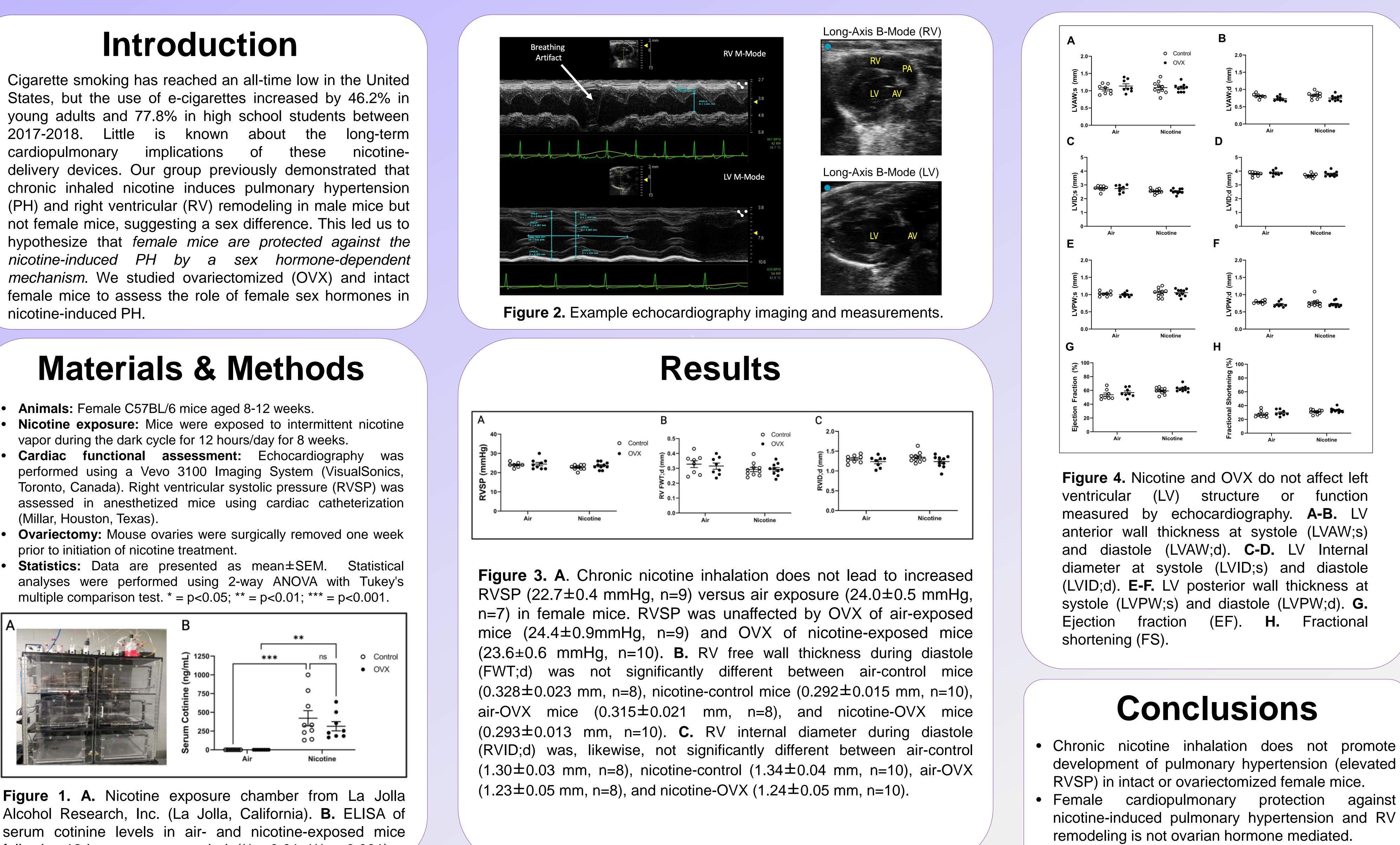


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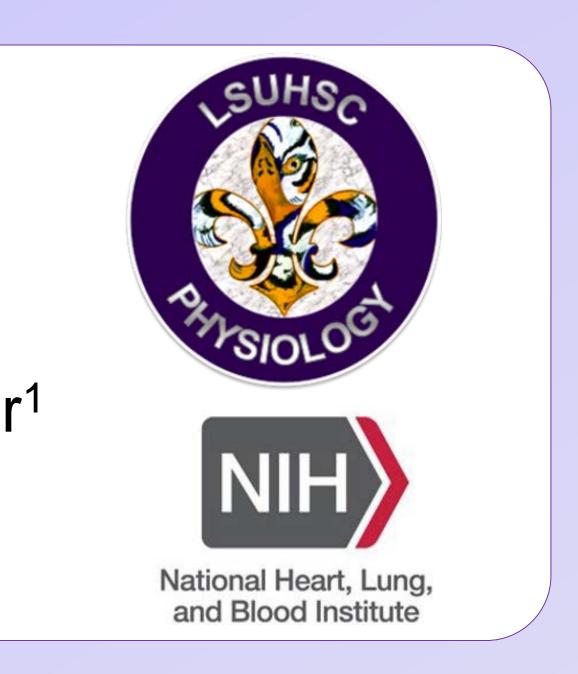
is known about the implications of these

- vapor during the dark cycle for 12 hours/day for 8 weeks.
- (Millar, Houston, Texas).
- prior to initiation of nicotine treatment.



following 12-hour exposure period. (**p<0.01, ***p< 0.001).

This work was funded by NIH NHLBI Grant #R01HL135635 (JG, XY, EL) and LSU Health Sciences Center, School of Medicine



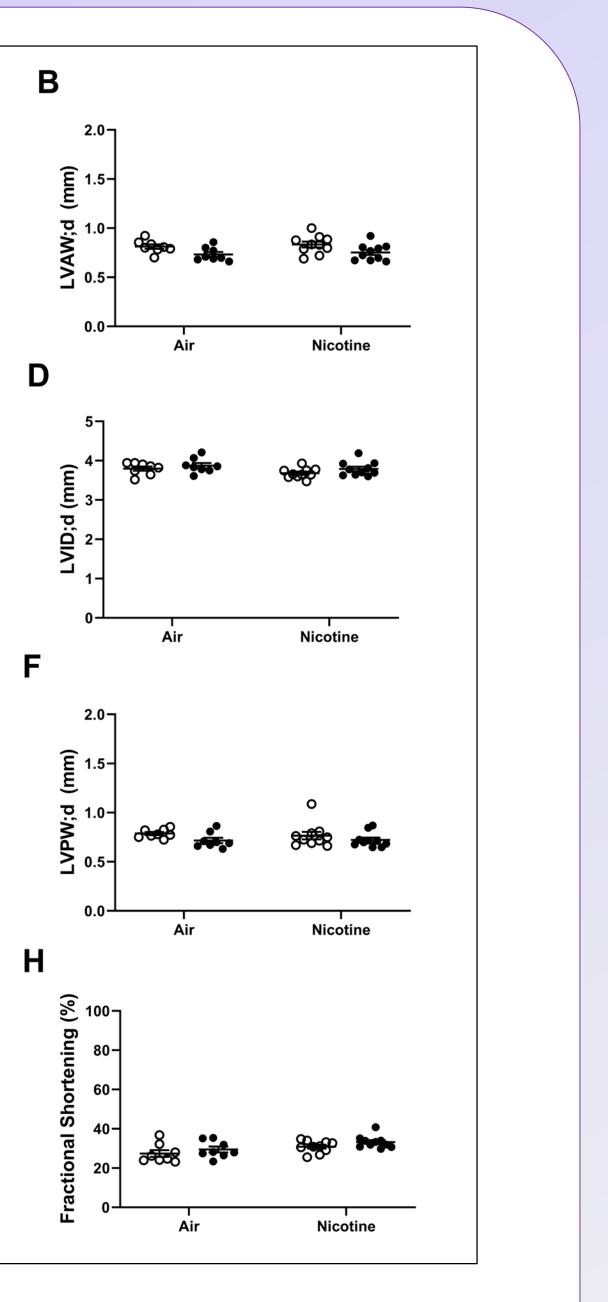


Figure 4. Nicotine and OVX do not affect left function or measured by echocardiography. A-B. LV anterior wall thickness at systole (LVAW;s) Internal diameter at systole (LVID;s) and diastole (LVID;d). E-F. LV posterior wall thickness at systole (LVPW;s) and diastole (LVPW;d). G. (EF). Η. Fractional

Conclusions

development of pulmonary hypertension (elevated RVSP) in intact or ovariectomized female mice. • Female cardiopulmonary protection against nicotine-induced pulmonary hypertension and RV



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Introduction

Cigarette smoking has reached an all-time low in the United States, but the use of e-cigarettes increased by 46.2% in young adults and 77.8% in high school students between 2017-2018. Little is known about the long-term cardiopulmonary implications of these nicotine-delivery devices. Our group previously demonstrated that chronic inhaled nicotine induces pulmonary hypertension (PH) and right ventricular (RV) remodeling in male mice but not female mice, suggesting a sex difference. This led us to hypothesize that female mice are protected against the nicotine-induced PH by a sex hormone-dependent mechanism. We studied ovariectomized (OVX) and intact female mice to assess the role of female sex hormones in nicotine-induced PH.







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Materials & Methods

- Animals: Female C57BL/6 mice aged 8-12 weeks.
- Nicotine exposure: Mice were exposed to intermittent nicotine vapor during the dark cycle for 12 hours/day for 8 weeks.
- Cardiac functional assessment: Echocardiography performed using a Vevo 3100 Imaging System (VisualSonics, Toronto, Canada). Right ventricular systolic pressure (RVSP) was assessed in anesthetized mice using cardiac catheterization (Millar, Houston, Texas).
- Ovariectomy: Mouse ovaries were surgically removed one week prior to initiation of nicotine treatment.
- **Statistics:** Data is presented as mean±SEM. Statistical analysis was performed using 2-way ANOVA with Tukey's multiple comparison test. * = p<0.05; ** = p<0.01; *** = p<0.001.

was

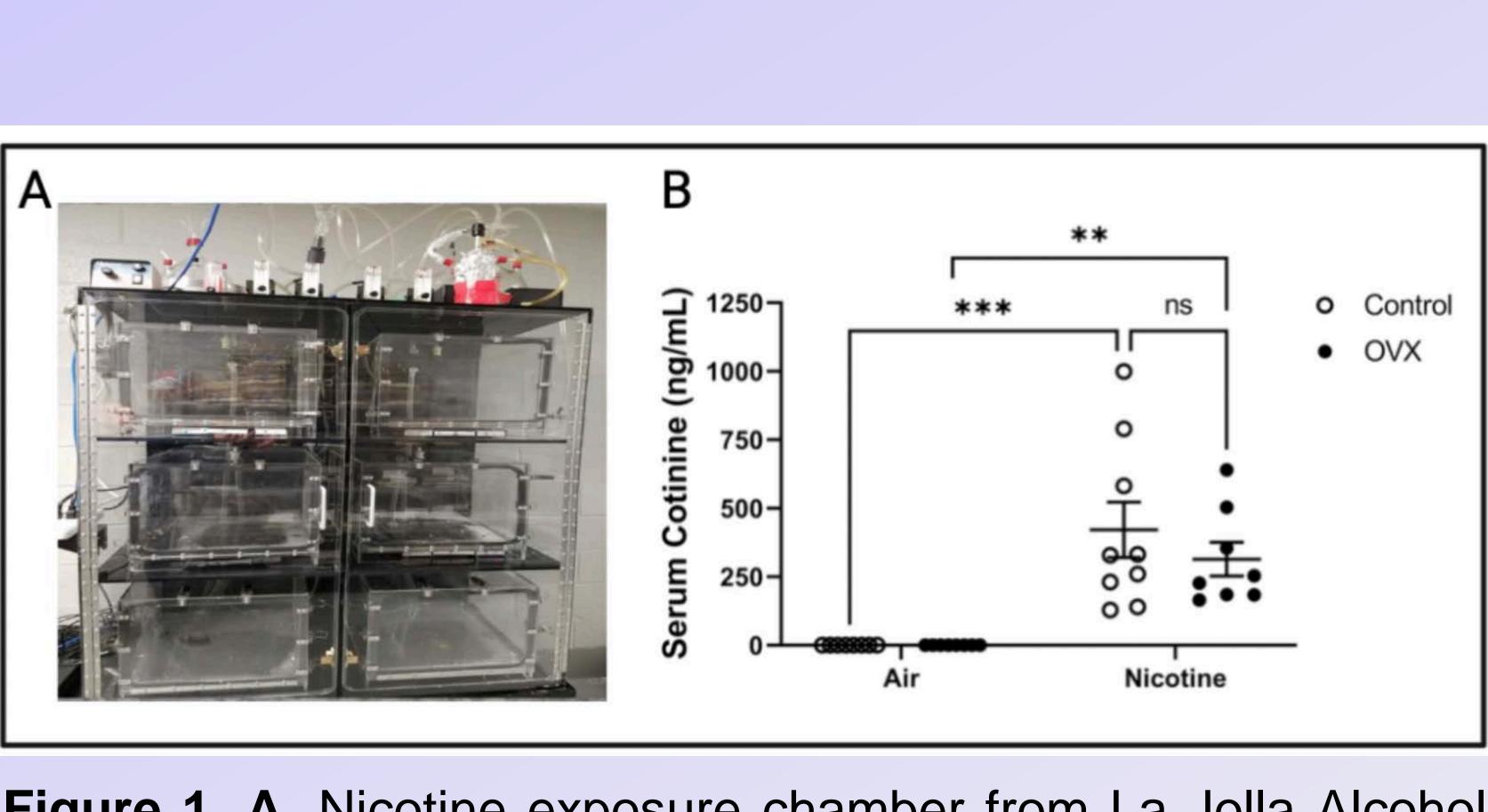
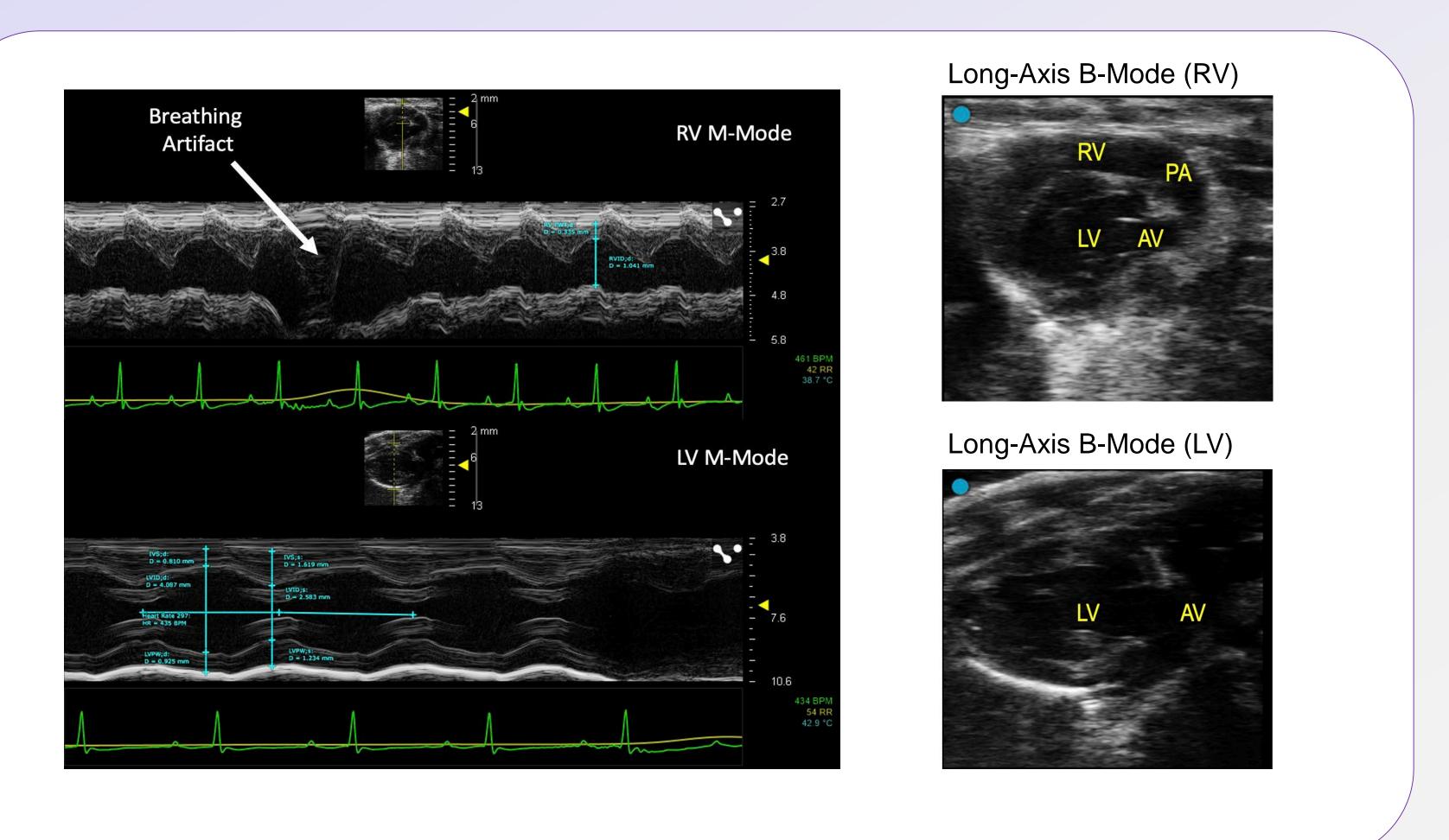


Figure 1. A. Nicotine exposure chamber from La Jolla Alcohol Research, Inc. (La Jolla, California). B. ELISA of serum cotinine levels in air- and nicotine-exposed mice following 12-hour exposure period. (**p<0.01, ***p< 0.001).



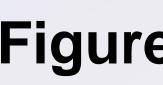
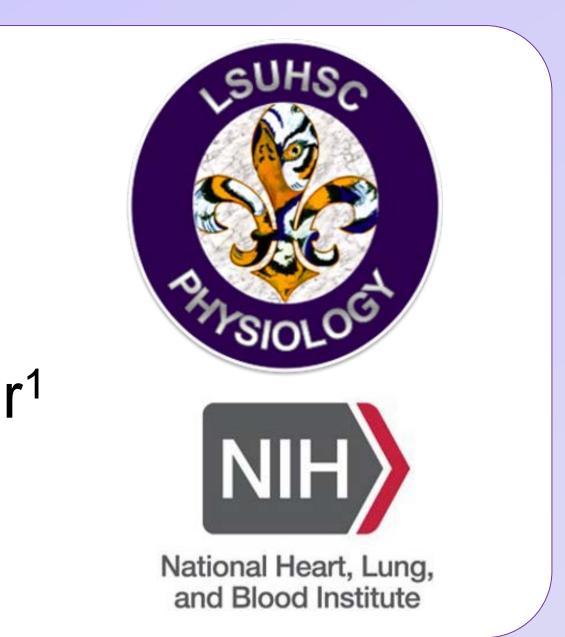


Figure 2. Example echocardiography imaging and measurements.





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Results

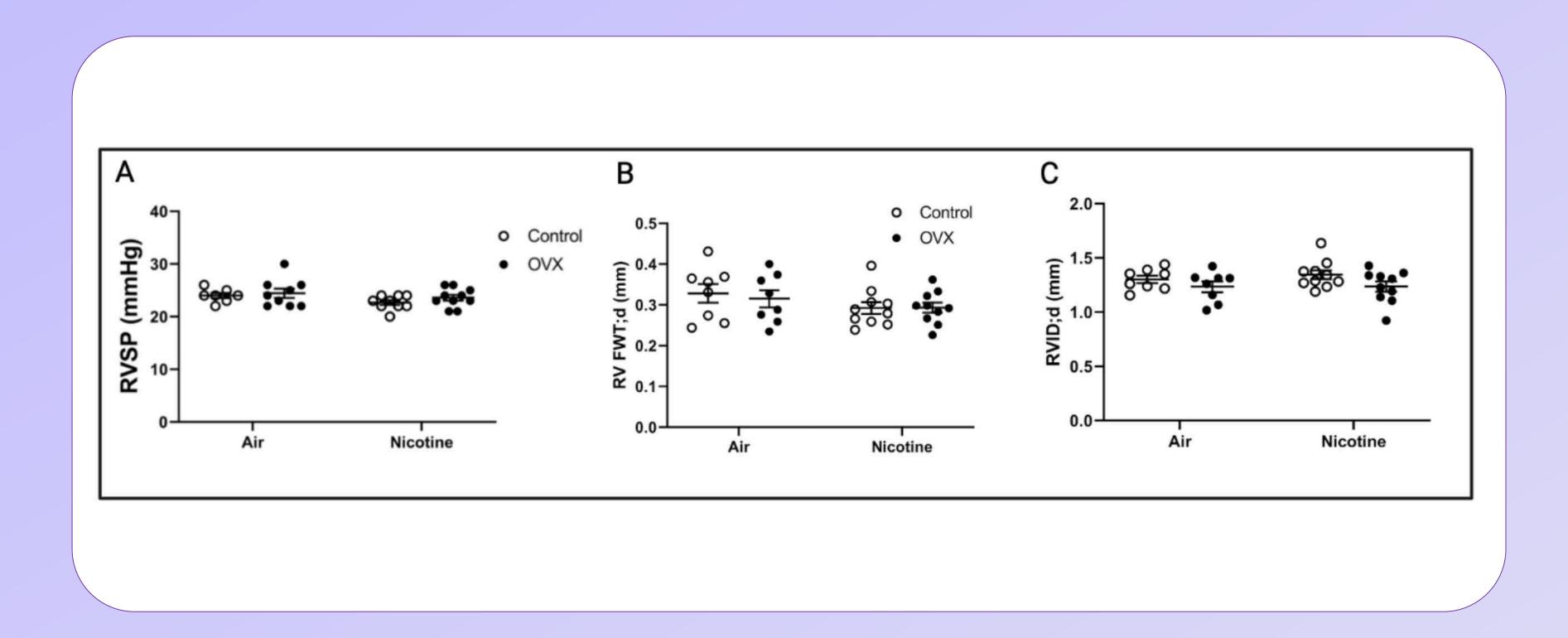


Figure 3. A. Chronic nicotine inhalation does not lead to increased RVSP (22.7 ± 0.4 mmHg, n=9) versus air exposure $(24.0\pm0.5 \text{ mmHg}, n=7)$ in female mice. RVSP was unaffected by OVX of air-exposed mice $(24.4\pm0.9mmHg, n=9)$ and OVX of nicotine-exposed mice $(23.6\pm0.6 \text{ mmHg}, n=10)$. **B.** RV free wall thickness during diastole (FWT;d) was not significantly different between air-control mice $(0.328 \pm 0.023 \text{ mm}, n=8)$, nicotine-control mice $(0.292 \pm 0.015 \text{ mm}, n=10)$, air-OVX mice $(0.315 \pm 0.021 \text{ mm}, n=8)$, and nicotine-OVX mice (0.293 ± 0.013) mm, n=10). C. RV internal diameter during diastole (RVID;d) was, likewise, not significantly different between air-control $(1.30\pm0.03 \text{ mm}, n=8)$, nicotine-control $(1.34\pm0.04 \text{ mm}, n=10)$, air-OVX (1.23 ± 0.05 mm, n=8), and nicotine-OVX (1.24 ± 0.05 mm, n=10).

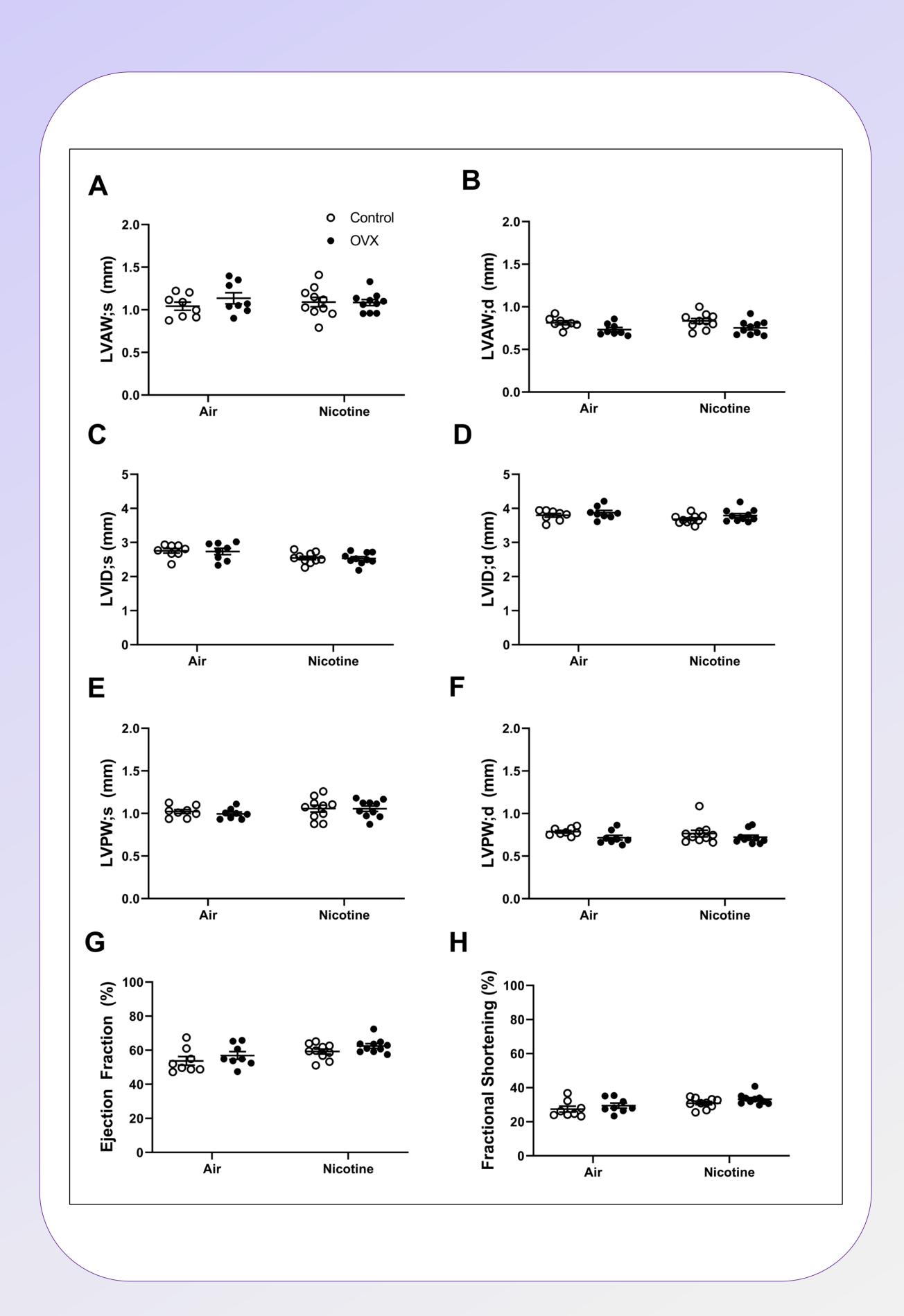
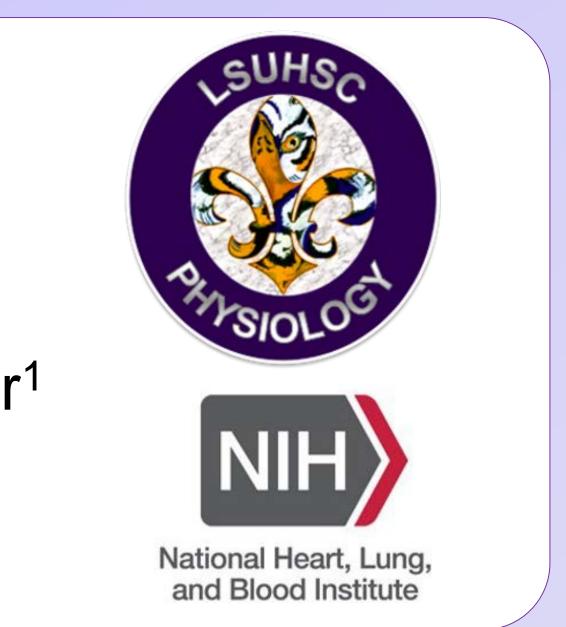


Figure 4. Nicotine and OVX do not affect left ventricular (LV) structure or function measured by echocardiography. **A-B.** LV anterior wall thickness at systole (LVAW;s) and diastole (LVAW;d). C-**D.** LV Internal diameter at (LVID;s) systole and diastole (LVID;d). E-F. LV posterior wall thickness at (LVPW;s) systole and (LVPW;d). **G**. diastole Ejection fraction (EF). H. Fractional shortening (FS).





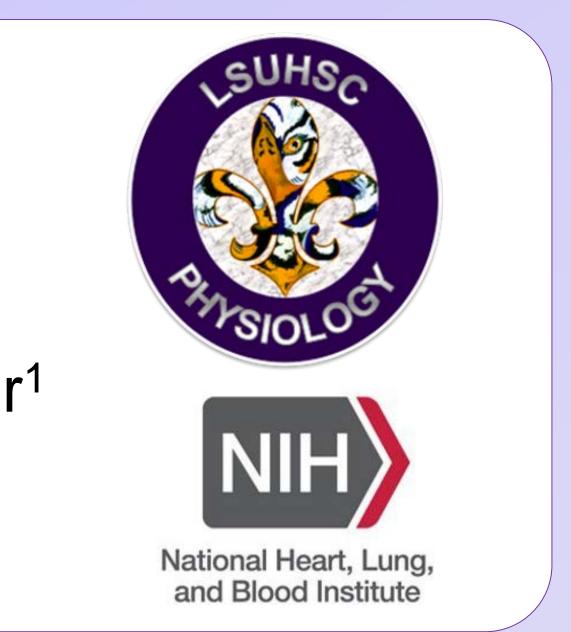
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Conclusions

mice.

•Female cardiopulmonary protection against nicotineinduced pulmonary hypertension and RV remodeling is not ovarian hormone mediated.

Chronic nicotine inhalation does not promote development of pulmonary hypertension (elevated RVSP) in the female





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