

## Original Article

# Role of $\beta_3$ adrenoceptor in rat thoracic aorta contractility

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**Abstract:** To clarify the role of  $\beta_3$ -AR in rat thoracic aorta contractility and underlying mechanisms. BRL 37344 (BRL) was used to detect the role of  $\beta_3$ -AR on rat thoracic aorta. 40 rats were randomly divided into Sham control group, Sham+SR group with SR 59230A (SR) injected, chronic heart failure (CHF) control group, and CHF+SR group. The effects of SR on thoracic aorta structure, function and NF- $\kappa$ B expression were estimated. BRL produced relaxant effect in both endothelium-intact and endothelium-free aorta rings, which was antagonized by SR and partially by L-NAME, but not changed by Propranolol. Similar results were obtained on thoracic aorta smooth muscle of CHF rats.  $\beta_3$ -AR was located in both vascular smooth muscle layer and endothelial layer. After SR injection, the aorta rings in Sham+SR group showed reduced endothelium-dependent relaxation response to Ach compared with Sham control group. The aorta rings in CHF control group showed reduced endothelium-dependent relaxation to Ach, with increased endothelium-dependent relaxation in CHF+SR group. Besides, SR injection showed increased contraction to NA. Meanwhile, NF- $\kappa$ B expression in Sham+SR group was higher than Sham control group, with increased expression in CHF control group but decreased in CHF+SR group. Microarray screening showed 48 and 42 differentially expressed miRNAs in Sham+SR rats and CHF+SR rats respectively with 19 of them associated with NF- $\kappa$ B pathways.  $\beta_3$ -AR is expressed in rat aorta and exerts relaxant effects through NOS-dependent pathway.  $\beta_3$ -AR inhibition delayed damage of vessels in development of heart failure possibly through regulation of NF- $\kappa$ B signaling pathway.

**Keywords:** Rat, thoracic aorta,  $\beta_3$  receptor, BRL 37344, SR 59230A, heart failure, endothelial function

## Introduction

Besides  $\beta_1$  and  $\beta_2$  adrenoceptors, the function of a new  $\beta$  adrenoceptor subtype,  $\beta_3$  adrenoceptor ( $\beta_3$ -AR) in cardiovascular system had drawn attention to researchers.  $\beta_3$ -AR was cloned in 1989 and firstly found in adipose tissues where it plays an important role in the regulation of lipid metabolism [1, 2]. Later on,  $\beta_3$ -AR was also found in gastrointestinal and airway smooth muscle [3, 4].  $\beta_3$ -AR was discovered in human heart in 1996 and plays the negative inotropic effect [5, 6],  $\beta_3$ -AR was also found in urinary smooth muscle and reproductive system and induced a relaxant effect [7, 8].

A previous study demonstrated that concentration-dependent vasorelaxation in rat thoracic aorta caused by SR 58611 (a preferential  $\beta_3$ -AR agonist) was not modified by pre-treatment with nadolol (a  $\beta_1/\beta_2$ -AR antagonist) but antago-

nized by SR 59230A, a  $\beta_3$ -AR antagonist [9]. However, the role of  $\beta_3$ -AR in mediating relaxation in rat aorta had been challenged by MacDonald A group whose studies showing evidence against beta 3-adrenoceptors or low affinity state of beta 1-adrenoceptors mediating relaxation in rat isolated aorta [10, 11]. To settle this dispute, in this study, we explored the inotropic effect of  $\beta_3$ -AR on thoracic aorta by localizing the  $\beta_3$ -AR expression, exploring the function and the related signaling pathway of  $\beta_3$ -AR in rat aorta.

Chronic heart failure (CHF) is the terminal stage of various cardiovascular diseases. Though myocardial cell apoptosis, inflammatory response and ventricular remodeling were involved in the development of heart failure, excessive activation of the sympathetic adrenal system which target adrenaline receptors is one of

the important changes [12, 13]. CHF was characterized by activation of sympathetic nervous system, increased catecholamine concentration, declined expression of  $\beta_1$ -AR and  $\beta_2$ -AR and increased expression of  $\beta_3$ -AR. At earlier stages of CHF, the role of  $\beta_3$ -AR was to relieve the excessive positive inotropic effect of  $\beta_1$ -AR and  $\beta_2$ -AR to prevent myocardial damage. Therefore up-regulation of the  $\beta_3$ -AR could be a compensatory mechanism to prevent further cardiomyocyte injury. However, later on, an imbalance among the adrenoceptors may promote further deterioration of heart function [14]. In recent years, some studies showed that in patients with CHF, vascular endothelial dysfunction is common and could in turn exacerbate the heart failure [15]. Given the role of endothelial cells dysfunction in CHF, whether  $\beta_3$ -AR expression associated with endothelial dysfunction remains unclear. In this study, we also investigated the effect of  $\beta_3$ -AR expression on endothelial function and the possible mechanisms underlying it.

### Materials and methods

#### Materials

BRL 37344, SR 59230A, H-89, L-NAME, Propranolol, acetylcholine (ACh) were acquired from Sigma-Aldrich (St. Louis, MO, USA). Noradrenaline bitartrate was purchased from Jinyao AminoAcid Ltd, (Tianjin, China).  $\beta_3$  primary antibody was purchased from Boyan Biotech Ltd (Shanghai, China), NF- $\kappa$ B p65 primary antibody was purchased from Cell Signaling Technology (Danvers, MA, USA). RNA Stabilization reagent, RNA zap, miRNeasy mini kit, miScript II RT Kit, miScript SYBR Green PCR kit and 96 panel miScript miRNA PCR arrays plates were all purchased from Qiagen (Germany). The SABC immunohistochemical kit was provided by BOSTER (Shanghai, China). CFX96 Real-time PCR was from BIO-RAD (Berkeley, CA, USA). RIPA extraction buffer, PMSF, BCA kit and SDS-PAGE gel were purchased from Beyotime (Guangzhou, China). ChemiDoc™ MP imaging system was provided by BIO-RAD, USA.

#### Animal models

Adult male Sprague-Dawley (SD) rats weighing 180-220 g were provided by the Experimental Animal Centre of Military Medical Sciences in

Beijing. All animal care and experimental procedures followed ethical standards of animal use and were approved by Institutional Animal Care and Use Committee of Shanxi Medical University. The rats had free access to water and standard laboratory chow diet and were kept at a light/dark cycle of 12 hours at 20-22°C. The rats were divided into Sham group (n=70) and CHF group (n=130). Chronic heart failure (CHF) was produced by left coronary artery ligation. Briefly, SD rats were anaesthetized with chloral hydrate (10%, 0.3 ml·100 g<sup>-1</sup>, Shanghai Biological Engineering Co Ltd) and ventilated by trachea cannula incubation. The heart was exposed by left thoracotomy and the descending coronary artery of the left anterior was ligated directly proximal to the main branching point. Then the thorax was closed, the rats were extubated immediately after their spontaneous respiration was sufficient and allowed to be recovered under strictly controlled conditions. The Sham group received an identical operation but without ligation. 20 rats from Sham group and 20 rats from CHF group were divided into four groups, Sham control group (n=10), Sham+SR group (n=10), CHF control group (n=10), CHF+SR group (n=10). Rats in SR application groups received intraperitoneal injection of 85 nmol SR 59230A in 1 ml saline twice a day for five weeks. Rats in control groups received intraperitoneal injection of 1 ml saline twice a day. The left rats in Sham group and CHF group were cared in the animal facilities for three more weeks.

#### Echocardiograph

Echocardiograms were recorded at the 4th week after the surgery. Rats were anaesthetized by intraperitoneal injection of chloral hydrate (10%, 0.3 ml·100 g<sup>-1</sup>). Cardiac structure and function were assessed using transthoracic echocardiogram (vivid7/dimension, GE, USA). Detection parameters include: left ventricular diastolic diameter (LVIDd), left ventricular systolic diameter (LVIDs), left ventricular ejection fraction (LVEF) and left ventricular fractional shortening (LVFS). The results obtained were the mean values of three cardiac cycles.

#### H&E staining of the heart and aorta tissue

Rats from all groups were euthanized by overdose chloral hydrate. The heart was excised and washed with saline to remove the excess

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**Table 1.** Echocardiographic values of chronic heart failure (CHF)

Grouping	LVIDd (mm)	LVIDs (mm)	EF (%)	FS (%)
Sham group (n=6)	5.12±0.47	3±0.33	78±4.2	41.17±3.92
CHF group (n=7)	6.58±1.05 <sup>b</sup>	4.72±0.65 <sup>c</sup>	59.71±8.26 <sup>c</sup>	27.29±5.56 <sup>c</sup>

Values are means ± SD. <sup>b</sup> $P < 0.05$ , <sup>c</sup> $P < 0.01$  vs. Sham group.

connective tissues and blood. The bibulous paper was used to absorb the water on samples. The aorta rings were obtained with the same process and treatment. Then the heart and aorta rings were stored in formalin, embedded in paraffin and cut into slices at 6- $\mu$ m thickness and dried in a thermostat at 37°C for 24 hours. The slices were transparented with dimethylbenzene and dehydrated with ethanol at gradient, then stained with hematoxylin-eosin (H&E), dehydrated and transparented again. Histopathologic images were obtained with the microscope (LEICA, Germany).

### *Thoracic aorta rings preparation and tension studies*

After anaesthetized, the descending thoracic aorta of rats was isolated and dissected to prevent endothelium damage and placed immediately into the oxygenated ice-cold Krebs-Henseleit (Krebs) solution composed of (in mmol·L<sup>-1</sup>): NaCl, 144; KCl, 5.8; glucose, 11.1; HEPES, 5.0; MgCl<sub>2</sub> 1.2; CaCl<sub>2</sub> 2.5 (pH 7.4). After removing fat and connective tissues, thoracic aorta was cut into 3-5 mm rings. In some rings, the endothelium was removed by gentle rubbing of the intimal surface with a fine cardellino. The aorta rings were then suspended on stainless-steel hooks in a 5 ml organ bath filled with a continuously oxygenated Krebs solution at 37°C (pH 7.4).

The aorta rings were progressively stretched to a tension of 2 g and allowed to equilibrate for 60 min with replacement of fresh Krebs solution every 15 min. After reaching equilibrium, the vascular rings were tested for viability using 30 mmol·L<sup>-1</sup> of KCl containing Krebs solution in which NaCl was partially replaced by an equimolar amount of KCl. Only vascular rings with less than 10% contraction differences were used for the experiments. The vascular tension was recorded through a force displacement transducer (ADI, USA).

The endothelial function of the aorta rings was tested by the presence of at least 70% relax-

ation in response to acetylcholine (Ach, 10<sup>-6</sup> mol·L<sup>-1</sup>) in rings pre-contracted with Noradrenaline (NA, 10<sup>-6</sup> mol·L<sup>-1</sup>). Endothelium free was confirmed by the absence of acetylcholine-induced relaxation.

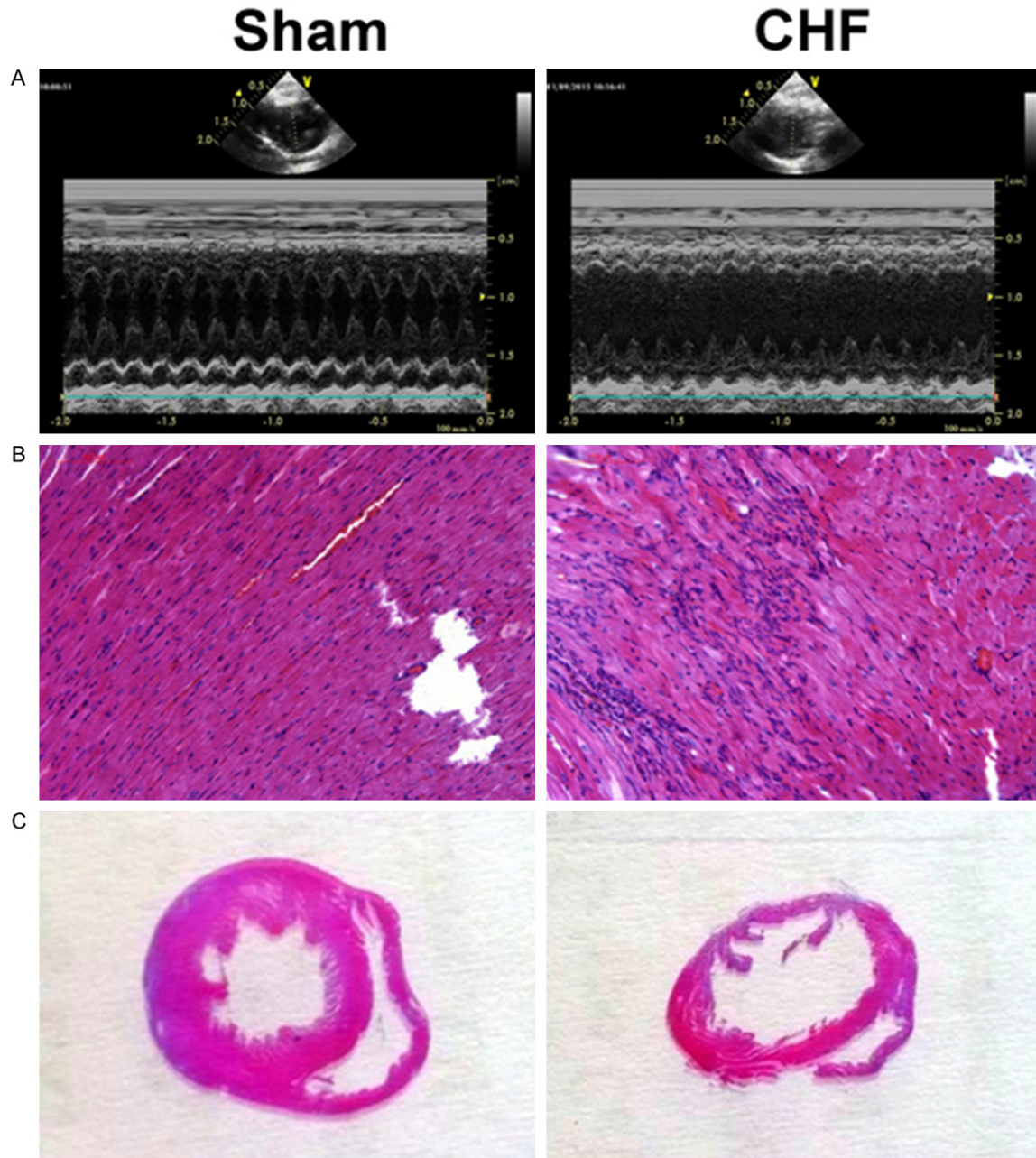
Functional and mechanism studies of  $\beta_3$ -AR in rat thoracic aorta were carried out by adding BRL 37344 (BRL), a specific  $\beta_3$ -AR agonist into the tissue bath after vasoconstriction reached a steady state in high concentration of KCl. The tension of the vascular rings was recorded in presence and/or absence of SR 59230A (SR), Propranolol, L-NAME and H-89 respectively.

### *Effect of SR 59230A on the endothelial function and vascular contractive response*

Tissues from rats of the four groups were used to perform the following experiments. (1) Arterial diastolic responses to Ach: After the equilibration period, artery rings were constricted with NA (10<sup>-6</sup> mol·L<sup>-1</sup>). The integrity of the endothelium was tested with Ach (10<sup>-12</sup>-10<sup>-4</sup> mol·L<sup>-1</sup>) when vasoconstriction reached a steady state. Then the cumulative concentration response curves to Ach were obtained. (2) Arterial contractive responses to NA: After 30 min of Ach wash out, the artery rings were constricted with NA (10<sup>-8</sup>-10<sup>-5</sup> mol·L<sup>-1</sup>), wash out again when it reached a stable state followed by addition of 60 mmol·L<sup>-1</sup> of KCl. Thoracic aortic vasoconstriction response was expressed by the percentage of contraction caused by NA and contraction induced by KCl. After that, a cumulative concentration-response curve to NA was constructed.

### *Immunohistochemistry (IHC)*

Slices with paraffin embedded sections were deparaffined in dimethyl benzene twice, dehydrated with gradient ethanol followed by hydration. Then the slices were treated with 10% hydrogen peroxide for 10 min at room temperature to block endogenous peroxidase. After antigen retrieving and blocking, the slices were incubated with the primary antibody at 4°C overnight. The final concentration of anti-mouse  $\beta_3$  receptor is 1:1000, anti-mouse NF- $\kappa$ B is 1:600. After that, the slices were incubated with secondary antibody at room temperature for 30 min, then with SABC for 20 min. The slices were colored using DAB (Zhong Shan-Golden



**Figure 1.** Establishment of chronic heart failure. A. Representative echocardiograms of Sham and CHF rats. B. Representative H&E staining of myocardial structure ( $\times 200$ ). C. Ventricular cavity images of rats. Left panel: Sham rats; Right panel: CHF rats.

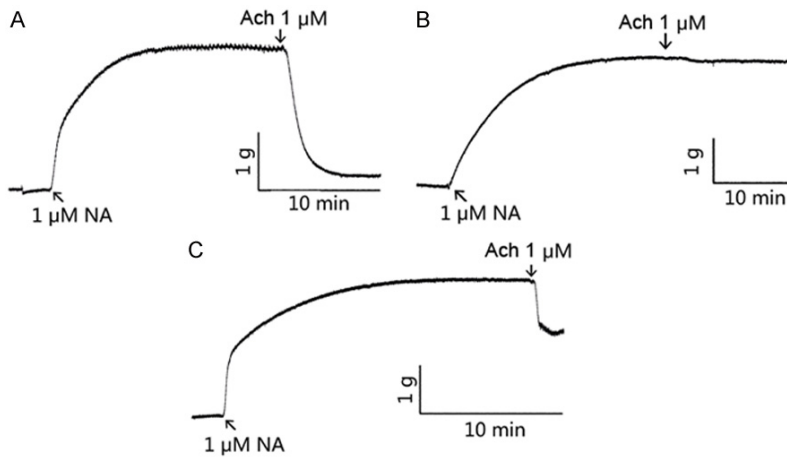
Bridge, China), hematoxylin stained, dehydrated, transparented and mounted with the resin. The positive granules appeared as brown particles. Standard for evaluation of IHC scoring is based on stain extent and intensity. The stain extent scoring was given from 0 to 4, where 0 was none observed and 4 was  $>80\%$  of staining. The stain intensity grading was 0 to 3,

where 0 represented non-staining and 3 represented the darkest brown staining.

#### *Western blot*

Standard western blotting procedures were carried out. The antibodies used were: NF- $\kappa$ B p65 primary antibody (1:1000; Cell Signaling

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**Figure 2.** Detection of thoracic aorta endothelial integrity. A. Sham endothelium-intact group. B. Endothelium-free group. C. CHF endothelium-intact group.

Technology, US). ChemiDoc™ MP imaging system (BIO-RAD, USA) was used for exposure.

### *miScript miRNA PCR arrays*

Thoracic aorta tissues from rats of the four groups were used for RNA isolation. Total RNA extraction was performed using miRNeasy Mini Kit according to the manufacturer's protocol. RNA concentration was determined by Nanodrop 2000c spectrophotometer (Thermo, USA). RNAs were stored at  $-80^{\circ}\text{C}$  until use.

cDNA synthesis was carried out using the miScript II RT Kit. According to the manufacturer's protocol, the reverse transcription reaction system was incubated for 60 min at  $37^{\circ}\text{C}$ , followed by 5 min at  $95^{\circ}\text{C}$ . After the reverse transcription, cDNA were stored at  $-20^{\circ}\text{C}$  for miScript miRNA PCR Arrays procedure within 1 week.

Real-time PCR was performed by using the miScript SYBR Green PCR kit. Template cDNAs were added into the reaction system and mixed well following the manufacturer's instructions. The 96 well plate was applied to screen the candidate microRNAs (miRNAs) which was centrifuged then placed in the CFX96 Real-time PCR machine in a reaction conditions of an initial activation of the DNA Polymerase for 15 min at  $95^{\circ}\text{C}$ , followed by 40 cycles of denaturation for 15 sec at  $94^{\circ}\text{C}$ , annealing for 30 sec at  $55^{\circ}\text{C}$  and extension for 30 sec at  $70^{\circ}\text{C}$  with the collection of the fluorescence data being performed during the extension step. The fold

changes of miRNAs expression were calculated by the  $2^{-\Delta\Delta\text{CT}}$  method.

### *Statistical analysis*

Data are expressed as mean  $\pm$  SD. Comparison of two treatment groups using two-tail unpaired student t-test with the SPSS program package (SPSS version 16.0). The values of  $P < 0.05$  were considered to be statistically significant.

## **Results**

### *Establishment of heart*

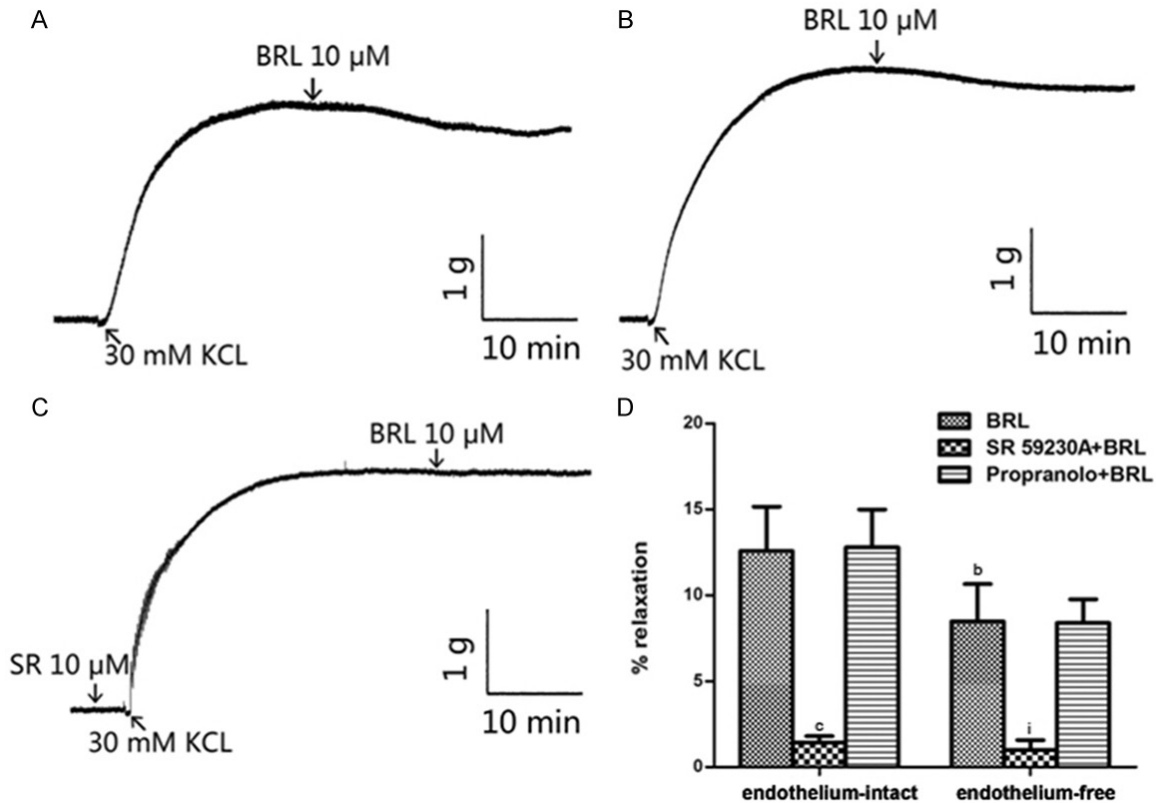
#### *failure model*

The cardiac function was assessed by echocardiography (**Table 1** and **Figure 1**). Compared with the Sham group, EF% and FS% were significantly decreased in CHF group ( $59.71 \pm 8.26\%$  vs.  $78 \pm 4.2\%$ ;  $27.29 \pm 5.56\%$  vs.  $41.17 \pm 3.92\%$ , respectively,  $P < 0.01$ ) (**Table 1**). LVIDd and LVIDs were also significantly increased ( $P < 0.05$  and  $P < 0.01$  respectively) in CHF group, which indicated a decrease in the LV contractility (**Table 1**). In addition, cardiac systolic dysfunction was observed in CHF groups (**Figure 1A**). The myocardial structure in Sham group presented clear boundaries and regular arrangement, while the myocardial fibers were irregular and unclear in CHF group. Furthermore, the cardiomyocytes had neutrophils infiltration (**Figure 1B**) and expansion of left ventricular cavity, and left ventricular walls were thin in CHF group (**Figure 1C**).

#### *Detection of endothelial integrity*

The endothelial integrity was assessed by application of acetylcholine (Ach,  $10^{-6}$  mol·L $^{-1}$ ) on aortic rings pre-contracted with Noradrenaline bitartrate incubation (NA,  $10^{-6}$  mol·L $^{-1}$ ). For Sham rats, Ach induced a greater relaxation in endothelium-intact group, in endothelium-free group, the relaxant effect was inhibited. In addition, for endothelium-intact aorta rings, Ach induced more relaxation in Sham group than CHF group (**Figure 2**).

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**Figure 3.** BRL relaxed both endothelium-intact and endothelium-free aorta. A. BRL relaxed thoracic aorta in endothelium-intact tissue. B. BRL relaxed aorta in endothelium-free tissue. C. Effect of SR on the relaxant effect of BRL in endothelium-intact tissue. D. Mechanistic studies of BRL-induced vasodilation. Results are expressed as percentage of relaxation pre-contracted by 30 mmol-L<sup>-1</sup> of KCl. Values were represented as mean  $\pm$  SD. <sup>b</sup> $P < 0.05$ , <sup>c</sup> $P < 0.01$  vs. Sham endothelium-intact BRL group. <sup>i</sup> $P < 0.01$  vs. Sham endothelium-free BRL group.

### Role of $\beta_3$ -AR on thoracic aorta

BRL induced a vasorelaxation of  $12.71 \pm 2.58\%$  ( $n=6$ ) (Figure 3A, 3D) in endothelium-intact aorta rings and  $8.78 \pm 1.83\%$  ( $n=6$ ) (Figure 3B, 3D) in endothelium-free aorta rings ( $P < 0.05$ ). To elucidate if these actions are induced by activation of  $\beta_3$ -AR alone, the relaxation of BRL were also measured in the presence of Propranolol (the  $\beta_1$ - and  $\beta_2$ -ARs antagonist) and SR 59230A (SR, the  $\beta_3$ -AR antagonist). Propranolol pre-treatment had no effect on the relaxant effect of BRL in both endothelium-intact and endothelium-free aorta in Sham group (Figure 3D). After pre-treatment with SR, the relaxant ability of BRL was inhibited (Figure 3C, 3D). The above results demonstrated that BRL relaxed the aorta ring through  $\beta_3$ -AR activation both in endothelium-intact and endothelium-free vessel.

### Mechanisms of BRL 37344-induced relaxation in Sham rat aorta

The relaxant effect of BRL was remarkably attenuated by pre-treatment of L-NAME both in

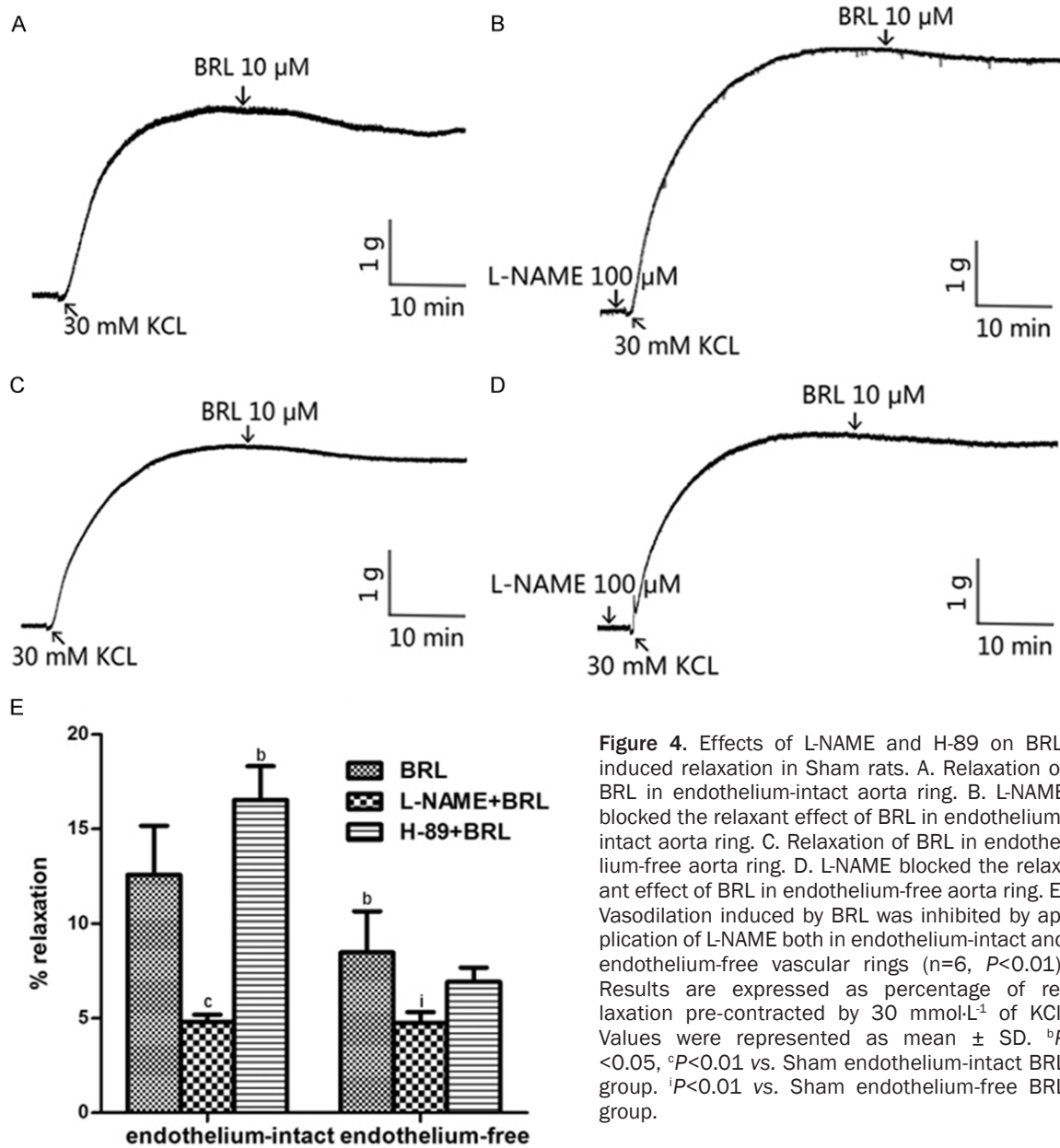
endothelium-intact ( $4.81 \pm 0.38\%$ ) (Figure 4A, 4B) and endothelium-free groups ( $4.74 \pm 0.58\%$ ) (Figure 4C, 4D). However, the effect of H-89 was not statistically significant (Figure 4E). In conclusion, vasodilation induced by  $\beta_3$ -AR was related to NO synthase pathway.

### Vasodilation effect of $\beta_3$ -AR on CHF rat aorta smooth muscle

Immunohistochemical staining showed that  $\beta_3$ -AR was distributed in thoracic aorta endothelium and a part of the smooth muscle in the Sham group (Figure 5A). The expression of  $\beta_3$ -AR was up-regulated significantly in the thoracic aorta smooth muscle in CHF group (Figure 5A).

BRL induced stronger relaxant effect in CHF aorta smooth muscle ( $13.4 \pm 1.9\%$ ,  $n=6$ ,  $P < 0.01$ ) (Figure 5B) than that in Sham aorta smooth muscle. L-NAME treatment reduced the relaxation effect to  $2.23 \pm 0.77\%$  ( $n=7$ ,  $P < 0.01$ ) and H-89 application partially inhibited the vasodilation effect ( $n=6$ ,  $P > 0.05$ ) (Figure 5B,

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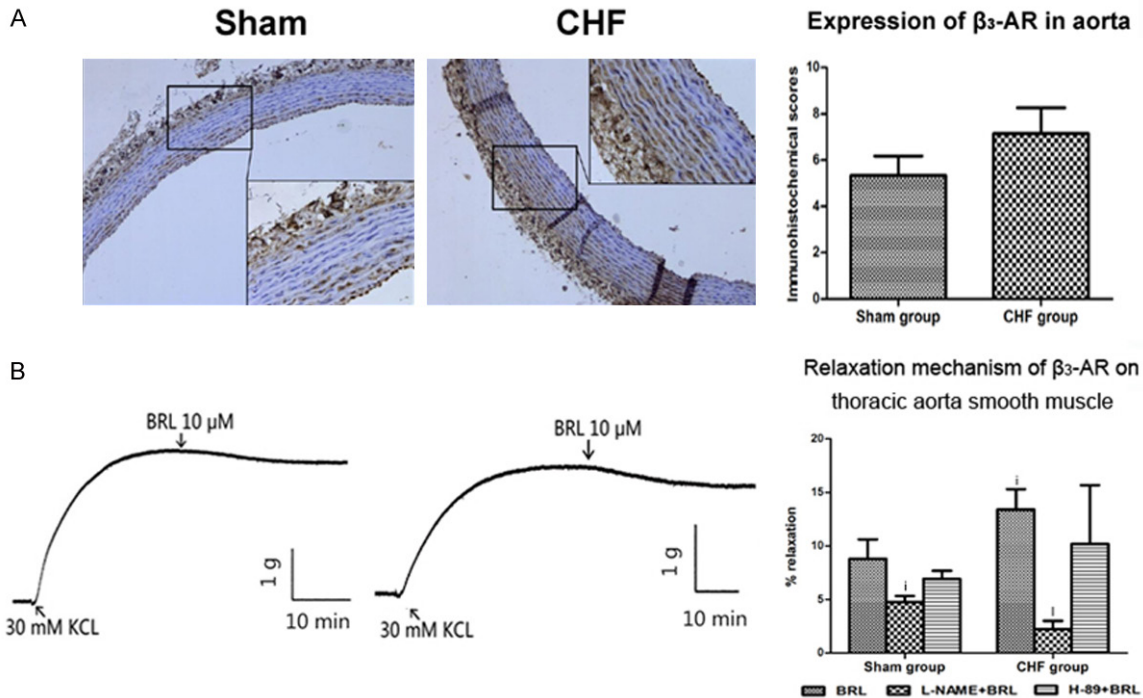
**Figure 4.** Effects of L-NAME and H-89 on BRL-induced relaxation in Sham rats. A. Relaxation of BRL in endothelium-intact aorta ring. B. L-NAME blocked the relaxant effect of BRL in endothelium-intact aorta ring. C. Relaxation of BRL in endothelium-free aorta ring. D. L-NAME blocked the relaxant effect of BRL in endothelium-free aorta ring. E. Vasodilation induced by BRL was inhibited by application of L-NAME both in endothelium-intact and endothelium-free vascular rings ( $n=6$ ,  $P<0.01$ ). Results are expressed as percentage of relaxation pre-contracted by 30 mmol·L<sup>-1</sup> of KCl. Values were represented as mean  $\pm$  SD. <sup>b</sup> $P<0.05$ , <sup>c</sup> $P<0.01$  vs. Sham endothelium-intact BRL group. <sup>i</sup> $P<0.01$  vs. Sham endothelium-free BRL group.

right). The inhibitory effect of L-NAME was stronger in CHF aorta smooth muscle than that in Sham aorta smooth muscle. Taken together, during development of heart failure, the expression of  $\beta_3$ -AR in aorta smooth muscle was up-regulated to exert vasodilator effect which was related to the NOS pathway.

### *The effect of SR 59230A on rat thoracic aorta endothelial function and contractive response*

Endothelial function and vascular contractive response were detected by vascular perfusion after five weeks intraperitoneal injection of SR

*in vivo*. Sham+SR group showed a reduced endothelium-dependent relaxation response to Ach ( $E_{max}=73.79\pm 8.3\%$ ,  $n=6$  vs.  $E_{max}=90.22\pm 6.15\%$ ,  $n=6$ ,  $P<0.01$ ) and an increased contraction response to NA ( $E_{max}=95.02\pm 3.79\%$ ,  $n=8$  vs.  $E_{max}=79.99\pm 2.28\%$  of Sham,  $n=6$ ,  $P<0.01$ ) (**Figure 6A, 6C**); The concentration-dependent response to Ach in CHF control group was declined to  $46.64\pm 18.47\%$  ( $n=6$ ,  $P<0.01$  vs. Sham control group) but was  $63.67\pm 10.8\%$  ( $n=6$ ,  $P>0.05$  vs. CHF control group) after 5 weeks injection of SR (**Figure 6B**).  $E_{max}$  of the concentration-dependent response caused by NA in CHF control group



**Figure 5.** Expression of  $\beta_3$ -AR in rat thoracic aorta and its relaxation action. ( $\beta_3$ -AR immunohistochemical staining, original magnification,  $\times 100$ ;  $\times 400$ ). A. Left: Expression of  $\beta_3$ -AR in rat thoracic aorta of Sham group; Middle: Expression of  $\beta_3$ -AR in rat thoracic aorta of CHF group; Right: The immunohistochemical scores of the expression of  $\beta_3$ -AR. B. Mechanisms of vascular smooth relaxation mediated by  $\beta_3$ -AR activation. Left: Representative relaxation curve of aorta smooth muscle in Sham group; Middle: Representative relaxation curve of aorta smooth muscle in CHF group; Right: Mechanisms of  $\beta_3$ -AR activation induced relaxation of smooth muscle in CHF group. Results are expressed as percentage of relaxation pre-contracted by 30 mmol·L<sup>-1</sup> of KCl. Values were represented as mean  $\pm$  SD. \* $P < 0.01$  vs. Sham endothelium-free BRL group. <sup>†</sup> $P < 0.01$  vs. CHF endothelium-free BRL group.

was increased to  $90.75 \pm 8.29\%$  ( $n=6$ ,  $P < 0.05$ ) and increased to  $100.32 \pm 4.76\%$  ( $n=6$ ,  $P < 0.05$  vs. CHF control group) after 5 weeks injection of SR (Figure 6D). These results indicated that  $\beta_3$ -AR mediates the relaxant effect in rat thoracic aorta and inhibition of  $\beta_3$ -AR induced endothelial injury in Sham rat's aorta, but delayed the damage of aorta caused by CHF to some extent after injection of SR.

#### Structural changes of rat thoracic aorta and NF- $\kappa$ B expression

In Sham control group, the endothelial cells were intact, smooth muscle cells in the tunica media were arranged in order with clear structure of blood vessel wall. In Sham+SR group, the tunica intima lost integrality with thickened tunica media and disordered arrangement of elastic fibers. In CHF control group, smooth muscle cells in the tunica media were disorganized and proliferated with obvious endothelial denudation, while in the CHF+SR group,

arrangement of the smooth muscle cells was relatively regular (Figure 7A).

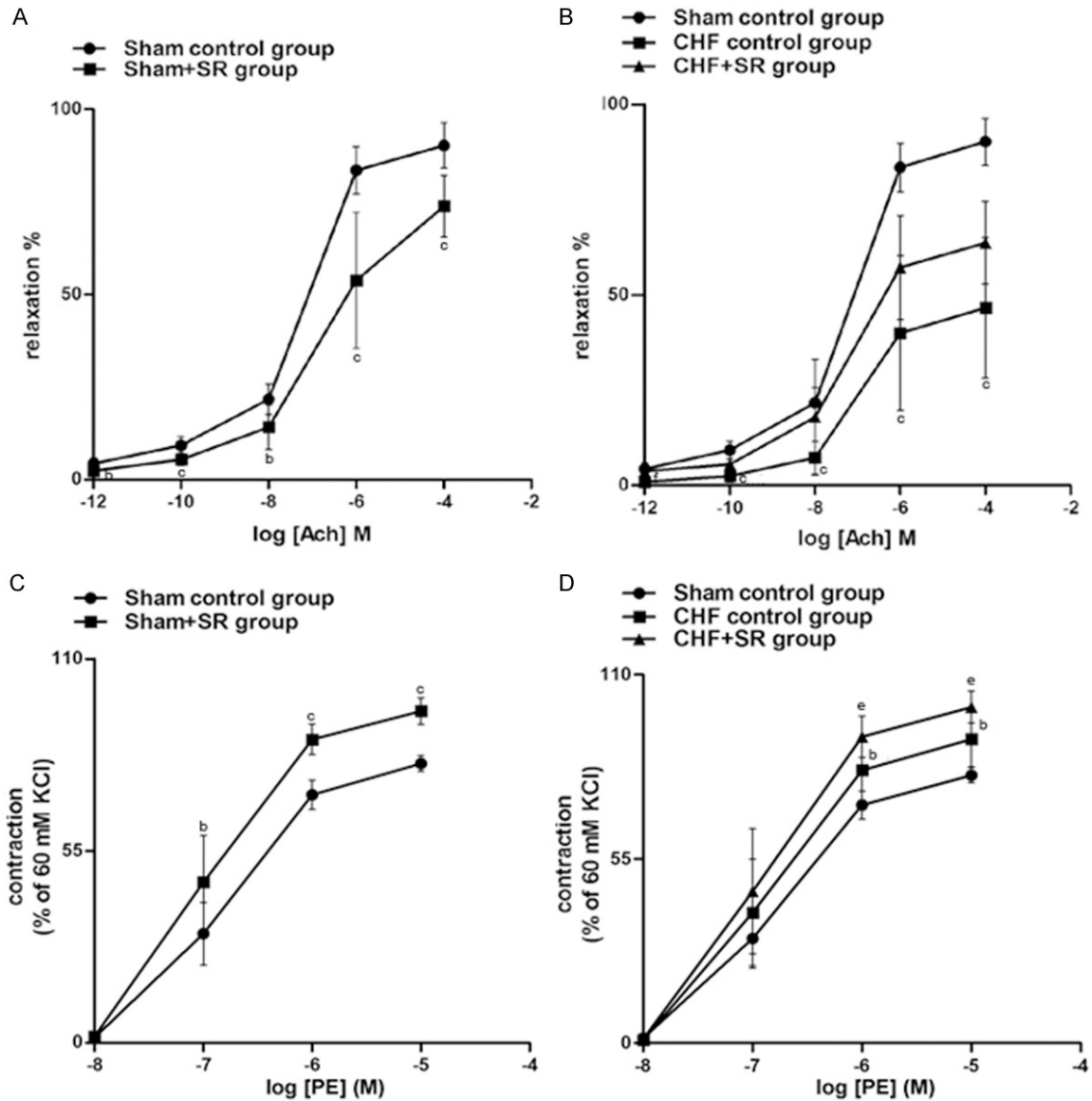
NF- $\kappa$ B expression in aorta was performed using immunohistochemistry analysis and western blot (Figure 7B-E). The expression of NF- $\kappa$ B in aorta was increased a little in Sham+SR group compared to the Sham control group, NF- $\kappa$ B immunostaining was stronger in the CHF group (Figure 7B, 7C), indicated an increased expression of NF- $\kappa$ B in development of heart failure. After 5 weeks of in vivo SR application, the expression of NF- $\kappa$ B in CHF rat aorta reduced, coinciding with the functional studies mentioned above (Figure 6).

#### Role of $\beta_3$ -AR on the expression profiles of miRNAs in rat thoracic aorta

After extracting RNAs from rat thoracic aorta of the SR-untreated and -treated rats with or without heart failure, we did a microarray screening to evaluate the expression patterns of miR-



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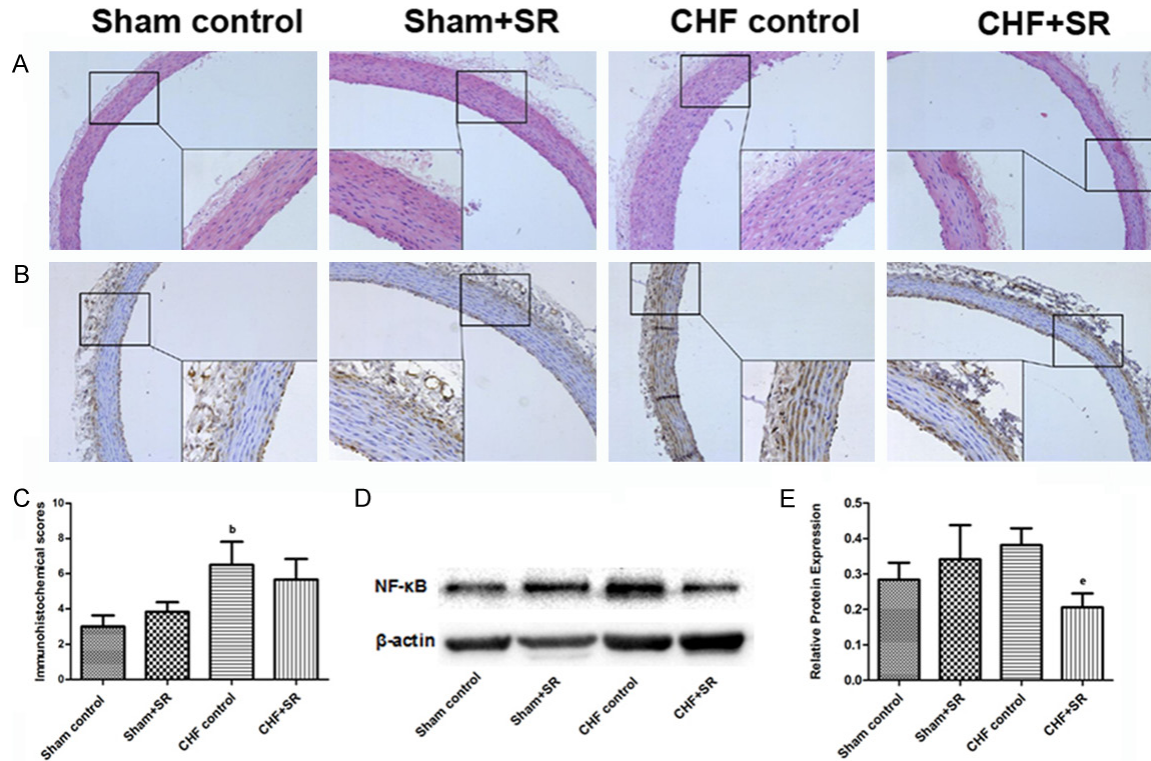
**Figure 6.** Influence of *in vivo* SR application on endothelial function and contractive response of rat thoracic aorta. A. Effect of SR on vascular endothelial function in Sham group. B. Effect of SR on vascular endothelial function in CHF group. C. Effect of SR on vascular contractive response in Sham group. D. Effect of SR on vascular contractive response in CHF group. Values were mean  $\pm$  SD. <sup>b</sup> $P < 0.05$ , <sup>c</sup> $P < 0.01$  vs. Sham control group. <sup>e</sup> $P < 0.05$ , <sup>f</sup> $P < 0.01$  vs. CHF control group.

NAs. The results showed 14 up-regulated miRNAs and 34 down-regulated miRNAs in Sham+SR group (Figure 8A, 8B). Under heart failure condition, there were 23 miRNAs up-regulated and 19 miRNAs down-regulated (Figure 8C, 8D). Among them, the expression of 25 miRNAs changed after 5 weeks injection of SR. We identified 9 up-regulated miRNAs and 16 down-regulated miRNAs that are related to  $\beta_3$ -AR inhibition both in Sham and CHF rat aortas (Figure 8E, 8F; Table 2). After literature research, 19 of them were found to be related to NF- $\kappa$ B path-

way (Table 2), among them expression of rno-miR-451-5p and rno-let-7c-5p reached a statistical significance.

### Discussion

Several reports pointed out that  $\beta_3$ -AR agonist SR 58611 and a selective  $\beta$ -adrenoceptor ( $\beta_1$ -AR) antagonist nebivolol exhibited relaxation effect in rat thoracic aorta, and the effect was blocked in the presence of  $\beta_3$ -AR antagonists such as L-748, 377 or SR 59230A [9, 32]. All of



**Figure 7.** Structure and NF- $\kappa$ B expression of rat thoracic aorta. A. H&E staining of rat thoracic aorta. (Outside,  $\times 100$ ; inside,  $\times 400$ ). B. NF- $\kappa$ B expression in rat thoracic aorta. C. The immunohistochemical scores of NF- $\kappa$ B expression in rat thoracic aorta. D. Western blot result of NF- $\kappa$ B expression. E. Relative gray value of NF- $\kappa$ B blots to  $\beta$ -actin. <sup>b</sup> $P < 0.05$  vs. Sham control group, <sup>e</sup> $P < 0.05$  vs. CHF control group.

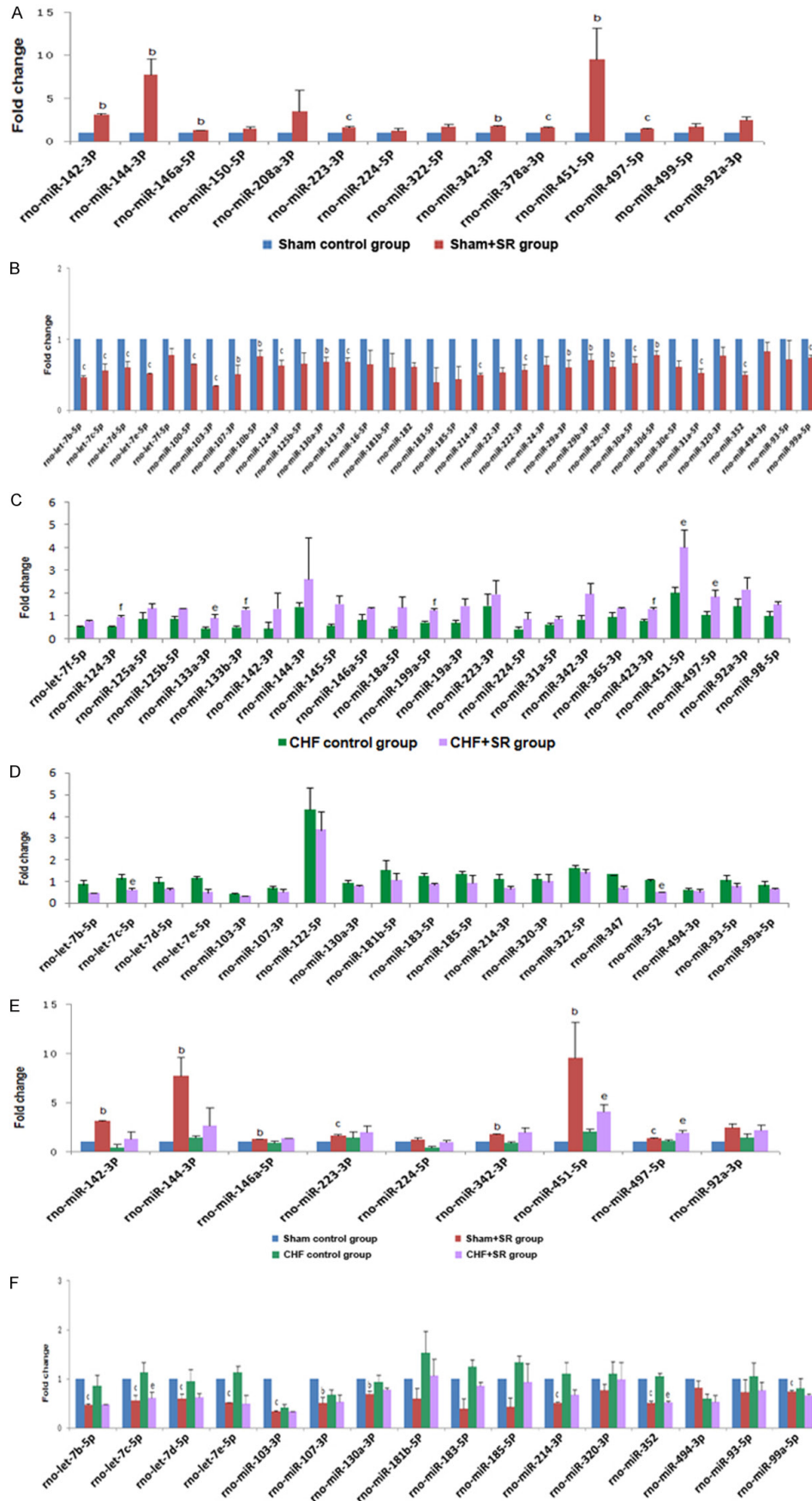
these results suggested that  $\beta_3$  receptor exists in the aorta with vasodilation effect, consistent with our observation in the present study showing that BRL 37344, a specific  $\beta_3$ -AR agonist, could induce a relaxant effect in rat thoracic aorta through activation of a NO synthase pathway.

The relaxant effect of BRL 37344 had been investigated in isolated common carotid arteries of the rat [33] and smooth muscle of the gastrointestinal tract before [34, 35]. However, the localization of  $\beta_3$ -AR in rat thoracic aortic has not been defined with controversial results among different studies. Trochu et al. indicated that isoprenaline-induced relaxation in aortic rings after endothelium removal, but only at higher concentrations and pretreatment of nadolol abolished this relaxant effect [9]. However, RT-PCR analysis detected  $\beta_3$ -AR transcripts both in thoracic aorta and freshly isolated endothelial cells [36]. To resolve the discrepancy, immunohistochemical staining with a specific anti- $\beta_3$ -AR monoclonal antibody was used in this study and showed that  $\beta_3$ -AR was

distributed in both rat thoracic aorta endothelium and smooth muscle layer.

Previous studies demonstrated that  $\beta_3$ -AR-mediated the negative inotropic effect was via anitricoxidesynthase(NOS)/nitricoxide(NO)/soluble guanylate cyclase (sGC)/cGMP pathway in cardiomyocytes [6]. Others reported that activation of  $\beta_3$ -AR was through  $G\alpha_s$ /cAMP/PKA pathway in the portal vein myocytes of rat [37] and pre-treatment with L-NMMA partially inhibited isoprenaline-induced relaxation, in addition, SR 58611 also produced a slight relaxation in the presence of L-NMMA [9]. To investigate the role of NO synthase and PKA pathway in vasorelaxation induced by  $\beta_3$ -AR activation, aorta rings were pre-incubated with L-NAME and H-89 (PKA blocker) separately in this research and showed that the relaxant action of BRL was remarkably attenuated by pre-treatment with L-NAME on endothelium-intact and endothelium-free aorta rings. However, H-89 slightly inhibited the vasodilation of the endothelium-free samples. All the

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## $\beta_3$ adrenoceptor and thoracic aorta contractility

**Figure 8.** Expression of miRNAs in rat aorta. A, B. Expression of miRNAs in Sham and Sham+SR group. C, D. Expression of miRNAs in CHF and CHF+SR group. E, F. Expression of altered miRNAs after SR administration in rat aorta. <sup>b</sup>*P*<0.05, <sup>c</sup>*P*<0.01 vs. Sham control group. <sup>e</sup>*P*<0.05, <sup>f</sup>*P*<0.01 vs. CHF control group.

**Table 2.** miRNAs related to  $\beta_3$ -AR inhibition

miRNA	Up-regulated	Down-regulated	Related to NF- $\kappa$ B
rno-miR-142-3p <sup>b</sup>	<sup>b</sup> <i>p</i> <0.05		Yes [16]
rno-miR-144-3p <sup>b</sup>	<sup>b</sup> <i>p</i> <0.05		Yes [17]
rno-miR-146a-5p <sup>b</sup>	<sup>b</sup> <i>p</i> <0.05		Yes [18]
rno-miR-223-3p <sup>c</sup>	<sup>c</sup> <i>p</i> <0.01		Yes [19]
rno-miR-224-5p			Yes [20]
rno-miR-342-3p <sup>b</sup>	<sup>b</sup> <i>p</i> <0.05		Yes [21]
rno-miR-451-5p <sup>b,e</sup>	<sup>b</sup> <i>p</i> <0.05, <sup>e</sup> <i>p</i> <0.05		Yes [22]
rno-miR-497-5p <sup>c,e</sup>	<sup>c</sup> <i>p</i> <0.01, <sup>e</sup> <i>p</i> <0.05		
rno-miR-92a-3p			Yes [23]
rno-let-7b-5p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	Yes [24]
rno-let-7c-5p <sup>c,e</sup>		<sup>c</sup> <i>P</i> <0.01, <sup>e</sup> <i>P</i> <0.05	Yes [24]
rno-let-7d-5p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	Yes [24]
rno-let-7e-5p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	Yes [24]
rno-miR-103-3p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	Yes [25]
rno-miR-107-3p <sup>b</sup>		<sup>b</sup> <i>P</i> <0.05	
rno-miR-130a-3p <sup>b</sup>		<sup>b</sup> <i>P</i> <0.05	Yes [26]
rno-miR-181b-5p			Yes [27]
rno-miR-183-5p			Yes [28]
rno-miR-185-5p			
rno-miR-214-3p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	Yes [29]
rno-miR-320-3p			
rno-miR-352 <sup>c,e</sup>		<sup>c</sup> <i>P</i> <0.01, <sup>e</sup> <i>P</i> <0.05	
rno-miR-494-3p			Yes [30]
rno-miR-93-5p			Yes [31]
rno-miR-99a-5p <sup>c</sup>		<sup>c</sup> <i>P</i> <0.01	

<sup>b</sup>*P*<0.05, <sup>c</sup>*P*<0.01 vs. Sham control group. <sup>e</sup>*P*<0.05 vs. CHF control group.

results suggested that  $\beta_3$ -AR-mediated vascular relaxation was related to the NO synthase-dependent pathway.

Accumulating evidences suggested that  $\beta_3$ -AR is activated at higher concentrations of catecholamines, and plays a negative inotropic role in heart [14]. Cardiovascular diseases, especially the chronic heart failure were associated with increased tissue and circulating catecholamines which mediate  $\beta_3$ -AR up-regulation in vivo [38]. When heart failure happened, the vessels will be in high catecholamine environment, possibly leading to up-regulation of  $\beta_3$ -AR in the vessels. In this study, we showed the different expressions of  $\beta_3$ -AR in thoracic aorta

between control (Sham group) and heart failure rats (CHF group). Meanwhile, BRL induced a stronger vasodilation effect on thoracic aorta smooth muscle in heart failure rats than Sham rats and the expression of  $\beta_3$ -AR was significantly up-regulated in thoracic aorta smooth muscle of heart failure rats. Researchers speculated that up-regulation of  $\beta_3$ -AR in failing heart may counterbalance the harmful effects of the  $\beta_1$ -AR and perhaps be beneficial in the early stages of heart failure, although ultimately leading to myocardium damage [14, 39]. Chronic heart failure led to endothelial diastolic dysfunction. In the present study, we also evaluated the role of  $\beta_3$ -AR in vascular function and showed that SR 59230A injection enhanced the contractive response of rat thoracic aorta, and inhibition of  $\beta_3$ -AR led to endothelial injury in Sham rats. However, under CHF condition, SR 59230A administration no longer induces endothelium damage possibly due to inhibition of  $\beta_3$ -AR.

The transcription factor NF- $\kappa$ B was reported playing an important role in regulating inflammatory reactions, proliferation after vascular injury

[40, 41]. In the study, through measuring the expression of NF- $\kappa$ B, we found that its expression was increased after SR treatment and highest NF- $\kappa$ B expression in CHF rats, suggesting vascular injury accompanied by the release of NF- $\kappa$ B. However, SR administration reversed the high expression of NF- $\kappa$ B in CHF rat aorta indicating the association of NF- $\kappa$ B with  $\beta_3$ -AR. Consistent with this, 19 differentially expressed miRNAs were identified in rat thoracic aorta with and without chronic heart failure related to  $\beta_3$ -AR to be associated with NF- $\kappa$ B signaling pathway. However, the exact mechanism by how  $\beta_3$ -AR is associated with NF- $\kappa$ B signaling remains unclear and requires further investigation.

In conclusion, our results confirmed that  $\beta_3$ -AR are expressed in rat aorta and exerts a relaxant effect through NOS-dependent pathway. Inhibition of  $\beta_3$ -AR delayed the damage of vessels in the development of heart failure possibly through regulation of NF- $\kappa$ B signaling pathway.

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### Disclosure of conflict of interest

None.

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