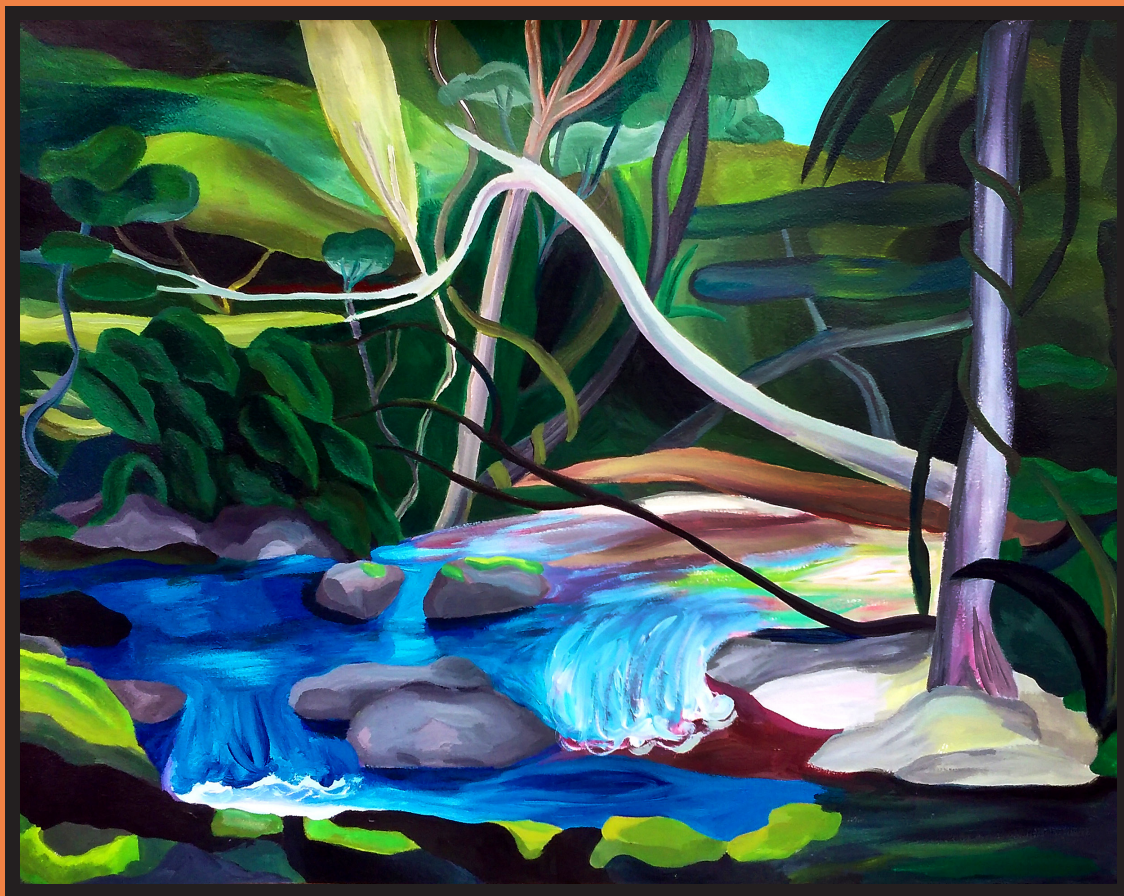


medicina

BUENOS AIRES, VOL. 83 Supl. V - 2023



medicina

BUENOS AIRES, VOL. 83 Supl. V - 2023

COMITÉ DE REDACCIÓN

Sebastián F. Ameriso
FLENI, Buenos Aires, Argentina

Pablo J. Azurmendi
Instituto de Investigaciones Médicas A. Lanari, UBA, Argentina

Damasia Becú Villalobos
*Instituto de Biología y Medicina Experimental-CONICET,
Buenos Aires, Argentina*

Gabriela V. Carro
*Hospital Nacional Prof. A. Posadas
Buenos Aires, Argentina*

José H. Casabé
*Instituto de Cardiología y Cirugía Cardiovascular,
Hospital Universitario Fundación Favaloro, Buenos Aires, Argentina*

Hugo N. Catalano
Hospital Alemán, Buenos Aires, Argentina

Eduardo L. De Vito
Instituto de Investigaciones Médicas A. Lanari, UBA, Argentina

Elisa Estenssoro
*Hospital Interzonal de Agudos General San Martín de La Plata,
Buenos Aires, Argentina*

Laura I. Jufe
Hospital General de Agudos J. M. Ramos Mejía,

Isabel Narvaiz Kantor
Organización Panamericana de la Salud (OPS/OMS), Argentina

Basilio A. Kotsias
Instituto de Investigaciones Médicas A. Lanari, UBA, Argentina

Gustavo Kusminsky
Hospital Universitario Austral, Buenos Aires, Argentina

Oscar M. O. Laudanno
Instituto de Investigaciones Médicas A. Lanari, UBA, Argentina

Isabel A. Lüthy
*Instituto de Biología y Medicina Experimental (IBYME),
Buenos Aires, Argentina*

Domingo J. Palmero
*Hospital de Infecciosas Dr. Francisco J. Muñiz
Instituto de Tisiopneumología Prof. Dr. Raúl Vacarezza,
Facultad de Medicina, UBA, Argentina*

Guillermo B. Semeniuk
Instituto de Investigaciones Médicas A. Lanari, UBA, Argentina

Oswaldo J. Stringa
Hospital de Clínicas José de San Martín, UBA, Argentina

Carlos D. Tajer
*Hospital de Alta Complejidad El Cruce Néstor Kirchner,
Buenos Aires, Argentina*

MIEMBROS EMÉRITOS

Héctor O. Alonso
Instituto Cardiovascular Rosario, Santa Fe, Argentina

María Marta de Elizalde de Bracco
IMEX-CONICET-Academia Nacional de Medicina, Buenos Aires, Argentina

Guillermo Jaim Etcheverry
Facultad de Medicina, UBA, Argentina

Daniel A. Manigot
Hospital San Juan de Dios, Buenos Aires, Argentina

Rodolfo S. Martin
*Facultad de Ciencias Biomédicas,
Hospital Universitario Austral, Buenos Aires, Argentina*

La Tapa
Todo, 2016
Daniela Kantor

MEDICINA (Buenos Aires) - Revista bimestral – ISSN 1669-9106 (En línea)

Registro de la Propiedad Intelectual N° 02683675
Personería Jurídica N° C-7497

Publicación de la Fundación Revista Medicina (Buenos Aires) Propietario de la publicación: Fundación Revista Medicina
Queda hecho el depósito que establece la Ley 11723

Publicada con el apoyo del Ministerio de Ciencia, Tecnología e Innovación Productiva.
MEDICINA no tiene propósitos comerciales. El objeto de su creación ha sido propender al adelanto de la medicina argentina.
Los beneficios que pudieran obtenerse serán aplicados exclusivamente a este fin.
Aparece en MEDLINE (PubMed), ISI-THOMSON REUTERS (Journal Citation Report, Current Contents, Biological Abstracts, Biosis, Life Sciences), CABI (Global Health), ELSEVIER (Scopus, Embase, Excerpta Medica), SciELO, LATINDEX, BVS (Biblioteca Virtual en Salud), DOAJ, Google Scholar y Google Books.
Incluida en el Núcleo Básico de Revistas Científicas Argentinas del CONICET.

Directores Responsables:
Eduardo L. De Vito, Isabel Lüthy, Oscar M. O. Laudanno, Isabel Narvaiz Kantor

Secretaría de Redacción: Ethel Di Vita, Instituto de Investigaciones Médicas Alfredo Lanari, Combatientes de Malvinas 3150,
1427 Buenos Aires, Argentina
e-mail: revmedbuenosaires@gmail.com – http://: www.medicinabuenosaires.com

Vol. 83, Supl. V, Noviembre 2023

Diagramación y Diseño: Andrés Esteban Zapata - aez.sgi@gmail.com

REUNIÓN CONJUNTA SAIC SAB AAFE AACYTAL 2023

**LXVIII REUNIÓN ANUAL DE LA
SOCIEDAD ARGENTINA DE INVESTIGACIÓN CLÍNICA
(SAIC)**

**XXV JORNADAS ANUALES DE LA SOCIEDAD
ARGENTINA DE BIOLOGÍA
(SAB)**

**LV REUNIÓN ANUAL DE LA ASOCIACIÓN
ARGENTINA DE FARMACOLOGÍA EXPERIMENTAL
(AAFE)**

**VIII REUNIÓN CIENTÍFICA REGIONAL DE LA
ASOCIACIÓN ARGENTINA DE CIENCIA Y
TECNOLOGÍA DE ANIMALES DE LABORATORIO
(AACYTAL)**

15-17 de noviembre de 2023
Hotel 13 de Julio – Mar del Plata

EDITORES RESPONSABLES

Dra. Isabel Luthy
Dra. Silvina Pérez Martínez
Dr. Ventura Simonovich
Dr. Gabriel Pinto

397. 526. TUMORAL PD-L1 MODULATES CD206+ MACROPHAGE IMMUNOSUPPRESSION DURING BREAST CANCER PROGRESSION

Paula Anabella Aguirre^{1,8}, Lilian Fedra Castillo^{1,3,8}, Marcos Daniel Palavecino², Paula Macarena Gonzalez^{1,8}, Sabrina Aldana Vallone², Agustina Suban^{1,8}, Roberto Meiss⁴, Santiago Rodriguez-Seguí², Omar Adrián Coso², Eva Wertheimer⁵, Edith Claudia Kordon², Marina Simian³, Andrea Emilse Errasti⁶, Eugenio Antonio Carrera-Silva⁷, Manuel De la Mata², Albana Gattelli², Juan Pablo Fededa^{1,8}

¹Instituto de Investigaciones Biotecnológicas (UNSAM/CONICET), San Martín, PBA, Argentina. ²Instituto de Fisiología, Biología Molecular y Neurociencias (UBA/CONICET), CABA, Argentina. ³Instituto de Nanosistemas (UNSAM), San Martín, PBA, Argentina. ⁴Academia Nacional de Medicina, CABA, Argentina. ⁵Centro de Estudios Farmacológicos y Botánicos (UBA/CONICET), CABA, Argentina. ⁶Instituto de Farmacología, Facultad de Medicina (UBA), CABA, Argentina. ⁷Instituto de Medicina Experimental (ANM/CONICET), CABA, Argentina. ⁸Escuela de Bio y Nanotecnologías (UNSAM)

One of the main immunosuppressive mechanisms during tumor progression is the expression of PD-L1, the ligand for T-cell inhibitory receptor PD-1. Despite PD-1 is also expressed in the myeloid lineage, it is not clear which macrophage-specific immune evasion mechanisms are modulated by tumor cell PD-L1. To interrogate this, we generated a PD-L1 KO TNBC-like tumor model in the murine EO771 cell line using CRISPR/Cas9 editing, allowing us to profile the immune infiltrates of the tumoral microenvironment (TME) *in vivo*. Profiling tumor growth in WT vs. PD-L1 KO tumors, we found that tumoral PD-L1 is partially required for EO771 tumor growth. Using flow cytometry (FC) to characterize the immune infiltrates of early vs late-stage WT tumors, we found a decrease in F480h CD206+ TAMs in late-stage tumors, suggesting that inhibition of CD206+ polarization is involved in immune evasion. Interestingly, analyzing late-stage PD-L1 KO vs WT tumors, we found that tumoral PD-L1 inhibits CD206+ macrophage polarization. Furthermore, WT tumor progression triggered PD-1+ and MHCII+ expression in CD206+ TAMs. Comparing PD-L1 KO vs WT tumors, we found that tumoral PD-L1 promotes MHCII expression in CD206+ TAMs, suggesting that PD-L1 fosters antigen presentation by MHCII *in vivo*. On the contrary, FC analysis of *in vitro* experiments showed that direct contact of tumoral PD-L1 inhibits MHCII expression in CD206+ macrophages, suggesting that indirect TME mechanisms compensate the immunosuppressive inhibition of MHCII mediated by tumoral PD-L1. Interestingly, using FC to analyze GFP+ tumor cell phagocytosis in CD11b+ F480+ TAMs, we found that tumoral PD-L1 directly suppresses phagocytosis both *in vivo* and *in vitro*. Altogether, these data suggest that tumor-intrinsic PD-L1 plays a key role in TNBC progression by triggering immune suppression mechanisms in CD206+ TAMs. By interrogating these non-canonical mechanisms, we could gain insights into novel mechanisms of resistance to PD-L1/PD-1 therapies.

398. 605. EFFECT OF GLYCODRUGS IN THE CHEMOTHERAPEUTIC RESPONSE IN PANCREATIC CANCER

Alina L. González¹, Gisela Weiz¹, Martín E. Fernández-Zapico², Javier D. Breccia¹, María I. Molejón¹

¹Facultad de Ciencias Exactas y Naturales, Instituto de Ciencias de la Tierra y Ambientales de La Pampa (INCITAP), Universidad Nacional de La Pampa – Consejo Nacional de Investigaciones Científicas y Técnicas (UNLPam- CONICET), Santa Rosa, La Pampa, Argentina.

²Schulze Center for Novel Therapeutics, Division of Oncology Research, Mayo Clinic, Rochester, MN 55905, USA.

Drug glycosylation has emerged an alternative approach to improve pharmacokinetic properties, bioavailability and reduce the toxicity. Using as model pancreatic ductal adenocarcinoma (PDAC), the most common histological subtype of pancreatic cancer, we aimed at evaluating the anti-tumoral properties of glycosylated version of two polyphenolic chemotherapeutic agents (4-methylumbelliferone

(4MU) and resorcinol (R) alone or in combination with standard cytotoxic therapy for PDAC. The enzymatic addition of the disaccharide rutinose using a diglycosidase was performed to obtain the respective glycodrugs named 4-methylumbelliferirutinose (4MUR) and resorcinol-rutinose (RR). Our experiments showed that the monotherapy with the glycodrugs did not affect significantly cell viability, however, the combination with gemcitabine, a commonly used chemotherapeutic agent, show a synergistic effect in PDAC cell models. In Panc-1 cells, 4MUR showed an antineoplastic effect decreasing the cell viability 44% (100 nM of Gemcitabine/ 50nM of 4-MUR, 48 h, $p < 0.05$) and in MiaPaCa-2 cells, the cell viability was 70% after the co-treatment with RR (100 nM of Gemcitabine/100 nM of RR, 48 h, $p < 0.05$). Next, in search of the mechanism underlying this combination, we evaluate the expression of genes related to hyaluronic acid metabolism (CD44, HYAL2, HAS2 and HAS3) and the ECM degraded compounds gene MMP-2 in PDAC cells by qPCR after 4MUR and RR treatment. Genes related to hyaluronic receptors and synthesis were downregulated and, simultaneously, Hyal2 gene was upregulated. Remarkably, MMP-2 expression was downregulated after glycodrugs treatments. In summary, our findings demonstrate that glycodrugs improve gemcitabine therapeutic effectiveness in PDAC, suggesting glycosylation as a novel and effective approach for PDAC treatment.

399. 612. THE IRON EFFECT ON THE CELL SURVIVAL OF BREAST CANCER DEPENDS ON ITS OVERLOAD LEVEL

Gómez Florencia Magalí¹, Mascaró Marilina², Curino Alejandro Carlos², Facchinetti María Marta², Giorgi Gisela¹

¹Laboratorio de Fisiología Humana, Departamento de Biología, Bioquímica y Farmacia, Universidad Nacional del Sur, Bahía Blanca, Argentina.

²Laboratorio de Biología del Cáncer, Instituto de Investigaciones Bioquímicas Bahía Blanca (INIBIBB), Universidad Nacional del Sur (UNS)-CONICET, Departamento de Biología, Bioquímica y Farmacia (UNS), Bahía Blanca, Argentina.

Cancer cells develop metabolic alterations to sustain an increased proliferation. The iron is an essential element required for many biological processes and its metabolism is disrupted in breast cancer (BC) cells. It has been reported that high cellular iron concentration accelerates the proliferation of BC cells. However, recent works described that the iron overload induce cell death by ferroptosis, a form of cell death caused by iron-catalyzed excessive peroxidation of polyunsaturated fatty acids; being a promising therapeutic target for therapy-resistant cancers. In this study we aimed to analyze the behavior of BC cells exposed to an increasing iron overload. To that end, the murine BC cell line, LM3, was treated with increasing ferric ammonium citrate (FAC) concentrations (0- 400 μ M) for 48 h and cell viability (by crystal violet), intracellular iron (by Prussian Blue), reactive oxygen species (ROS) (by DFCA), lipid peroxidation (TBARS) (by MDA accumulation) and the expression of divalent metal transporter 1 (DMT1) by immunocytochemistry, were analyzed. LM3 cell viability increased after FAC treatment with 25 μ M and 50 μ M ($p < 0.05$) but decreased with 200 μ M and 400 μ M FAC ($p < 0.05$ and $p < 0.01$, respectively), respect to vehicle. The ROS levels increased after FAC treatment with 50 μ M ($p < 0.05$), 200 μ M ($p < 0.001$) and 400 μ M ($p < 0.001$) compared to vehicle. In addition, we detected an increase in lipid peroxidation in LM3 cells treated with 200 μ M and 400 μ M of FAC compared to vehicle ($p < 0.01$, in both). Also, we found iron accumulation as hemosiderin form and high DMT1 importer expression in LM3 cells treated with 200 μ M and 400 μ M of FAC, compared to vehicle. Altogether these results suggest that the effect of iron on cell viability depends on its overload level and that a high iron overload promotes the iron entry through DMT1 and its accumulation as hemosiderin inducing lower cell viability through lipid peroxidation-dependent mechanisms.

400. 633. DIFFERENTIAL REGULATION OF MULTIDRUG RESISTANCE ASSOCIATED PROTEIN 4 (MRP4/ABCC4) EXPRESSION IN RESPONSE TO EPIDERMAL GROWTH FACTOR (EGF) IN HUMAN PANCREATIC DUCTAL ADENOCARCINOMA AND HEPATOCELLULAR CELL LINES

Zaher Bazzi¹, Julieta Allegro¹, Rodrigo Lagos¹, Natalia