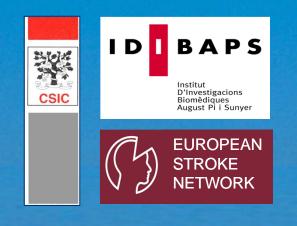


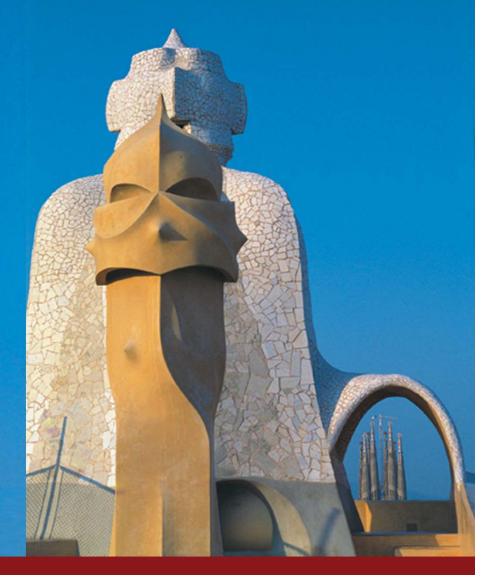


# Inflammation and oxidative stress after stroke

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### Oxidative stress after brain ischemia

### Sources:

- -Mitochondrial electron transport chain
- -NADH/NADPH oxidase
- -Xanthine-xanthine oxidase system
- -Cyclooxigenases
- -Inflammation

### ROS:

#### RNS: -nitric oxide

- peroxinitrite

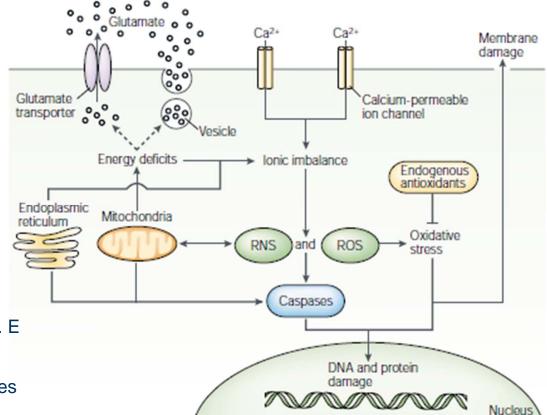
- -superoxide anion
- -hydrogen peroxide
- -hydroxyl radical
- -hypochlorous acid

### Antioxidant reserve:

- -superoxide dismutase (SOD)
- -catalase
- -glutathione peroxidase (GSHPx)
- antioxidants: glutathione (GSH), vit.C, vit. E

### Effects:

- -depletion of endogenous antioxidant stores
- -dysfunction of mitochondrial ion channels
- -protein nitration
- -lipid peroxidation
- -DNA damage
- -MMP activation

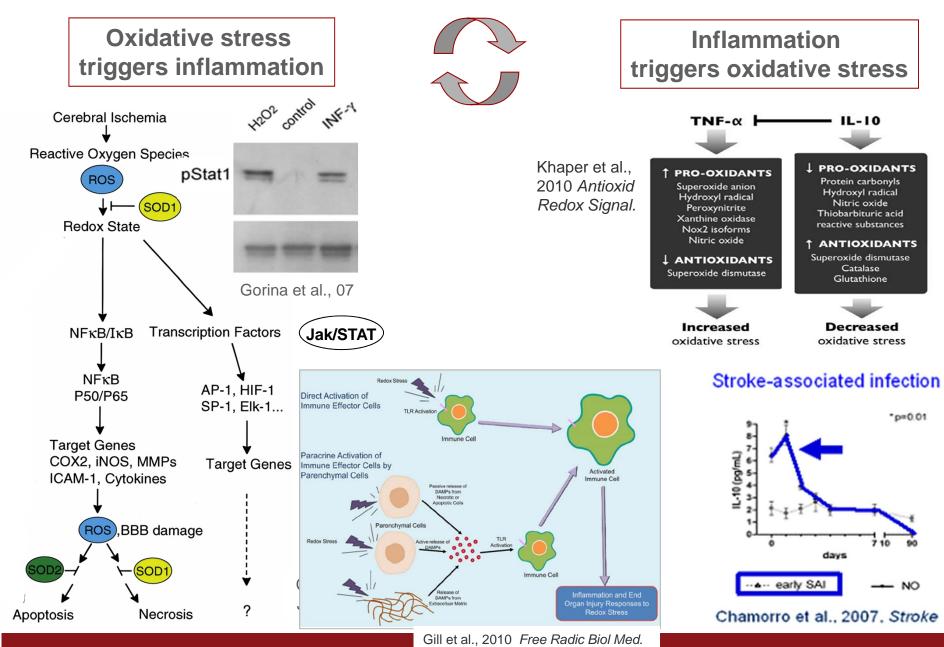


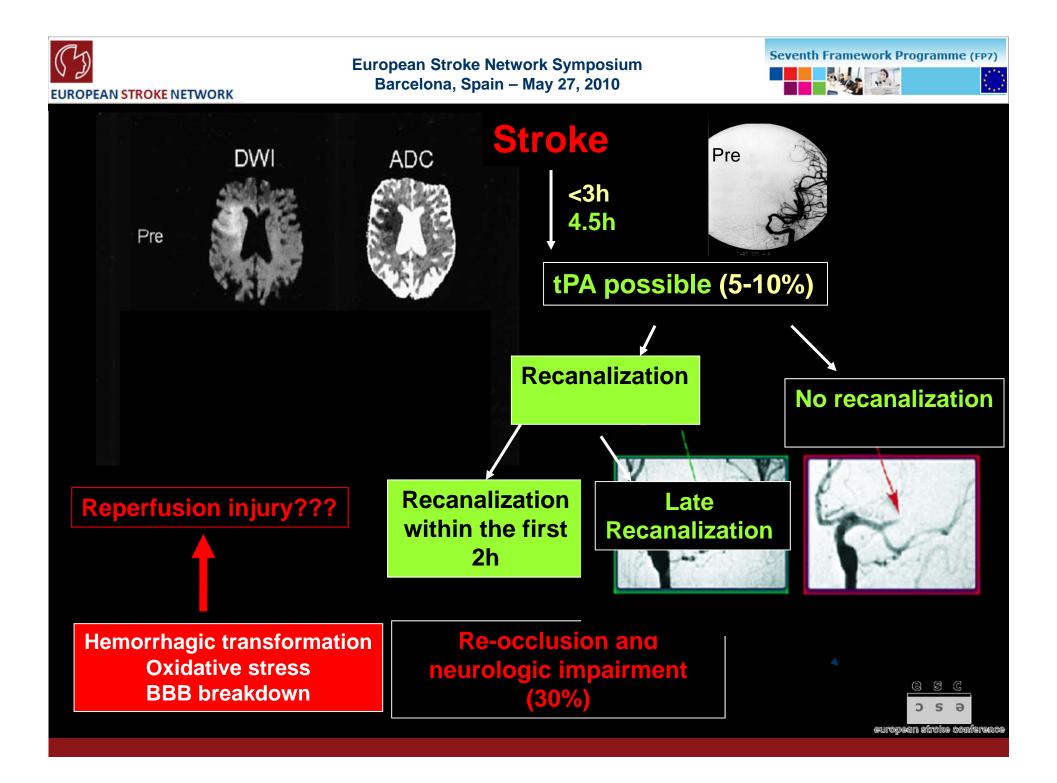
Lo et al. (2003) Nat Rev Neurosci 4:399-415











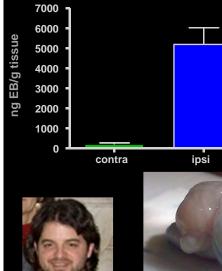


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## Alterations in blood-brain barrier permeability

### 7T-MRI: T1 W (Gd-DTPA-BMA Omniscan®)

#### **Evans Blue extravassation**





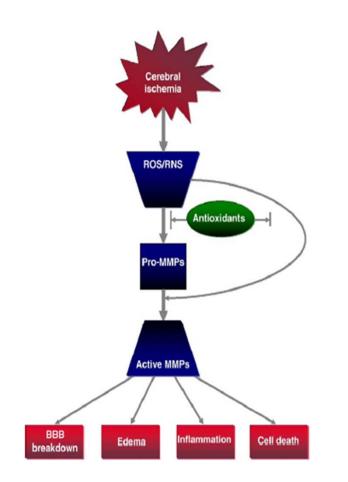


Microscopic BBB permeability alterations

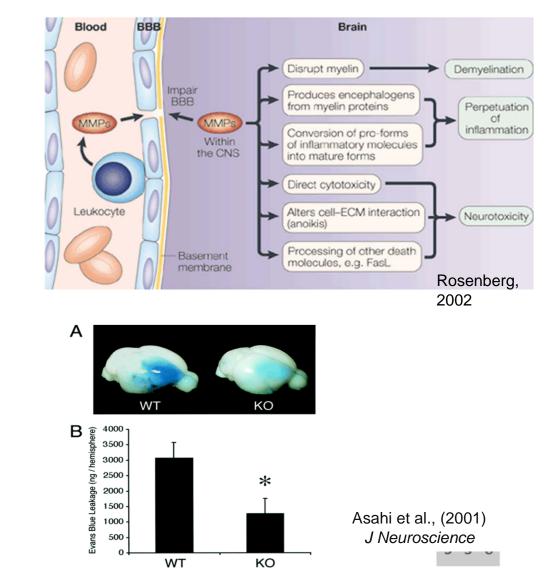


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## Matrix Metaloproteinases (MMP) and changes at the blood brain barrier (BBB)

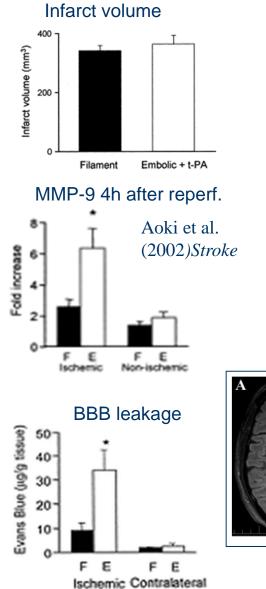


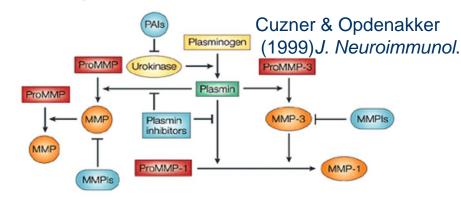
Liu & Rosenberg, 2005 *Free Radic Biol Med* 39:71-80





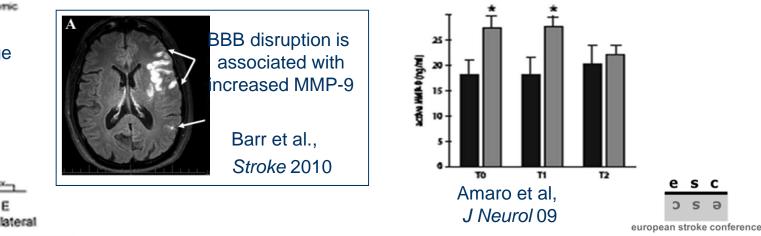
### tPA increases MMP-9 activity and BBB breakdown

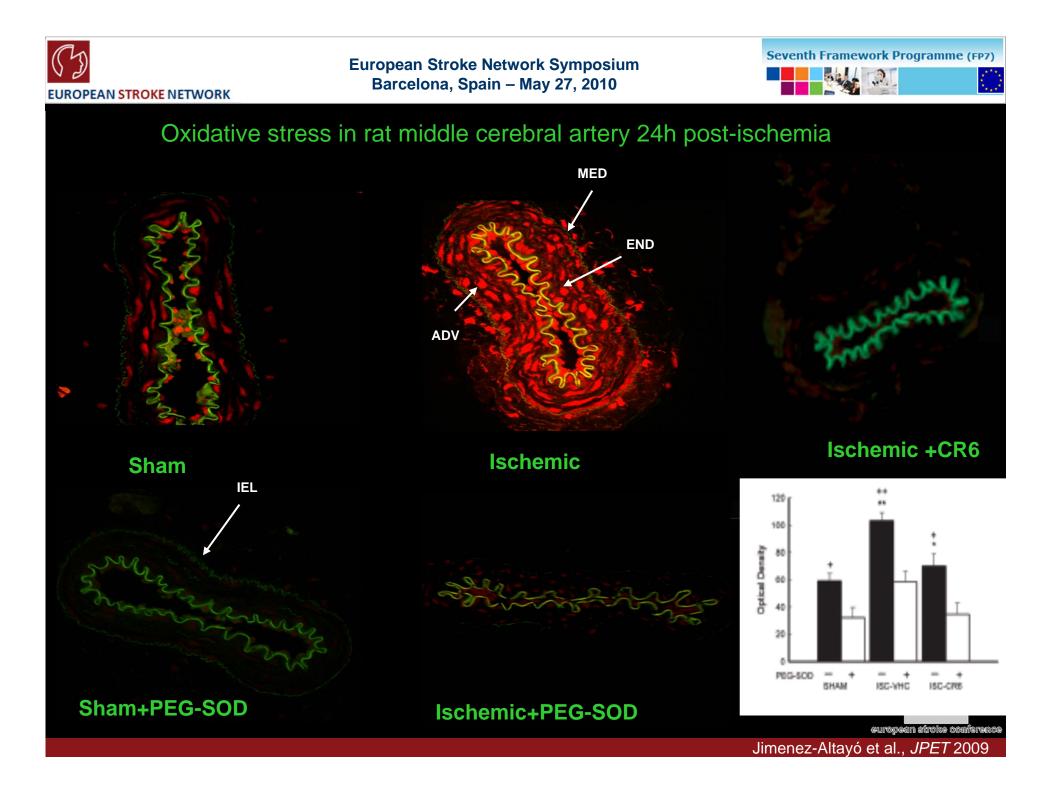




🖬 Good Outcome 🔲 Poor Ortcome

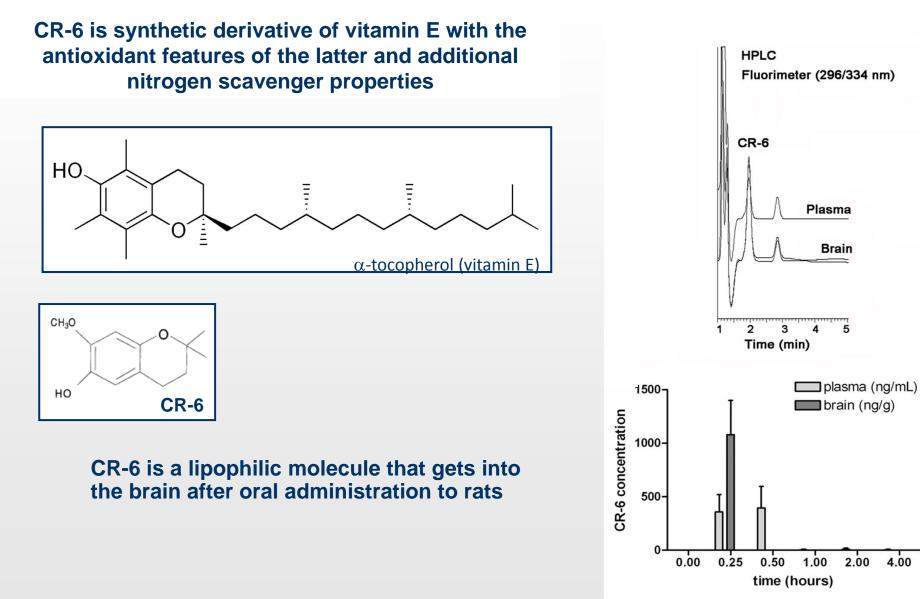
MMP-9 levels are predictors of hemorrhagic transformation after tPA Montaner et al. *Circulation*, 2003; Castellanos et al. *Stroke* 2003











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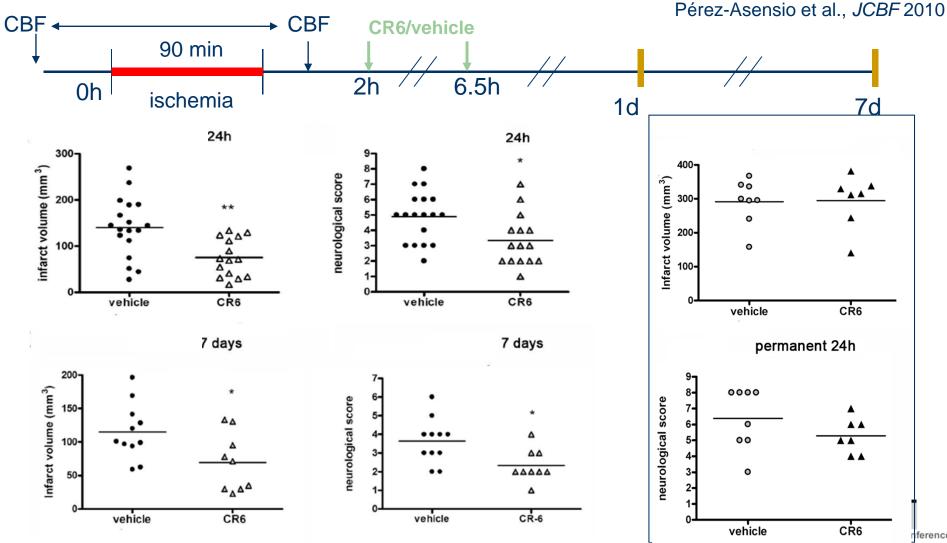
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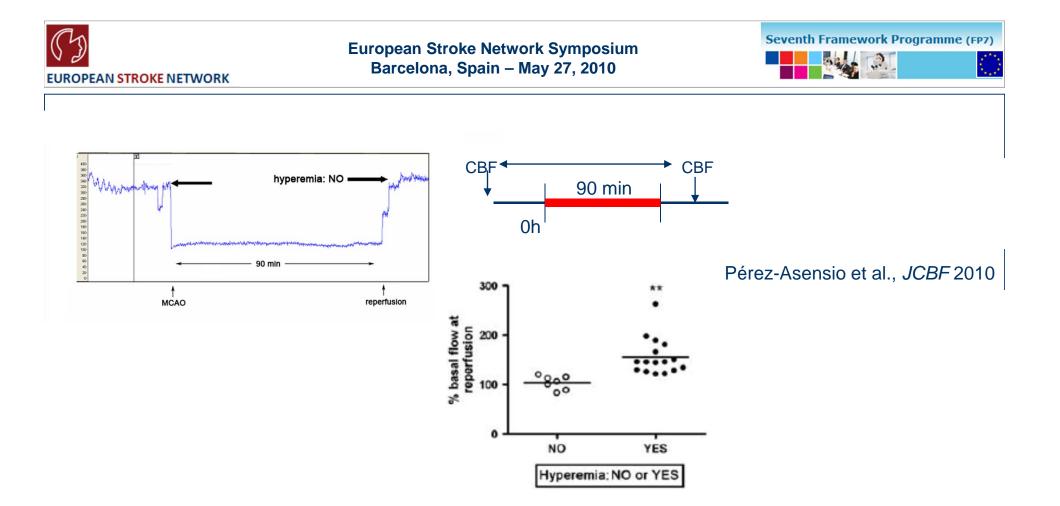


## Oral administration of CR-6 at 2h and 6.5h after the onset of ischemia





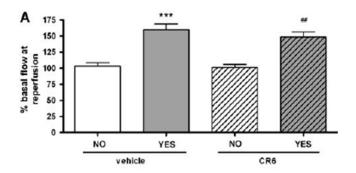
ference



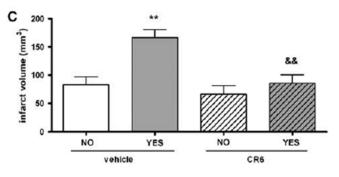


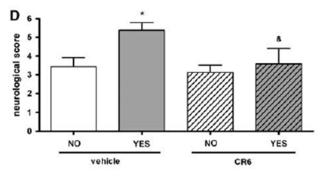


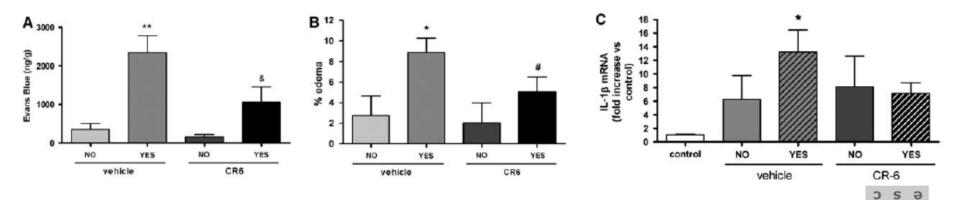
## CR-6 is beneficial in rats developing hyperemia



Pérez-Asensio et al., *JCBF* 2010







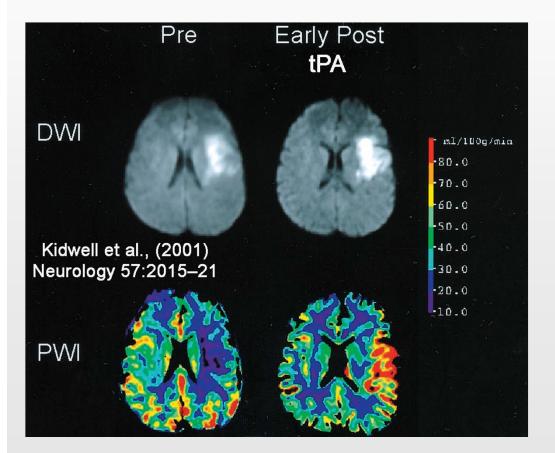




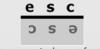
Hyperemia may be a marker of reperfusion injury in rats

Does hyperemia occur after thrombolysis in humans stroke?

Is hyperemia a sign of reperfusion injury in humans?



Postischemic hyperperfusion, visualized with perfusion MRI in humans following recanalization by intra-arterial thrombolytic therapy, occurred in about 40% of patients within hours



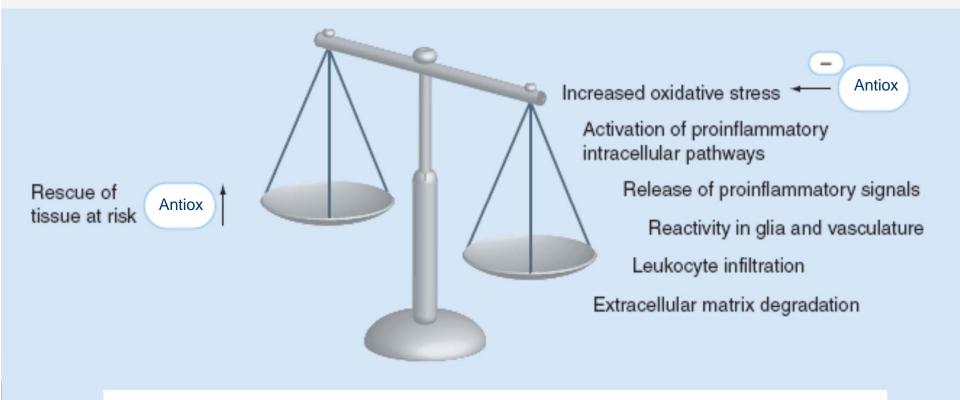




## CAN WE IMPROVE THE BENEFITS OF REPERFUSION?

## Does reperfusion injury occur in human ischemic stroke after thrombolysis?

- Can patients at risk of developing reperfusion injury be identified early after stroke? MRI assessement of hyperperfusion at reperfusion????
- Can these patients be the target of specific therapeutic intervention? Certain antioxidant agents????







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