

# Characterization Of Interventricular Septal Development and Perinatal Mortality in Mice Lacking Natriuretic Peptide Receptor A (NPRA)



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## Background

**Natriuretic peptide receptor A (NPRA)** is a high-affinity receptor for cardiac hormone **atrial natriuretic peptide (ANP)**, and it is known to play an essential role in embryonic heart development and the maintenance of normal cardiac function.

Previous research has shown that NPRA Knockout (KO) mice exhibit **perinatal mortality**, and recent findings from our lab show that stillborn neonatal NPRA KO mice display a **ventricular septal defect (VSD)** phenotype.

VSD is the most prevalent type of congenital heart disease (CHD), which is the most common type of birth defect worldwide. Despite advancements in clinical interventions treating VSDs, **the cellular mechanism responsible for VSD are still unclear.**

**Hypothesis: Loss of NPRA** in the developing interventricular septum of neonatal mice **disrupts cardiac cell fate and proliferation, metabolic status**, leading to VSD, increased cardiac hypertrophy, fibrosis, and ultimately contributing to perinatal mortality and cardiac abnormalities.

## Methods

**Experimental animals:** Neonatal NPRA-KO mice and WT mice as controls for the study.

**Cryosection:** Neonatal heart tissues were cryoprotected in 30% sucrose, embedded in OCT, and cryosectioned at 10  $\mu$ m.

**Immunohistochemistry:** Heart cryosections were immunostained using primary and fluorescent secondary antibodies, counterstained with Hoechst nucleus stain, and imaged on a Leica TCS SP8 Confocal microscope.

**Histology:** Heart cryosections were stained following standard fixation, hematoxylin and eosin protocols. Fibrosis staining was also performed using Sirius red and fast green staining.

**Statistical analysis:** All datasets were presented as mean  $\pm$  standard error of the mean. Between-group comparisons were performed using a two-tailed unpaired t-test or one-way analysis of variance (ANOVA). Significance for all statistical analyses was assigned at  $P < 0.05$ .

## Acknowledgements



## Results

- NPRA KO stillborn neonatal mice show a VSD phenotype (Figure 1).

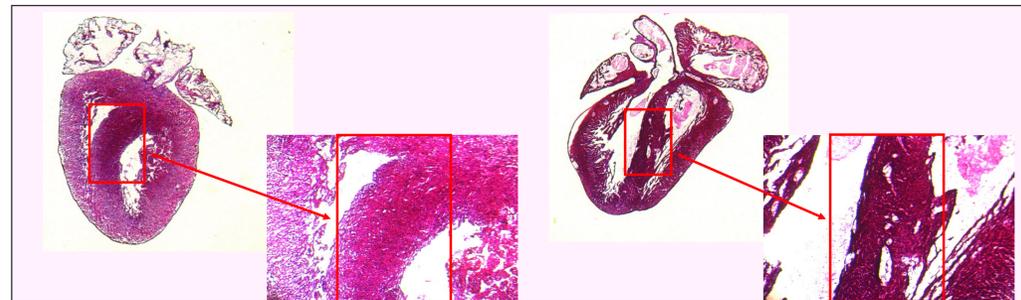
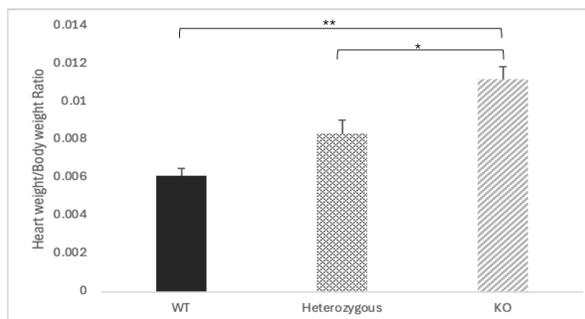


Figure 1. Histology H&E staining of neonatal heart sections (left- WT, right-KO)



- Neonatal KO mice exhibit significantly higher heart/body weight ratios Vs. WT and heterozygous mice, suggesting cardiac hypertrophy in KO.

Figure 2. Heart weight/body weight ratio in WT, heterozygous and KO mice. Values are mean  $\pm$  SEM, \* $P < 0.05$ , \*\* $P < 0.005$ ,  $n = 3-6$  mice per group, ANOVA, Turkey's HSD.

- Cell proliferation immunostaining suggests reduced cell proliferation in the NPRA KO mice, with only minimal change in apoptosis.

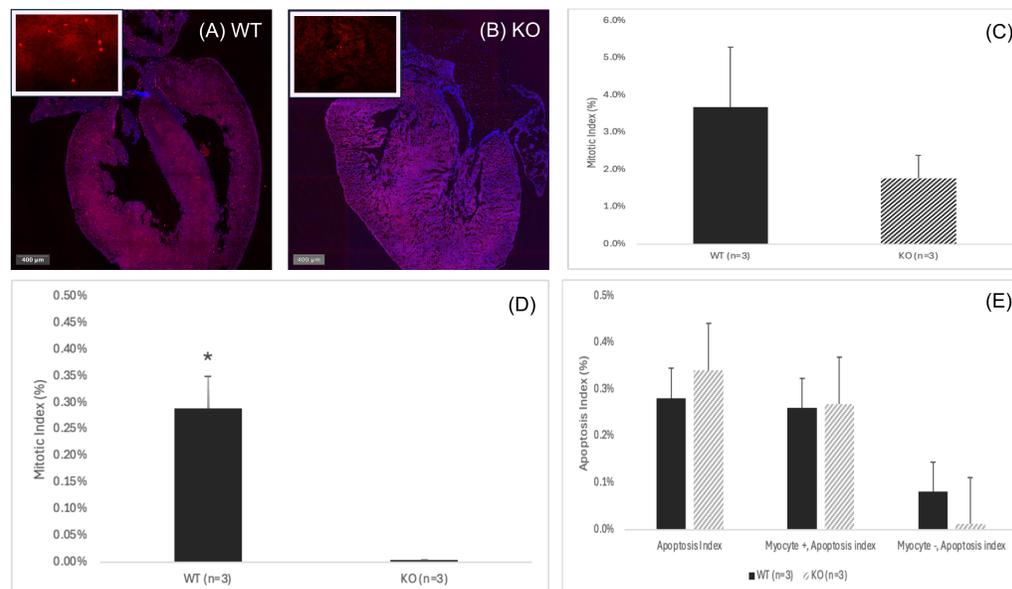


Figure 3. Quantification of cell proliferation and apoptosis levels: (A & B) Representative low and high-power images of phosphor-Histone H3 signal in KO and WT hearts; (C & D) Mitotic index (%) determined by immunostaining of phospho-Histone H3 (C) and Aurora Kinase B (D) in the septal cells of WT and KO hearts; (E) Apoptosis index for septal cardiomyocytes and non-myocytes populations determined by immunostaining for activated Caspase-3 and sarcomeric myosin staining. Values are mean  $\pm$  SEM, \* $P < 0.05$ ,  $n = 3$  mice per group.

## Results

- Representative images suggest a notable reduction of metabolic marker p-PDH in KO hearts (Figure 4).

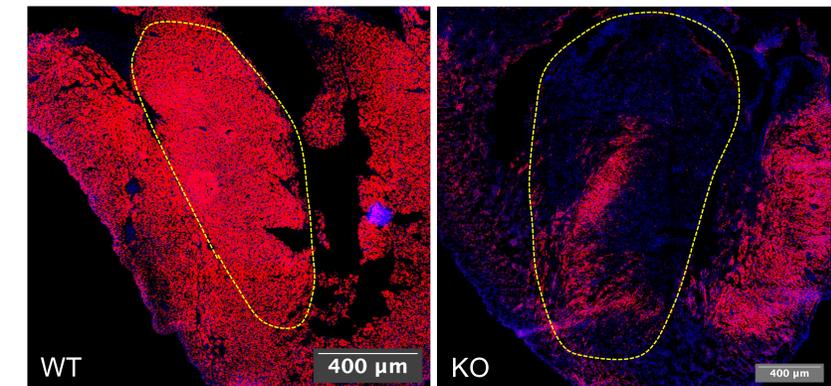


Figure 4. Immunolocalization of phospho-pyruvate dehydrogenase (p-PDH, red) merged with the Hoechst nuclear stain (blue) in the septum of the neonatal hearts.

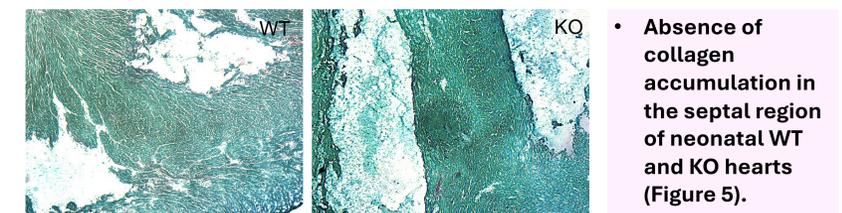


Figure 5. Fibrosis staining (Sirius red and Fast green) of neonatal heart sections under 10x magnification (left- WT, right - KO)

- Absence of collagen accumulation in the septal region of neonatal WT and KO hearts (Figure 5).

## Conclusions

- VSD in the neonatal stillborn NPRA KO shows septum malformation during cardiac development.
- KO mice exhibit a significantly higher heart weight/body weight ratio compared to WT ( $P = 0.001$ )
- Immunostaining experiments revealed a significant reduction in septal cardiomyocyte proliferation in KO Vs WT hearts, as assessed by Aurora kinase B ( $P = 0.04$ ), with a clear trend in reduced phospho-histone H3 staining, and no significant changes in apoptosis levels.
- Additionally, immunostaining of metabolic marker p-PDH revealed a reduced signal in KO Vs WT.
- Histological fibrosis staining revealed no significant differences in collagen accumulation between the two groups.
- Future experiments will quantify P-PDH signal intensity to confirm metabolic alterations and increase the number of animals analyzed for Histone H3 to determine statistical significance.
- CHD remain the leading cause of mortality from birth defects worldwide. This work may help identify new molecular targets and point us towards potential drug targets.