

1. Background:

Curcumin (diferuoylmethane, CCM) is a dietary pigment in curry and a phenolic component of common spice, turmeric. The antineoplastic effect of curcumin has been discussed a lot, but only a few papers demonstrated its application in transplantation. In vitro, CCM was shown to block cyclosporine A (CsA)-resistant CD28 costimulatory pathway of human T-cell proliferation. This is the first in vivo study to evaluate CCM as a novel adjuvant immunosuppressant.

2. Materials and Methods:

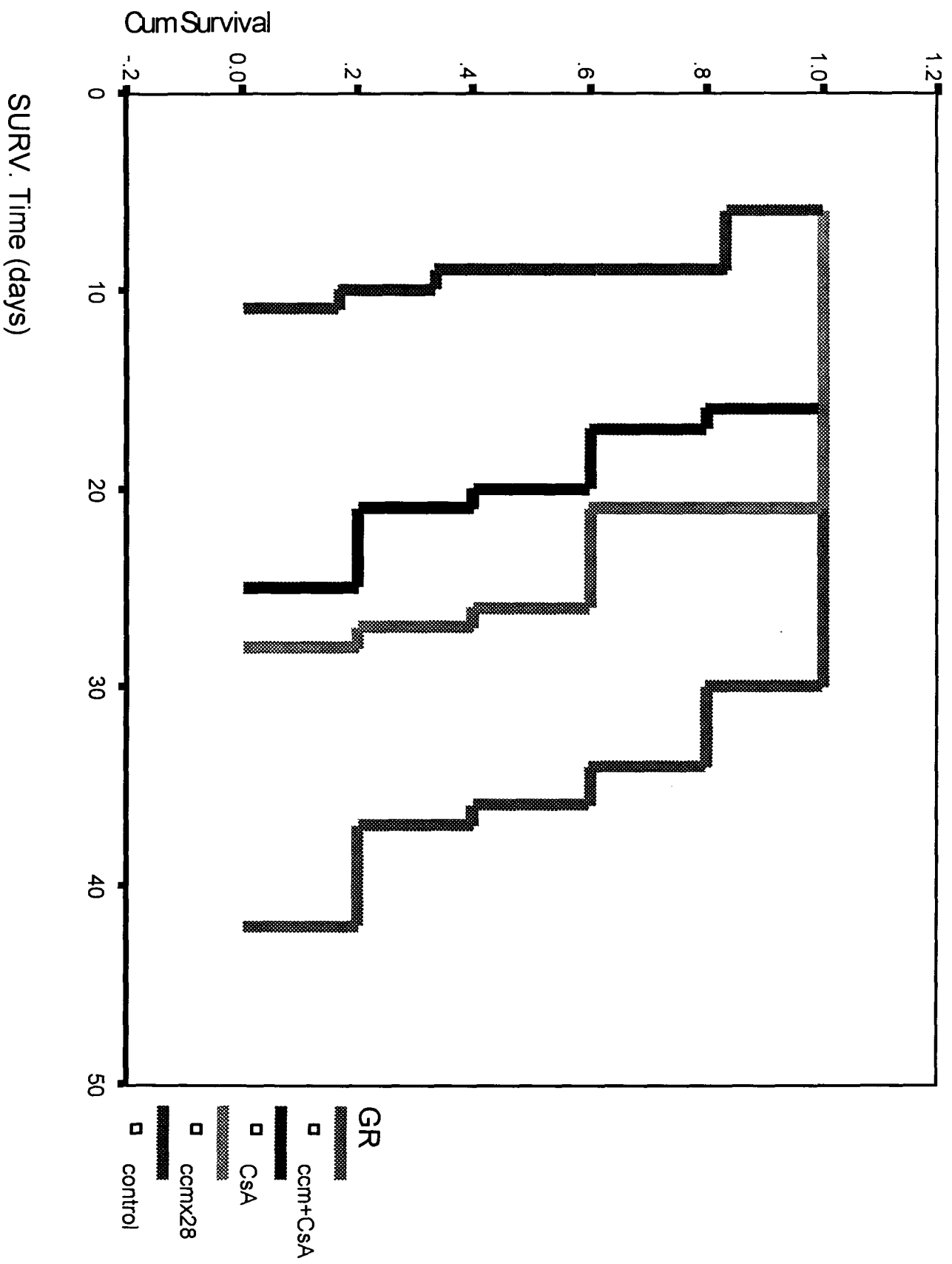
Immunosuppressive effect of CCM was studied in vivo with a rat heterotopic cardiac transplantation model. BrownNorway (BN, RT1n) hearts were grafted to WKY (RT1u) hosts or Buffalo (BUF, RT1b) hearts to Wistar-Furth (WF, RT1u) hosts. CCM alone or in combined with subtherapeutic doses of CsA were tested. Graft survival was monitored by daily palpation of heartbeats.

3. Results:

In BN to WKY model, CCM alone significantly increased the mean survival time (MST) +/- SD to 20.5 +/- 7.8 (100 mg/d x 14 d), and 24.5 +/- 6.3 (100 mg/d x 28d) days, as compared to 9.1 +/- 1.9 d of non-treated controls. Combination of CCM and subtherapeutic doses of CsA (10 mg/kg/d x 7d) produced further prolongation of MSTs to 28.5 +/- 5.1 and 35.6 +/- 5.9 days, better than that of CCM or CsA alone ($P < 0.05$). In BUF to WF model, CCM alone did not increase the MST, but when CCM and subtherapeutic doses of CsA were combined, two thirds of the grafts survived for more than 60 days ($P < 0.05$ as compared to either treatment group).

Conclusion: For the first time, this study demonstrated the effectiveness of curcumin as a novel adjuvant immunosuppressant in an in vivo rodent cardiac allograft model.

Survival Functions (BN-WKY)



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