

## 甘露清瘟方对小鼠急性肺损伤的治疗作用及其机制

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[中图分类号] R256; R289; R563.8

[文献标志码] A

[DOI] 10.11855/j.issn.0577-7402.1477.2025.0225

[声明] 本文所有作者声明无利益冲突

[引用本文] 李翔鹏, 李风森, 李争, 等. 甘露清瘟方对小鼠急性肺损伤的治疗作用及其机制[J]. 解放军医学杂志, 2025, 50(7): 868-875.

[收稿日期] 2024-09-24

[录用日期] 2024-11-19

[上线日期] 2025-02-25

**[摘要]** 目的 探究甘露清瘟方对脂多糖(LPS)诱导的小鼠急性肺损伤/急性呼吸窘迫综合征(ALI/ARDS)的治疗作用及其机制。方法 50只ICR小鼠随机分为对照组、模型组及甘露清瘟低(7.10 g/kg)、中(15.21 g/kg)和高(30.42 g/kg)剂量组, 每组10只。第1—3天, 各甘露清瘟组小鼠分别灌胃给予相应剂量的甘露清瘟方, 对照组、模型组灌胃给予等体积生理盐水, 1次/d; 第4天, 模型组与各甘露清瘟组小鼠腹腔注射LPS(20 mg/kg)构建ALI/ARDS模型, 对照组腹腔注射等体积PBS; 24 h后观察小鼠存活率, 采集血清和肺组织, 检测肺组织湿干重比(W/D)并行肺组织HE染色, ELISA法检测血清肿瘤坏死因子(TNF)- $\alpha$ 、 $\gamma$ 干扰素(IFN- $\gamma$ )、白细胞介素(IL)-4、IL-10、IL-12水平及肺组织TNF- $\alpha$ 、IFN- $\gamma$ 、IL-1 $\beta$ 、IL-4、IL-6、IL-10、IL-12水平, Western blotting检测肺组织NOD样受体热蛋白结构域相关蛋白3(NLRP3)、膜穿孔蛋白Gasdermin D(GSDMD)、胱天蛋白酶-1(Caspase-1)、凋亡相关斑点样蛋白(ASC)表达水平。结果 各组小鼠存活率比较差异无统计学意义( $P>0.05$ )。ELISA法和Western blotting检测结果显示, 与对照组比较, 模型组小鼠肺组织W/D、IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12、IL-1 $\beta$ 、IL-6、NLRP3、ASC、Caspase-1、GSDMD和血清IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12水平明显升高( $P<0.05$ ), 肺组织和血清IL-10水平明显降低( $P<0.05$ ); 与模型组比较, 甘露清瘟低、中、高剂量组小鼠肺组织W/D、IFN- $\gamma$ 、TNF- $\alpha$ 、IL-1 $\beta$ 、IL-4、IL-6、IL-12、NLRP3、ASC、Caspase-1、GSDMD和血清IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12水平均明显降低( $P<0.05$ ), 肺组织IL-10水平明显升高( $P<0.05$ ), 甘露清瘟高剂量组血清IL-10水平明显升高( $P<0.05$ ); 与甘露清瘟低剂量组比较, 甘露清瘟高剂量组小鼠肺组织IFN- $\gamma$ 、IL-6、NLRP3、ASC、Caspase-1、GSDMD和血清TNF- $\alpha$ 水平明显降低( $P<0.05$ ), 肺组织和血清IL-10水平明显升高( $P<0.05$ )。小鼠肺组织HE染色结果显示, 对照组肺结构清晰、正常; 模型组部分肺间质充血、出血, 部分细支气管周围炎性细胞浸润; 甘露清瘟低、中、高剂量组肺间质充血、出血现象减少, 炎性细胞浸润程度减轻。结论 甘露清瘟方可能通过抑制NLRP3/Caspase-1/GSDMD通路, 抑制细胞焦亡, 延缓小鼠ALI/ARDS的发生。

**[关键词]** 甘露清瘟; 脂多糖; 急性肺损伤; 急性呼吸窘迫综合征; 细胞焦亡

## Therapeutic effects and underlying mechanisms of Ganluqingwen formula on acute lung injury in mice

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This work was supported by the Xinjiang Uygur Autonomous Region Key Research and Development Program (2021B03003-2), the Xinjiang Uygur Autonomous Region Major Science and Technology Special Project (2022A03006-1), and the "Tianshan Talents" Program for Training High-level Talents in Medicine and Healthcare (TSYC202301B048)

**[Abstract]** **Objective** To investigate the therapeutic effects and underlying mechanisms of Ganluqingwen formula on**[基金项目]** 新疆维吾尔自治区重点研发计划(2021B03003-2); 新疆维吾尔自治区重大科技专项(2022A03006-1); "天山英才"医药卫生高层次人才培养计划(TSYC202301B048)**[作者简介]** 李翔鹏, 博士研究生, 主要从事呼吸系统疾病中西医结合治疗方面的研究**[通信作者]** 李风森, E-mail: fengsen602@163.com

lipopolysaccharide (LPS)-induced acute lung injury/acute respiratory distress syndrome (ALI/ARDS) in mice. **Methods** Fifty ICR mice were randomly divided into five groups: control, model, and Ganluqingwen formula (GLQW) low dose (7.10 g/kg), medium dose (15.21 g/kg), and high dose (30.42 g/kg) groups, with 10 mice per group. On days 1-3, mice in GLQW groups were daily gavaged with the corresponding dose of GLQW, while control and model groups received equal volumes of saline. On day 4, ALI/ARDS was induced in model and GLQW groups using intraperitoneal injection of LPS (20 mg/kg), while control group received an equal volume of PBS. At 24 h post-treatment, survival rate, wet-to-dry weight ratio (W/D) and lung histological changes (HE staining) were observed. Serum levels of tumor necrosis factor (TNF)- $\alpha$ , interferon gamma (IFN- $\gamma$ ), interleukin (IL)-4, IL-10, IL-12, as well as lung tissue levels of TNF- $\alpha$ , IFN- $\gamma$ , IL-1 $\beta$ , IL-4, IL-6, IL-10 were measured by ELISA. Western blotting was used to determine the expression levels of NOD-like receptor thermal protein domain associated protein 3 (NLRP3), cystatinase-1 (Caspase-1), apoptosis-associated speck-like protein (ASC), and membrane perforating protein Gasdermin D (GSDMD) in lung tissue. **Results** No significant differences in survival rates were observed among the groups ( $P>0.05$ ). Compared with control group, ELISA and Western blotting results showed that lung tissue W/D, IFN- $\gamma$ , TNF- $\alpha$ , IL-4, IL-12, IL-1 $\beta$ , IL-6, NLRP3, ASC, and Caspase-1, GSDMD and serum IFN- $\gamma$ , TNF- $\alpha$ , IL-4, IL-12 levels were significantly higher ( $P<0.05$ ), and IL-10 levels in lung tissue and serum were significantly lower in mice of model group ( $P<0.05$ ). Compared with model group, lung tissue W/D, IFN- $\gamma$ , TNF- $\alpha$ , IL-1 $\beta$ , IL-4, IL-6, IL-12, NLRP3, ASC, Caspase-1, and GSDMD, and serum IFN- $\gamma$ , TNF- $\alpha$ , IL-4, and IL-12 levels were significantly lower ( $P<0.05$ ), and lung tissue IL-10 levels were significantly higher ( $P<0.05$ ) in GLQW low, medium, and high dose groups, with high-dose group showing significantly higher level in serum IL-10 ( $P<0.05$ ). Compared with GLQW low-dose group, the lung tissue levels of IFN- $\gamma$ , IL-6, NLRP3, ASC, Caspase-1, and GSDMD, and serum TNF- $\alpha$  were significantly lower ( $P<0.05$ ), and lung and serum IL-10 levels were significantly higher in GLQW high-dose group ( $P<0.05$ ). HE staining results showed that lung structure was clear and normal in control group; part of the lung interstitium was congested and hemorrhagic, and some of the fine bronchial periphery was infiltrated with inflammatory cells in model group; the phenomena of lung interstitial congestion and hemorrhage were reduced, and the degree of infiltration of inflammatory cells was alleviated in GLQW low-, medium-, and high-dose groups. **Conclusion** Ganluqingwen formula can delay the development of ALI/ARDS in mice by inhibiting NLRP3/Caspase-1/GSDMD pathway, thereby suppressing cellular pyroptosis.

**[Key words]** Ganluqingwen; lipopolysaccharide; acute lung injury; acute respiratory distress syndrome; pyroptosis

急性肺损伤(acute lung injury, ALI)/急性呼吸窘迫综合征(acute respiratory distress syndrome, ARDS)是多种直接或间接原因如肺炎、创伤、中毒、误吸、胰腺炎、输血等<sup>[1]</sup>引起的以进行性呼吸困难、持续性顽固低氧血症、弥漫性肺水肿为临床表现的综合征<sup>[2-3]</sup>。ALI/ARDS发病率较高, 30 d病死率达21.5%~27.2%, 严重威胁人类健康<sup>[4-7]</sup>; 目前其临床治疗以支持治疗为主, 但随着抗生素、糖皮质激素等药物的使用及长时间的机械通气治疗, 可能引起多种并发症及后遗症, 如住院周期延长、呼吸机相关感染和患者死亡风险增加<sup>[8]</sup>; 机械通气虽然能帮助塌陷的肺泡膨胀复张, 改善氧合, 纠正低氧血症<sup>[9]</sup>, 但不当的正压和潮气量可导致机械性损伤及肺泡表面活性物质减少<sup>[10]</sup>, 亦可导致毛细血管通透性增加, 使更多炎性因子释放至间质<sup>[11]</sup>。因此, ALI/ARDS治疗药物的开发与应用已成为近年来的研究热点。

甘露清瘟方(以下简称甘露清瘟)是李凤森教授治疗呼吸系统感染性疾病的经验方, 由普济消毒饮加减化裁而成, 具有清热解毒、清肺化痰之功, 在病毒性感冒、冠状病毒感染、社区获得性肺炎等疾病的临床治疗中取得一定疗效。本研究采用脂多糖(lipopolysaccharide, LPS)诱导的小鼠ALI/ARDS模型, 探讨甘露清瘟对ALI/ARDS的治疗作用及与肺组织细

胞焦亡相关的作用机制, 旨在为甘露清瘟颗粒制剂的研发提供理论依据。

## 1 材料与方法

**1.1 实验动物及分组** 10周龄SPF级ICR小鼠50只, 雌雄各半, 体重(20 $\pm$ 2)g, 购自新疆医科大学动物实验中心并于该中心饲养[实验动物生产许可证号: SCXK(新)2023-0001; 使用许可证号: SYXK(新)2023-0004], 环境温度(23 $\pm$ 3) $^{\circ}$ C, 相对湿度50% $\pm$ 10%, 自由进食水。将小鼠随机分为对照组、模型组及甘露清瘟低、中、高剂量组, 每组10只。本研究经新疆医科大学实验动物伦理委员会审批(IACUC-JT-20230831-52)。实验过程符合国家和单位有关实验动物的管理和使用规定。

**1.2 药物** 甘露清瘟方组成包括茵陈、青蒿各15g, 连翘12g, 黄芩、射干、伊贝母、陈皮、豆蔻、石菖蒲、燀桃仁各9g, 藿香、法半夏各6g, 购自新疆医科大学附属中医医院。

**1.3 主要试剂** LPS(L2630)购自美国Sigma公司; 白细胞介素(IL)-1 $\beta$ (E-EL-M003)、IL-4 (E-EL-M0043)、IL-6(E-EL-M0044)、IL-10(E-EL-M0046)、IL-12(E-EL-M3062)、肿瘤坏死因子- $\alpha$ (TNF- $\alpha$ ; E-EL-M3063)、 $\gamma$ 干扰素(IFN- $\gamma$ ; E-EL-M0048)ELISA检测试剂盒购自

武汉伊莱瑞特生物科技有限公司；苏木精-伊红(HE)染色试剂盒(G1120)、高效RIPA裂解液(R0010)、5×蛋白上样缓冲液(P1040)购自北京索莱宝科技有限公司；BCA蛋白浓度测定试剂盒(BLS21A)、特超敏ECL化学发光底物(BLS20B)购自中国兰杰柯科技有限公司；抗NOD样受体热蛋白结构域相关蛋白3(NOD-like receptor thermal protein domain associated protein 3, NLRP3; 19771-1-AP)、凋亡相关斑点样蛋白(apoptosis-associated speck-like protein, ASC; 10500-1-AP)、GAPDH抗体(10494-1-AP)购自武汉三鹰生物技术有限公司；抗胱天蛋白酶-1(cysteinyI aspartate specific proteinase, Caspase-1; ab286125)抗体、辣根过氧化物酶(horseradish peroxidase, HRP)标记的山羊抗兔IgG二抗(ab205718)购自英国Abcam公司；抗膜穿孔蛋白Gasdermin D(GSDMD)抗体(AF4012)购自江苏亲科生物研究中心有限公司。

#### 1.4 方法

**1.4.1 药物制备** 取甘露清瘟草药2剂，加1170 g水浸泡30 min，大火煮沸后，转小火煮30 min，无纺布过滤药渣；药渣加936 g水，再次煎煮、过滤；将两次药液混匀，继以浓缩、低温烘干，最终获得约40 g干浸膏粉，密封、冷藏，造模前以0.9%氯化钠注射液溶解。

**1.4.2 ALI/ARDS小鼠模型的建立** 第1—3天，各甘露清瘟组小鼠灌胃给予甘露清瘟，1次/d，其中低剂量组7.10 g/kg、中剂量组15.21 g/kg、高剂量组30.42 g/kg[1付中药为117 g(相当于20 g干浸膏粉)，中剂量：117 g/70 kg×9.1=15.21 g/kg；低剂量：15.21 g/kg×0.5=7.10 g/kg；高剂量：15.21 g/kg×2=30.42 g/kg]；对照组、模型组灌胃给予等体积生理盐水，1次/d。第4天，模型组与各甘露清瘟组腹腔注射20 mg/kg LPS(半数致死剂量)建立ALI/ARDS小鼠模型，对照组腹腔注射等体积PBS。

**1.4.3 血清和肺组织采集** 腹腔注射LPS(对照组腹腔注射等体积PBS)24 h后腹主动脉取血处死小鼠，离心取血清用于ELISA检测；迅速收集肺组织，右肺上叶用于检测肺组织湿/干重比(W/D)，右肺中叶以4%多聚甲醛溶液固定用于病理检测，右肺下叶制作组织匀浆后用于ELISA检测，左肺组织剪碎后以RIPA裂解制备蛋白母液用于Western blotting检测。

**1.4.4 小鼠肺组织W/D检测** PBS冲洗右肺上叶血液，称量肺湿重(W)，然后在60℃烘箱烘烤48 h，称量肺干重(D)，计算W/D。

**1.4.5 HE染色观察小鼠肺组织病理学改变** 右肺中叶固定、脱水、石蜡包埋、切片后行HE染色，光学显微镜下观察肺组织病理学改变。

**1.4.6 ELISA法检测小鼠血清和肺组织炎症指标**

按照说明书步骤，取血清检测IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-10、IL-12水平。取右肺下叶组织匀浆检测IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-10、IL-12、IL-1 $\beta$ 、IL-6水平。

**1.4.7 Western blotting检测小鼠肺组织NLRP3、ASC、Caspase-1、GSDMD蛋白表达水平** 蛋白母液BCA定量后，将蛋白母液、RIPA、5×上样缓冲液按照BCA定量计算结果混匀，使各组蛋白浓度达到20  $\mu$ g/10  $\mu$ l，煮样。上样20  $\mu$ g，行SDS-PAGE凝胶电泳及转膜。5%脱脂奶粉室温封闭2 h，分别加入抗NLRP3(1:1000)、ASC(1:1000)、Caspase-1(1:1000)、GSDMD(1:1000)、GAPDH(1:5000)抗体，4℃摇床过夜。洗膜3次，加入二抗HRP标记的山羊抗兔IgG(1:10 000)室温孵育50 min；再次洗膜，使用超敏ECL发光底物试剂，A液、B液等量混匀，将显色液均匀滴洒在PVDF膜上，保持1 min，使用化学发光成像系统曝光，并保存图像。

**1.5 统计学处理** 采用GraphPad Prism 8.2软件进行统计分析。计量资料均符合正态分布，以 $\bar{x}\pm s$ 表示，多组间比较采用单因素方差分析，进一步两两比较采用LSD-*t*检验。计数资料以例(%)表示，组间比较采用Fisher确切概率法。 $P<0.05$ 为差异有统计学意义。

## 2 结果

**2.1 甘露清瘟对小鼠存活率的影响** 造模后24 h，对照组小鼠存活10只(100.0%)，模型组存活5只(50.0%)，甘露清瘟低剂量组和中剂量组均存活6只(60.0%)，甘露清瘟高剂量组存活8只(80.0%)。各组小鼠存活率比较差异无统计学意义( $P>0.05$ )。

**2.2 甘露清瘟对小鼠肺组织W/D的影响** 与对照组比较，模型组小鼠肺组织W/D明显增高( $P<0.0001$ )；与模型组比较，甘露清瘟低、中、高剂量组小鼠W/D均明显降低( $P<0.001$ 或 $P<0.0001$ )；甘露清瘟中剂量组W/D明显低于低剂量组( $P<0.05$ )，高剂量组W/D明显低于中剂量组( $P<0.05$ )(图1)。

**2.3 甘露清瘟对小鼠血清炎症指标的影响** ELISA法检测结果显示，与对照组比较，模型组小鼠血清IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12水平明显升高( $P<0.0001$ )，IL-10水平明显降低( $P<0.0001$ )；与模型组比较，甘露清瘟低、中、高剂量组血清IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12水平明显降低( $P<0.001$ )，甘露清瘟高剂量组IL-10水平明显升高( $P<0.05$ )；与甘露清瘟低剂量组比较，甘露清瘟高剂量组小鼠血清IL-10水平明显升高( $P<0.05$ )；与甘露清瘟低、中剂量组比较，甘露清瘟高剂量组小鼠血清TNF- $\alpha$ 水平明显降低( $P<0.001$ 或 $P<0.0001$ )，IL-10水平明显升高( $P<0.05$ 或 $P<0.01$ )(图2)。

**2.4 甘露清瘟对小鼠肺组织炎症指标的影响** ELISA

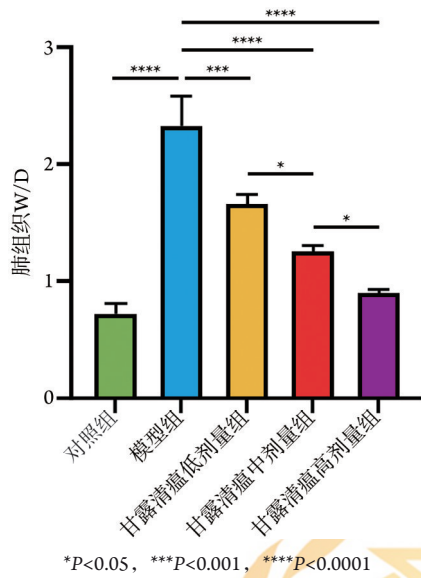


图1 甘露清瘟方对各组小鼠肺组织湿干重比(W/D)的影响

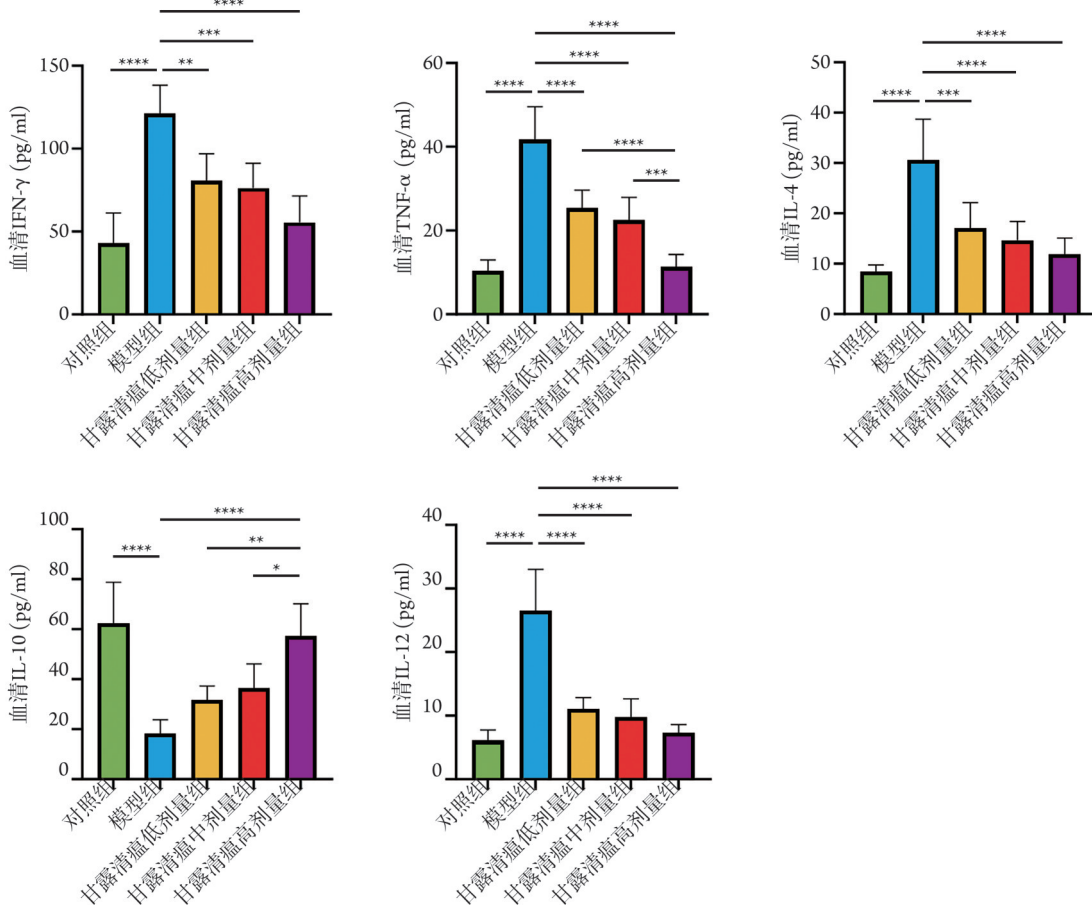
Fig.1 Effect of Ganluqingwen formula on lung wet to dry weight ratio (W/D) of mice in each group

法检测结果显示,与对照组比较,模型组小鼠肺组织IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12、IL-1 $\beta$ 、IL-6水平明显

升高( $P < 0.0001$ ), IL-10水平明显降低( $P < 0.0001$ );与模型组比较,甘露清瘟低、中、高剂量组小鼠肺组织IFN- $\gamma$ 、TNF- $\alpha$ 、IL-1 $\beta$ 、IL-4、IL-6、IL-12水平明显降低( $P < 0.05$ ), IL-10水平明显升高( $P < 0.05$ );与甘露清瘟低剂量组比较,甘露清瘟高剂量组小鼠肺组织IFN- $\gamma$ 、IL-6水平明显降低( $P < 0.0001$ 或 $P < 0.01$ ), IL-10水平明显升高( $P < 0.05$ )(图3)。

2.5 甘露清瘟对小鼠肺组织病理学改变的影响 HE染色结果显示,对照组小鼠肺组织结构清晰,肺泡壁薄,肺泡大小、数量正常,排列有序,肺泡腔内、支气管内无炎性渗出物,偶见少量炎性细胞浸润;与对照组比较,模型组小鼠部分肺间质充血、出血,部分肺泡壁明显增厚,部分肺泡腔内有炎性渗出物,部分细支气管周围较多炎性细胞浸润;与模型组比较,甘露清瘟低、中和高剂量组增厚的肺泡壁范围均减少,肺间质充血、出血现象减少,炎性细胞浸润程度减轻;与甘露清瘟低剂量组比较,甘露清瘟中剂量组差异不明显,甘露清瘟高剂量组炎性细胞浸润程度稍减轻(图4)。

2.6 甘露清瘟对小鼠肺组织NLRP3、GSDMD、



IFN- $\gamma$ 干扰素; TNF- $\alpha$ 肿瘤坏死因子- $\alpha$ ; IL白细胞介素; \* $P < 0.05$ , \*\* $P < 0.01$ , \*\*\* $P < 0.001$ , \*\*\*\* $P < 0.0001$

图2 甘露清瘟方对小鼠血清炎症指标的影响

Fig.2 Effects of Ganluqingwen formula on the serum levels of inflammatory indicators in mice of each group

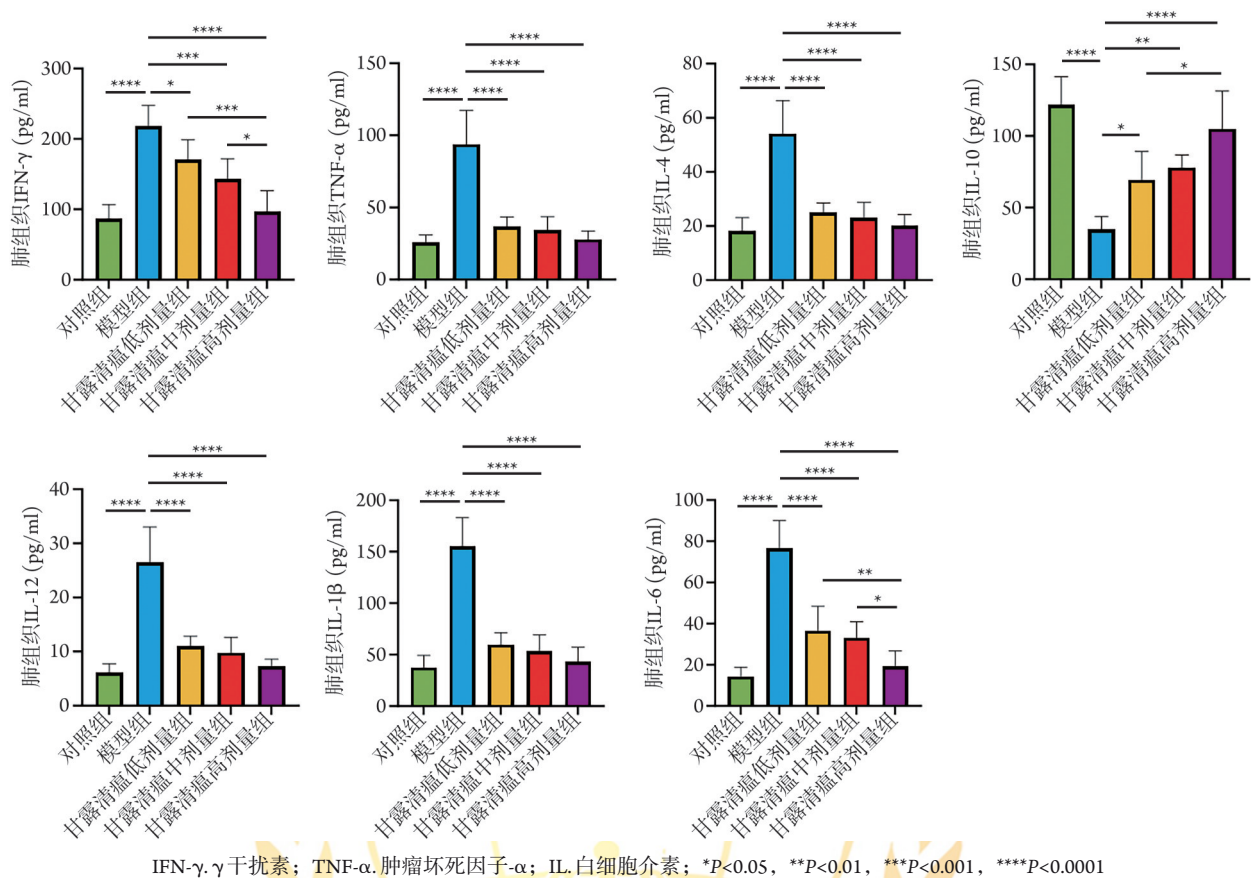


图3 甘露清瘟方对小鼠肺组织炎症指标的影响

Fig. 3 Effects of Ganluqingwen formula on the levels of inflammatory indicators in lung tissues of mice in each group

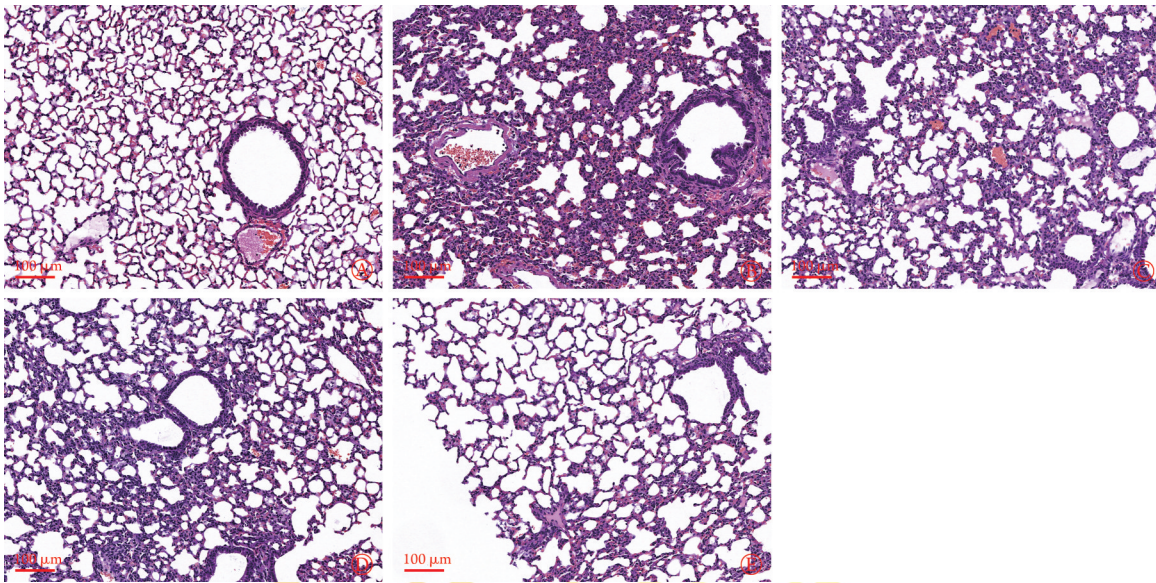
Caspase-1、ASC 蛋白表达的影响 Western blotting 检测结果显示,与对照组比较,模型组小鼠肺组织 NLRP3、GSDMD、Caspase-1、ASC 蛋白表达水平明显增高( $P$ <0.0001);与模型组比较,甘露清瘟低、中、高剂量组小鼠肺组织 NLRP3、GSDMD、Caspase-1、ASC 蛋白表达水平明显降低( $P$ <0.05);与甘露清瘟低剂量组比较,甘露清瘟中剂量组小鼠肺组织 ASC、Caspase-1、GSDMD 蛋白表达水平明显降低( $P$ <0.05);与甘露清瘟中剂量组比较,甘露清瘟高剂量组小鼠肺组织 Caspase-1 蛋白表达水平明显降低( $P$ <0.0001)(图5)。

### 3 讨论

ALI/ARDS 是以肺部炎症反应为病理特征,主要表现为肺水肿和呼吸衰竭的严重肺部疾患<sup>[12]</sup>,具有肺顺应性下降、肺内分流增加、无效腔容量增加、通气-血流比失衡、毛细血管通透性增加、肺间质水肿等病理生理特征。因过度的炎症反应导致大量中性粒细胞、巨噬细胞浸润,进而导致弥漫性肺泡损伤、肺泡毛细血管和上皮细胞功能障碍甚至坏死、透明膜形成,最终形成毛细血管内血栓。ALI/ARDS 的治疗以抗感染、抗炎及保护性肺通气为主,其他

治疗还包括严格的液体管理以减轻肺水肿、给予吸入性肺血管扩张药物改善分流,必要时可给予体外膜肺氧合(extracorporeal membrane oxygenation, ECMO)提供体外呼吸、循环支持;糖皮质激素的使用仍存在争议,虽然可发挥一定的抗炎作用,但不能降低病死率且存在一定的不良反应<sup>[13-20]</sup>。促炎因子的大量堆积可诱导上皮细胞和血管内皮细胞受损,使毛细血管通透性增加,炎性细胞浸润,导致肺组织损伤加重<sup>[3,21-22]</sup>。因此,抑制炎性介质的产生和释放是预防和治疗 ALI/ARDS 的关键节点。本研究中,模型组小鼠肺组织病理切片表现出弥漫性肺泡及肺间质水肿,其间充斥大量炎性细胞,亦可见淤血及微小血栓形成,与 ALI/ARDS 的病理表现一致;而甘露清瘟用药组肺组织炎性浸润减轻,间质水肿减少,提示甘露清瘟可减轻肺组织的炎症反应和肺水肿。

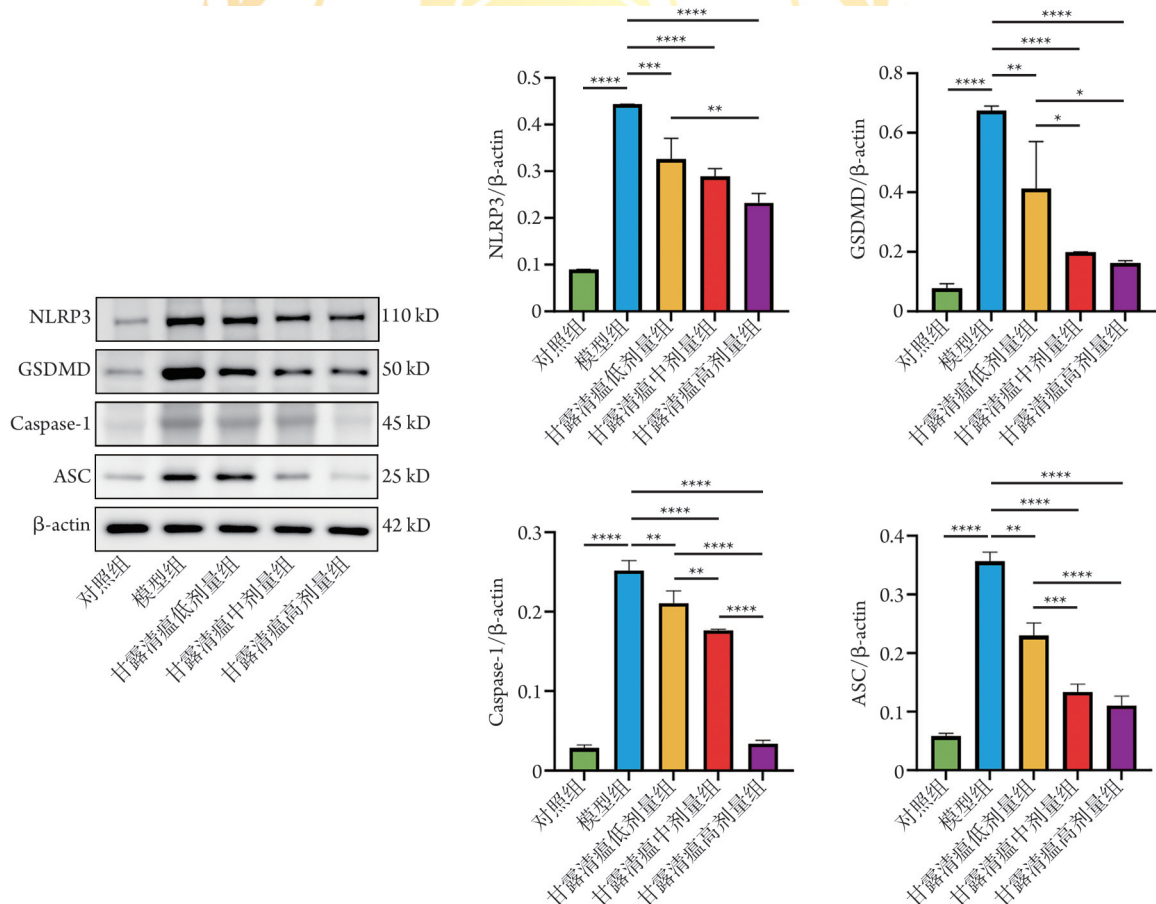
细胞焦亡是程序性细胞死亡的一种,其形态学表现为细胞肿胀甚至细胞膜破裂,染色质浓缩碎裂, DNA 断裂,但细胞核结构完整,细胞内的炎性介质释放至细胞外,引发炎症反应<sup>[23-27]</sup>。细胞焦亡的分子机制可分为经典炎性途径和非经典炎性途径。经典炎性途径称为 Caspase-1 依赖性途径,即固有免疫细胞膜表面的膜识别受体(PRR)在感受到损伤相关分



A. 对照组; B. 模型组; C. 甘露清瘟低剂量组; D. 甘露清瘟中剂量组; E. 甘露清瘟高剂量组

图4 甘露清瘟方对小鼠肺组织病理学改变的影响

Fig.4 Effects of Ganluqingwen formula on lung histopathologic changes in mice of each group



NLRP3. NOD样受体热蛋白结构域相关蛋白3; GSDMD.膜穿孔蛋白 Gasdermin D; ASC.凋亡相关斑点样蛋白; Caspase-1.胱天蛋白酶-1; \*P<0.05, \*\*P<0.01, \*\*\*P<0.001, \*\*\*\*P<0.0001

图5 甘露清瘟方对小鼠肺组织中NLRP3、GSDMD、ASC、Caspase-1蛋白表达的影响

Fig.5 Effects of Ganluqingwen formula on expression of NLRP3, GSDMD, ASC and Caspase-1 proteins in mouse lung tissue

子模式(DAMP)或病原相关分子模式(PAMP)的刺激后,募集胞质中多种成分组装成炎性小体<sup>[28-30]</sup>。PPR

包括 Toll 样受体 (TLRs)、NOD 样受体 (NOD-like receptors, NLRs)、黑色素瘤缺乏因子样受体 2

(absent in melanoma 2, AIM2)<sup>[31-33]</sup>, 但仅NLRs能够直接组装成炎性小体<sup>[34]</sup>。当PRR感受到PAMP、DAMP刺激后, 可通过激活核因子 $\kappa$ B(nuclear factor kappa-B, NF- $\kappa$ B)导致NLRP3表达上调并激活, NLRP受体寡聚化, 引起Pyrin结构域聚集, 并通过Pyrin-Pyrin模式结合, 招募ASC蛋白并形成复合物; ASC的CARD结构域随后募集pro-Caspase-1<sup>[35-37]</sup>。Pro-Caspase-1裂解释放Caspase-1, Caspase-1切割由肽键连接的GSDMD蛋白的N端效应结构域和C端抑制结构域, N端可插入细胞膜, 在细胞膜表面形成“孔道”; Caspase-1切割IL-1 $\beta$ 前体(pro-IL-1 $\beta$ )、pro-IL-18, 使其变为具有活性的IL-1 $\beta$ 、IL-18<sup>[38]</sup>; 此时细胞内容物流出<sup>[39-40]</sup>, 从而导致免疫反应的发生。非经典免疫途径亦称为非Caspase-1依赖途径, 当其识别细菌细胞壁的LPS成分后, 直接激活Caspase-4/-5/-11, 不需组装炎性小体; 与经典途径相似, 活化的Caspase-4/-5/-11直接切割GSDMD<sup>[30,41]</sup>, 使细胞内容物流出, 进一步促进NLRP3炎性小体的组装<sup>[42-44]</sup>, 导致焦亡的发生。细胞焦亡是由NLRP3介导的炎症程序性细胞死亡过程, NLRP3是炎症发生的关键调控因子<sup>[45-46]</sup>。因此, 抑制NLRP3是抑制细胞焦亡发生的重要途径之一<sup>[47]</sup>。在细胞焦亡发生时, LPS通过TLRs识别并激活NF- $\kappa$ B信号通路, 上调NLRP3的表达, 为炎性小体的激活提供起始点<sup>[41]</sup>。NLRP3、ASC、Caspase-1组装成炎性小体, 促进IL-1 $\beta$ 、IL-18的释放。LPS亦能直接激活Caspase-4/-5/-11, 进而切割GSDMD, 诱导细胞焦亡的发生。NLRP3炎性小体在下游炎性细胞释放、募集更多的促炎因子及加重炎症反应的过程中发挥了重要作用<sup>[48]</sup>。大量促炎因子的释放导致细胞因子风暴, 其中包括促炎因子TNF- $\alpha$ 、IFN- $\gamma$ 、IL-4、IL-6、IL-12, 以及抗炎因子IL-10的大量堆积<sup>[49-54]</sup>, 因此, NLRP3可作为抑制炎症风暴和治疗ALI/ARDS的潜在靶点<sup>[55]</sup>。

综上所述, 本研究结果显示, 甘露清瘟可降低ALI/ARDS小鼠血清IFN- $\gamma$ 、TNF- $\alpha$ 、IL-4、IL-12水平, 上调IL-10水平; 降低ALI/ARDS小鼠肺组织FN- $\gamma$ 、TNF- $\alpha$ 、IL-1 $\beta$ 、IL-4、IL-6、IL-12水平, 上调IL-10水平; 下调小鼠肺组织NLRP3、ASC、Caspase-1、GSDMD蛋白的表达。总之, 甘露清瘟可通过抑制炎性小体NLRP3的激活而抑制NLRP3/Caspase-1/GSDMD通路所致的细胞焦亡, 减少炎性因子释放, 减轻肺组织炎性细胞浸润, 减轻急性肺损伤。本研究仍存在一定的局限性, 如未对NLRP3、Caspase-1、GSDMD进行共定位, 对通路蛋白之间的关系验证存在些许不足, 有待后续研究进一步论证。

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