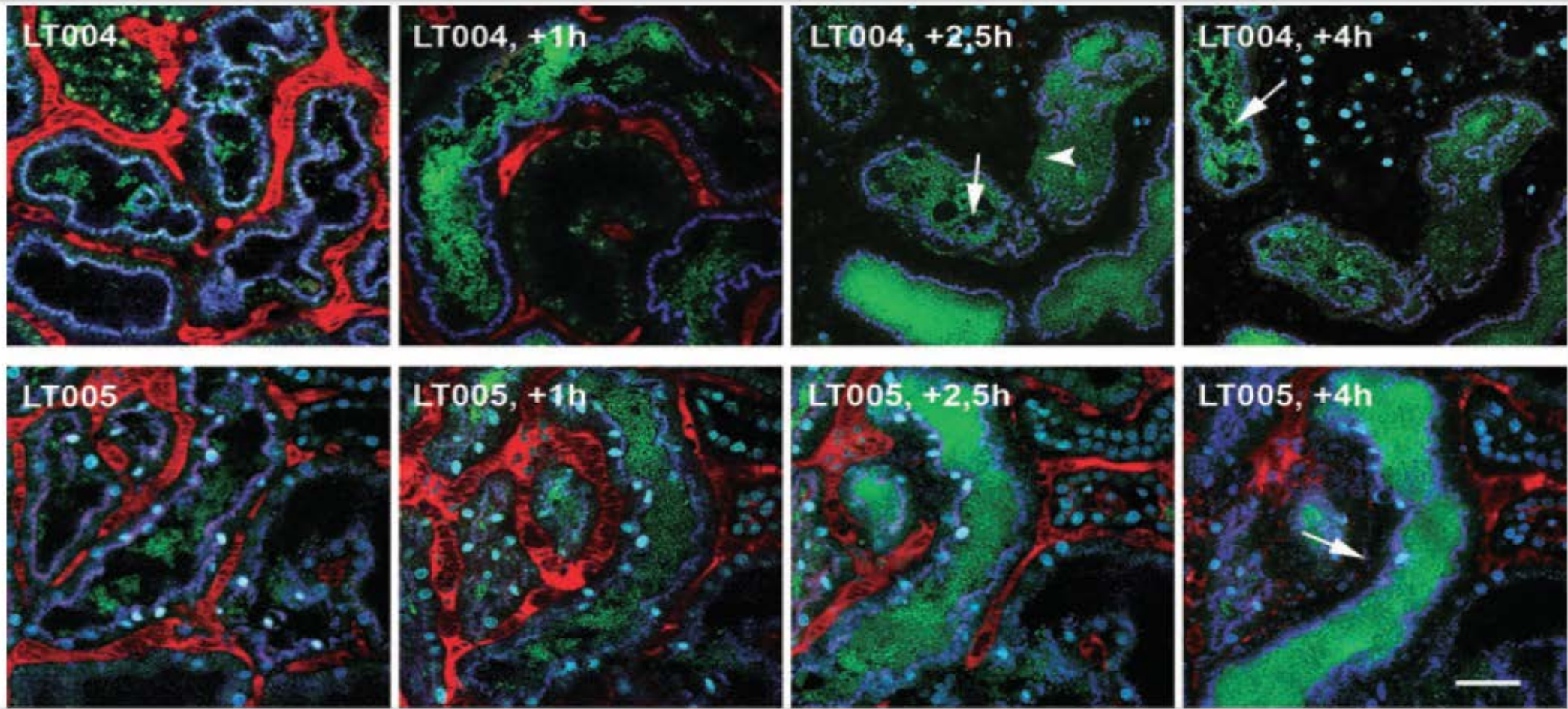
UPEC wt



PBS



# Proximal Tubule *E. coli* Infection: Effect of Virulence Factor

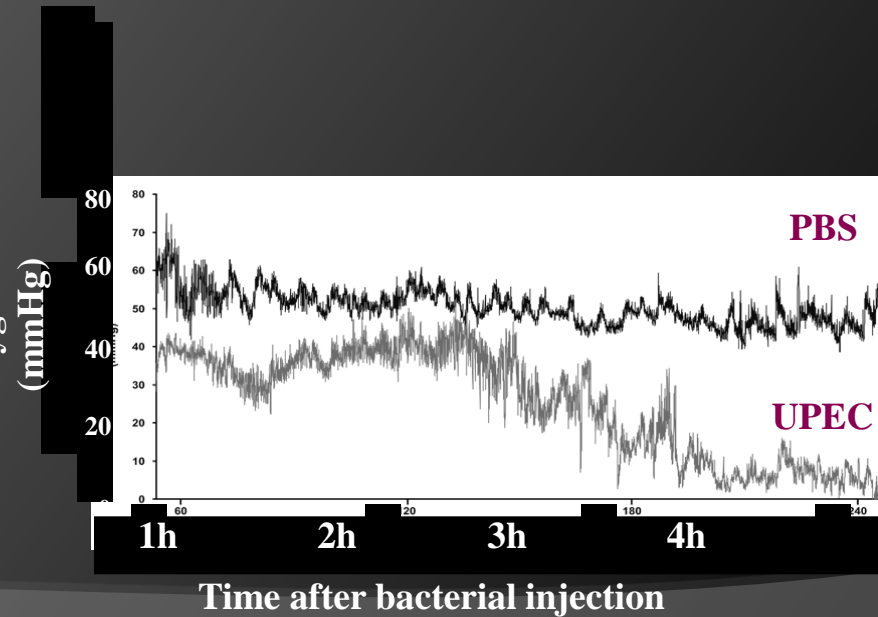


# Bacterial Infection Causes Rapid Drop in Tissue Oxygen Tension ( $pO_2$ )

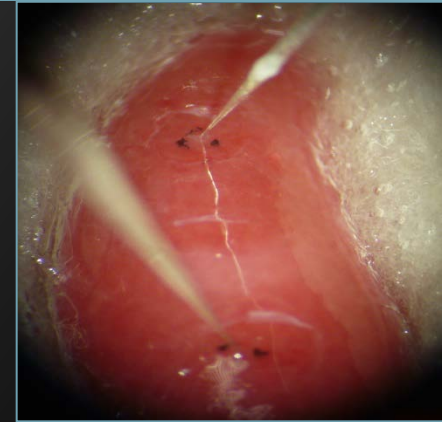
Arterial blood pressure (mmHg)



Tissue oxygen tension (mmHg)

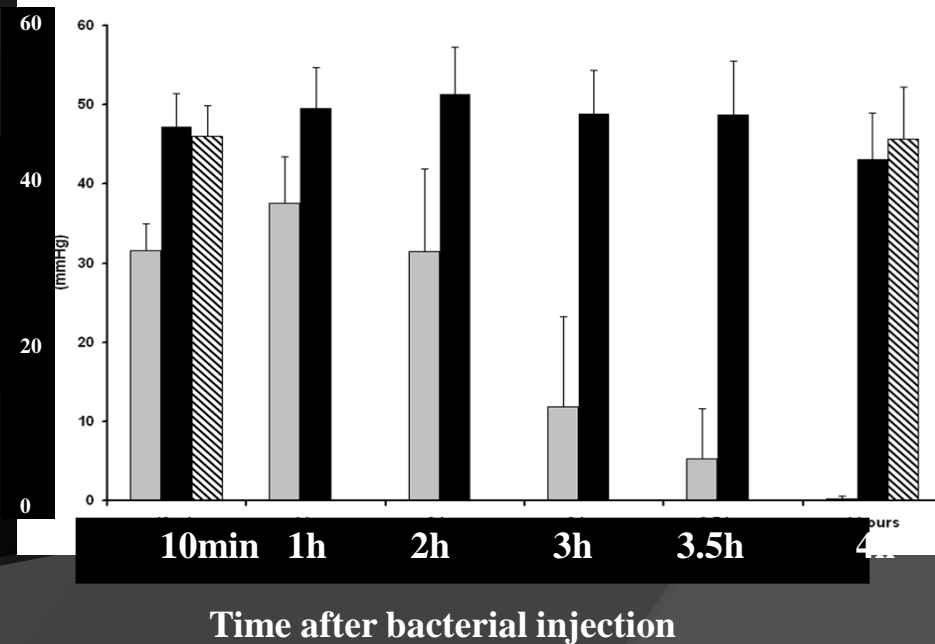


Time after bacterial injection



- UPEC
- Naive cortex
- PBS

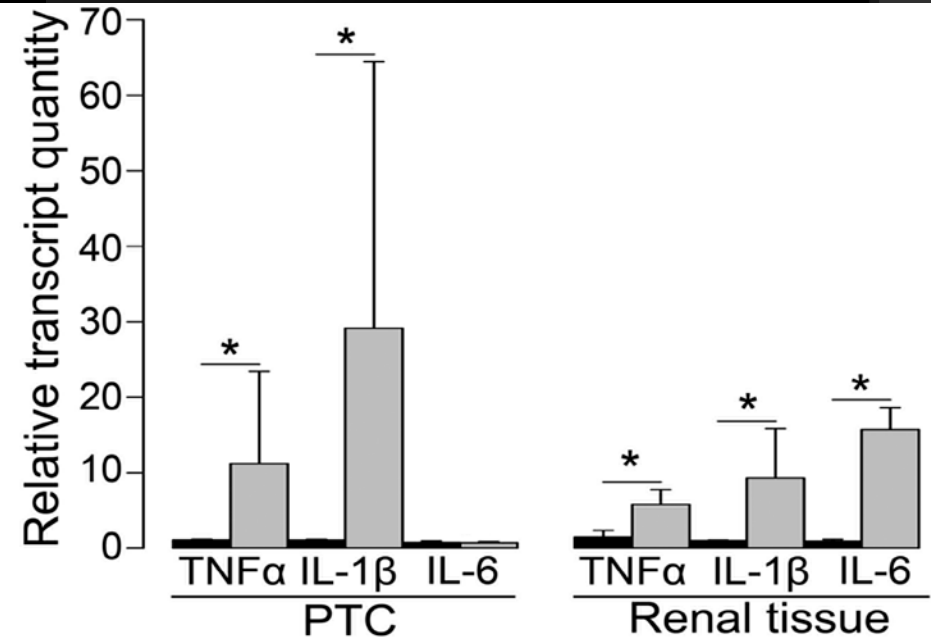
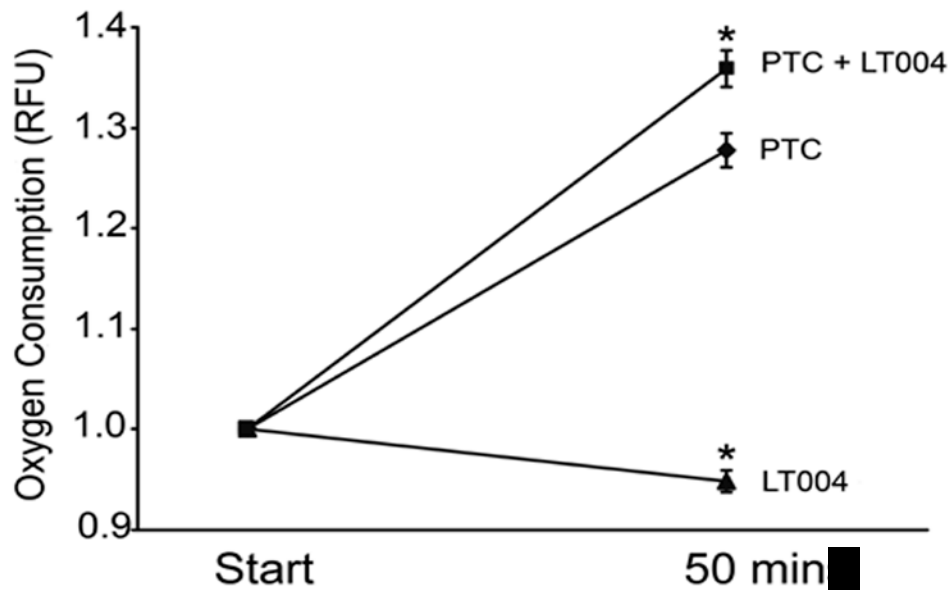
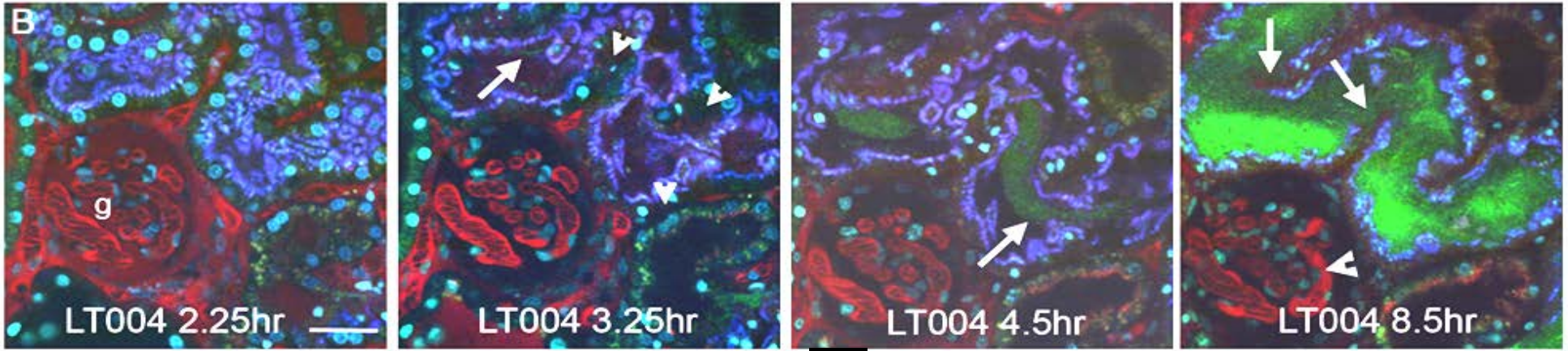
Tissue oxygen tension (mmHg)



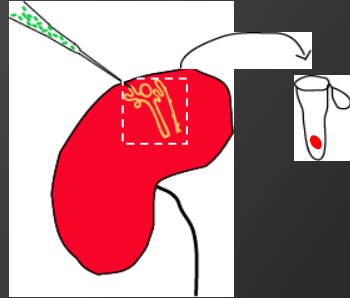
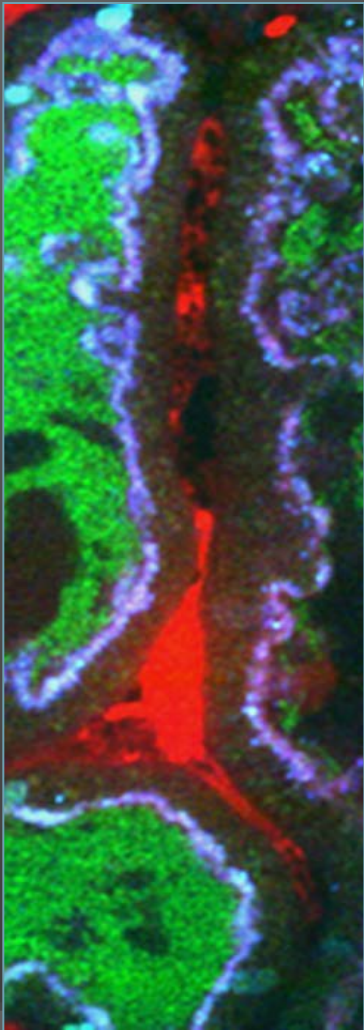
Time after bacterial injection



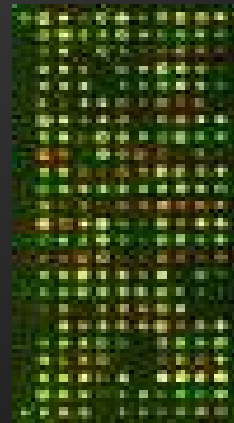
# Infection Triggers Increased Oxygen Consumption in Renal Cells



# Clotting Cascade Genes are Up-Regulated in Infected Kidneys

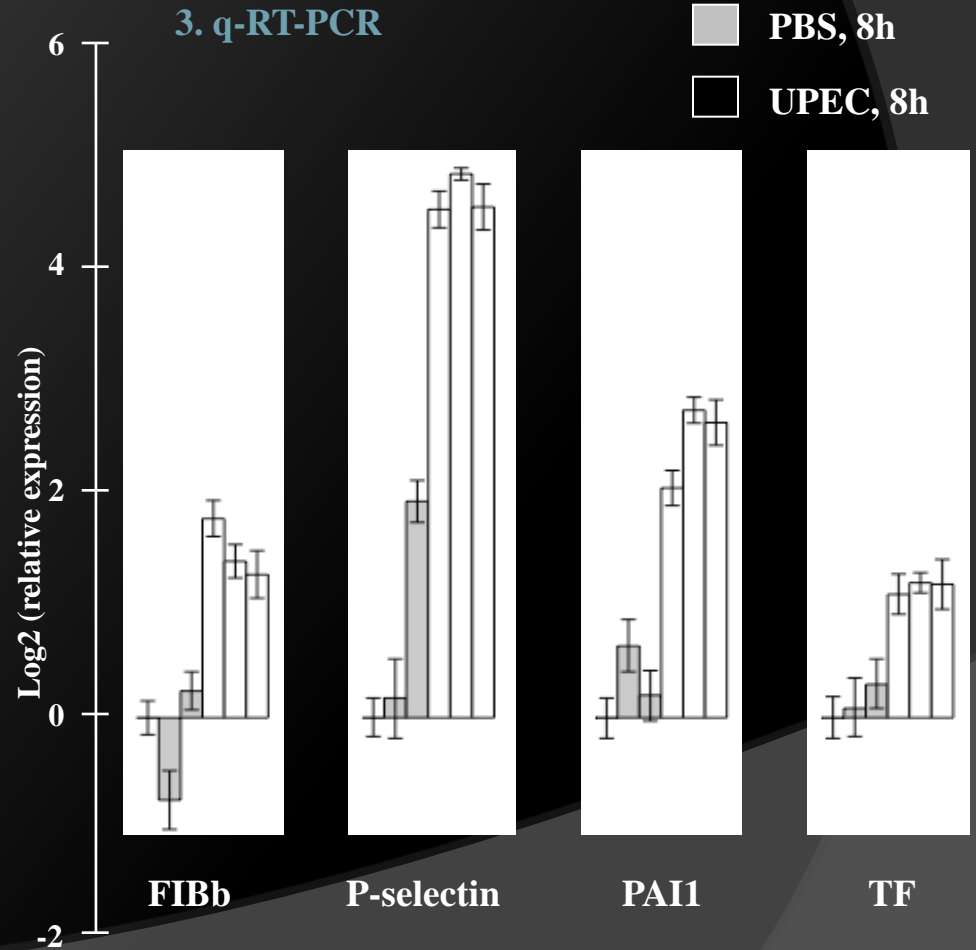


1. Precise dissection to enrich for local mRNA



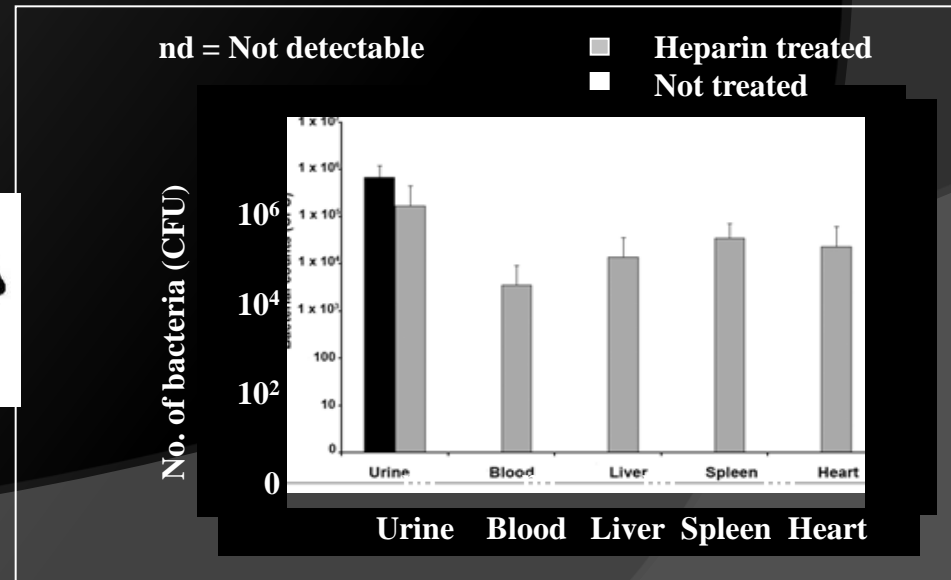
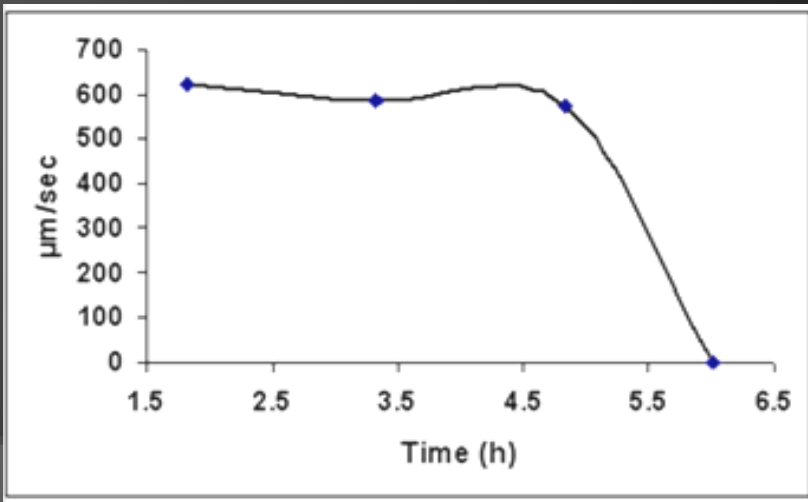
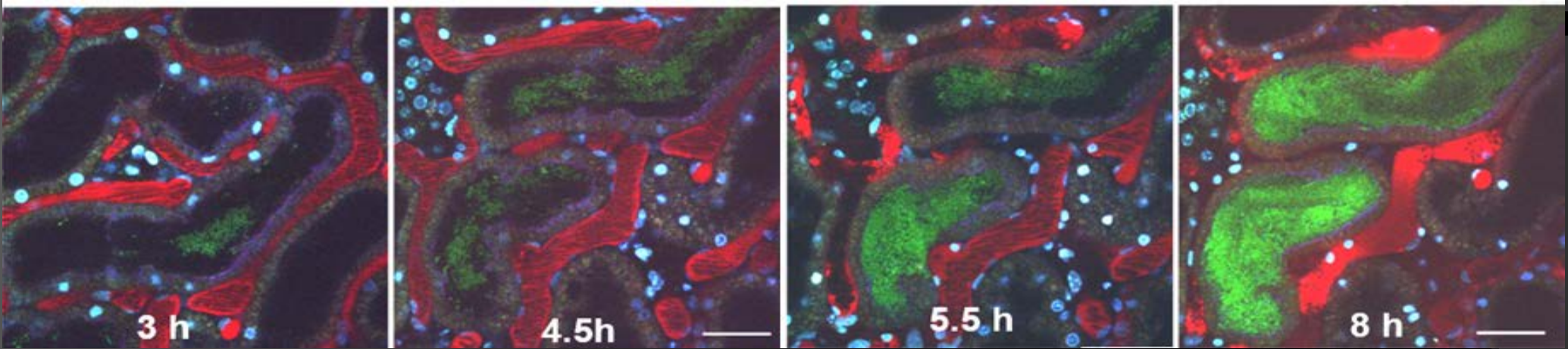
2. Gene expression array

3. q-RT-PCR

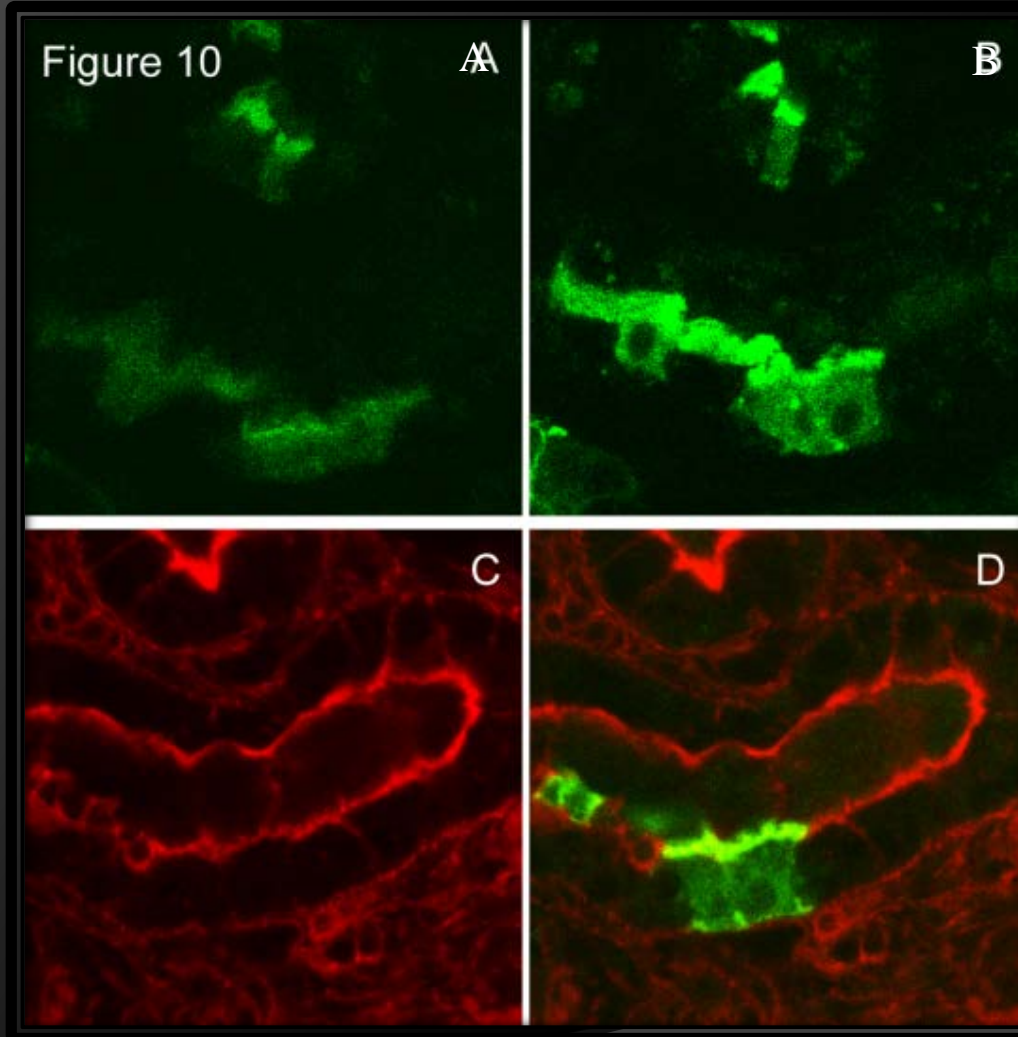
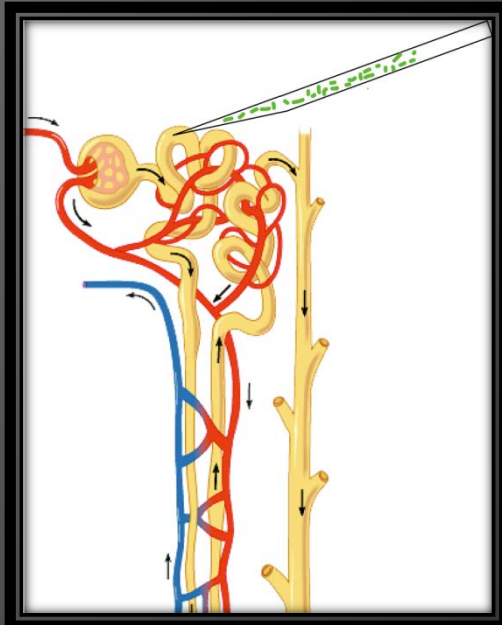


# Heparin-Treatment Causes Systemic Bacterial Spread, Rats Die from Sepsis

Animals treated with heparin (400 U/kg) to prevent clotting



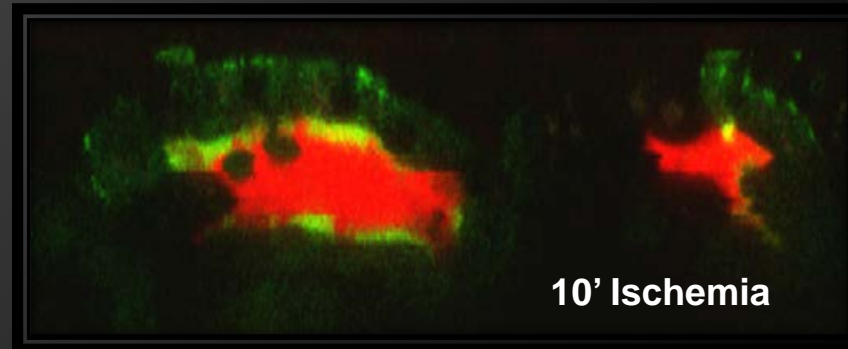
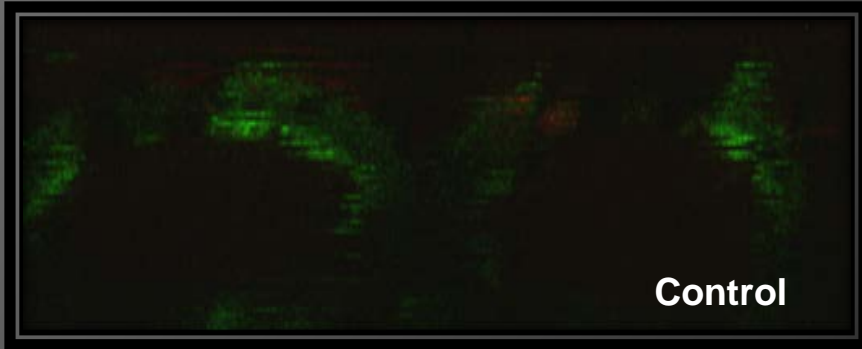
# Micropuncture Delivery of Adeno-eGFP Actin



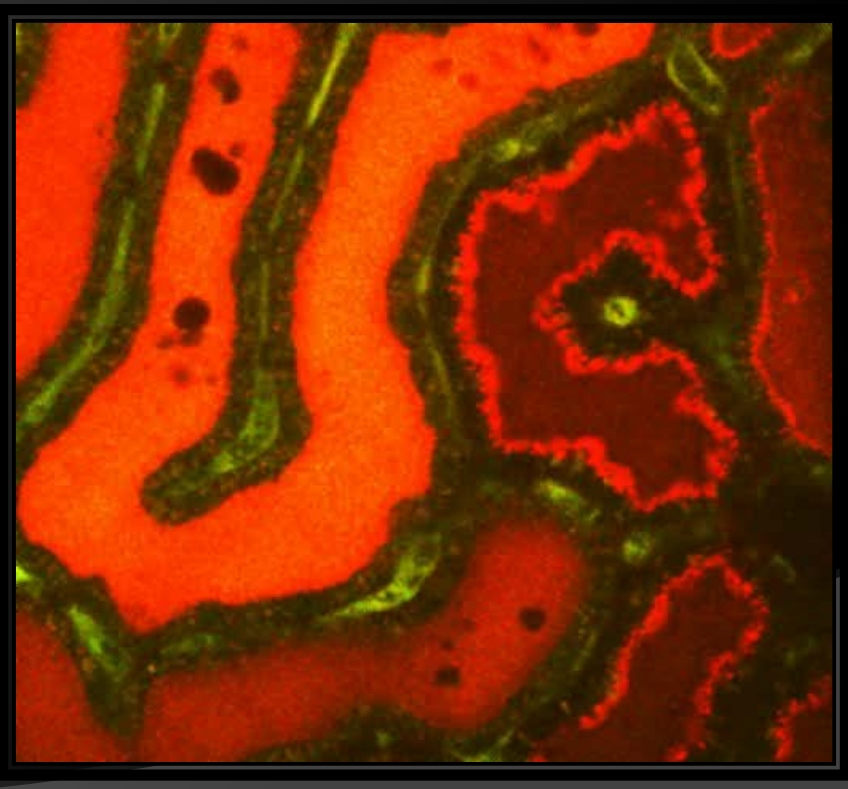
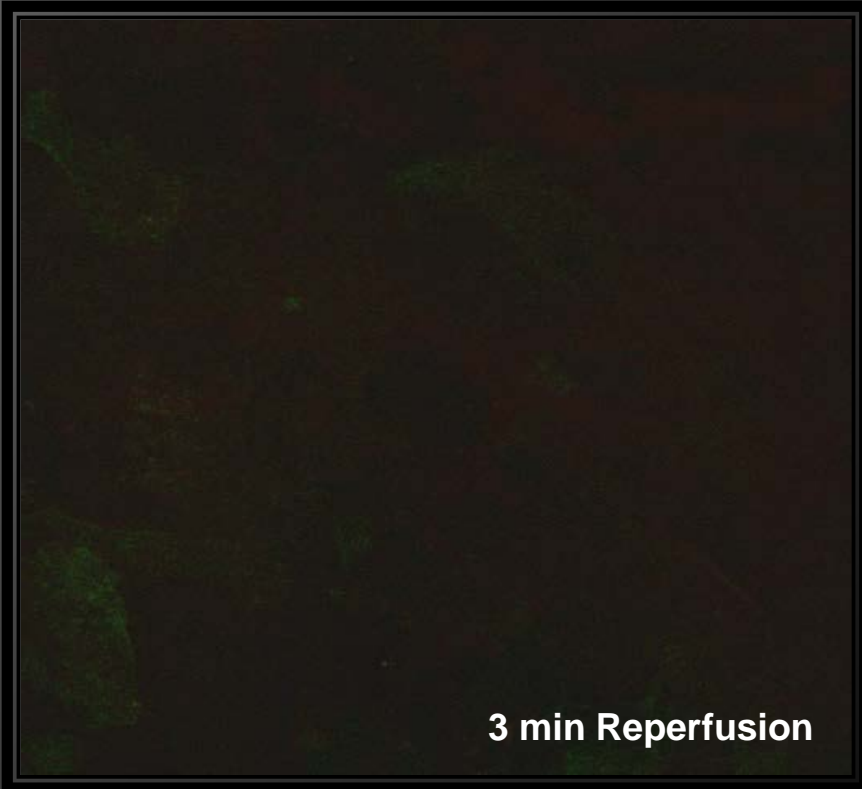
Proximal Tubules  
48 hr post Viral  
Injection

Proximal Tubules  
Post Fixation and  
rhodamine Phalloidin  
Staining;

# Apical Membrane Bleb and Tubular Cast Formation in Ischemia



eGFP-Actin and  
3kDa TR Dextran



# Actin Components of a Urinary Cast in Acute Renal Failure

