Virtual International Meeting

STEROIDS AND NERVOUS SYSTEM

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Torino, Italy 11-12 and 25-26 February 2021

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ABSTRACT BOOK

TORINO - 2021

ABSTRACTS OF INVITED LECTURES AND FREE CONTRIBUTIONS

G.C. Panzica and S. Gotti, editors

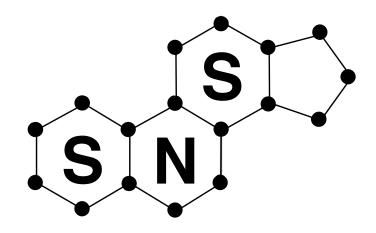
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PROGESTERONE ADMINISTRATION REDUCES THE NUMBER OF HYPERTROPHIC MICROGLIA/MACROPHAGES AND MODULATES THE EXPRESSION PROFILE OF M1/M2 MARKERS AND INFLAMMASOME COMPONENTS AFTER ACUTE EXPERIMENTAL SPINAL CORD INJURY

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Neuroinflammation is a hallmark of central nervous system pathologies, including spinal cord injury (SCI). In particular, the acute activation of macrophages and resident microglia are critically implicated in the detrimental long-standing consequences of spinal trauma, such as the onset and maintenance of neuropathic pain [5]. Indeed, the fine-tuning of microglia/macrophage polarization from classically-activated (M1, inflammatory) towards alternatively-activated (M2, anti-inflammatory) states represents an active research focus of restorative strategies in a wide range of experimental nervous system trauma, including SCI [1], and may offer a therapeutic opportunity to prevent the risk of developing pain later. We have previously shown that progesterone, a neuroactive steroid, exhibits neuroprotective and pro-myelinating actions in experimental spinal lesions [3, 6] and could stand as a promising repositioning molecule for timely targeting the harmful aspects of acute inflammation [2, 4], while preserving anti-inflammatory and pro-reparative features. Hence, by using real time RT-PCR and immunohistochemical techniques we evaluate the hypothesis that progesterone could modulate microglia/macrophage morphology and the mRNA expression profile of cytokines, M1/M2 biomarkers and inflammasome components at the dorsal spinal cord level, a critical site for nociceptive processing, in a well-recognized rat model of spinal hemisection that develops central neuropathic pain. Here we observed that progesterone administration (16 mg/kg, daily sc injection) within the acute phase (1-3 days post-SCI) significantly reduced the injury-induced mRNA expression of several biomarkers of neuroinflammation, including critical inflammasome components NLRP3 and ASC, two related pro-inflammatory cytokines IL-1ß and IL-18, ATP-gated P2X7 ion channel and inducible nitric oxide synthase, all signatures associated with M1 phenotype, while maintaining high levels of Arginase 1 and CD206, both M2-associated markers, and the antiinflammatory cytokine TGF- β . Along with these changes, progesterone-treated animals did not change the injury-induced increase in the total number of OX-42 microglia/macrophages positive profiles, but exhibited a significantly higher number of ramified cells and a concomitant decrease in hypertrophic/ameboid phenotypes in the dorsal horn as compared to injured-animals receiving vehicle. Collectively, our results suggest that progesterone may avoid a broad suppression of microglia/macrophages, promoting a balance towards antiinflammatory phenotypes that may underlie the anti-allodynic mechanisms of this steroid.

These findings add new evidence to further stimulate the study of neuroactive steroids-based therapies and may open novel translational perspectives for effectively modulating the acute neuroinflammatory cascade in order to prevent the harmful enduring outcomes after spinal trauma, such as central pain.

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