

# A fibrosis molekuláris pathogenezise

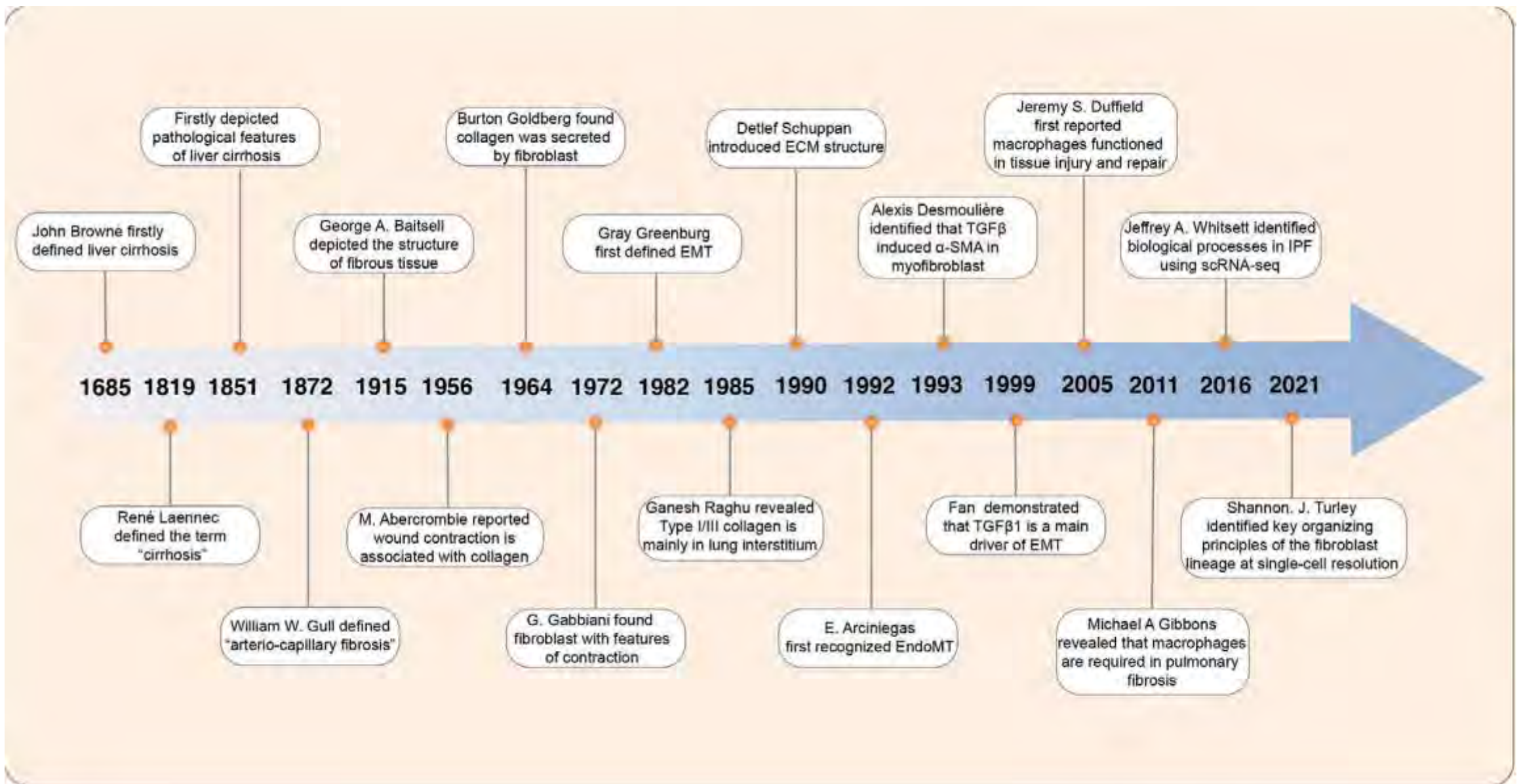
**Szűcs Gabriella**

Debreceni Egyetem

ÁOK Reumatológiai Tanszék  
KK Reumatológiai és Immunológiai Klinika



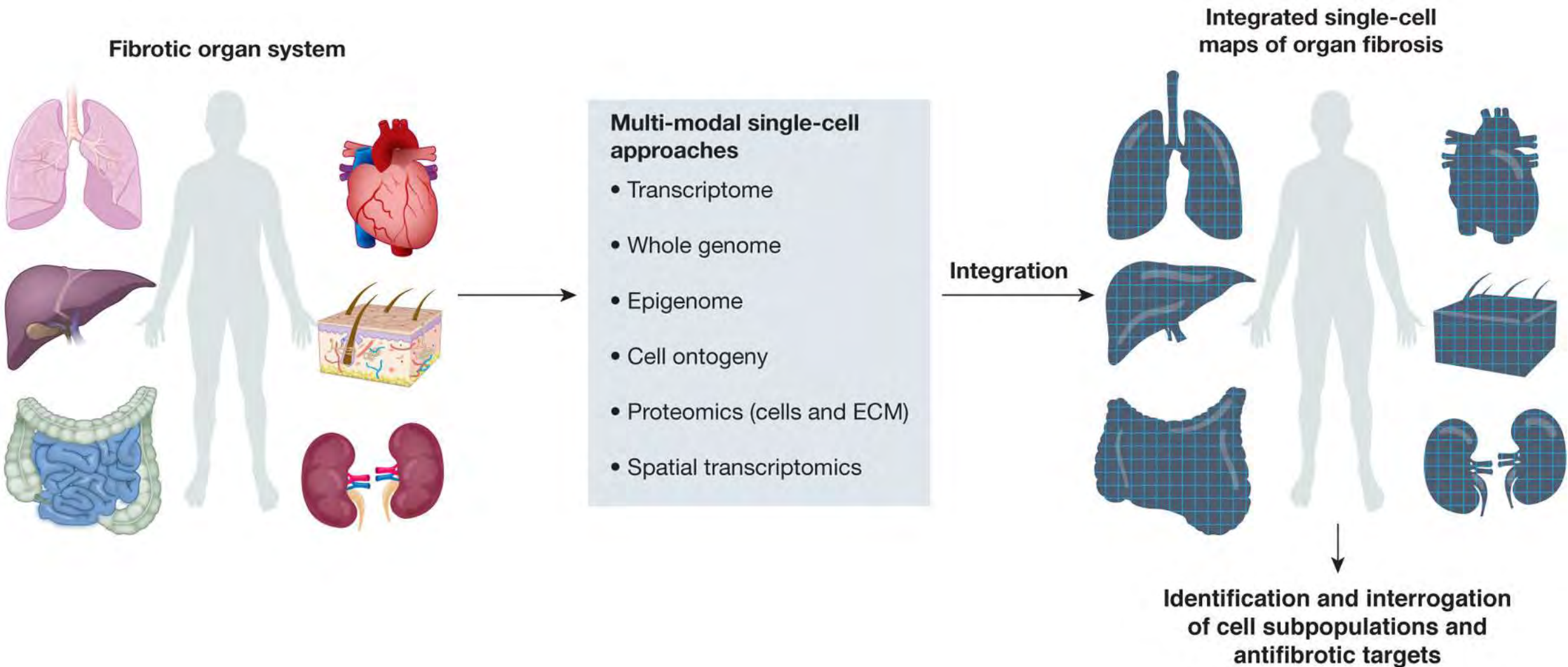
**Klinikai immunológia és allergológia I. Elmélet**  
SE, Reumatológiai és Klinikai Immunológiai Tanszék  
2025. március 10-18.



**Timeline of the milestones in the investigation of fibrosis over the past 300 years**

# FIBROSIS: FROM MECHANISMS TO MEDICINES

Henderson NC et al. Nature. 2020 November ; 587(7835): 555–566.

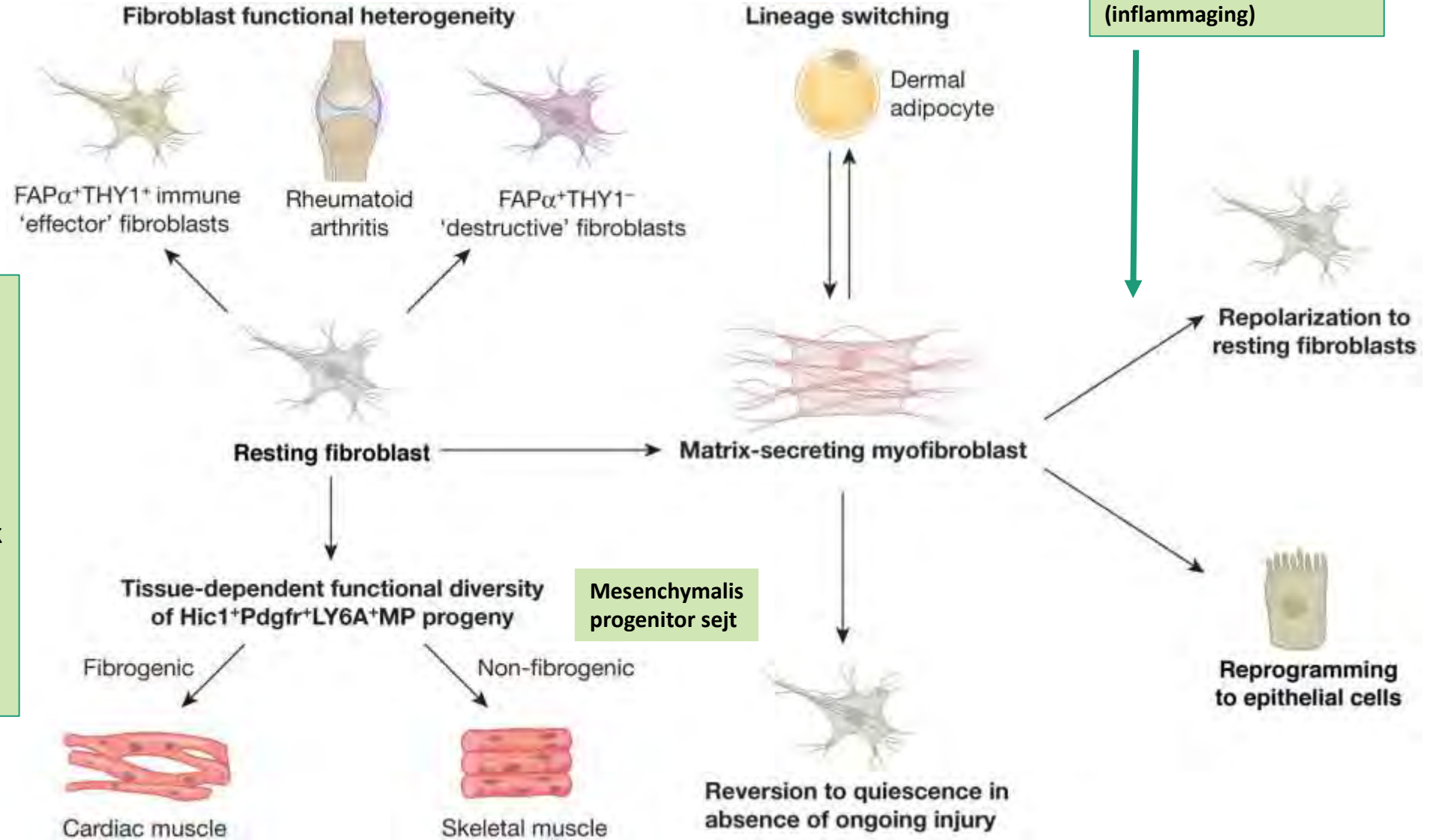


Az ipari világ halálzásának 45%-a



# FIBROSIS: FROM MECHANISMS TO MEDICINES

Henderson NC et al. Nature. 2020 November ; 587(7835): 555–566.



Fibrosis, secondary to age-associated chronic low-grade inflammation (inflammaging)

Fibrotikus szövet kialakulása – sérülés utáni normál repair

extracellular matrix (collagen, fibronectin stb) accumulatio

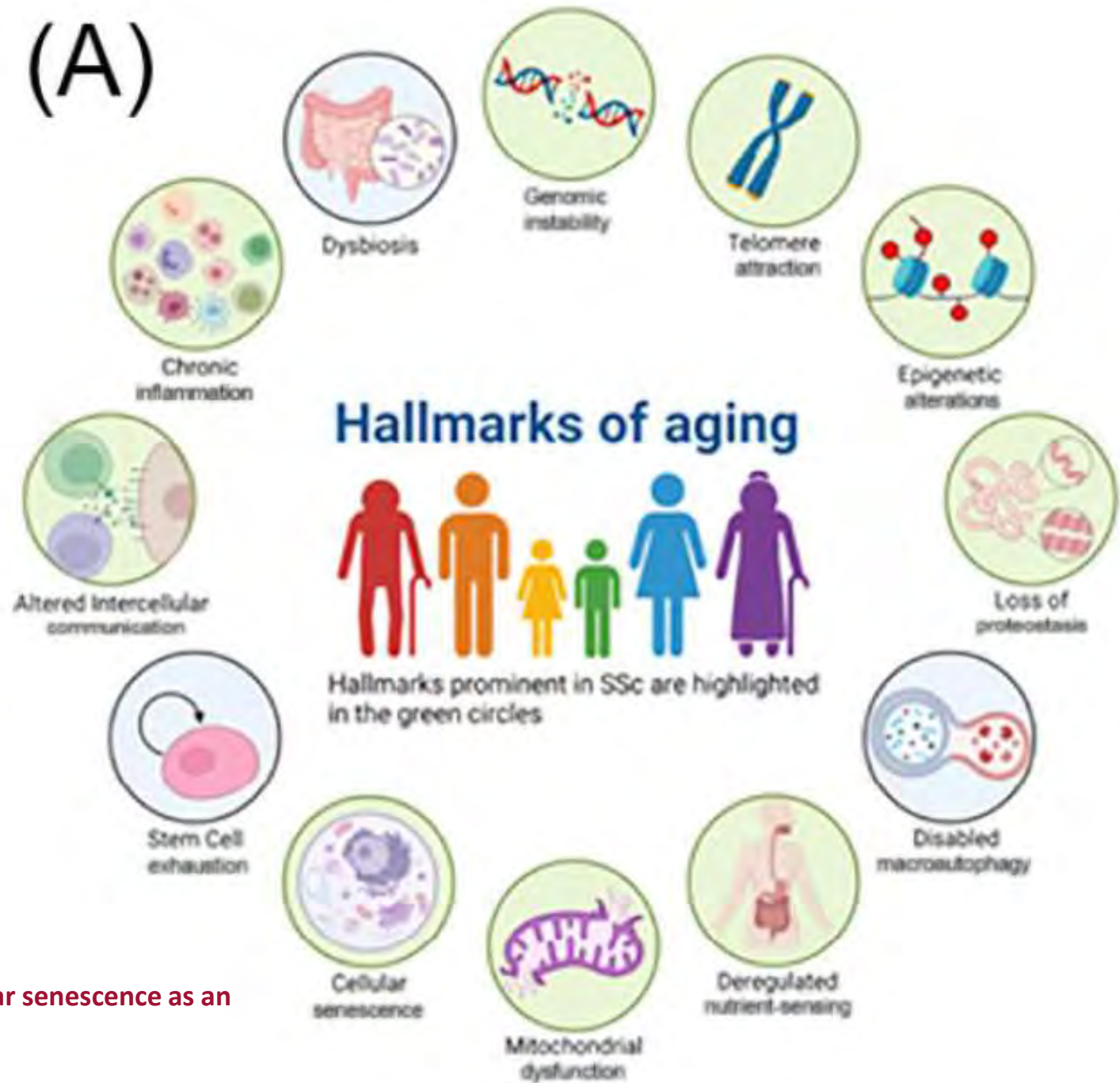
Pl. bőrben a fascia fibroblastok + a környező egységek (erek, macrophagok, perifériás erek)

↓

Gyógyulás

Funkcionális fibroblast heterogenitás és plaszticitás

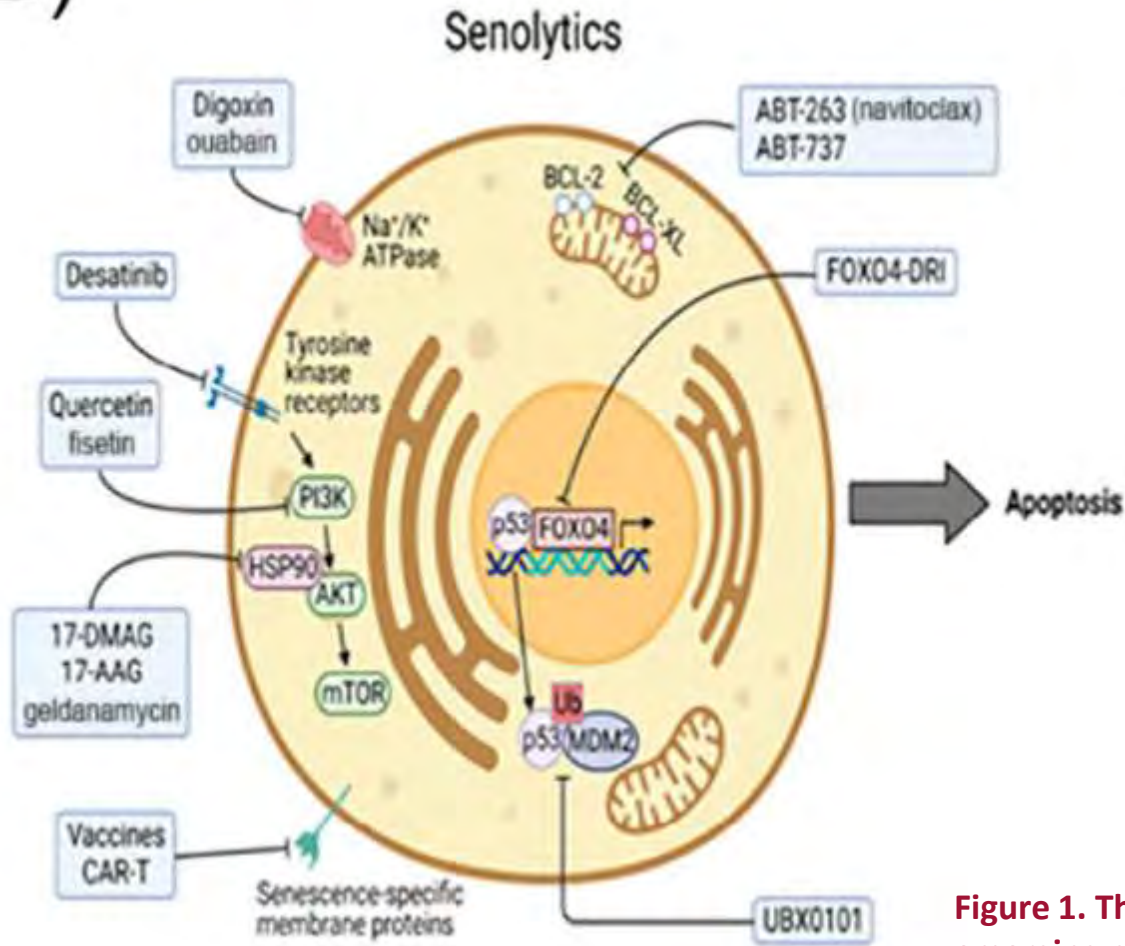
# Senescence and tissue fibrosis: opportunities for therapeutic targeting



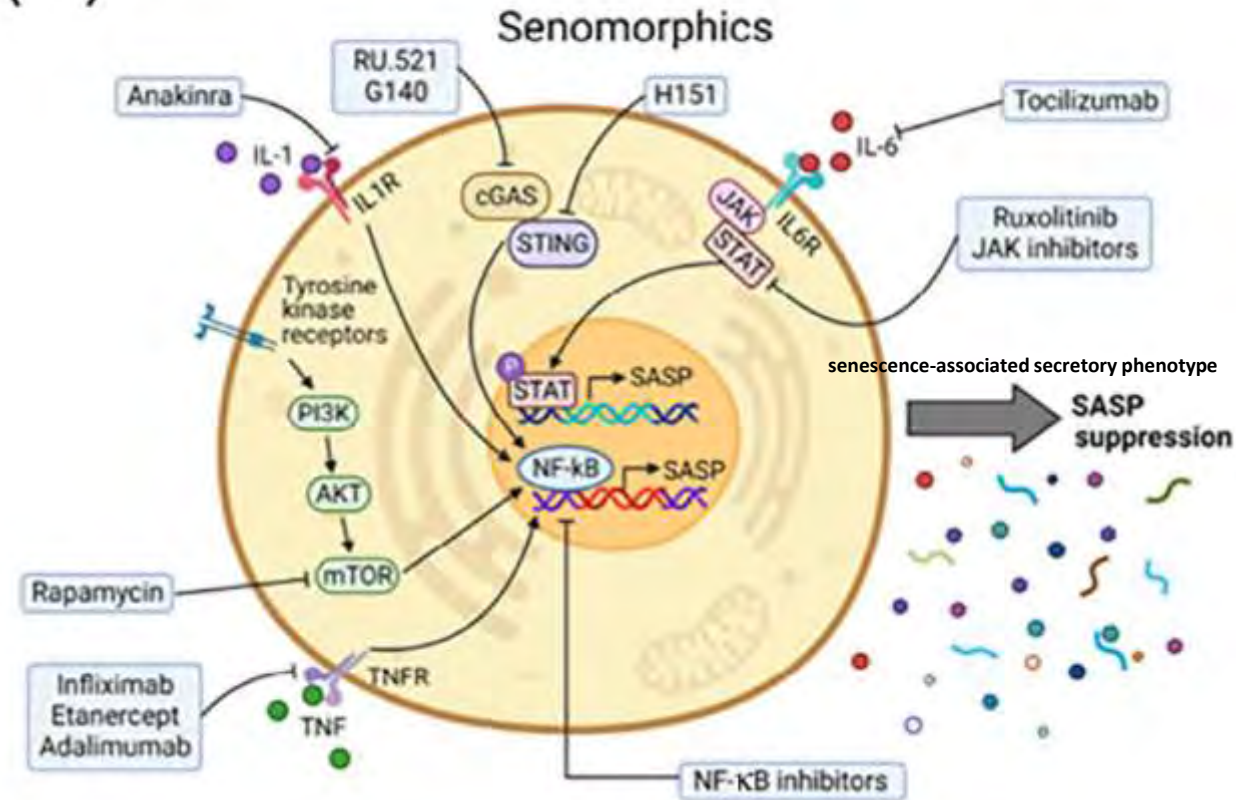
**Figure 1. The 12 hallmarks of aging and targeting cellular senescence as an emerging novel therapeutic strategy for fibrosis**

# Senescence and tissue fibrosis: opportunities for therapeutic targeting

(B)



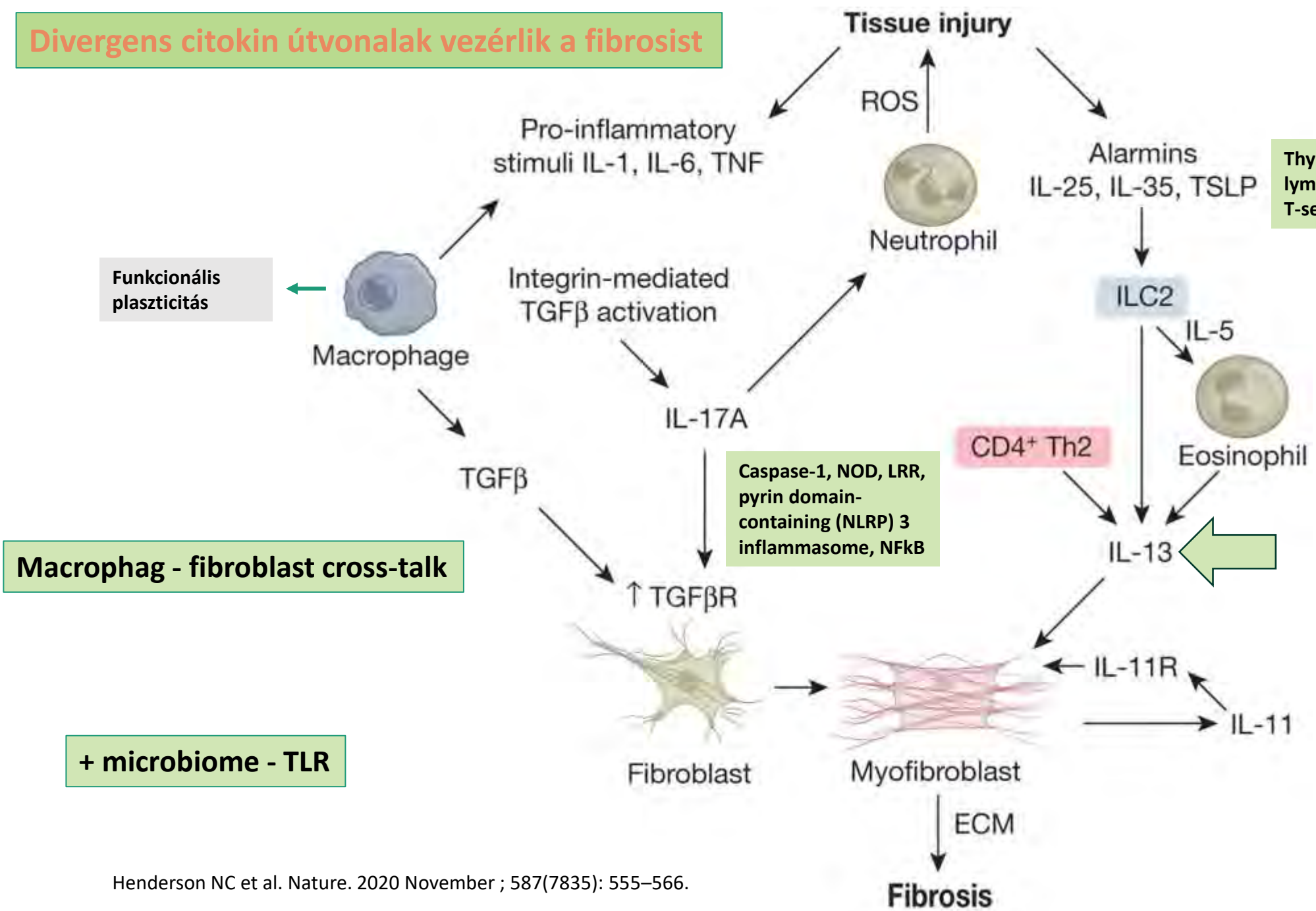
(C)



**Figure 1. The 12 hallmarks of aging and targeting cellular senescence as an emerging novel therapeutic strategy for fibrosis**



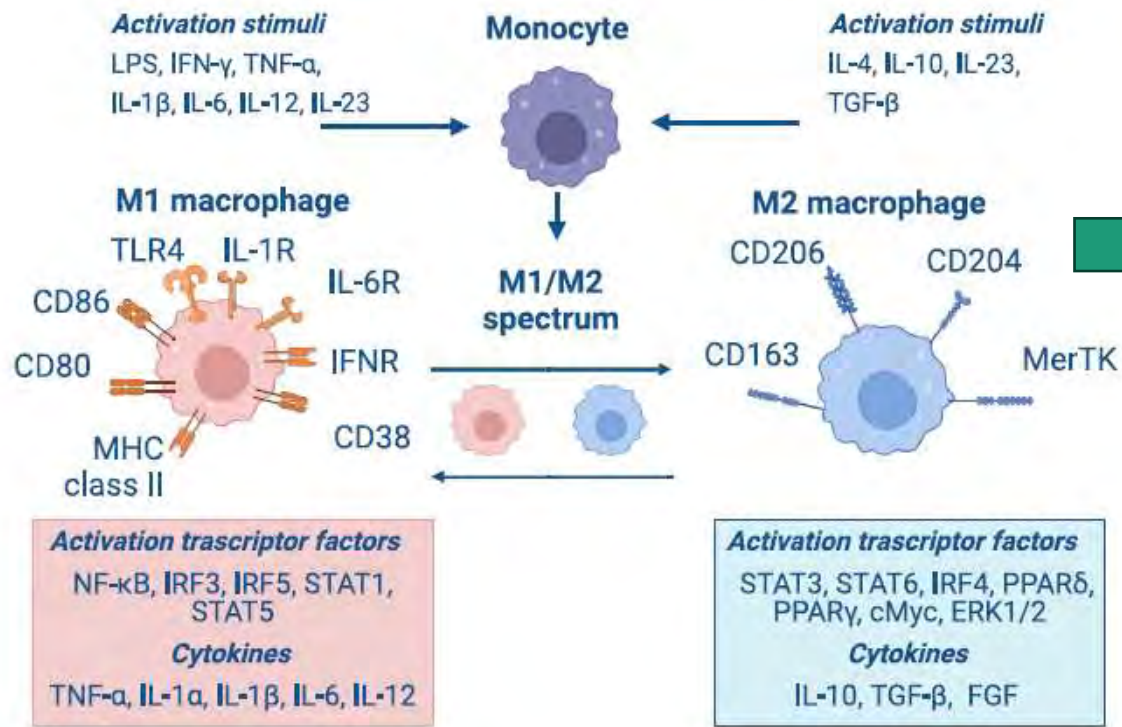
**Divergens citokin útvonalak vezérlik a fibrosist**



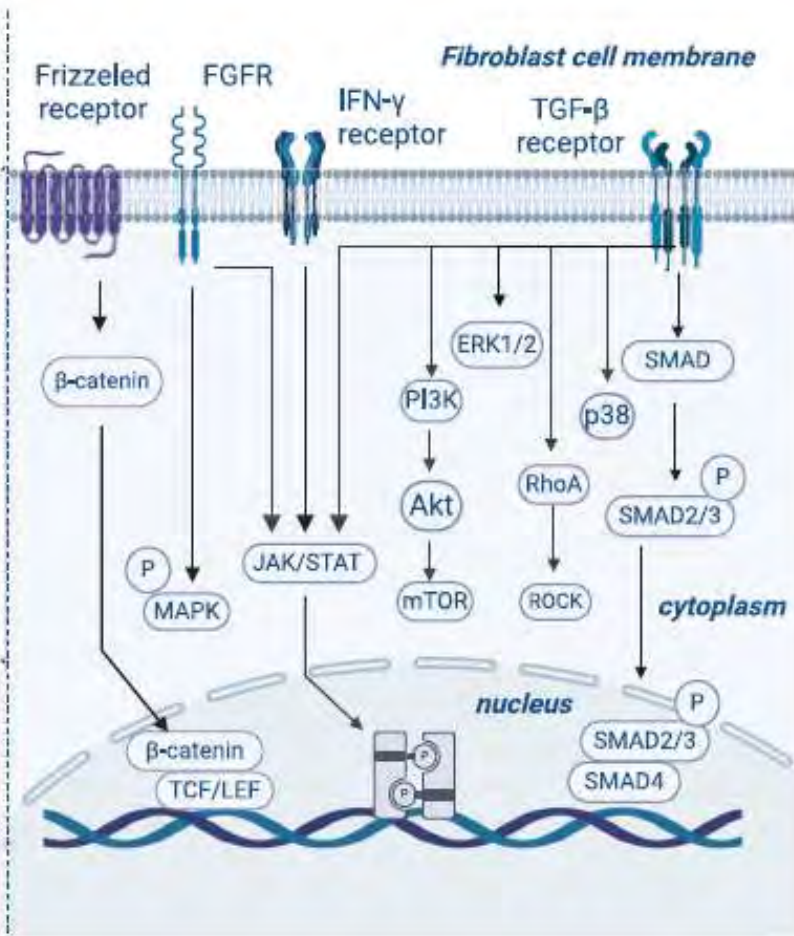
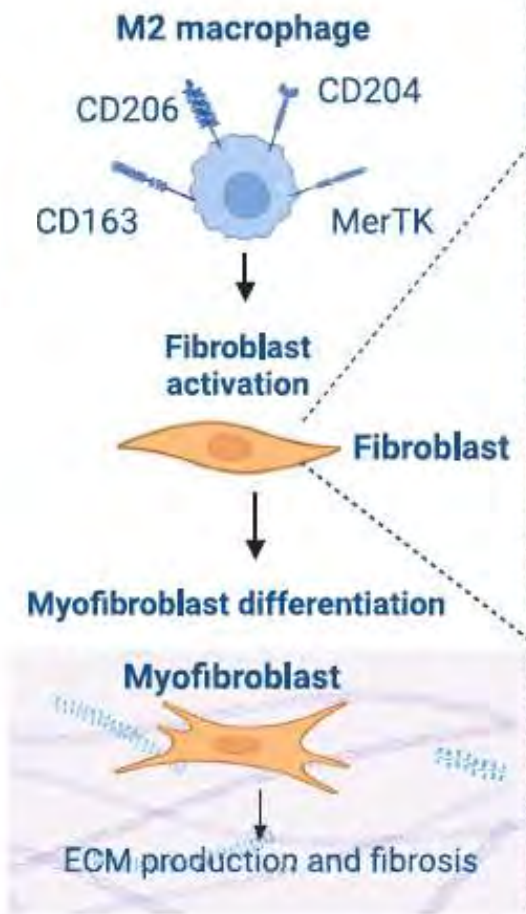
**Macrophag - fibroblast cross-talk**

**+ microbiome - TLR**

## Monocyte-derived-macrophages

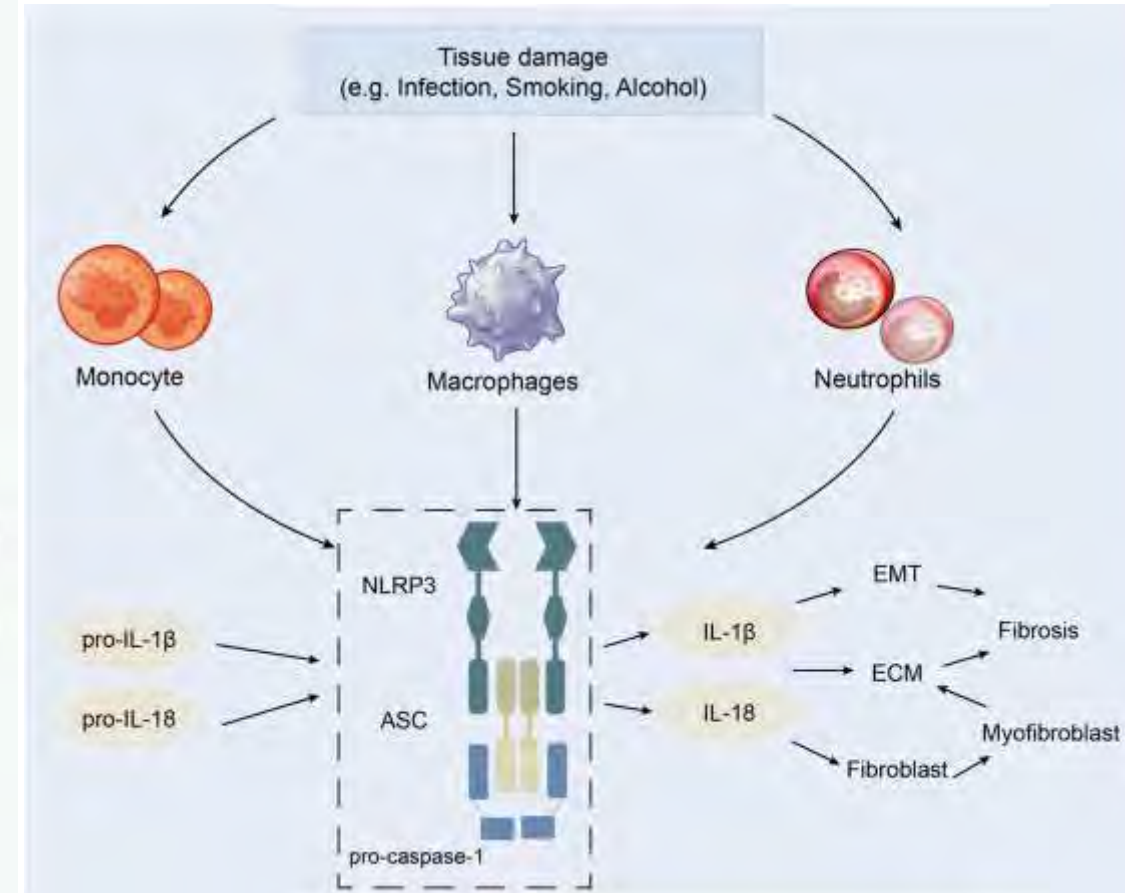
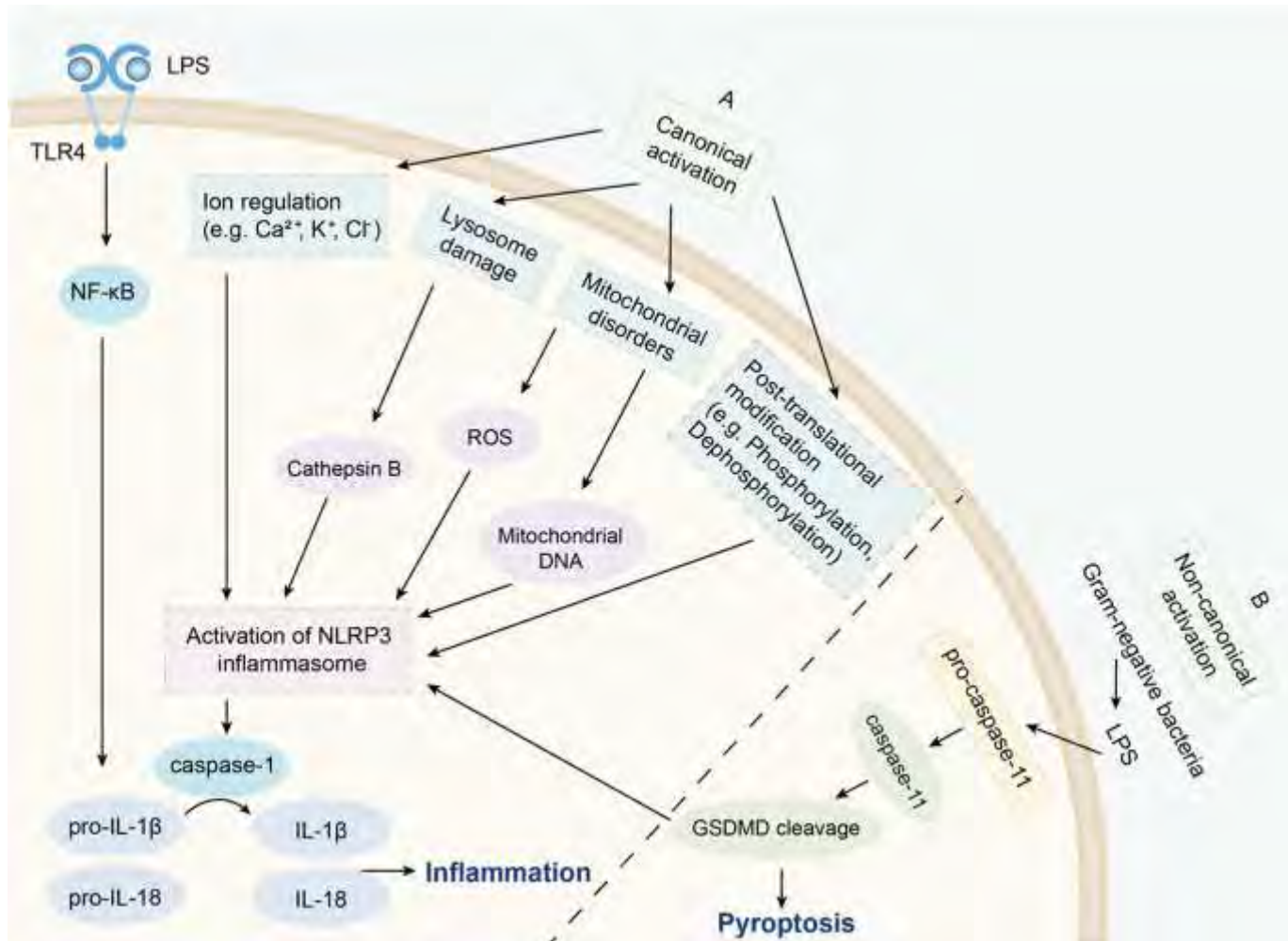


## Macrophag - fibroblast cross-talk





# The NLRP3 inflammasome in fibrosis and aging: The known unknowns



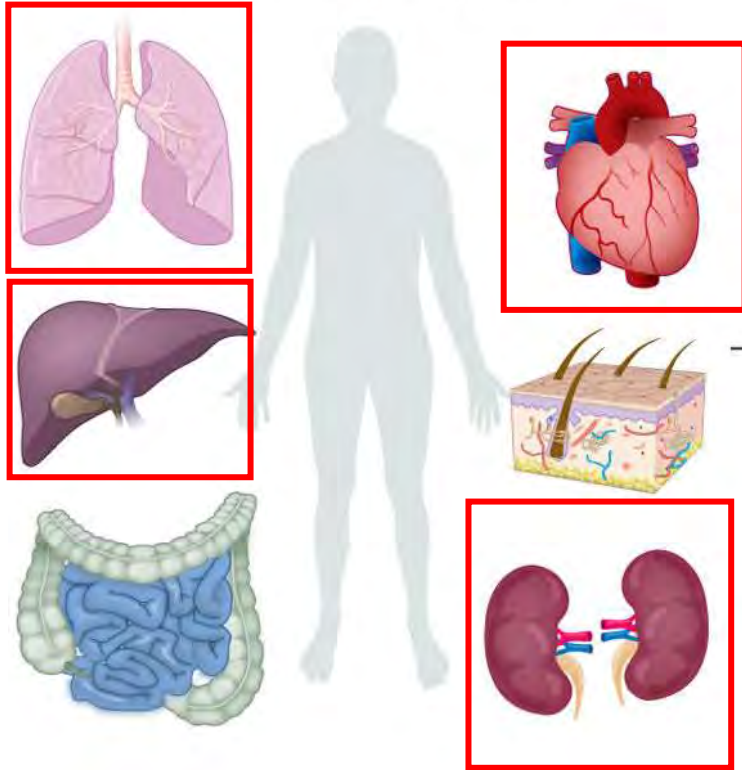
ASC: apoptosis-associated speck-like protein

Fig. 1. Regulatory mechanism of the NLRP3 inflammasome.

# FIBROSIS: FROM MECHANISMS TO MEDICINES

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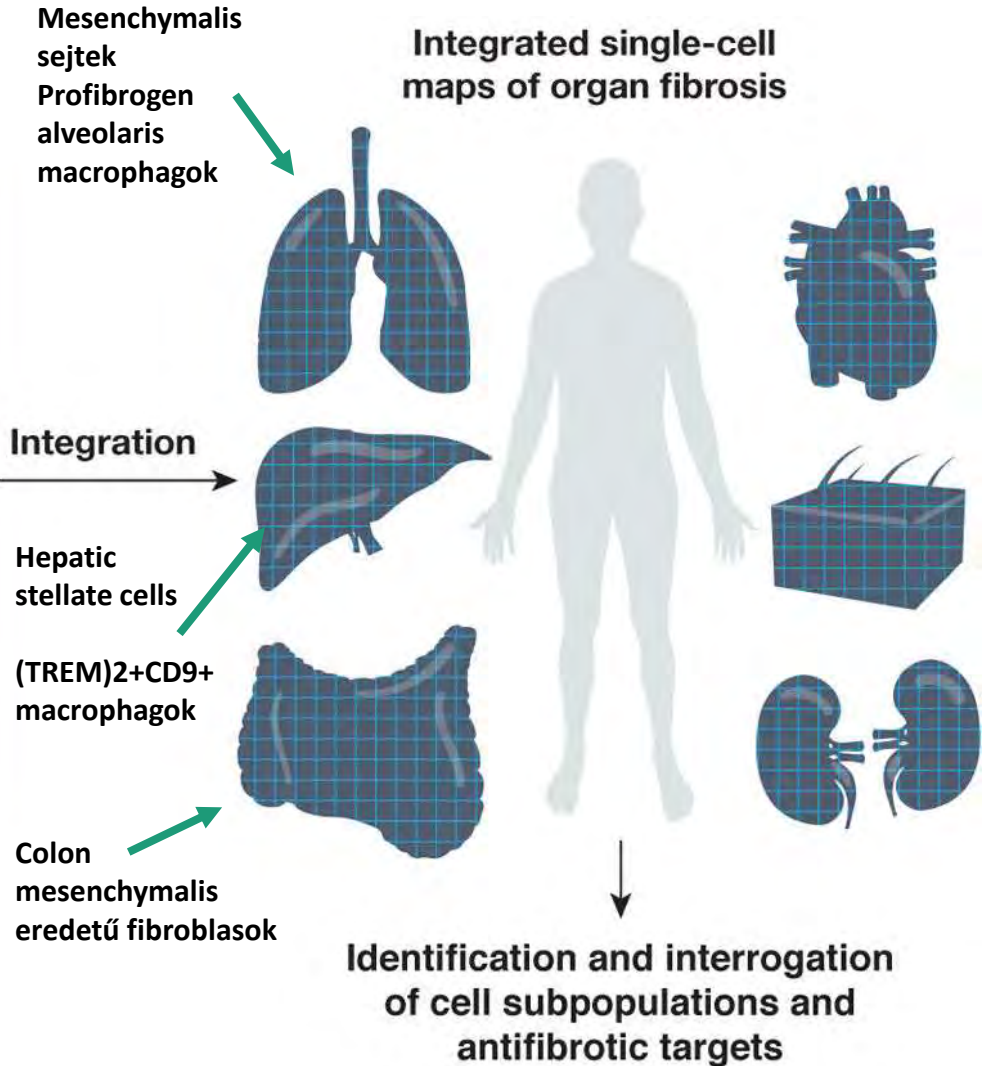
## Fibrotic organ system



Szisztémás sclerosis  
IgG4-related betegség

## Multi-modal single-cell approaches

- Transcriptome
- Whole genome
- Epigenome
- Cell ontogeny
- Proteomics (cells and ECM)
- Spatial transcriptomics



Az ipari világ halálozásának 45%-a



# Inflammation and immunity in IPF pathogenesis and treatment

Heukels P et al. Respiratory Medicine 147 (2019) 79–91.

Incidencia: 3-9/100 000  
>65 év: 94/100 000,  
prevalencia 494/100 000

Repetitív alveolaris epithelialis sérülés

+

Repair mechanizmusok diszregulációja

+

fibroblast diszfunkció



fibrosis

Genetikai vizsgálatok vizsgálatok:

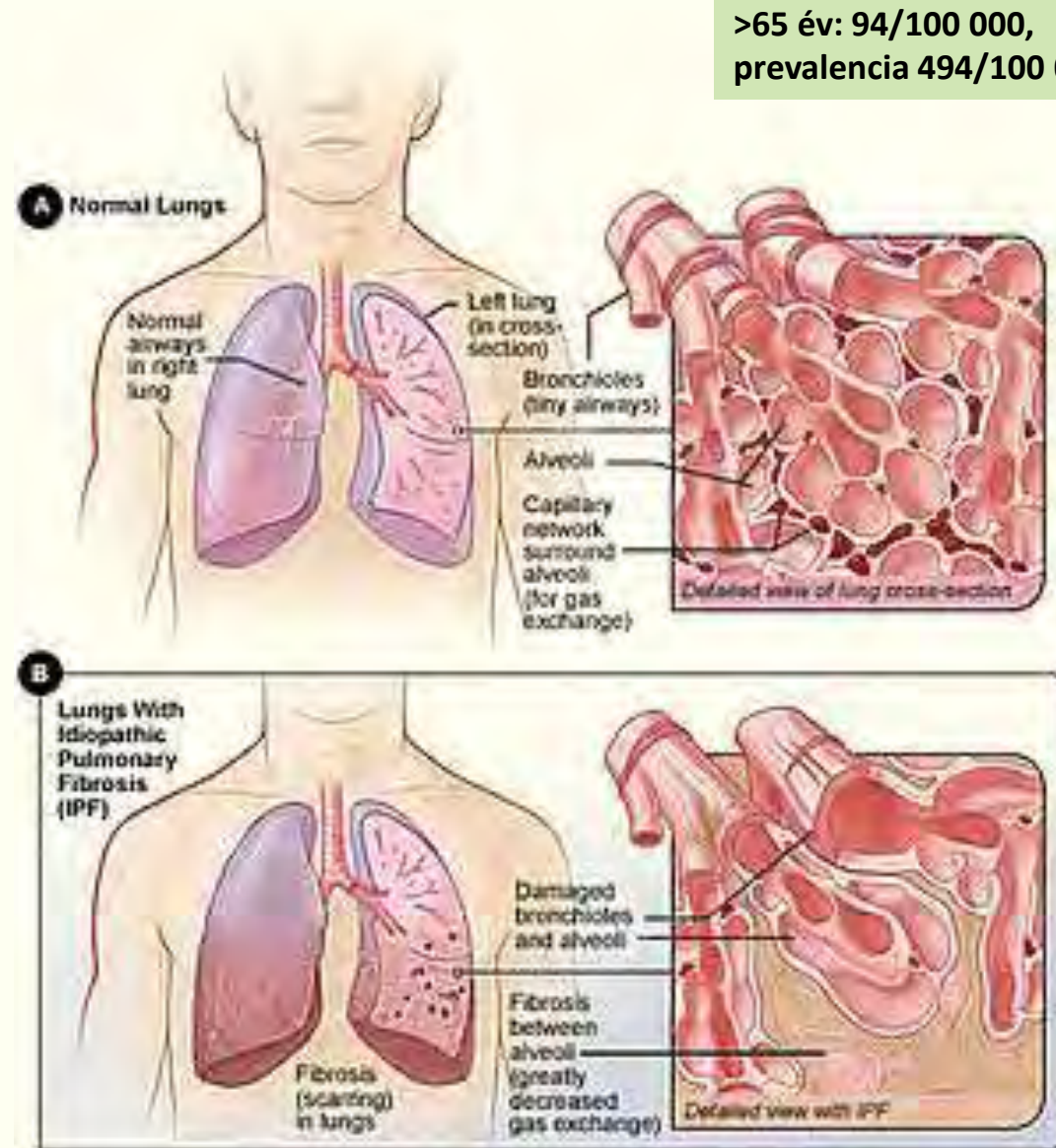
*FAM13A* (4q22), *DSP* (6p24), *OBFC1* (10q24)

WNT, TGF, NOTCH, sonic hedgehog (SHH)

*TOLLIP* (Toll-interacting protein), the inhibitory protein of the Toll-like receptor (TLR)

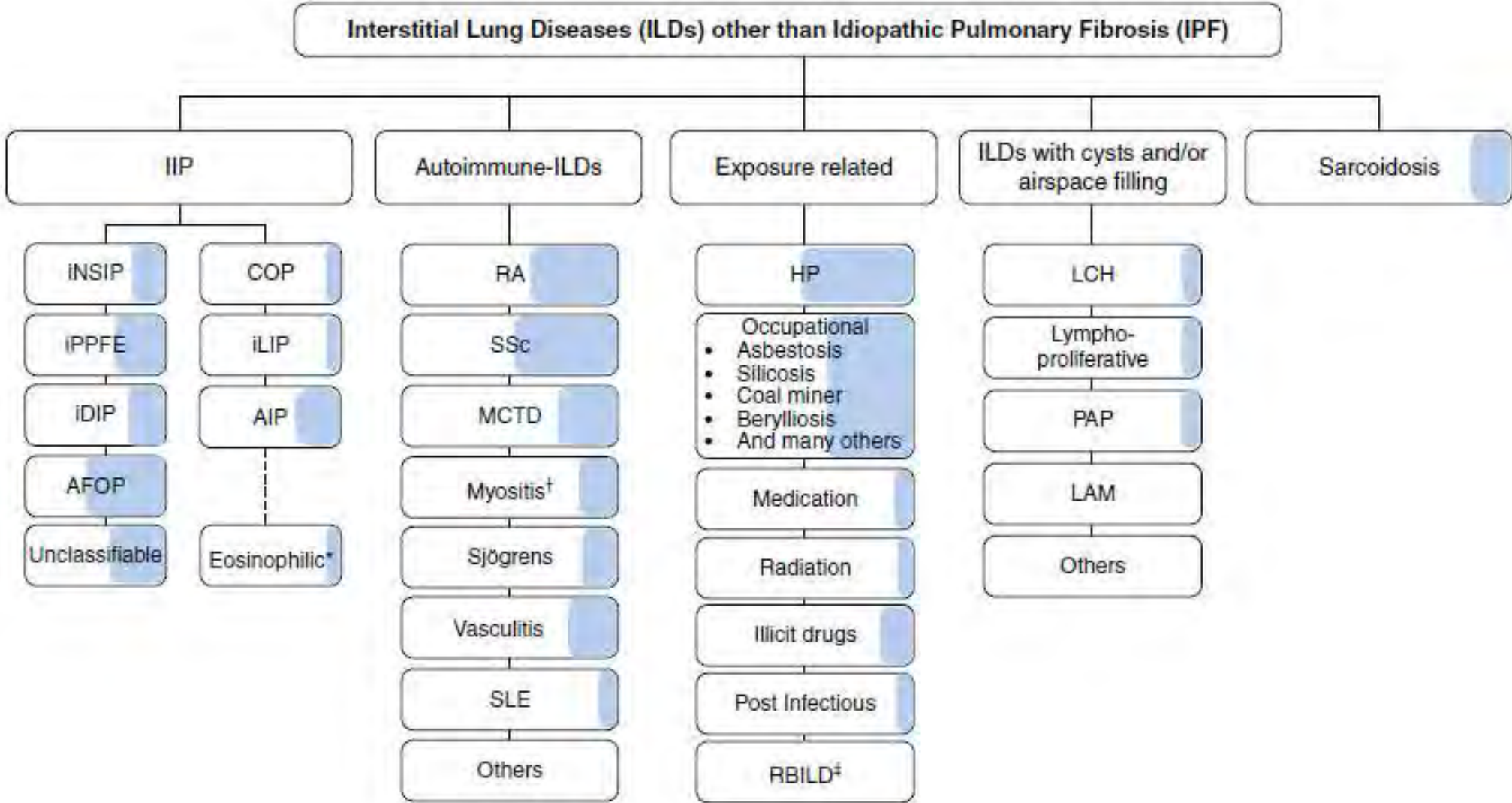
*DRB1\*15:01* and *DQB1\*06:02*

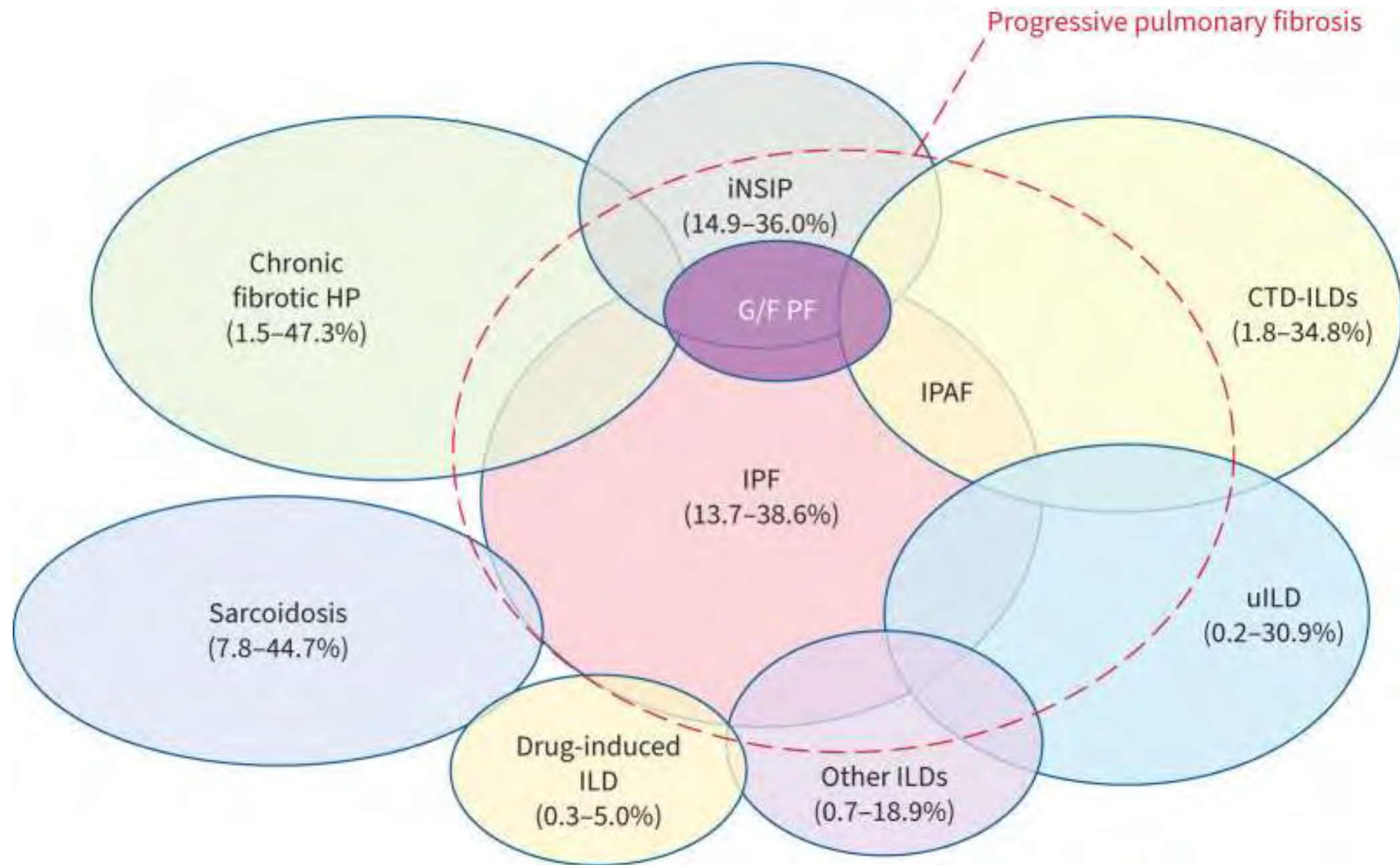
*MUC5B* gén

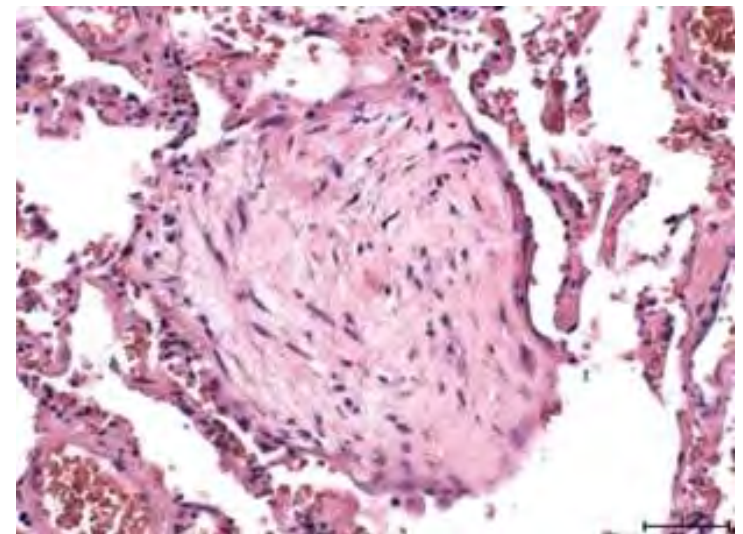
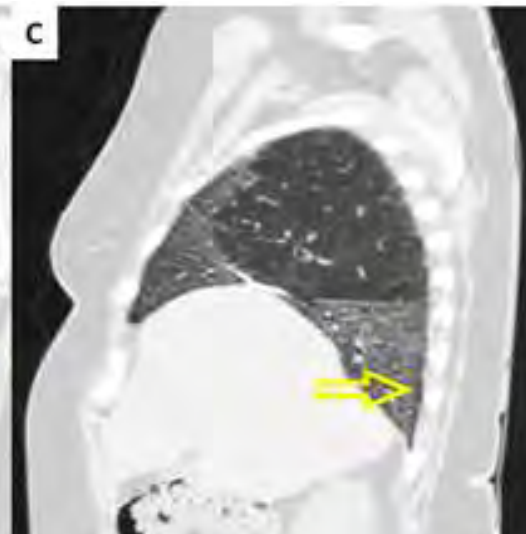
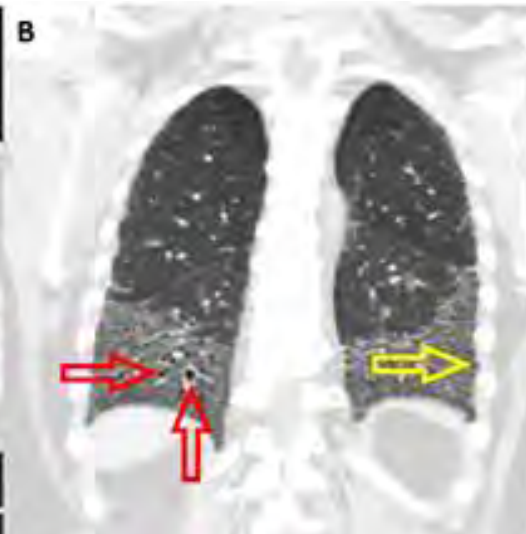
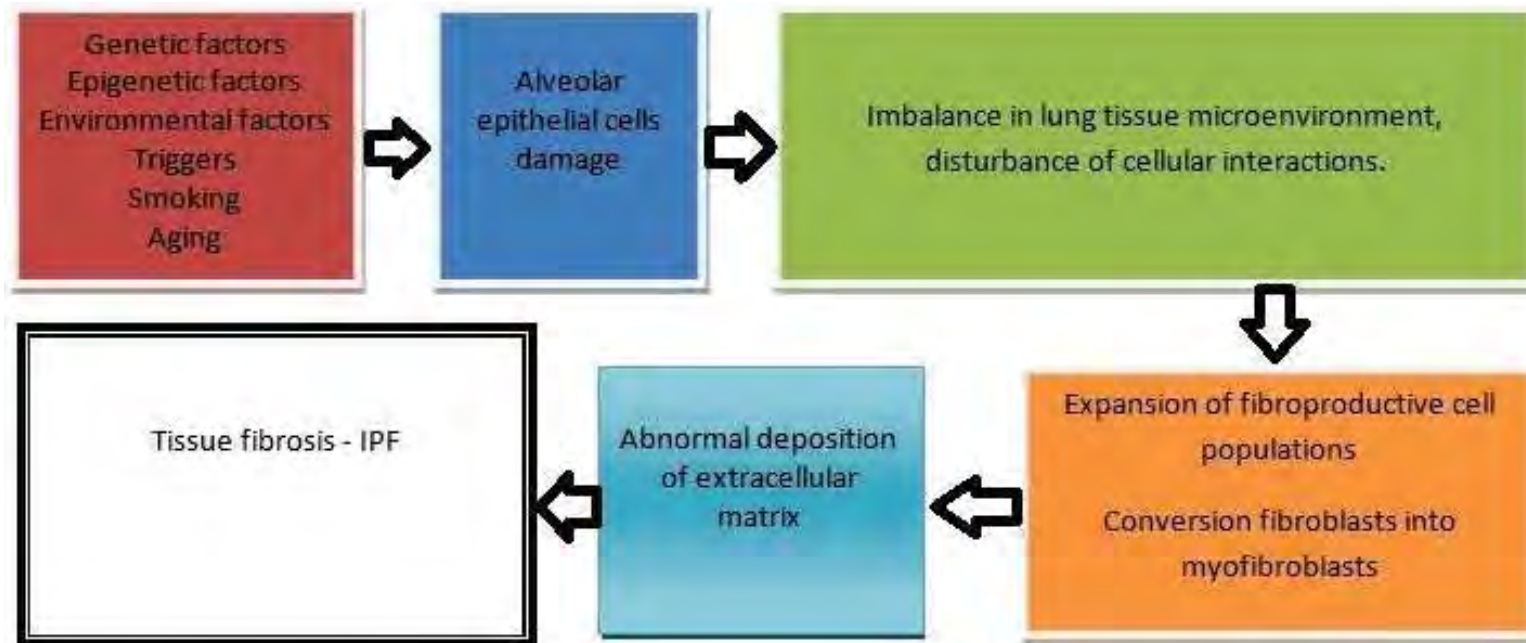




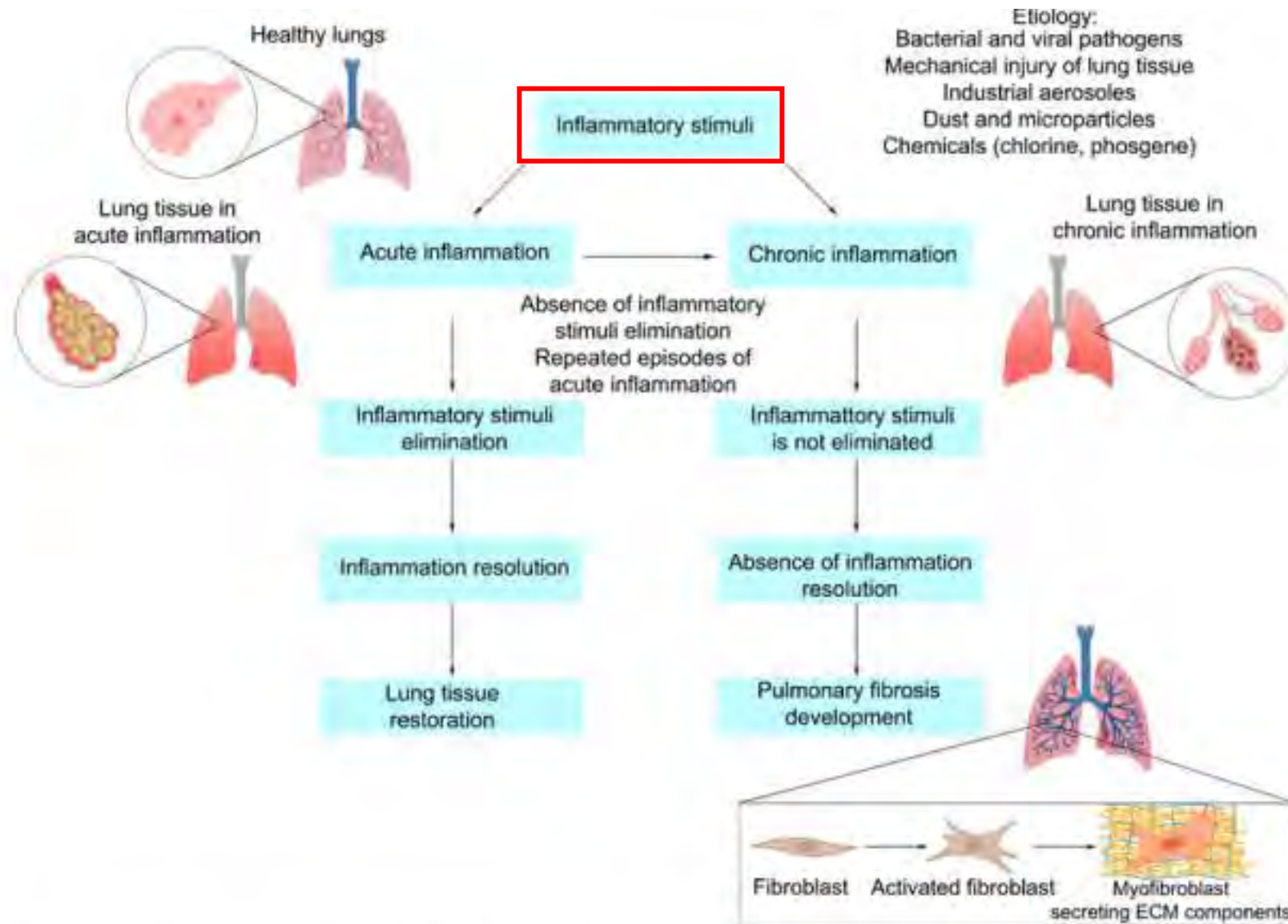
# Az ILD klasszifikációja











**Figure 1.** General scenarios of lung inflammation development: variants and outcomes.

## Fibrocyta – myofibroblast átalakulás

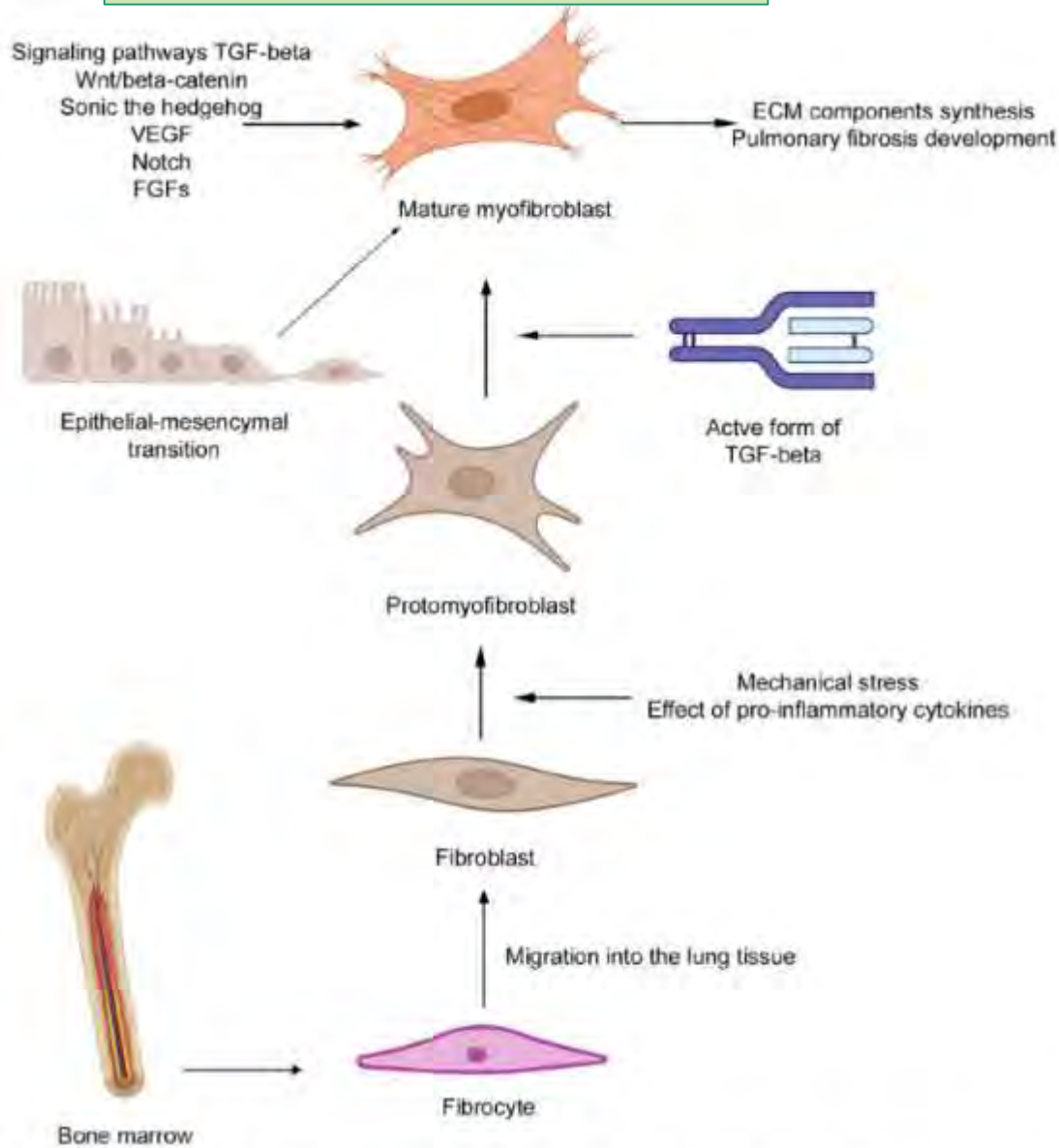


Figure 2. Evolution of fibrocyte to myofibroblast—main effector cell in pulmonary fibrosis development.

## Szignál-transzdukció folyamata

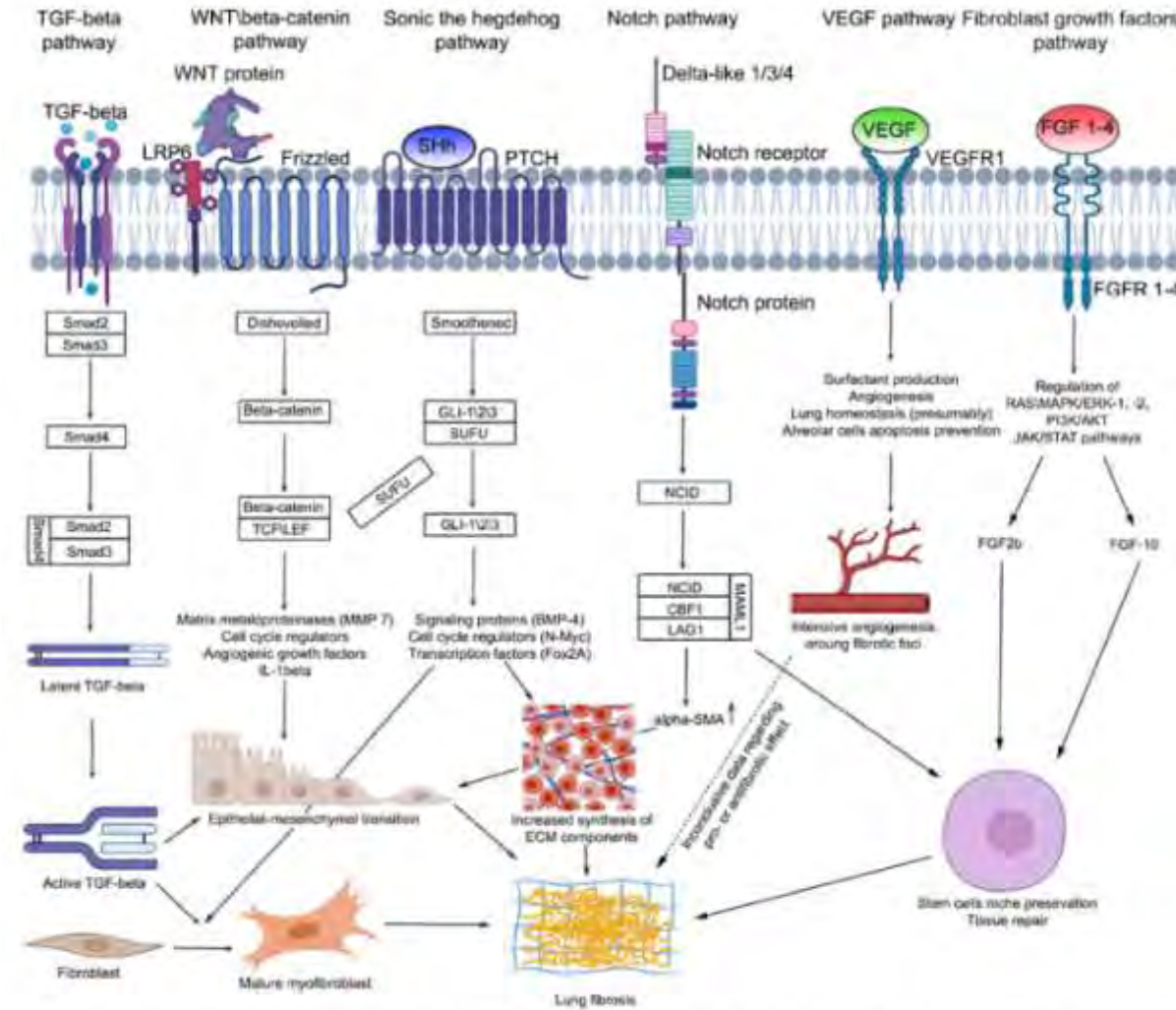
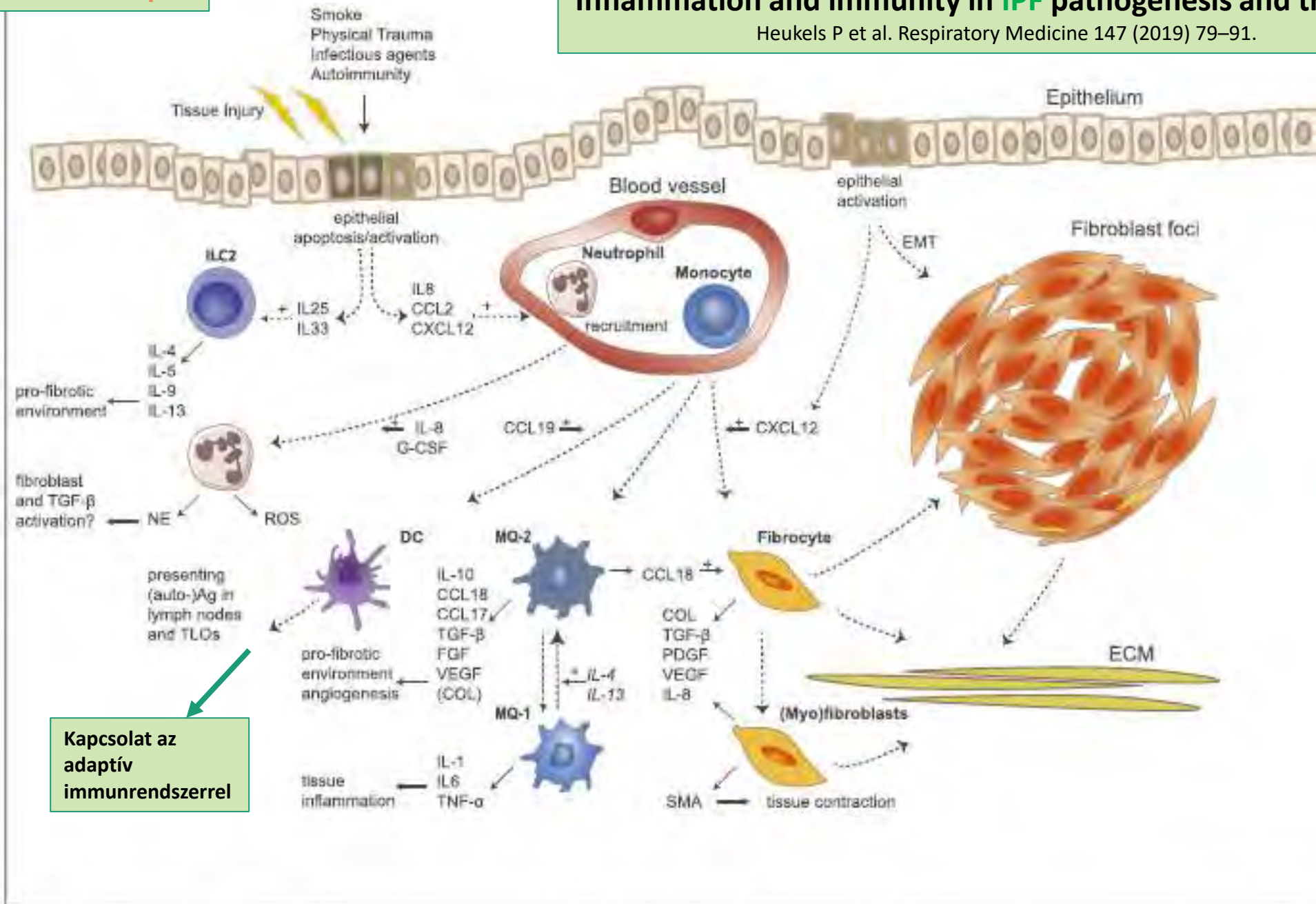


Figure 3. Overview of particular signaling pathways regulating pulmonary fibrosis development.



Kapcsolat az adaptív immunrendszerrel

Fig. 1. Schematic overview of the role of the innate immune system in IPF pathogenesis. Abbreviations: EMT = epithelial-mesenchymal transition, II



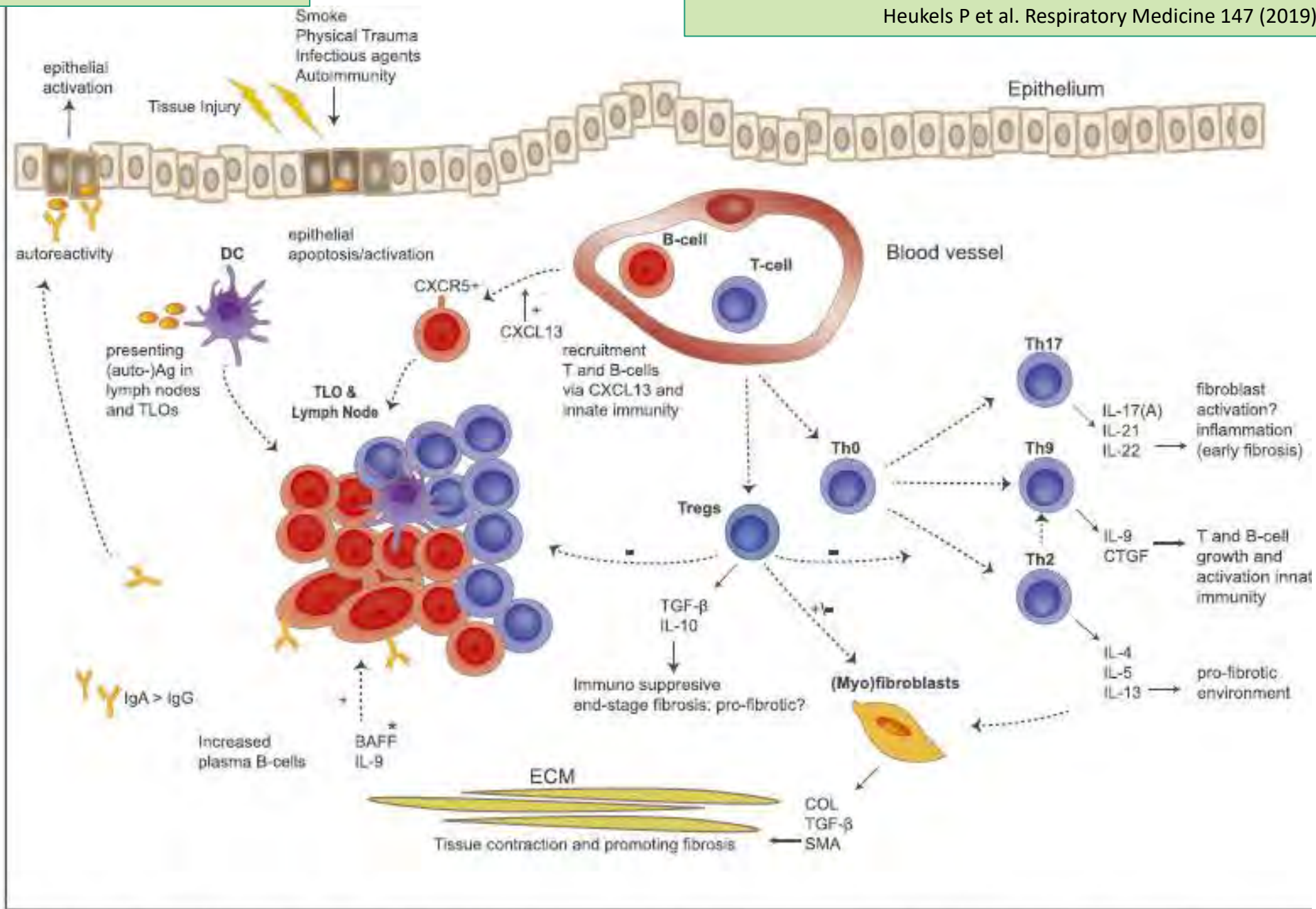
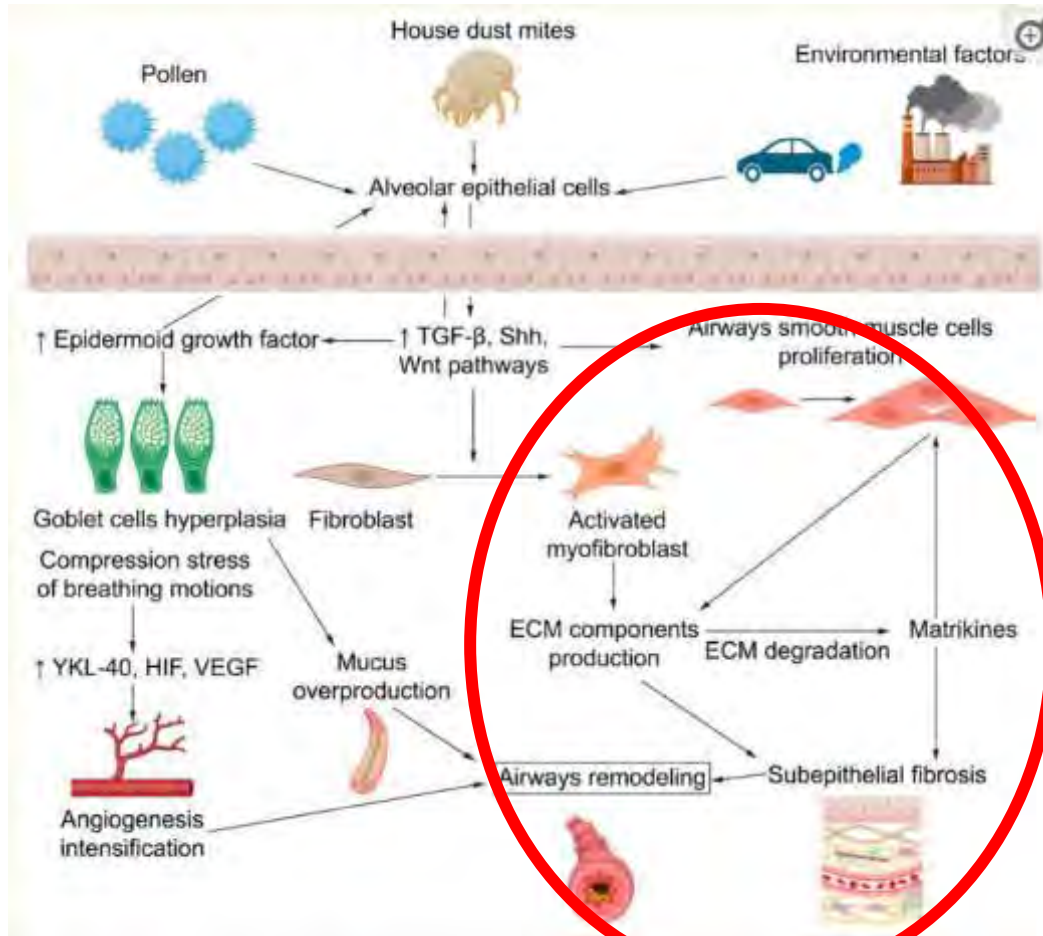


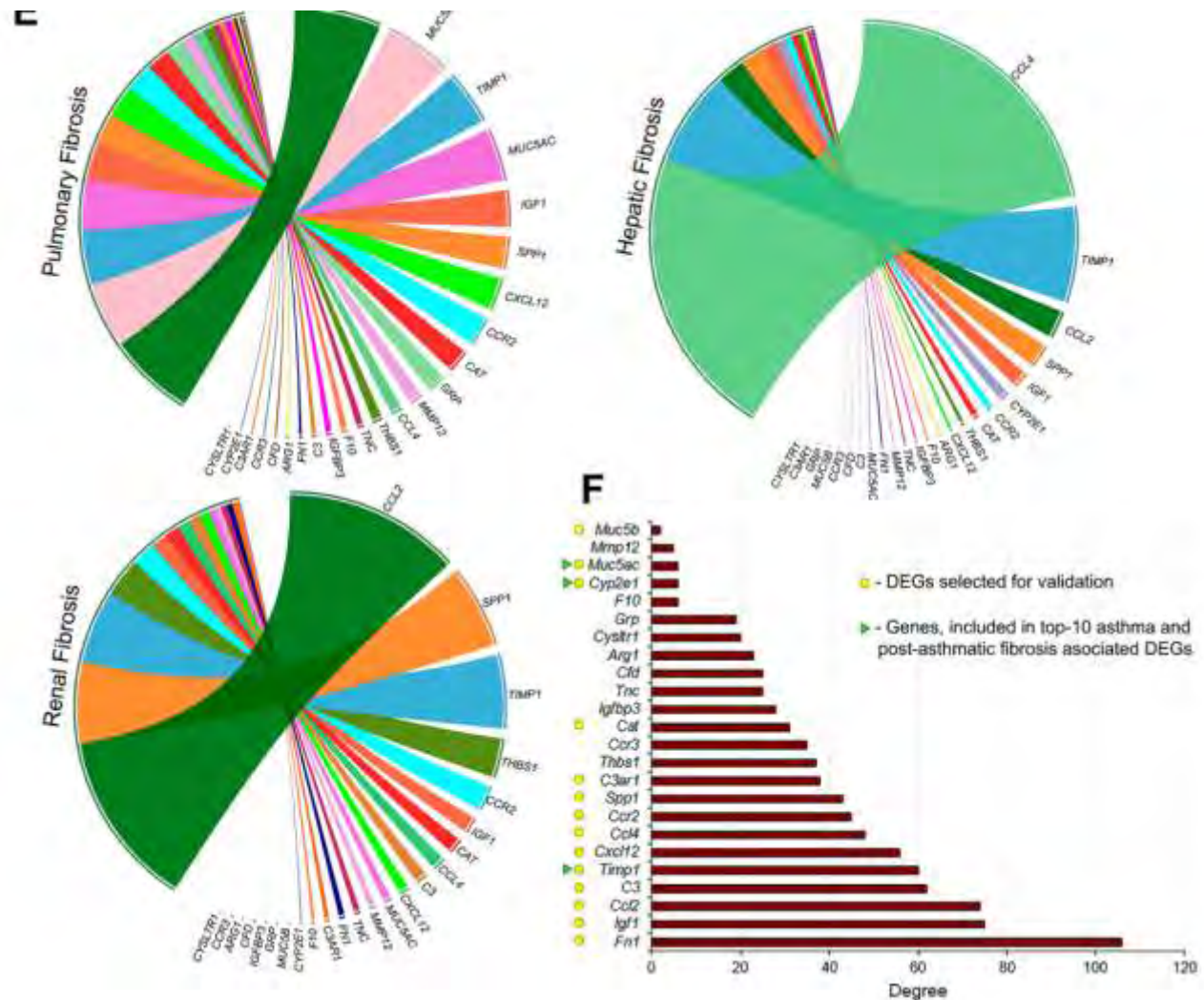
Fig. 2. Schematic overview of the role of the **adaptive immune system** in IPF pathogenesis. \* also known as B lymphocyte stimulator (BL)

# Asthma és fibrosis



Principal pathophysiological components of airway remodeling emergence in allergic asthma.

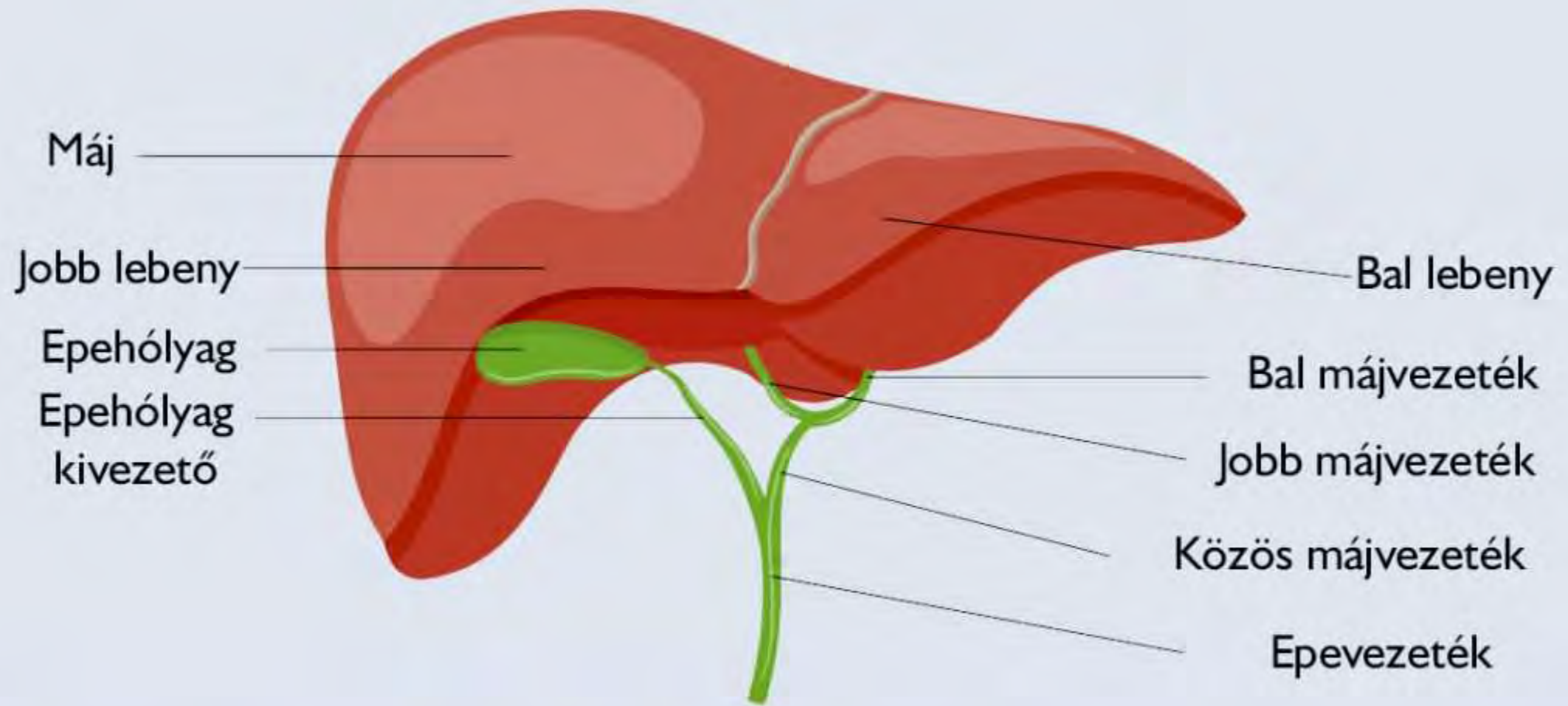
• 2023 Nov 7;24(22):16042. doi: 10.3390/ijms242216042.



Asthma and Post-Asthmatic Fibrosis

Biomedicines 2022, 10, 17.



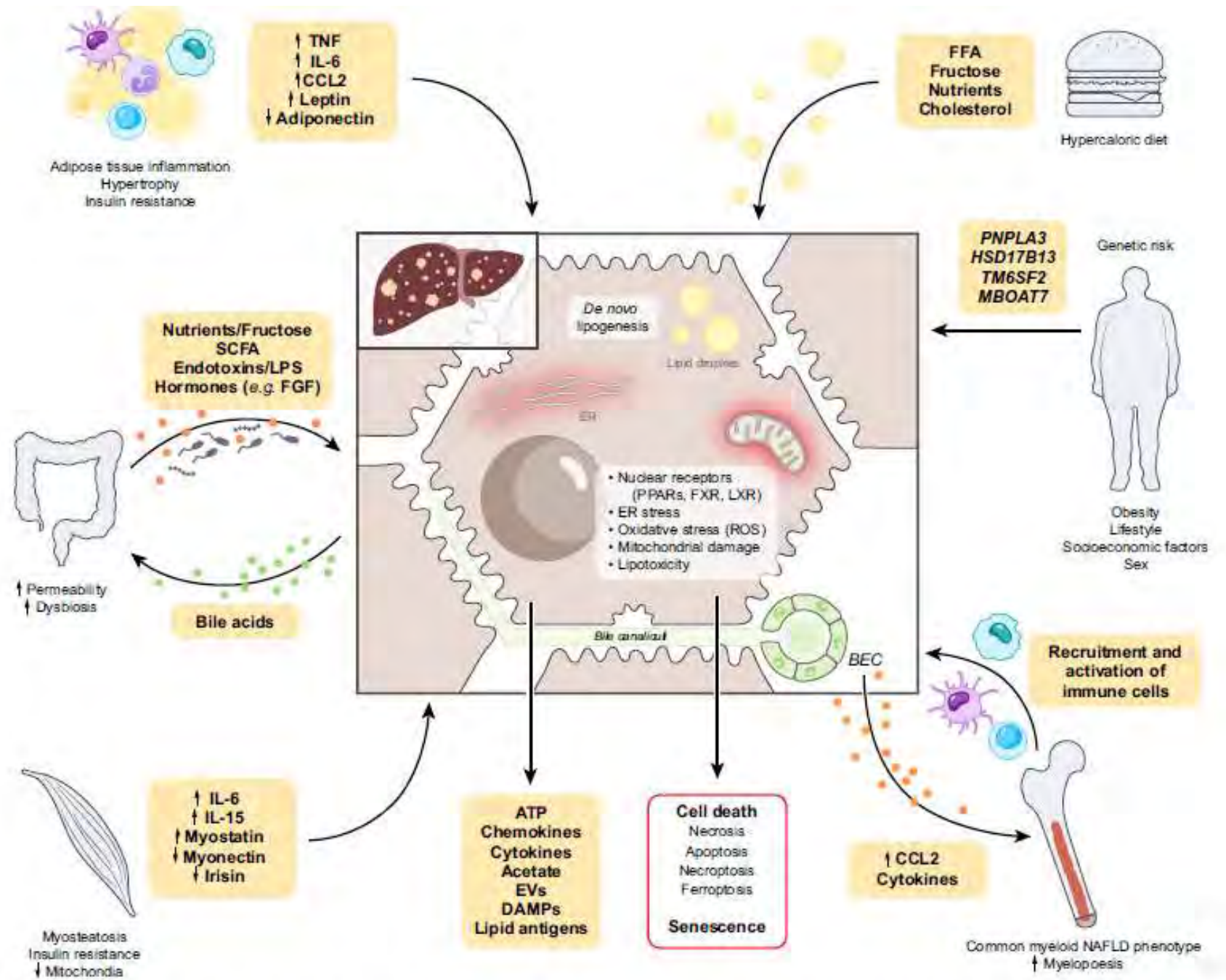




**Immune mechanisms linking metabolic injury to inflammation and fibrosis in fatty liver disease – novel insights into cellular communication circuits**

Peiseler M et al. Journal of Hepatology 2022 vol. 77 j 1136–1160.

**Előfordulás: 6-35%/populáció**



**Fig. 1. Triggers of inflammation in NAFLD.** Intra- and extrahepatic factors trigger inflammation in NAFLD. Hypercaloric diet, obesity, lifestyle, and genetic risk

# Metabolic reprogramming in liver fibrosis

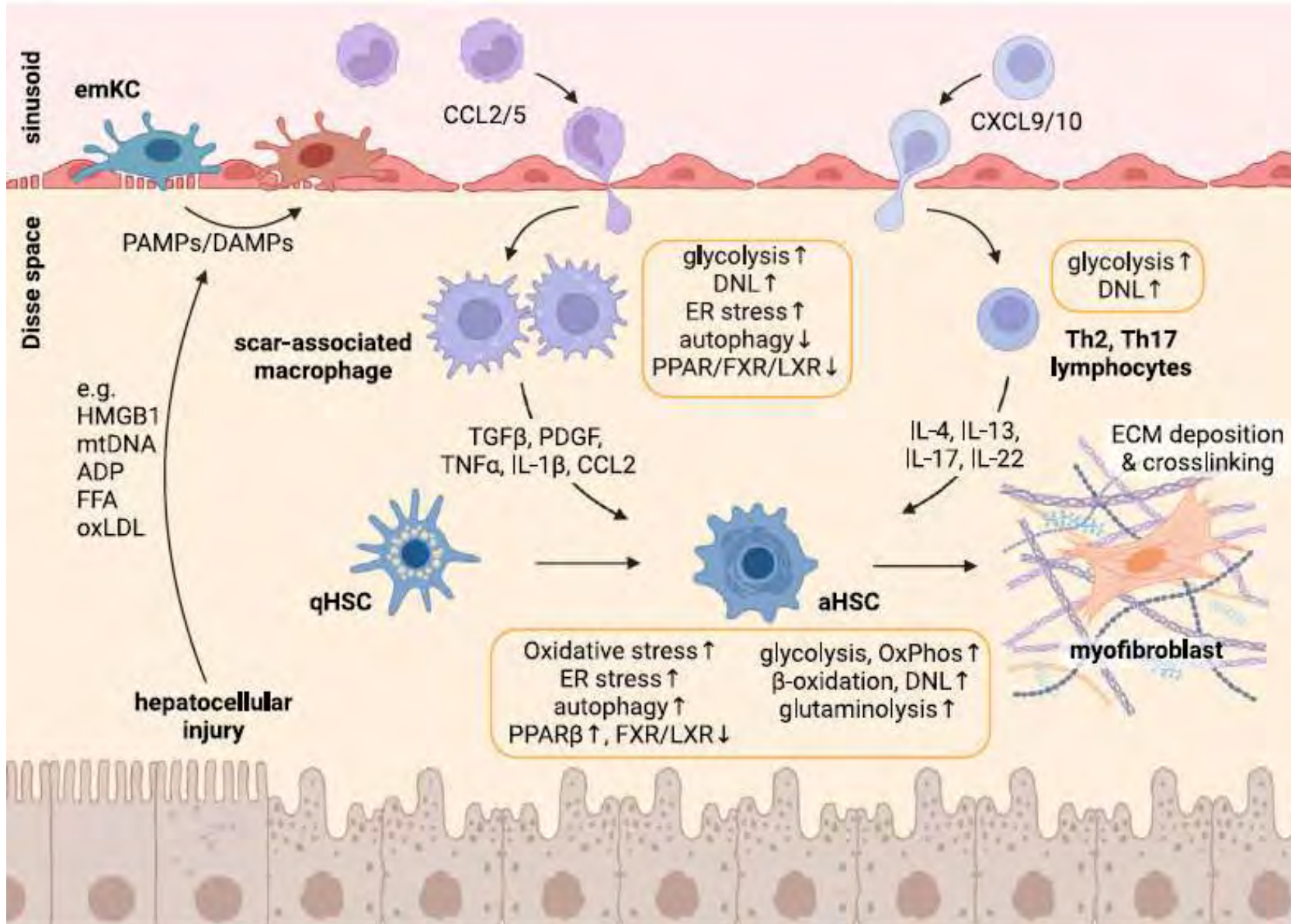


Figure 1. General mechanisms of liver fibrosis and main metabolic adaptations in macrophages, lymphocytes, and activated hepatic stellate cells



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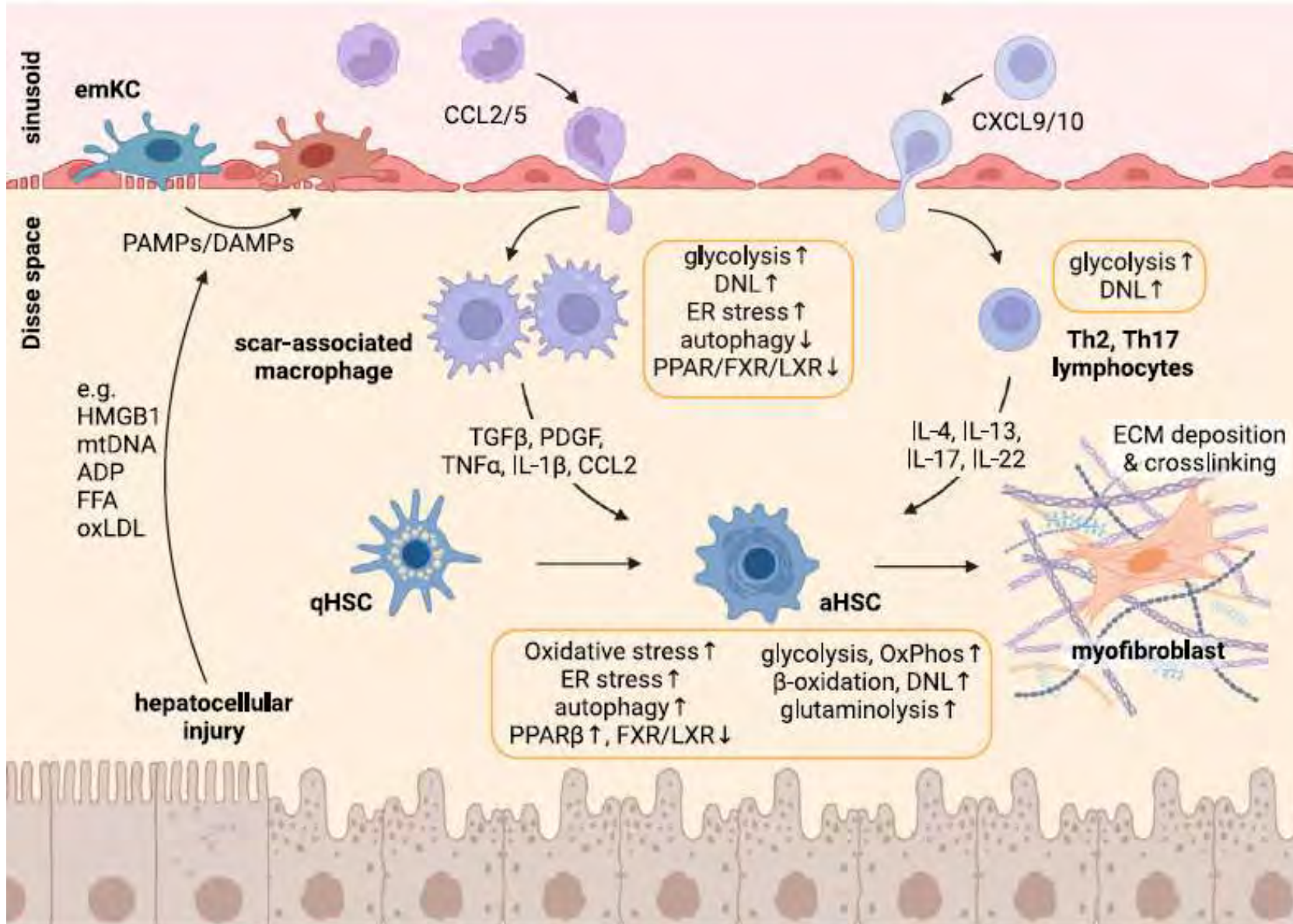


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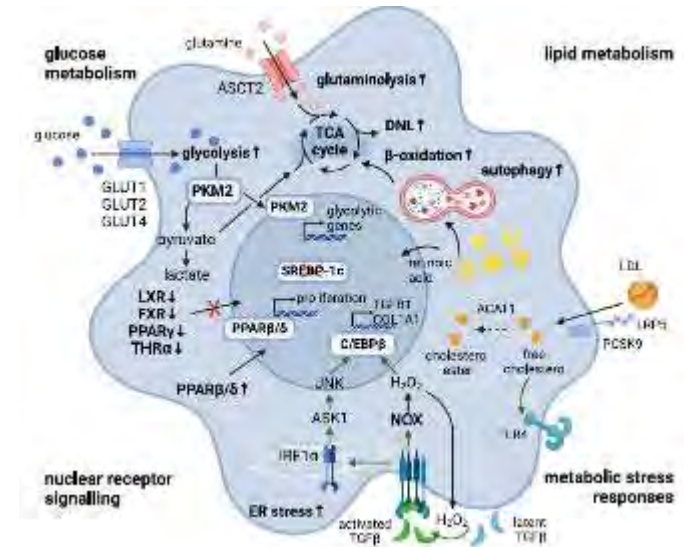


Figure 3. Metabolic reprogramming in fibrogenic hepatic stellate cell activation

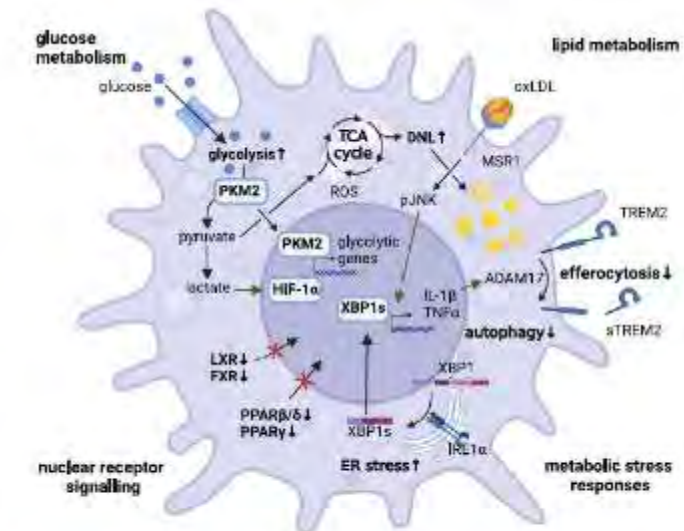


Figure 2. Metabolic reprogramming in hepatic macrophage activation during liver fibrogenesis



## Immensejtek részvétele a NASH-ben

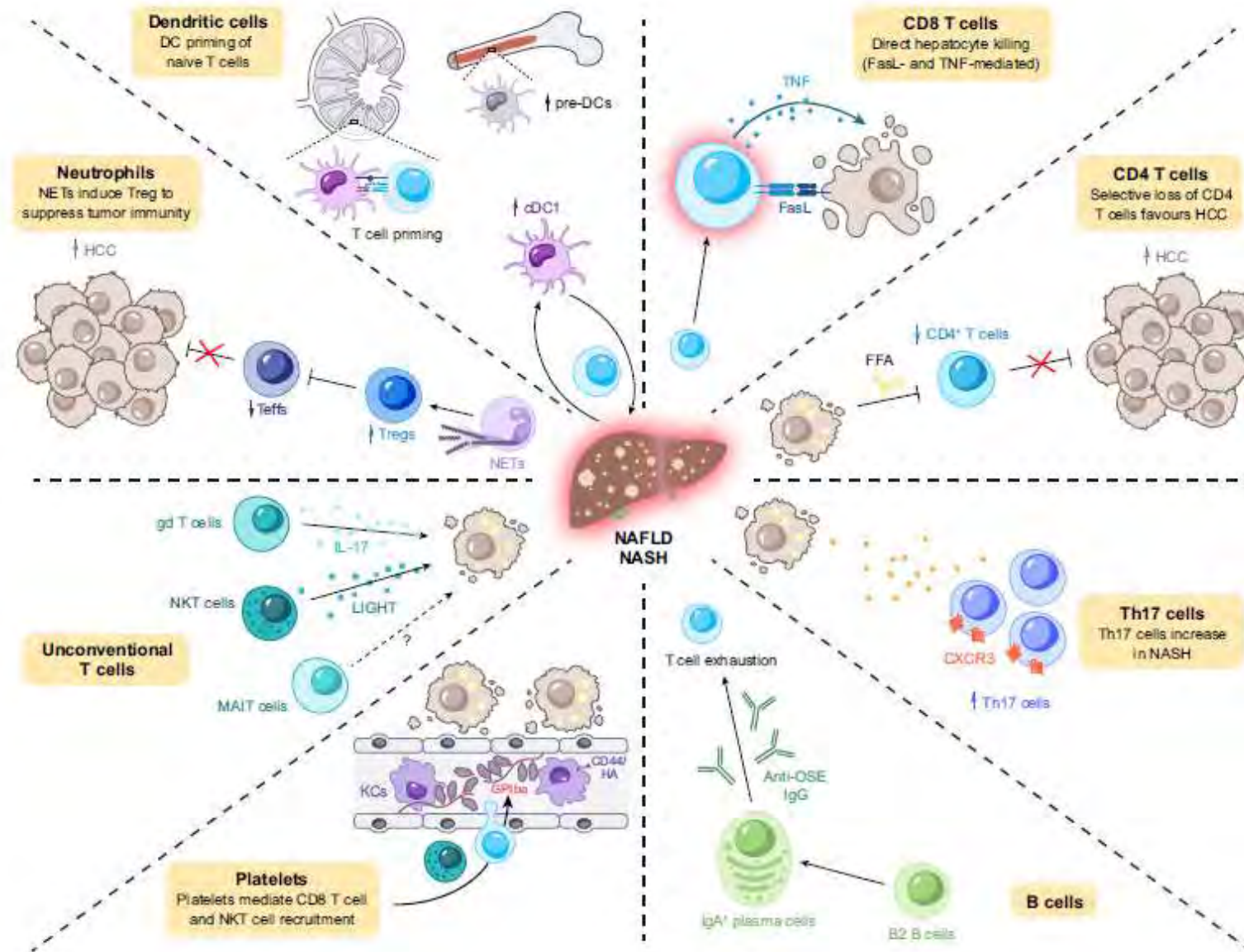
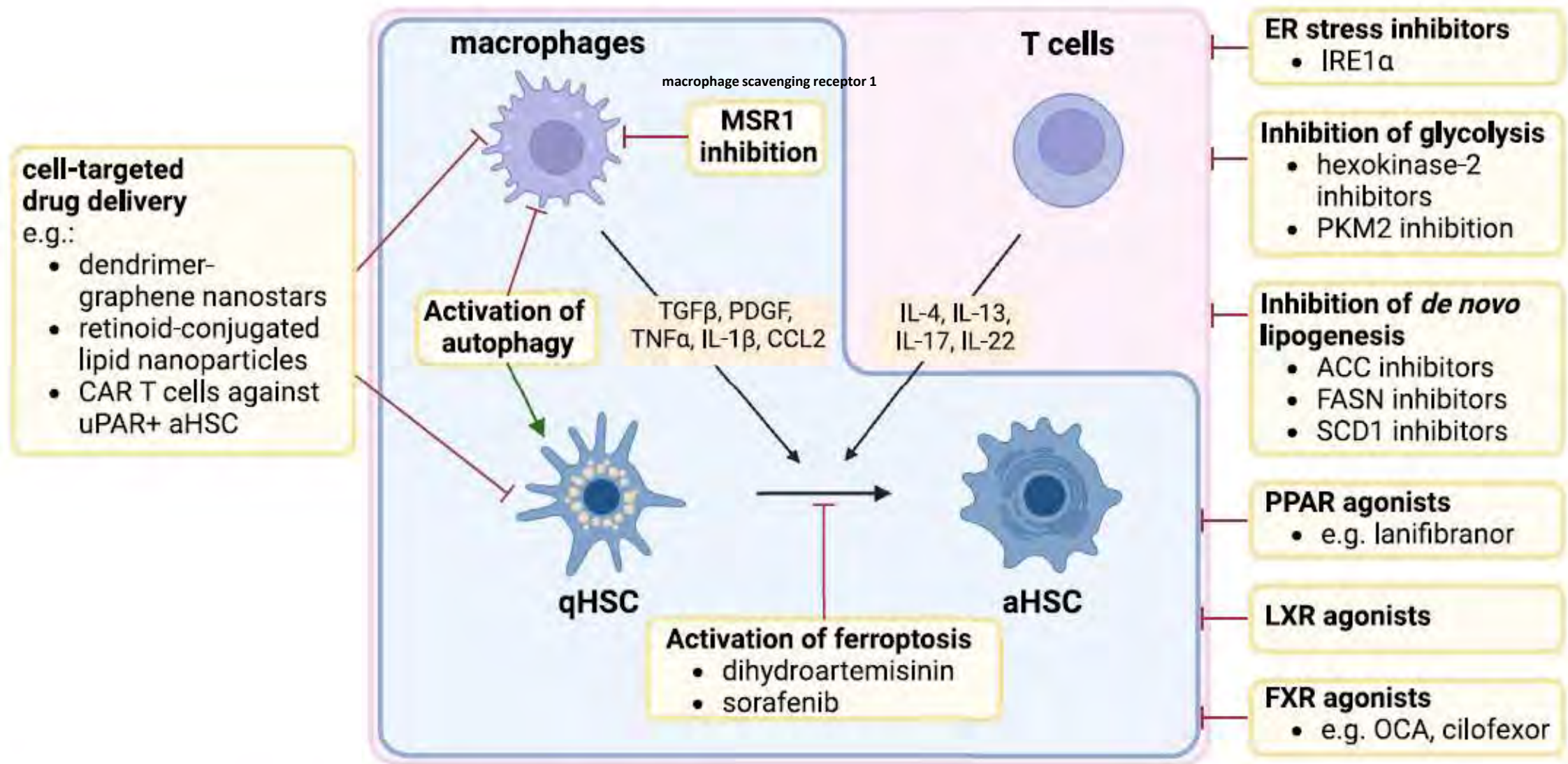


Fig. 3. Recent advances in understanding cellular immune-mediated mechanisms in NAFLD. The figure depicts the reshaping of immune cells during NAFLD.



#### 4. Immunometabolic therapeutic targets in liver fibrosis







# Diffuse myocardial fibrosis: mechanisms, diagnosis and therapeutic approaches

Begoña López<sup>1,2,4</sup>, Susana Ravassa<sup>1,2,4</sup>, María U. Moreno<sup>1,2,4</sup>, Gorka San José<sup>1,2</sup>, Javier Beaumont<sup>1,2</sup>, Arantxa González<sup>1,2</sup> and Javier Díez<sup>1,2,3</sup>

## Box 1 | Conditions associated with diffuse myocardial fibrosis

### Ischaemic heart disease

- Coronary artery disease<sup>1</sup>
- Alterations of the coronary microcirculation caused by hypertension<sup>7</sup> or diabetes mellitus<sup>8</sup>

### Cardiac pressure overload

- Systemic arterial hypertension<sup>9</sup>
- Aortic stenosis<sup>10</sup>
- Coarctation of the aorta<sup>11</sup>
- Pulmonary arterial hypertension<sup>4,12</sup>

### Cardiac volume overload

- Obesity<sup>4,13</sup>
- Aortic regurgitation<sup>14</sup>
- Mitral regurgitation<sup>4,15</sup>

### Cardiac inflammation

- Myocarditis<sup>16</sup>
- Sarcoidosis<sup>4,17</sup>

### Genetic cardiac diseases

- Hypertrophic cardiomyopathy<sup>18</sup>

### Cardiac metabolic alterations

- Obesity<sup>4,13</sup>

- Diabetes mellitus<sup>19</sup>

- Chronic kidney disease<sup>20</sup>

### Infiltrative cardiac alterations

- Amyloidosis<sup>21</sup>

### Cardiac storage diseases

- Anderson–Fabry disease<sup>4,22</sup>

### Congenital heart diseases

- Tetralogy of Fallot<sup>23</sup>
- Ebstein anomaly<sup>4,24</sup>
- Transposition of the great arteries<sup>4,25</sup>

### Other conditions

- Ageing<sup>26</sup>
- Non-ischaemic dilated cardiomyopathy<sup>27</sup>
- Atrial fibrillation-mediated cardiomyopathy<sup>28</sup>
- Exposure to pharmacological cardiotoxic agents<sup>29</sup>

\*Conditions in which diffuse myocardial fibrosis was identified by cardiovascular MRI instead of endomyocardial biopsy, which was performed in the other conditions.

# Diffuse myocardial fibrosis: mechanisms, diagnosis and therapeutic approaches

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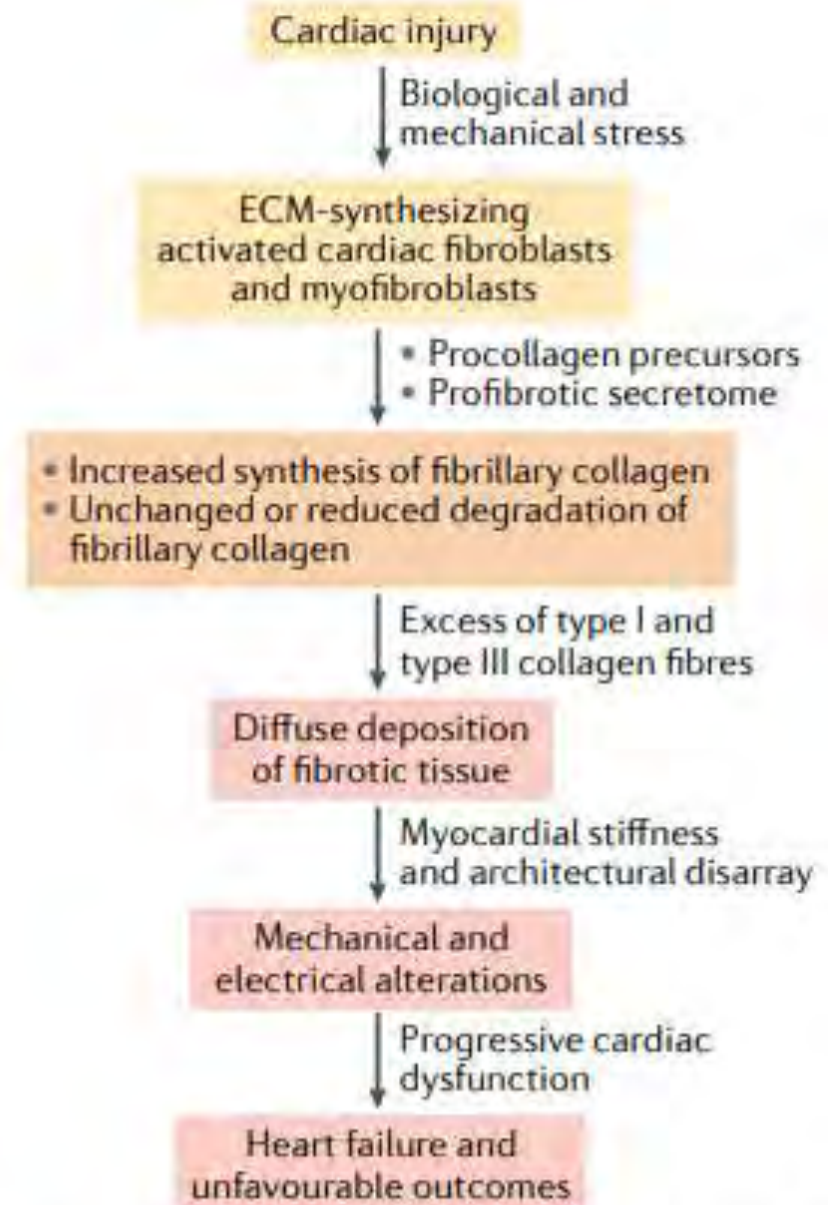


Fig. 1 | Pathogenesis and consequences of diffuse myocardial fibrosis. In response to cardiac injury,



# Diffuse myocardial fibrosis: mechanisms, diagnosis and therapeutic approaches

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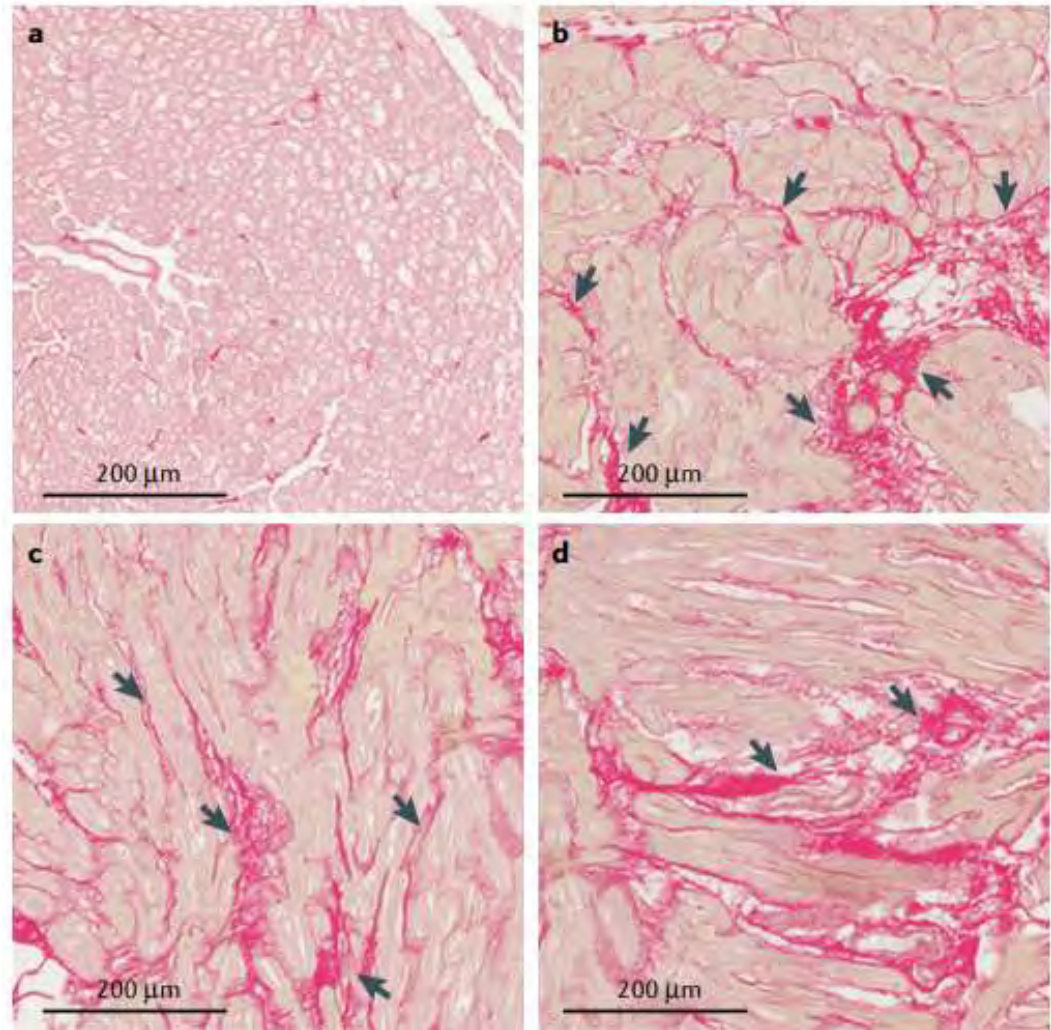
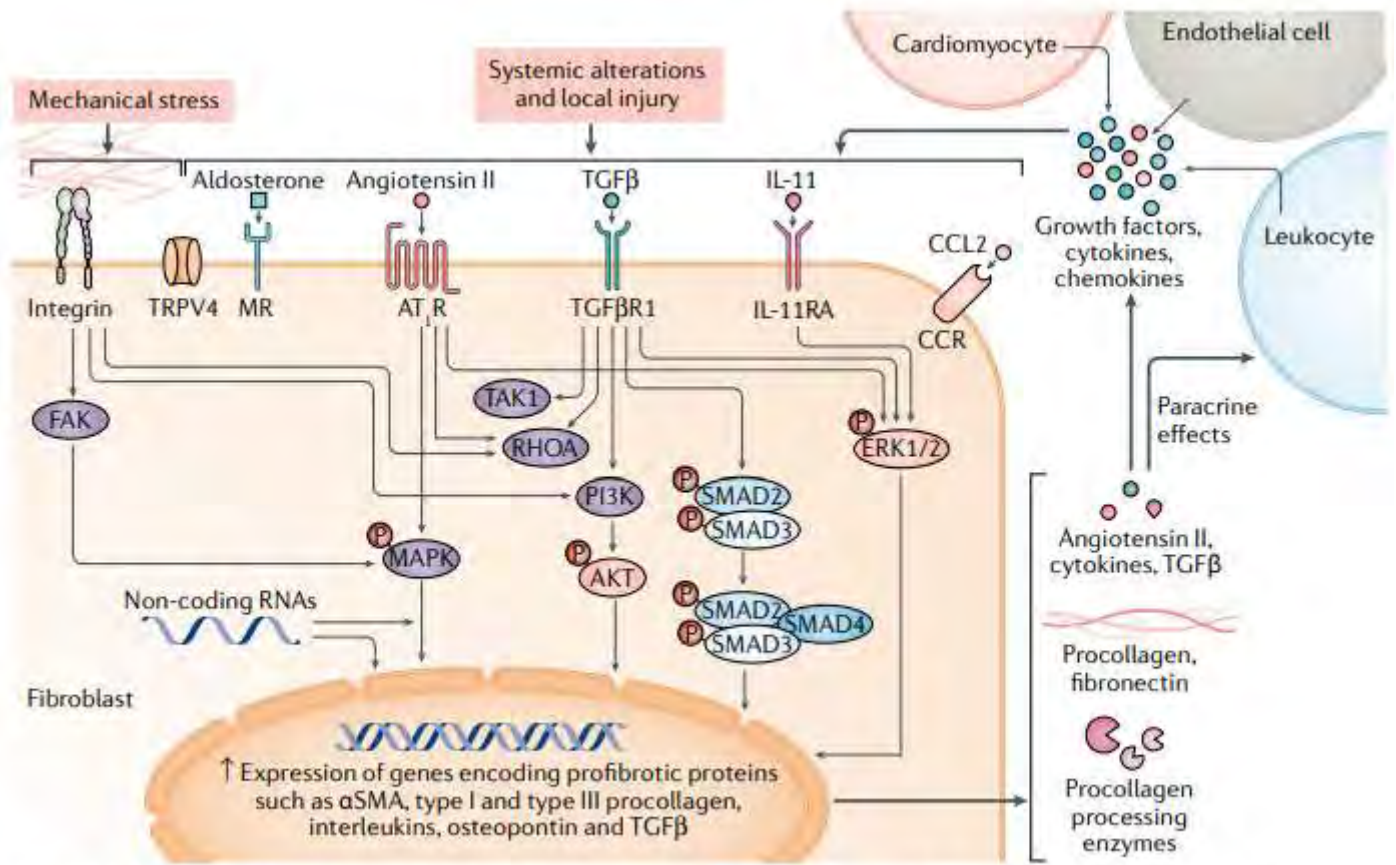
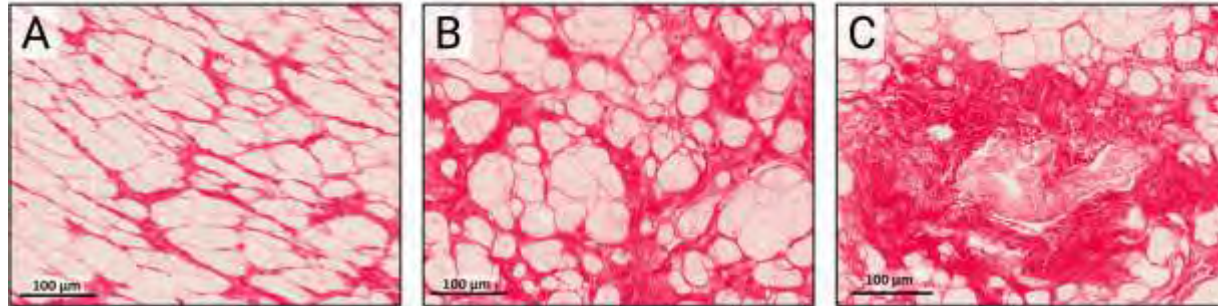


Fig. 3 | Major signalling pathways involved in the activation of cardiac fibroblasts. In response to increased



# Myocardial fibrosis from the perspective of the extracellular matrix: Mechanisms to clinical impact

## Endomyocardial biopsy (EMB)

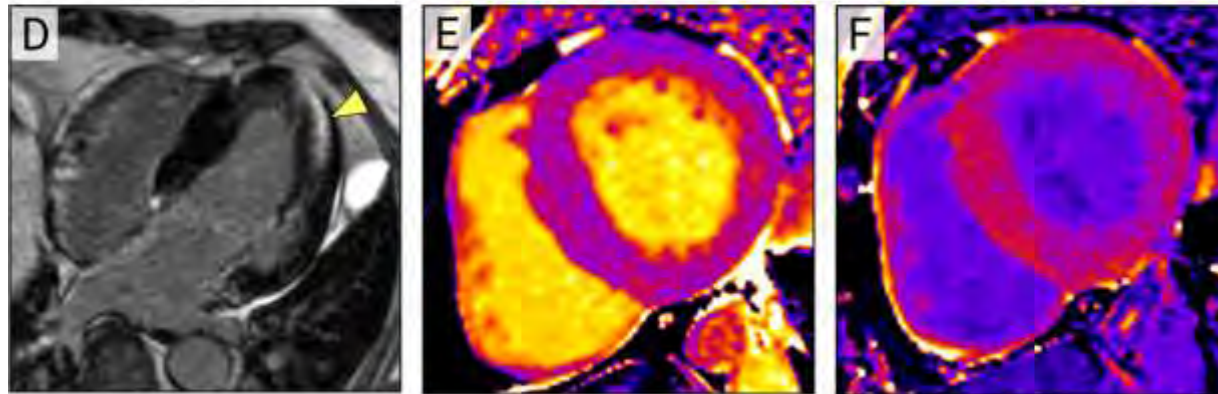


A Reactive interstitial fibrosis

B Focal replacement fibrosis

C Perivascular fibrosis

## Cardiac magnetic resonance (CMR) imaging



D Late gadolinium enhancement (LGE)

E Native T1 mapping

F Post-contrast T1 mapping

## Biomarkers of cardiac fibrosis

### Endomyocardial biopsy (EMB)

#### Pro

- Direct and specific assessment of myocardial collagen

#### Contra

- Invasive procedure
- Vulnerable to sampling bias
- Screening is logistically challenging

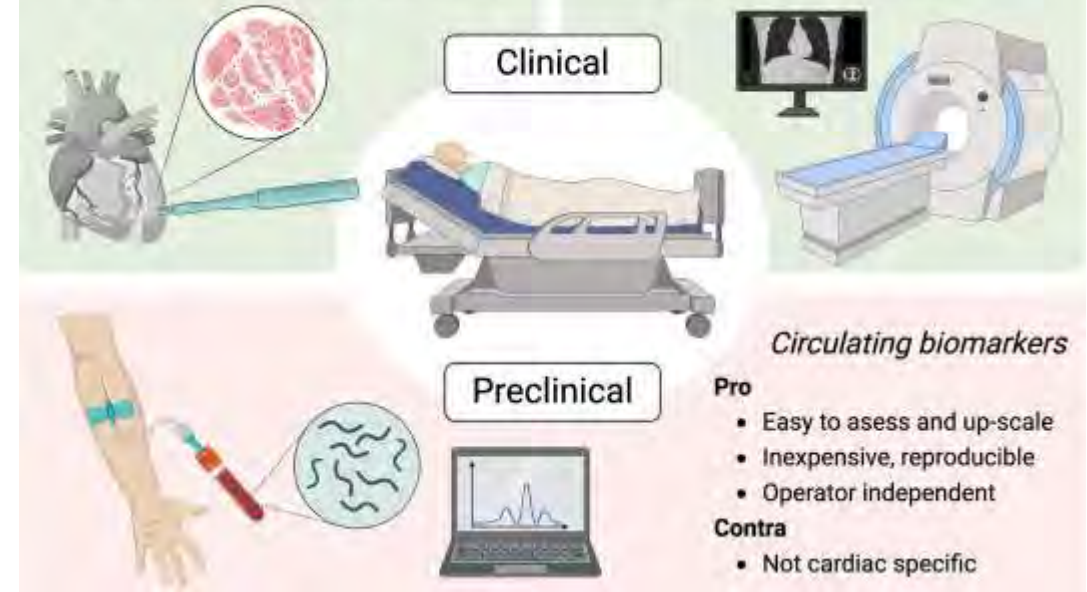
### Cardiac MRI or CT

#### Pro

- Repeatable, non-invasive procedure
- Whole-heart visualisation

#### Contra

- Low resolution (0.5 - 2.0 mm)
- Limited ability to discriminate tissues
- Mostly detects focal fibrosis



### Circulating biomarkers

#### Pro

- Easy to assess and up-scale
- Inexpensive, reproducible
- Operator independent

#### Contra

- Not cardiac specific



# Myocardial fibrosis from the perspective of the extracellular matrix: Mechanisms to clinical impact

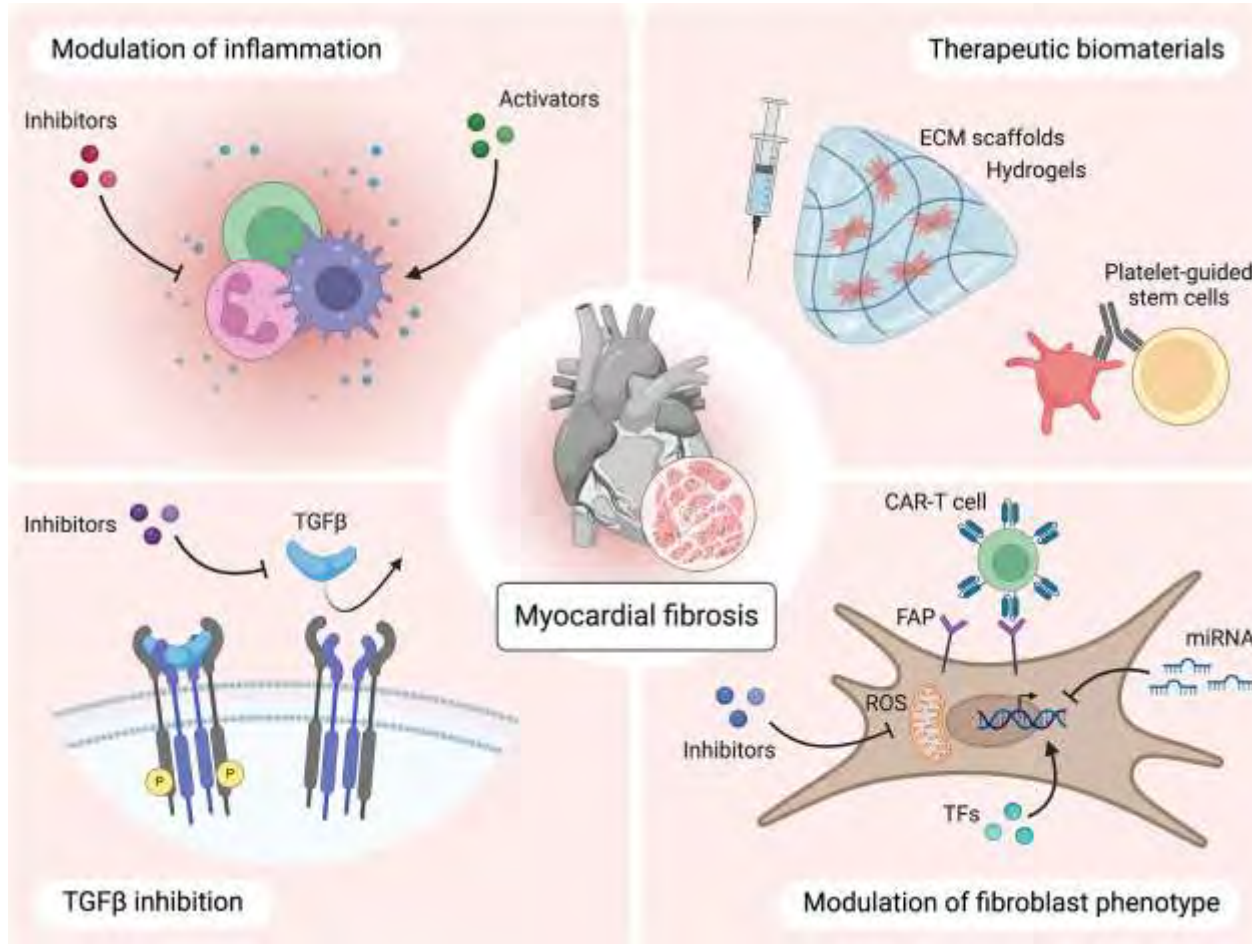


Table 3 | Novel therapies potentially applicable to reverse diffuse myocardial fibrosis

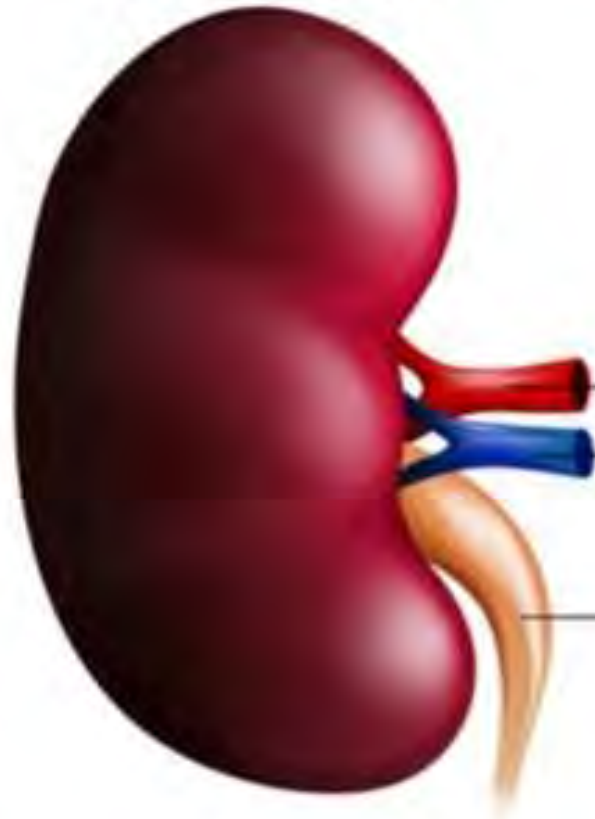
Target	Therapeutic strategy	Study stage	Status	Ref.
TGFβ1 signalling	Inhibiting connective tissue growth factor activity with the monoclonal antibody pamrevlumab	Phase II trial in patients with idiopathic pulmonary fibrosis	Completed	<sup>211</sup>
		Phase III trial in patients with idiopathic pulmonary fibrosis	Ongoing	<sup>212</sup>
Non-coding RNAs	Inhibiting miR-21 with RG-012	Phase I trials in patients with Alport syndrome	Completed	<sup>213</sup>
		Phase II trials in patients with Alport syndrome	Ongoing	<sup>212</sup>
	Mimicking miR-29a with remlarsen	Phase I trial in healthy volunteers	Completed	<sup>215</sup>
		Phase II trial in patients with cutaneous fibrosis	Ongoing	<sup>216</sup>
Metabolic pathways	Omega-3 fatty acid supplementation	Phase III clinical trial in patients with myocardial infarction	Completed	<sup>144</sup>
Extracellular collagen processing	LOXL2 inhibition with simtuzumab	Phase II clinical trial in patients with idiopathic pulmonary fibrosis	Completed	<sup>214</sup>
		Matrix metalloproteinase inhibition with low-dose doxycycline	Completed	<sup>210</sup>
	Phase II trial in patients with myocardial infarction	Ongoing	<sup>211</sup>	
Inflammation	Therapy with modified citrus pectin (a galectin 3 inhibitor)	Phase I trial in patients with chronic kidney disease	Ongoing	<sup>219</sup>
	Therapy with BLD-2660 (a calpain inhibitor)	Phase IIa trial in patients with idiopathic pulmonary fibrosis	Ongoing	<sup>200</sup>
	Therapy with sodium thiosulfate (a hydrogen sulfide-releasing agent)	Phase II trial in patients with myocardial infarction	Ongoing	<sup>212</sup>

LOXL2, lysyl oxidase homologue 2; TGFβ1, transforming growth factor-β1.

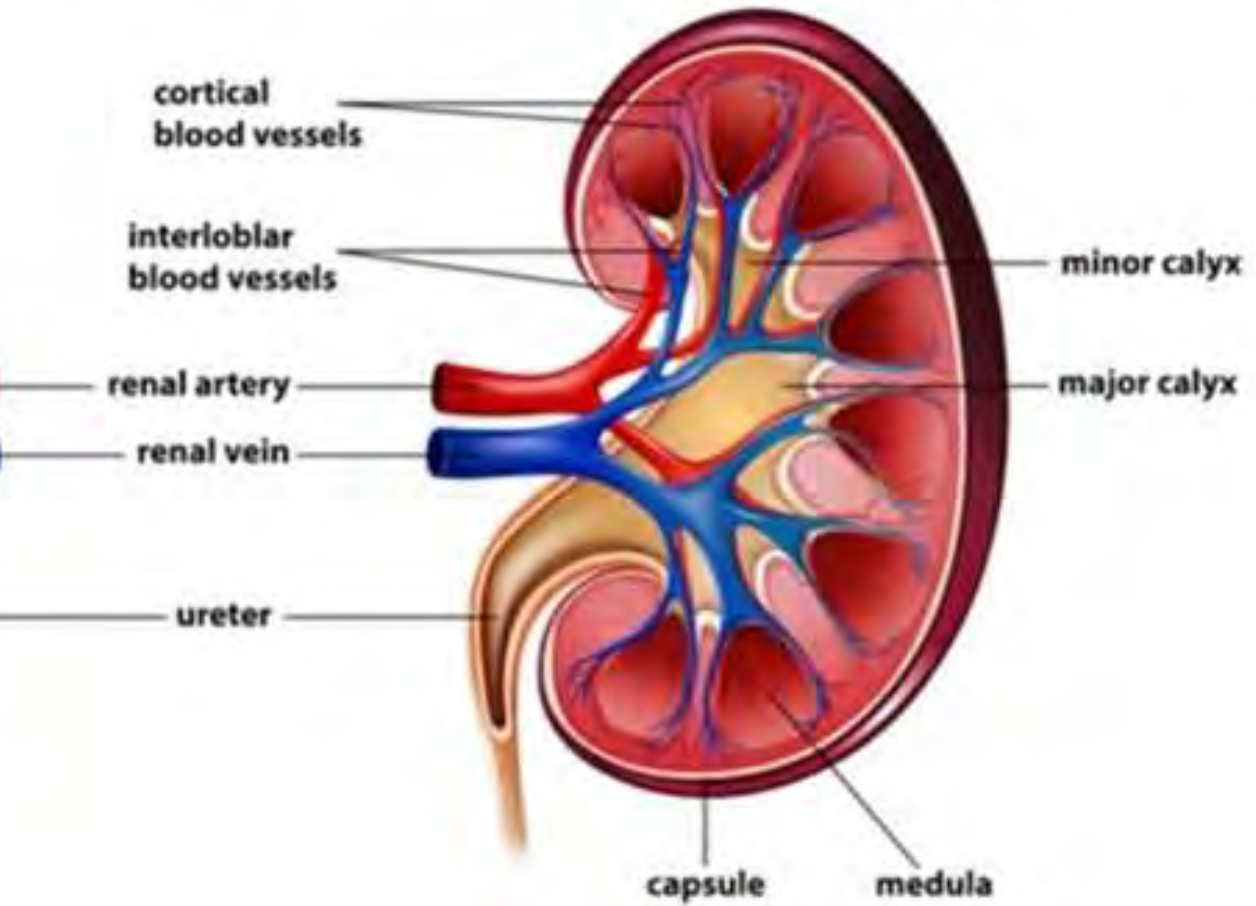


# Human Kidney Anatomy

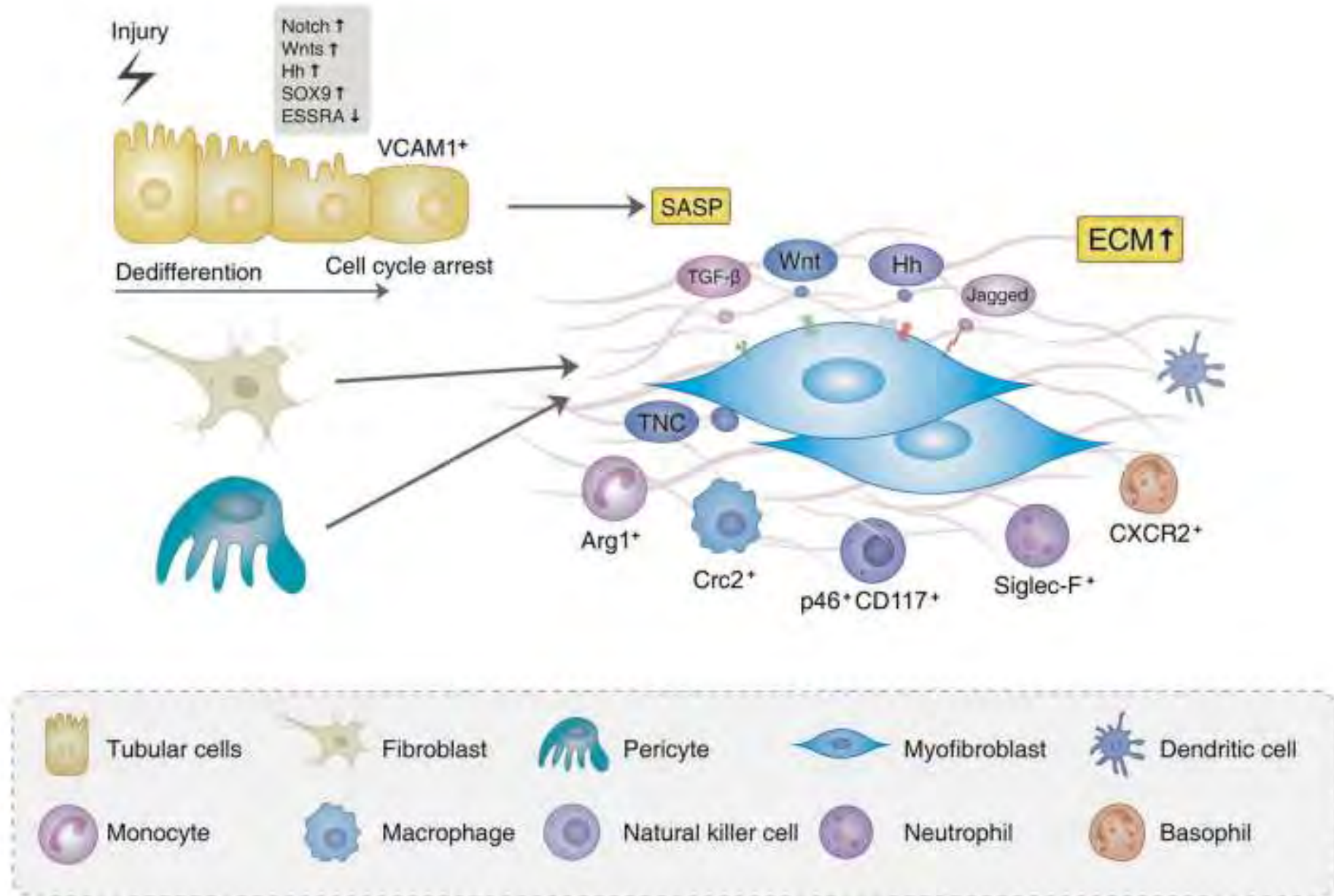
External View



Internal View

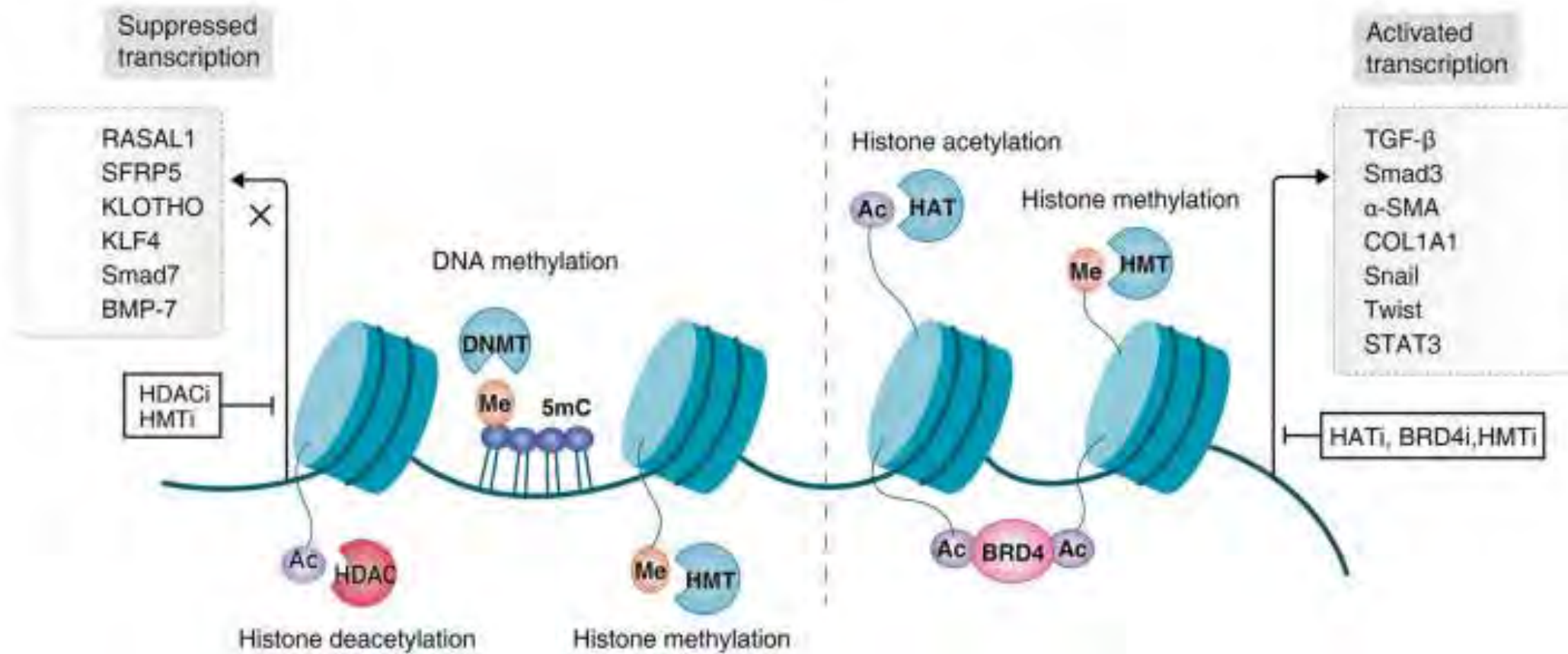


# Kidney fibrosis: from mechanisms to therapeutic medicines



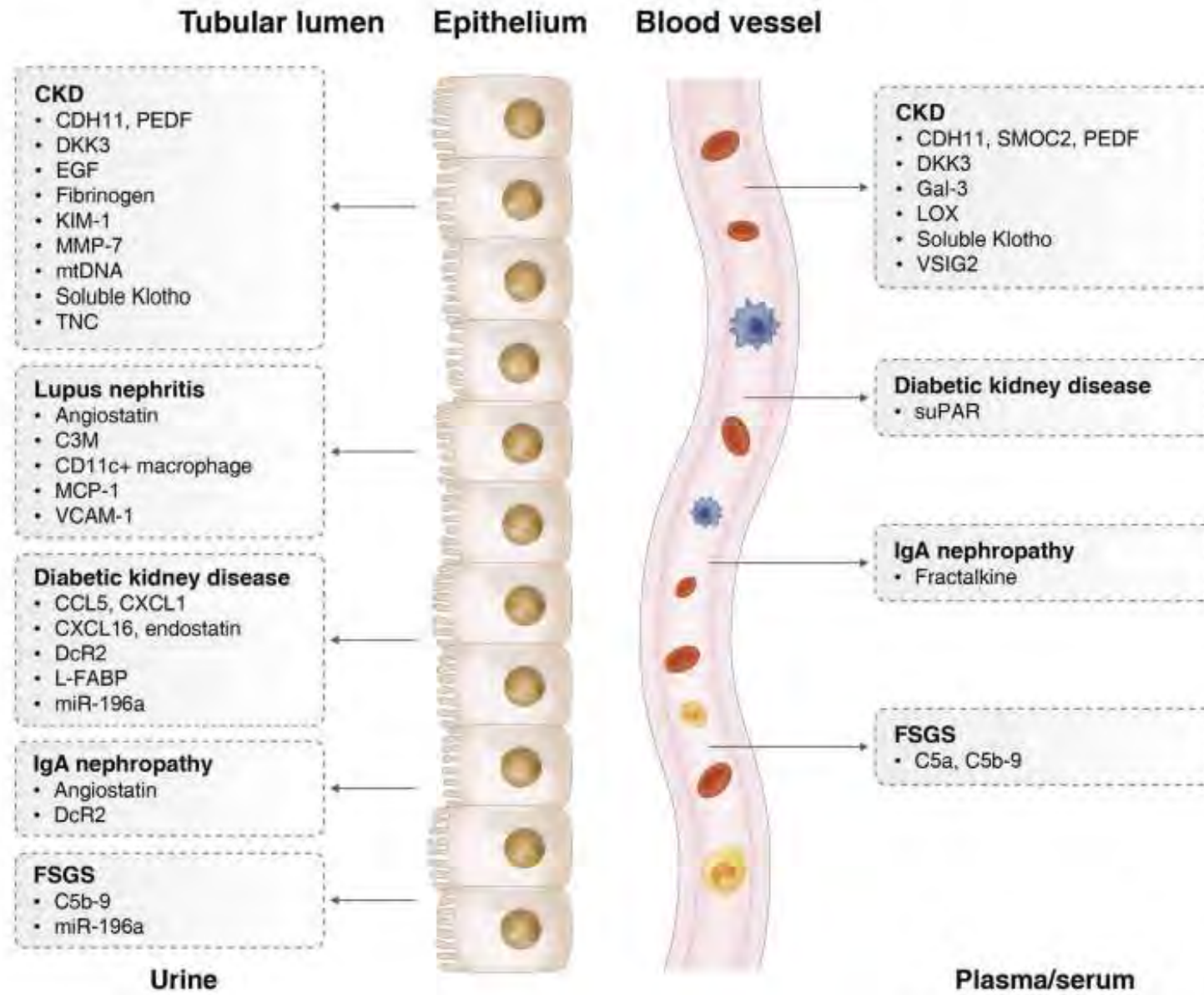


# Kidney fibrosis: from mechanisms to therapeutic medicines



Histone modification and DNA methylation in kidney fibrosis. Suppression of antifibrotic genes

# Kidney fibrosis: from mechanisms to therapeutic medicines



Non-invasive biomarkers of kidney fibrosis in urine and blood



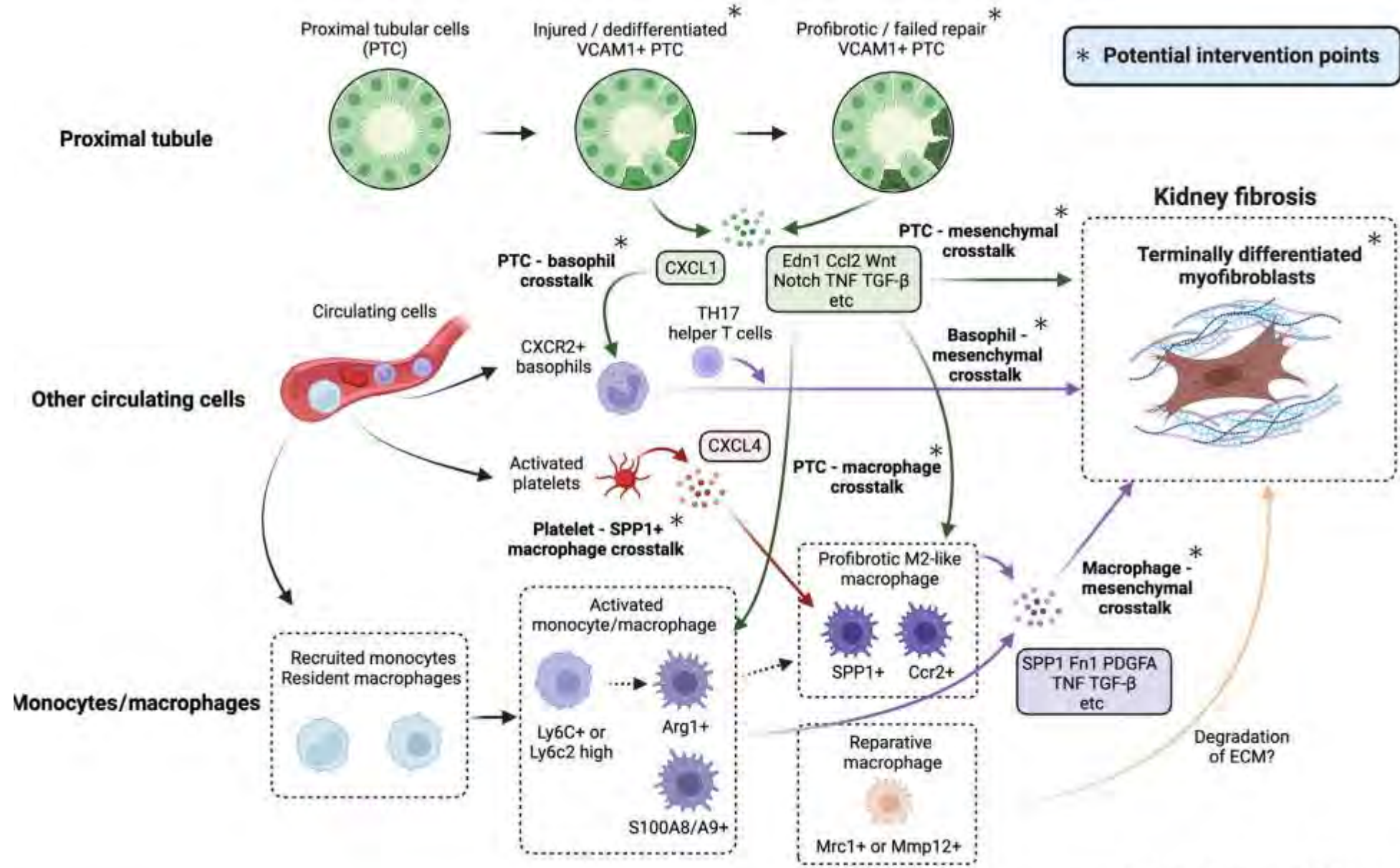


Figure 2. Cellular crosstalk driving kidney fibrosis, and potential intervention points. Proximal tubular epithelial cells (PTCs) are the major cellular component of the

# Szisztémás sclerosis

„scleroderma”: „sclero” (kemény) + „derma” (bőr)





# Patogenezis

Fogékony szervezet

Exogén behatások

Immunrendszer aktivációja, fenotípusos változások

Immunsejtek

- B-sejtek
- $\Gamma\delta$  T-sejtek
- CD4+ T-sejtek
- CD8+ T-sejtek
- Macrophagok
- Hízósejtek
- pDC-k
- Dermális DC-k

Vascularis sérülés

Endothel aktiváció

- Strukturális károsodás
- Alvadási/ fibrinolitikus zavar
- Sejtadhéziós molekulák megváltozott expressziója
- Megváltozott citokin/kemokin expresszió

Hypoxia  
Thrombosis

Infiltráció  
Aktiváció

Fibroblast aktiváció

- Autokrin TGF- $\beta$  aktiváció és visszacsatolás
- Megváltozott válaszreakció
- Th1/Th2/Th17 citokinek

- Fibrocyta
- Endotheliális-mesenchymális átalakulás
- Epitheliális-mesenchymális átalakulás
- Adipocyta-myofibroblast átalakulás
- Gyulladásos sejtek

Krónikus gyulladás

Szervek fibrosisa

# Raynaud tünet

Vazokonstriktio ↑

A simaizomsejtek  $\alpha$ -2  
adrenoreceptorok reaktivitása ↑

Vazodilatatio ↓

A szenzoros afferens rostokból származó  
vazodilatator neuropeptidek (pl. CGRP)  
szintje ↓

Idegrostok  
(szimpatikus  
és szenzoros)

Simaizomsejtek

Endotheliális sejtek

Endothelin-1 ↑

NO ↓

Fibrosis

PDGF receptor elleni antitestek  
Oxidatív stressz  
Endothel sejtek elleni antitestek

Thrombocytá  
aktiváció/aggregáció ↑

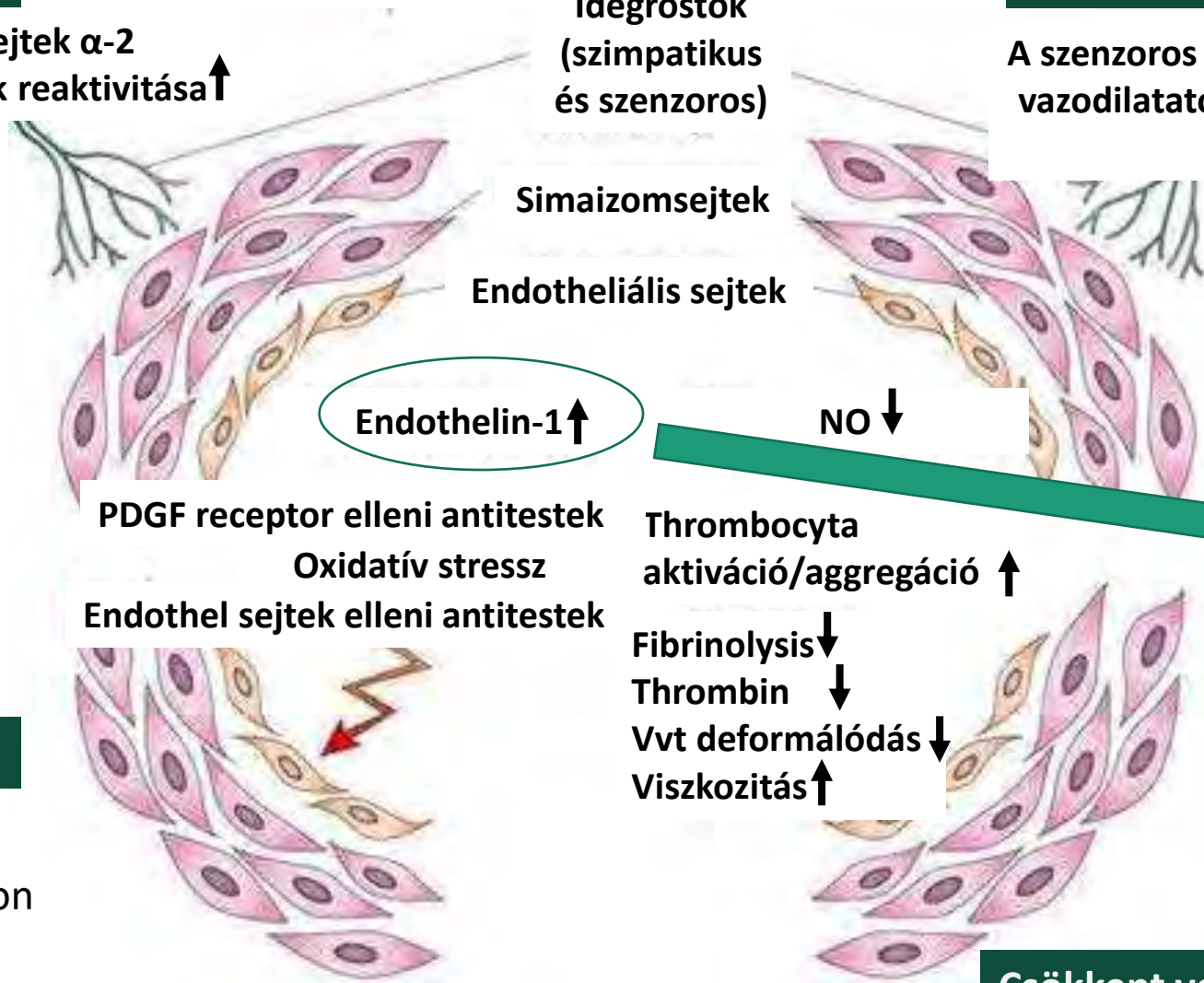
Fibrinolysis ↓  
Thrombin ↓  
Vvt deformálódás ↓  
Viszkozitás ↑

Csökkent véráramlás/  
prokoaguláns állapot

Endothel sérülés

Sejtek közötti adhézio, tight junction  
fellazulása

A digitalis artériák hideghatásra,  
vagy emocionális stresszre  
bekövetkező kóros válaszreakciója,  
fokozott vasokonstriktioja

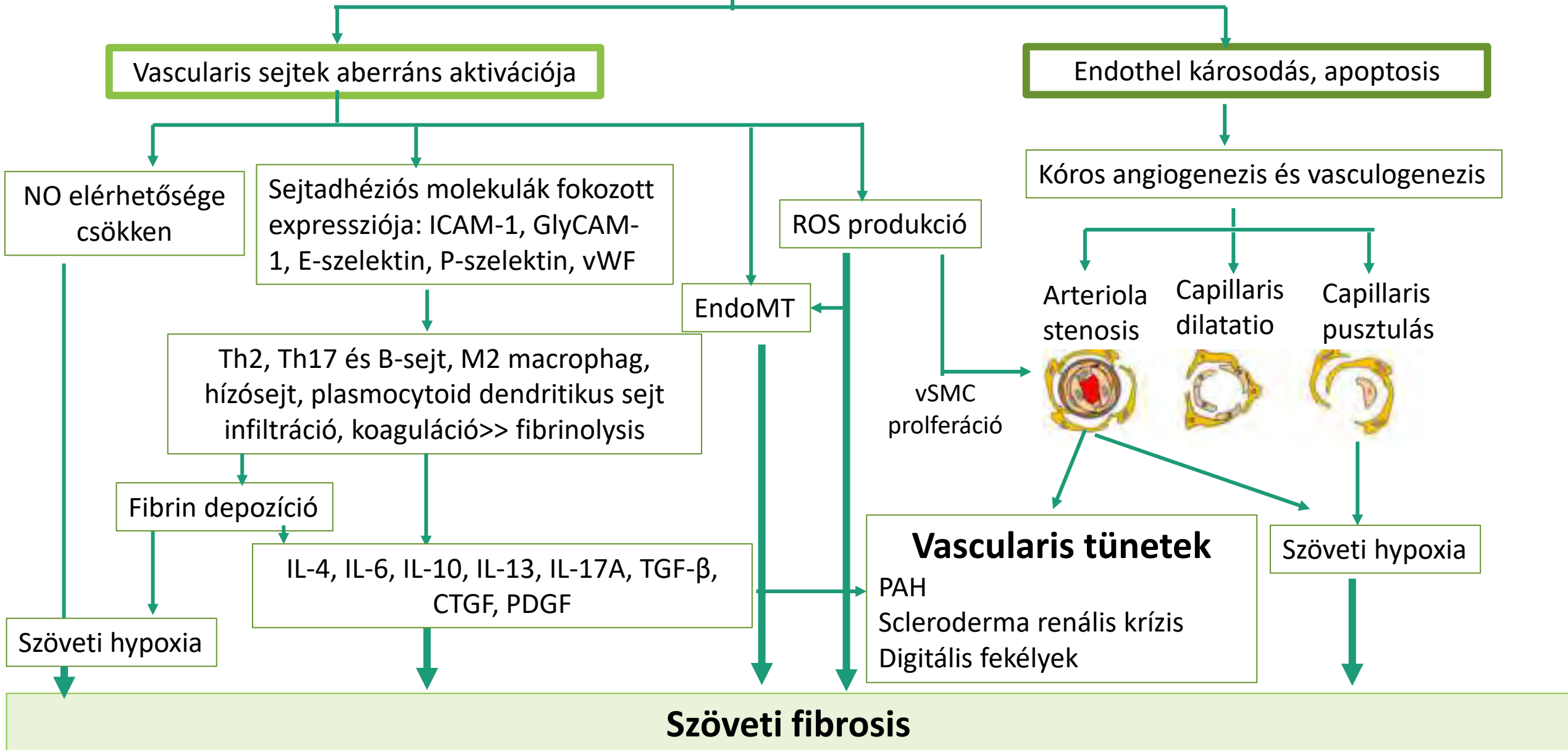




# Vasculopathia

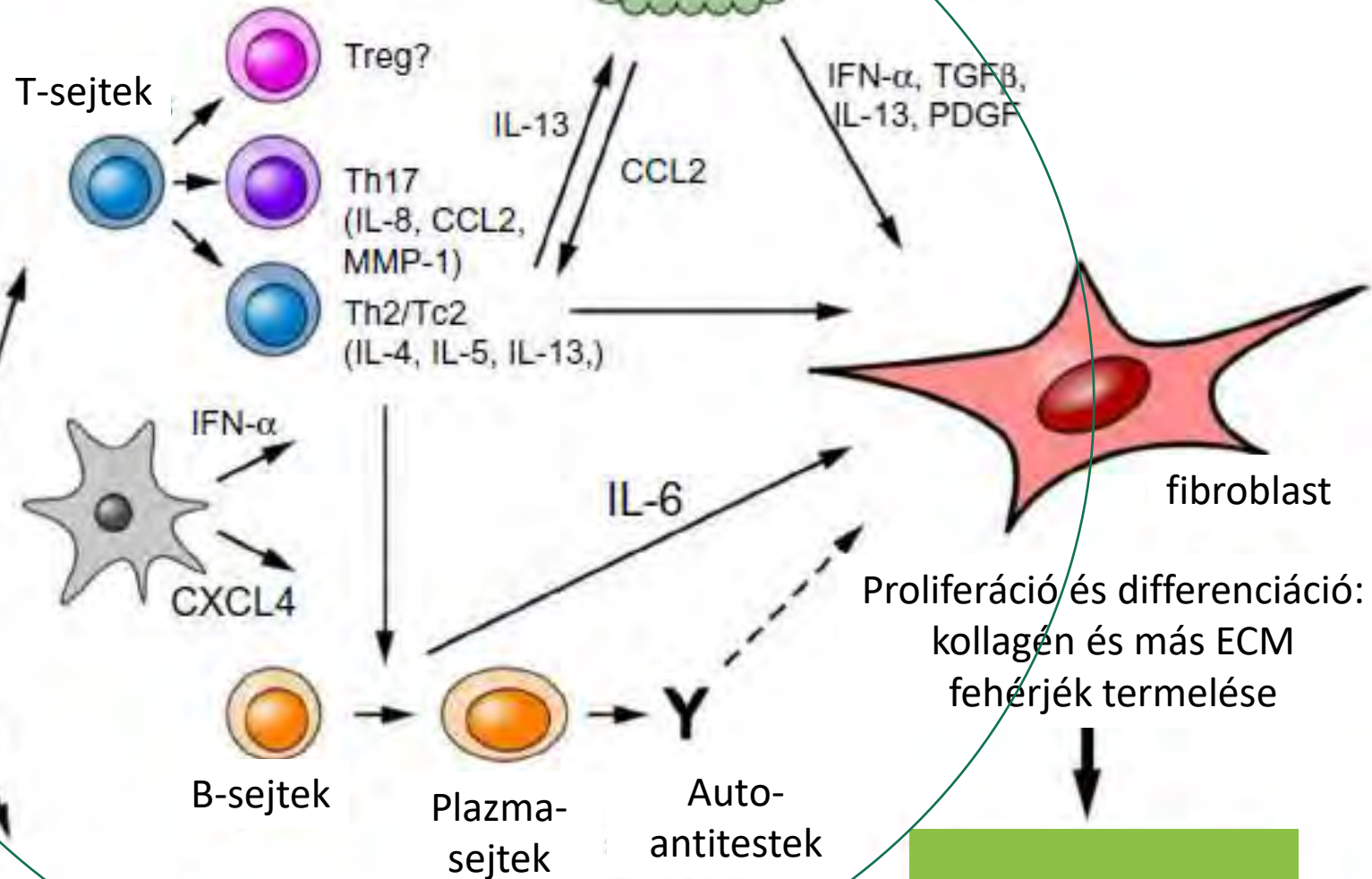
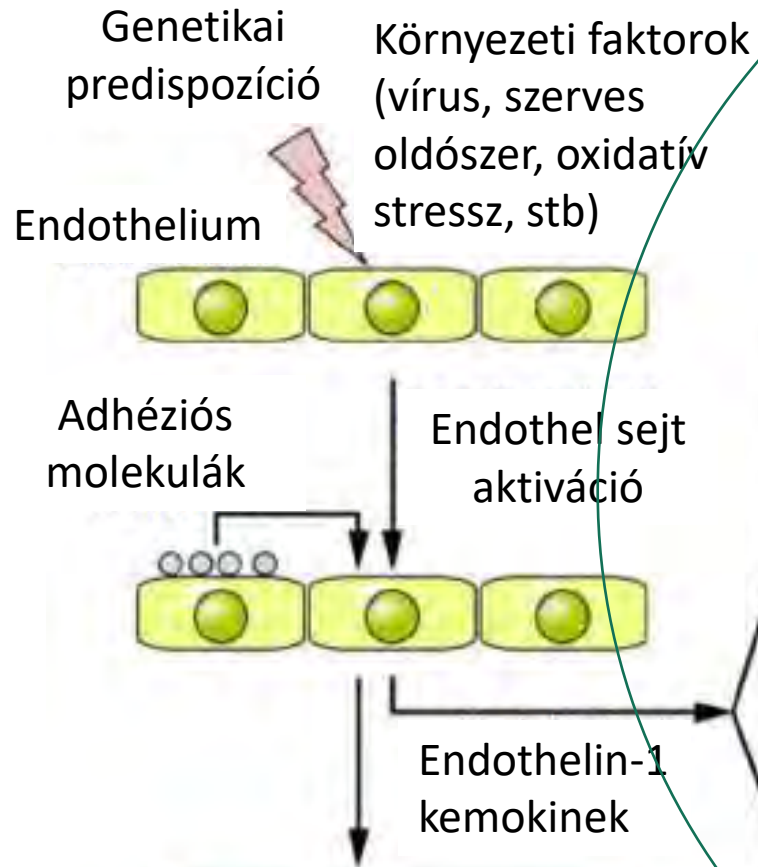


Autoimmunitás (endothel sejt elleni at és egyéb környezeti tényezők)



## Szöveti sérülés

## Gyulladás



## Vascularis sérülés

## Autoimmunitás

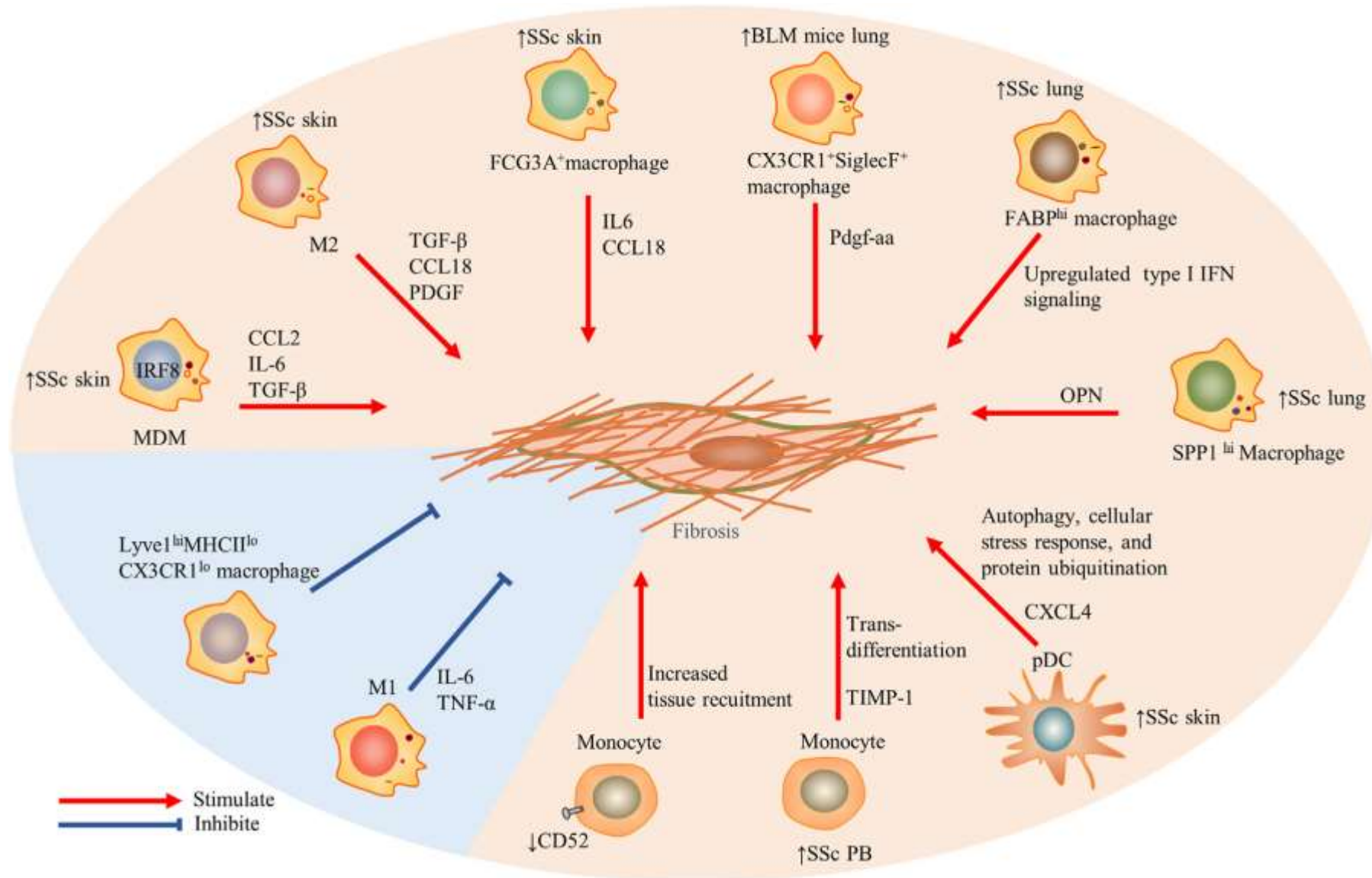
## Fibrosis

Obliteratív vasculopathia  
Defektív vasculogenesis  
Szöveti hypoxia



# Contributions of Immune Cells and Stromal Cells to the Pathogenesis of Systemic Sclerosis: Recent Insights

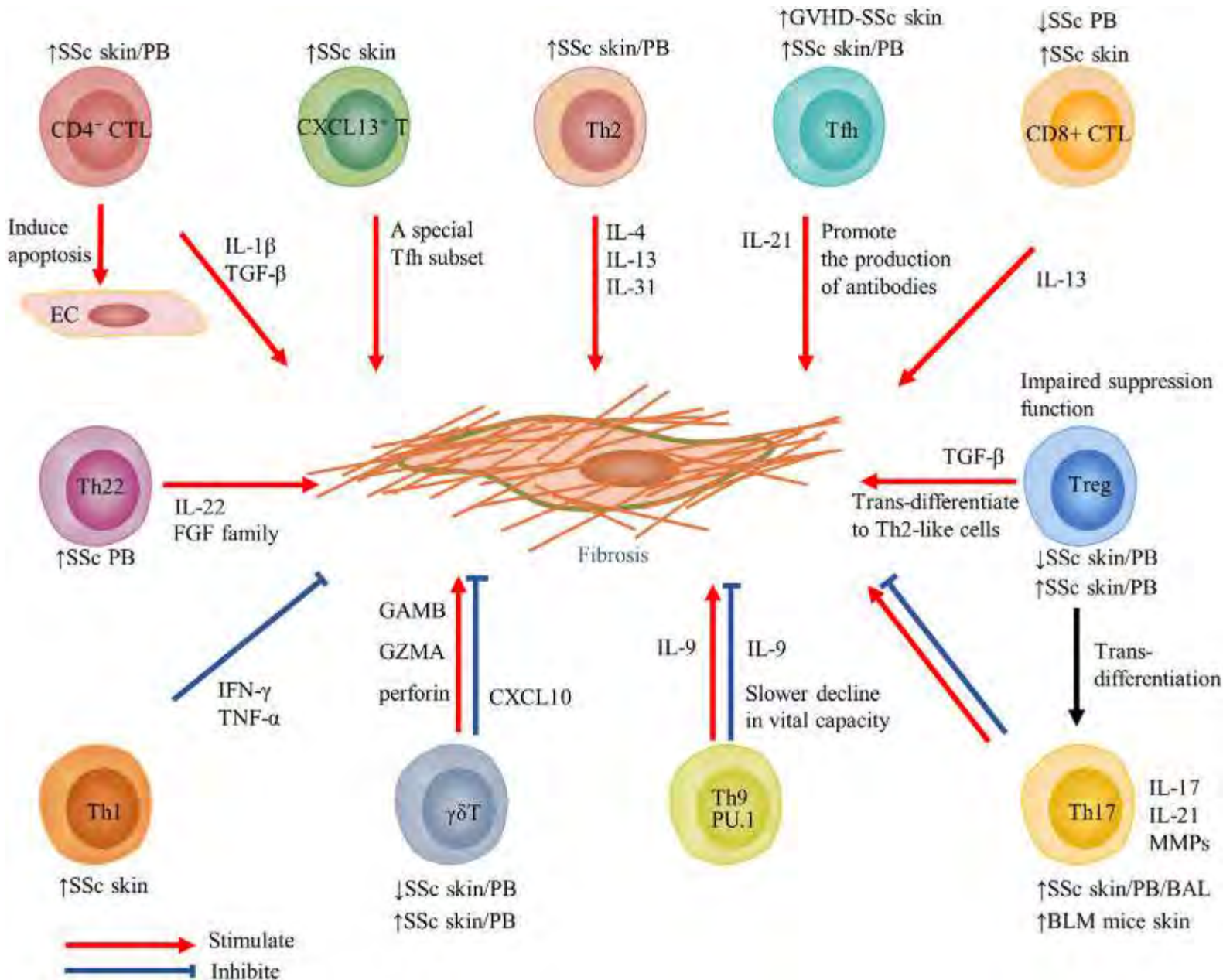
Bingying Dai et al. 2022. Front. Pharmacol. 13:826839.



The role of innate immune cells including monocytes, macrophages, and dendritic cells in the fibrosis in SSc.

# Contributions of Immune Cells and Stromal Cells to the Pathogenesis of Systemic Sclerosis: Recent Insights

Bingying Dai et al. 2022. Front. Pharmacol. 13:826839.



Adaptív immunitás

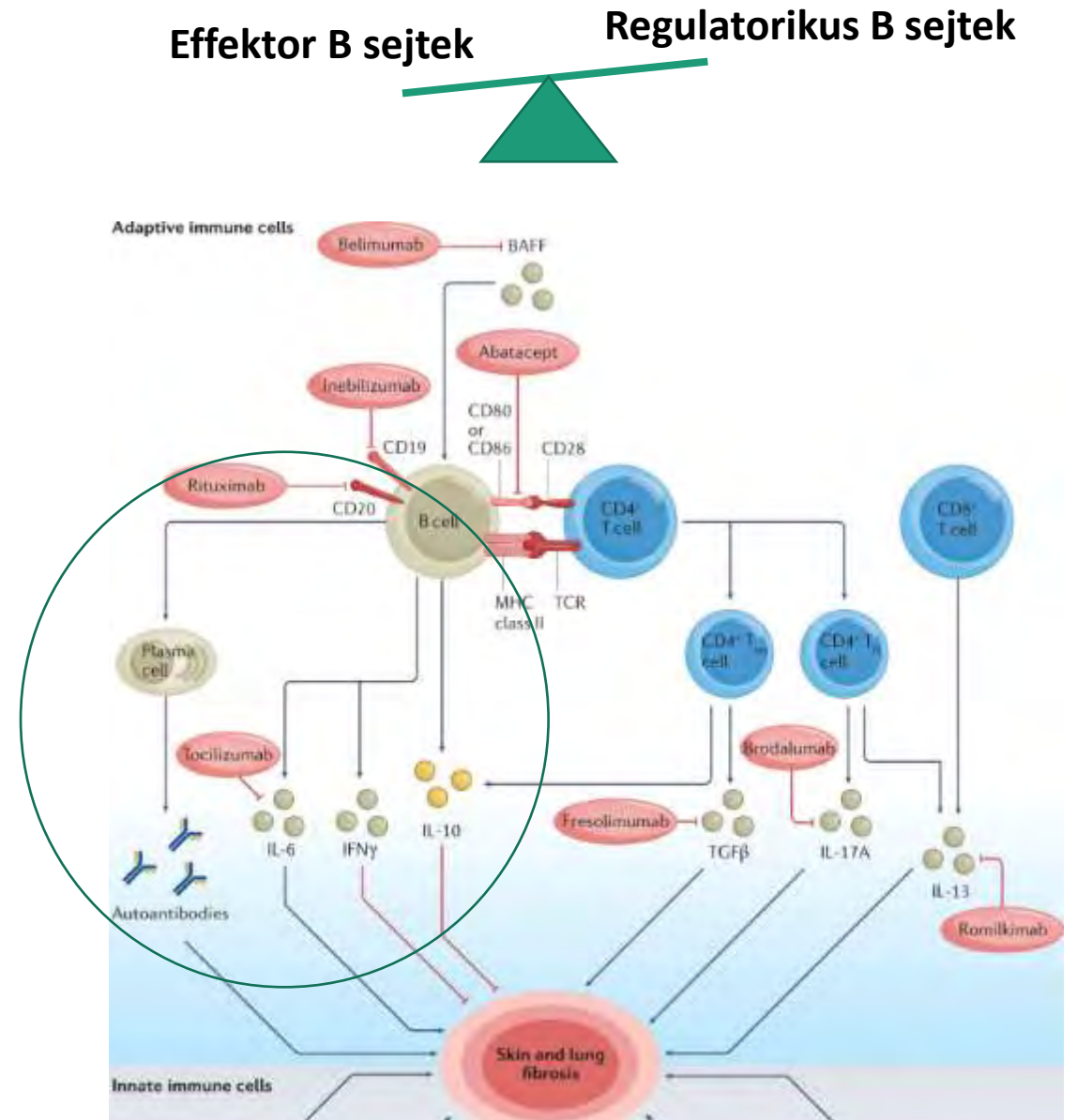
Contribution of T-cell subsets and their cytokines to fibrosis in SSc



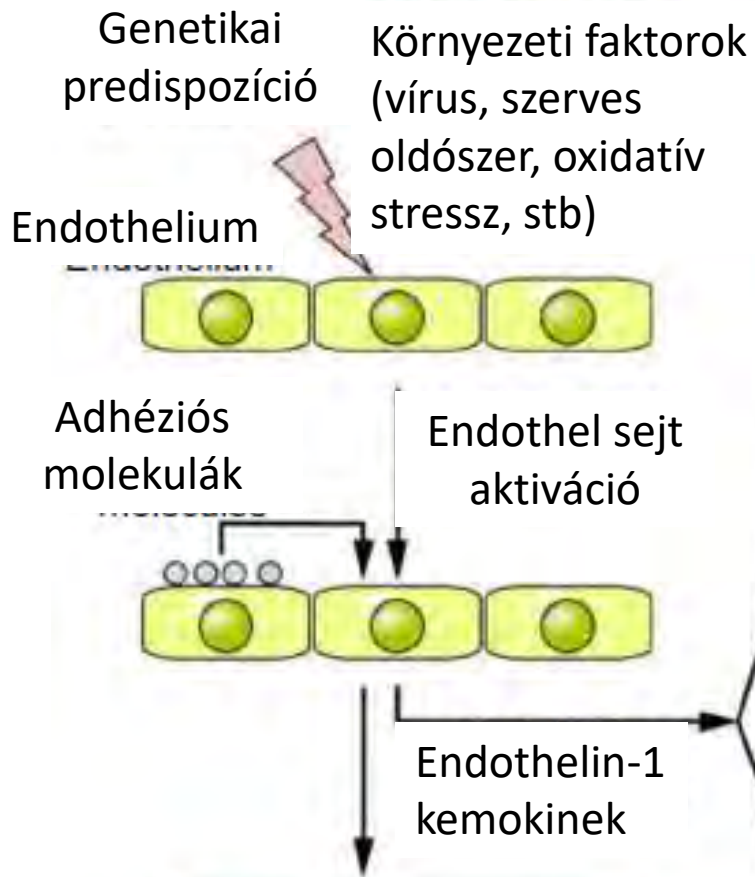
# Adaptív immunitás

## B-sejtek:

- Antitest termelés, citokin szekréció
- IL-6, IFN $\gamma$ , GM-CSF
- Breg sejtek száma és funkciója is csökken: IL-10
- BAFF: B-sejtek profibrotikus aktivitása nő, fokozódik a citokin szekréció
- Macrophagok M2 polarizációjában, T-sejtek, dendritikus sejtek aktivációjában is részt vesznek: innate-adaptív immunitás összeköttetés



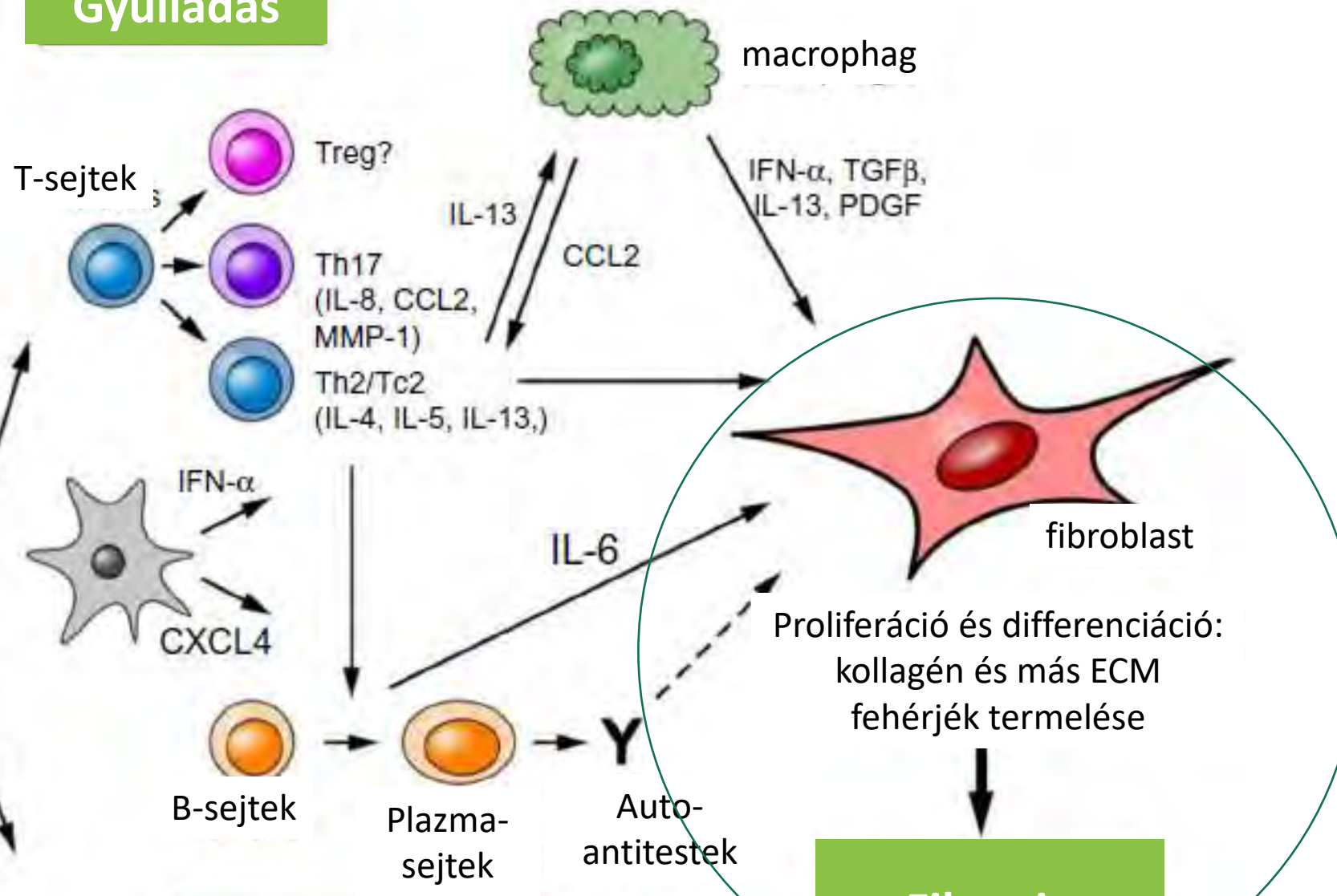
## Szöveti sérülés



## Vascularis sérülés

Obliteratív vasculopathia  
Defektív vasculogenesis  
Szöveti hypoxia

## Gyulladás

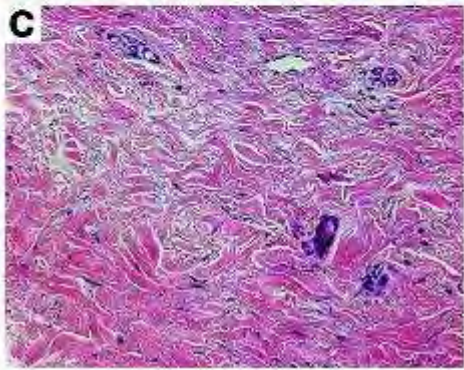
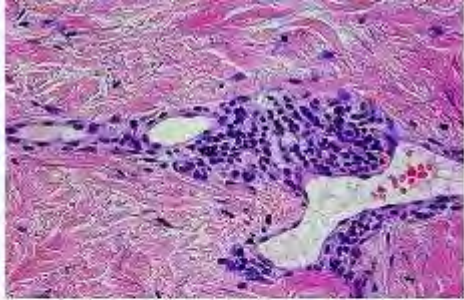


## Autoimmunitás

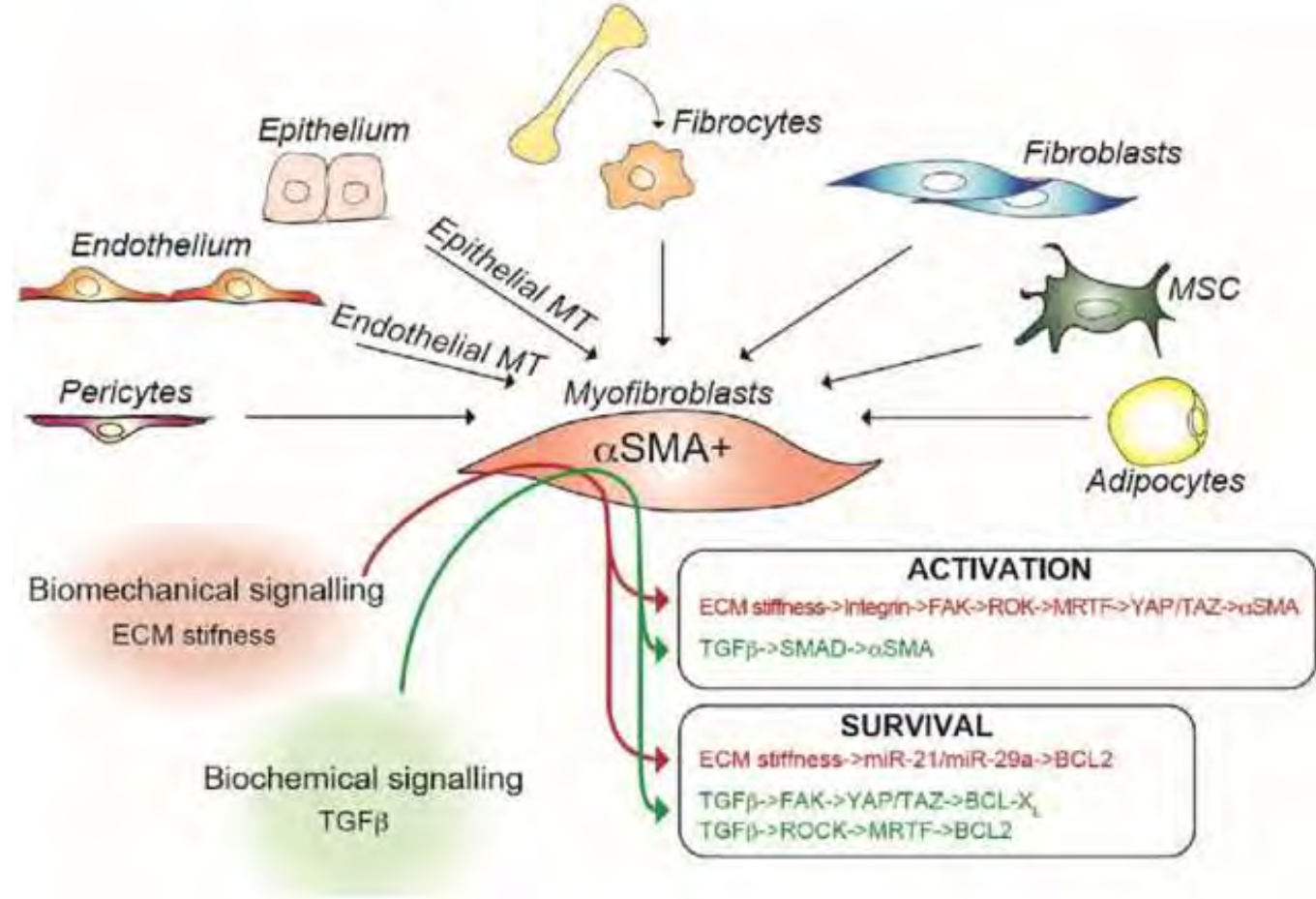
## Fibrosis



# Fibrosis



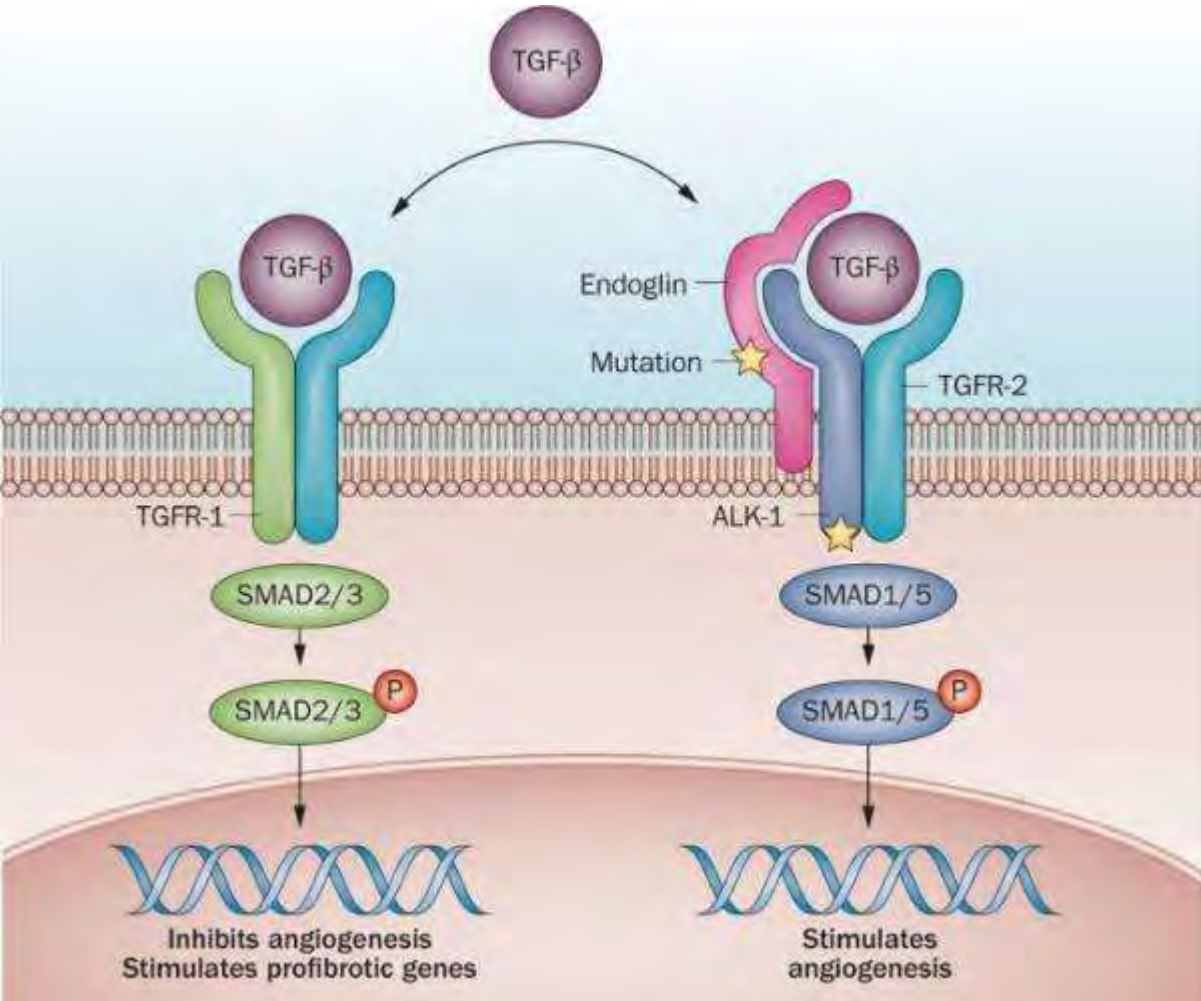
Gyulladásos  
mikrokörnyezet  
+  
Szöveti sérülés, hypoxia,  
stressz



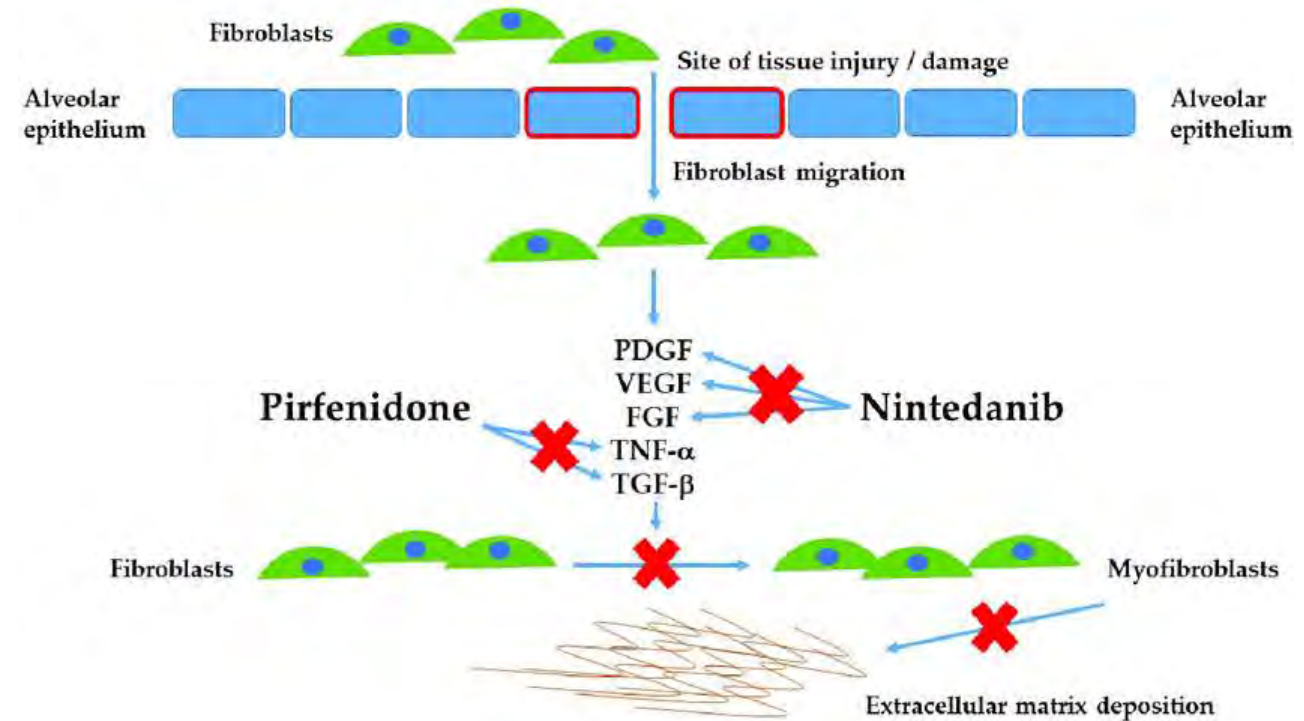
Kóros fibrosis: fibroblast-myofibroblast ( $\alpha$ -simaizom aktint expresszáló) átalakulás, fibroblast apoptosis csökkenés, autokrin aktiváció miatt túlzott kollagén és ECM termelés

Megvastagodott kollagén rostok: I, III, VII-es típusú kollagén, subcutan zsírszövet csökken, kollagén keresztkötések

# TGF- $\beta$



- Fibrosis: központi szerep, ECM termelés fokozása, lebontás gátlása
- Forrása: fibroblasztok, miofibroblasztok, T-sejtek, monociták, makrofágok és vérlemezkék
- I-es típusú kollagén, I-es típusú plazminogén aktivátor inhibitor, CTGF és  $\alpha$ -SMA gén expresszió fokozása

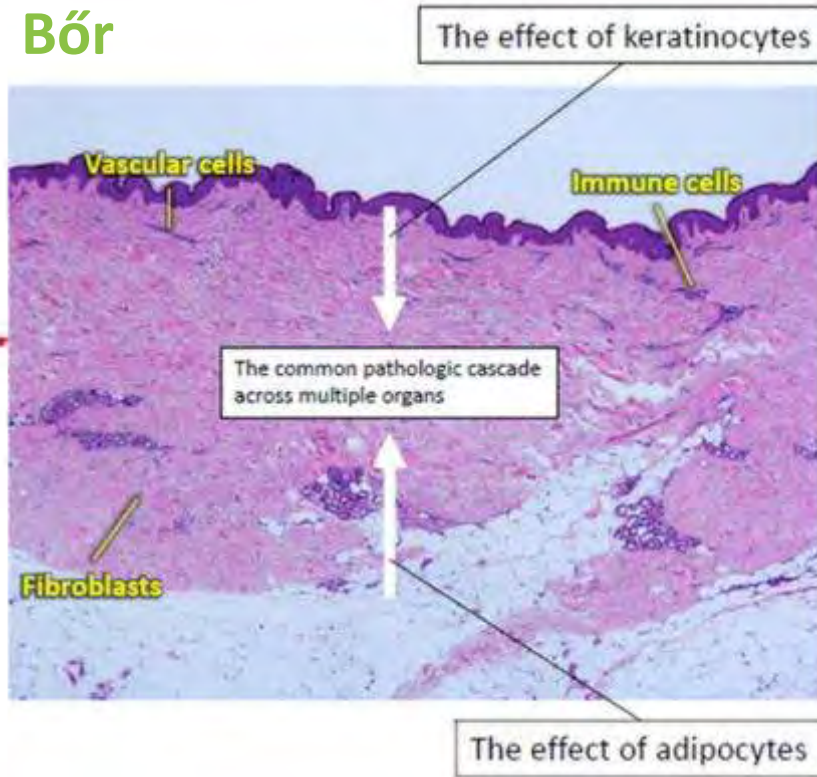




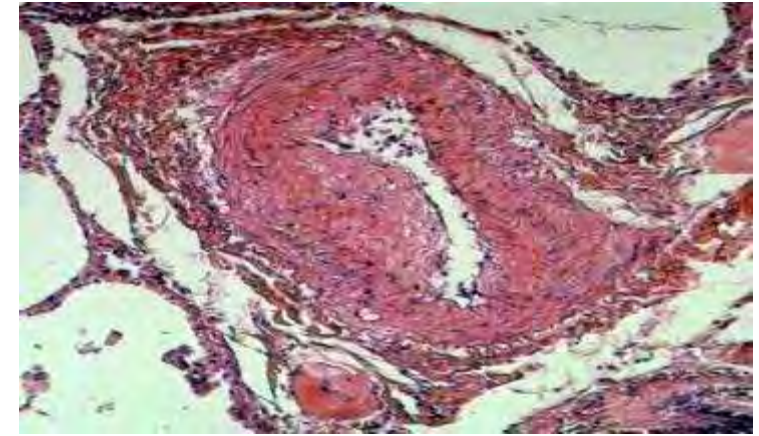
# Szervi érintettségek pathogenezeise



# Bőr



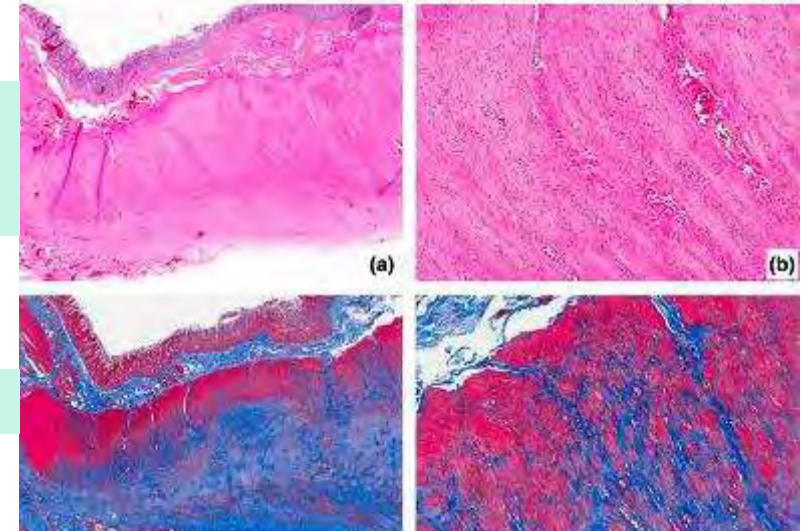
# Vasculatura



**Intima hyperplasia  
media hypertrophia  
adventitia fibrosis**

A muscularis propria fibrosisa a simaizomsejtek atrophiáját okozza

Trikróm festés: fibrosis





# SSc-ILD

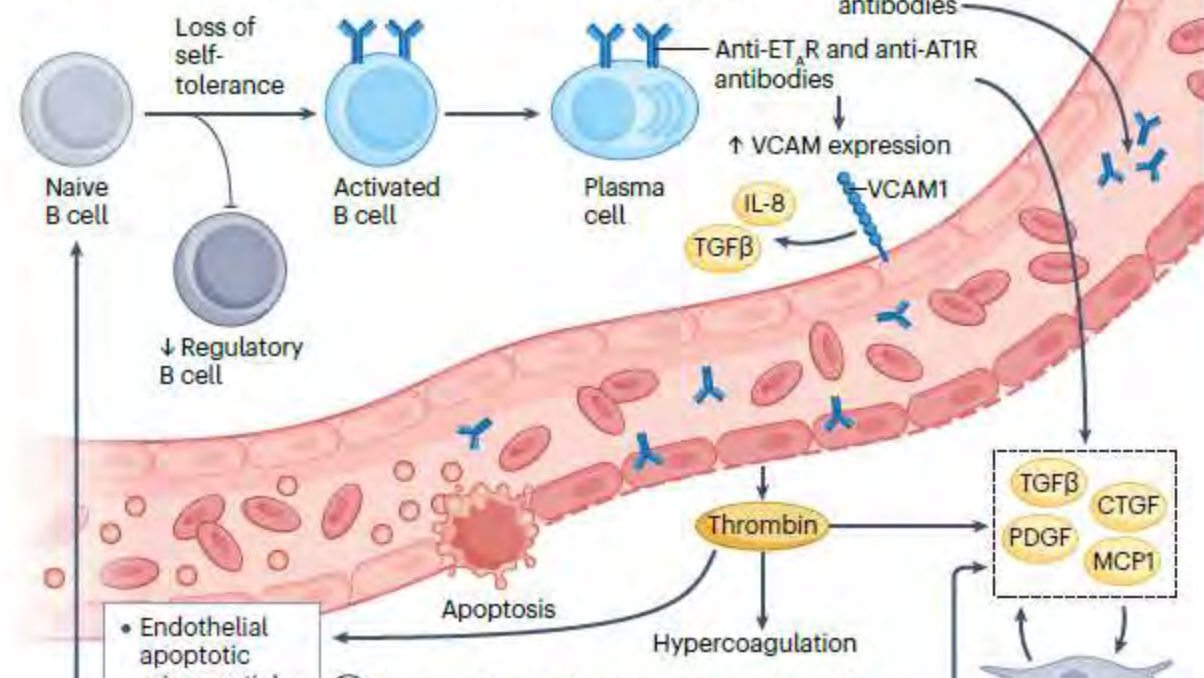
## 1 Repetitive injury to lung vascular tree in genetically susceptible individuals



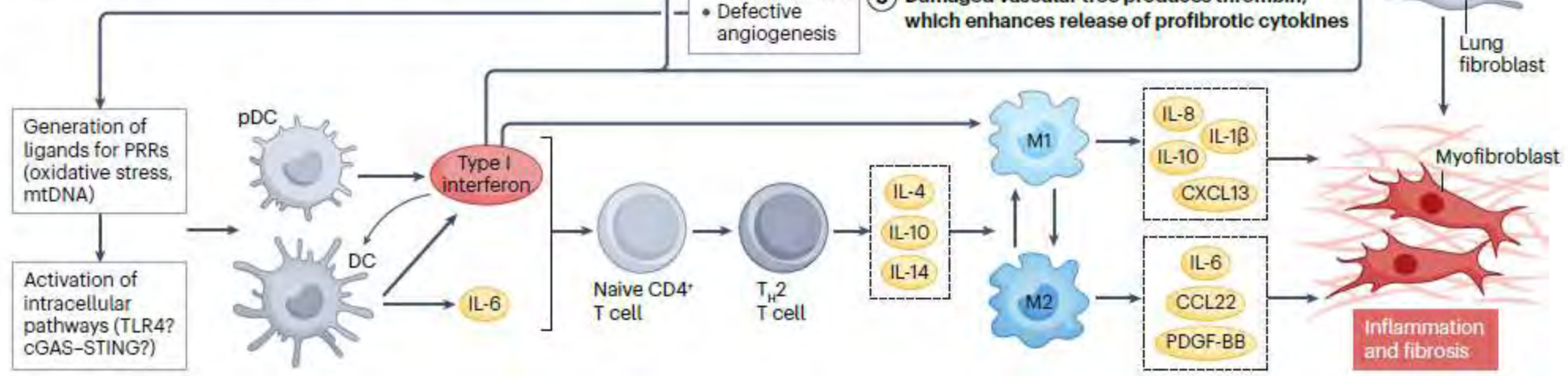
- Environmental factors**
- Oxidative stress
  - Viral infections
  - Silica exposure
  - Organic solvents

- Genetic predisposition**
- HLA-related polymorphisms (for example, *HLA-DRB1\*11*)
  - Interferon-related polymorphisms (*IRF4,5,7,8, STAT4*)
  - Innate immunity-related polymorphisms (for example, *TNFAIP3, TNIP*)
  - Adaptive immunity-related polymorphisms (for example, *TNFSF4, CD247, PTNPN22, CSK, BANK1, IL12, IL21*)
  - Cell death-related polymorphisms (for example, *DNASE1L3, ATG5, GRB10, NOTCH4*)
  - Vascular homeostasis and fibrosis (for example, *PPARG, CAV1, DDX6*)
  - Myfibroblast differentiation (for example, *CSK*)

## 2 Loss of self-tolerance and production of autoantibodies against molecules of vascular origin




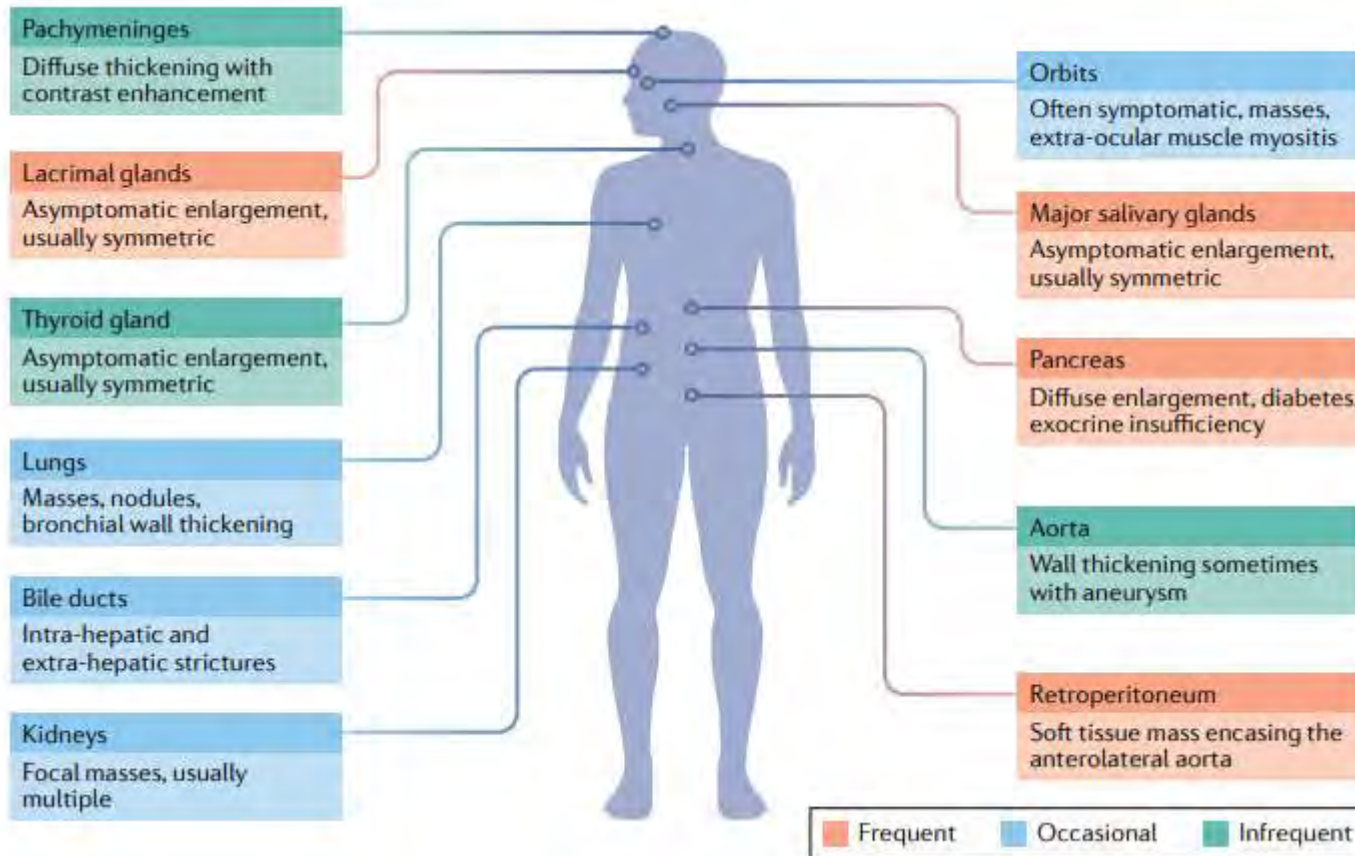
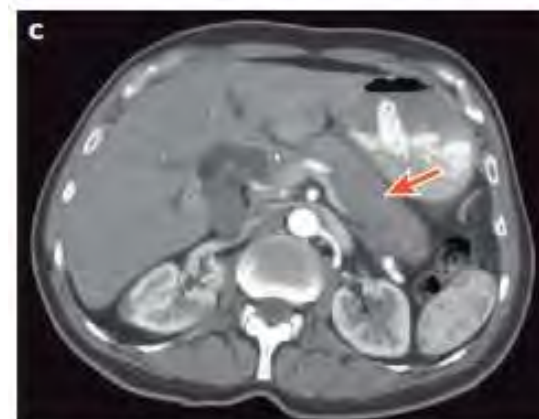
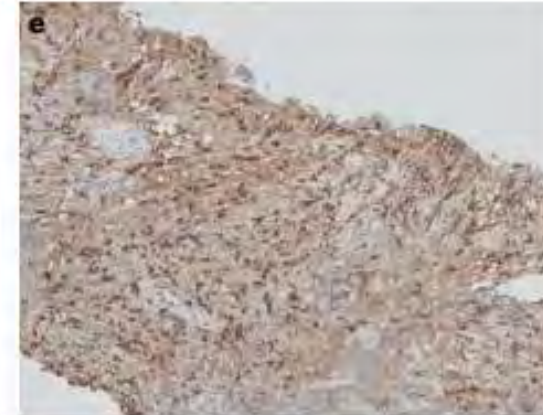
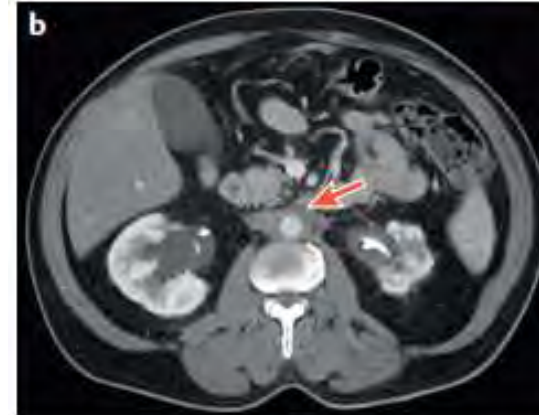
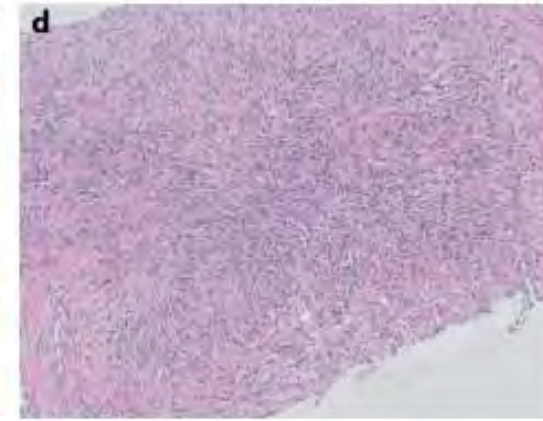
## 3 Damaged vascular tree produces thrombin, which enhances release of profibrotic cytokines






# IgG4-related disease: an update on pathophysiology and implications for clinical care

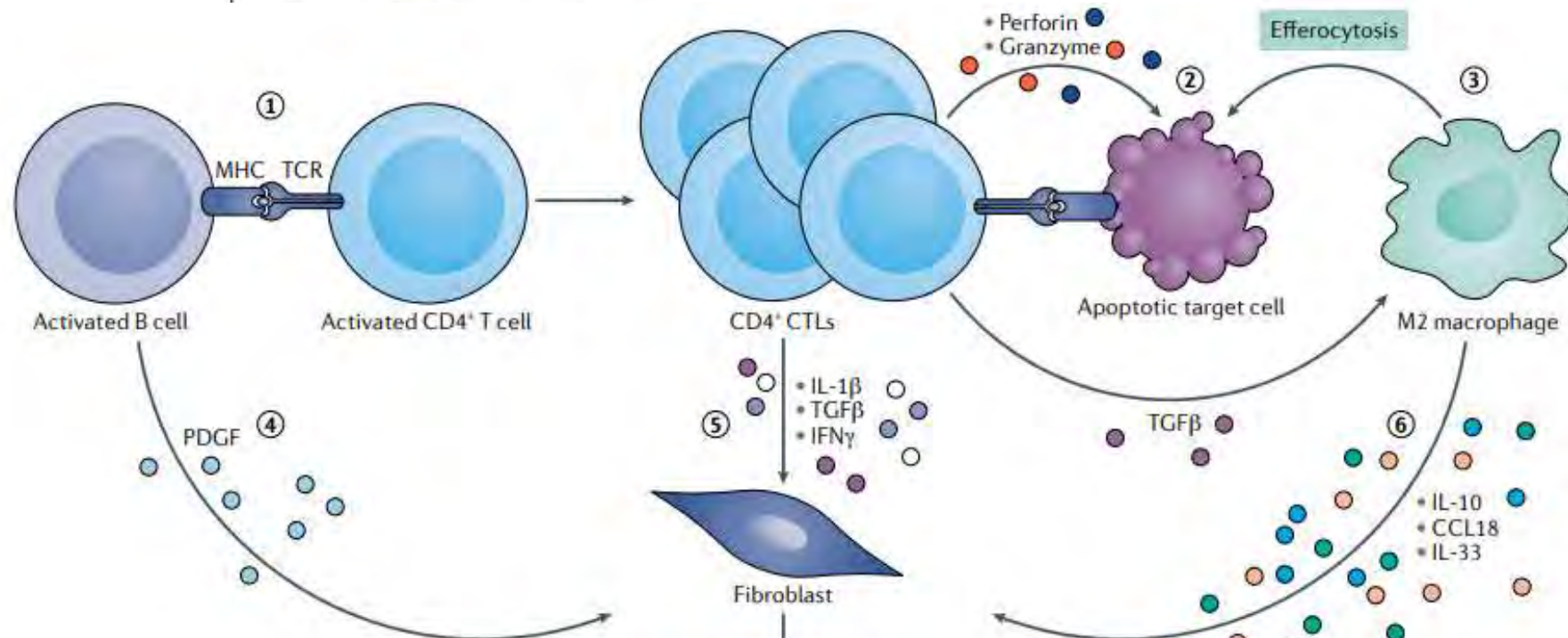
Cory A. Perugino<sup>1,2</sup> and John H. Stone<sup>1</sup> 





# IgG4-related disease: an update on pathophysiology and implications for clinical care

Cory A. Perugino<sup>1,2</sup> and John H. Stone<sup>1</sup> 



Tissue fibrosis	
Clinical manifestations	Histopathology
<ul style="list-style-type: none"> <li>• Tumor-like soft tissue mass</li> <li>• Organ enlargement</li> </ul>	<ul style="list-style-type: none"> <li>• Lymphoplasmacytic infiltrate</li> <li>• Storiform fibrosis</li> </ul>

# Fibrosissal járó kórképek kezelése



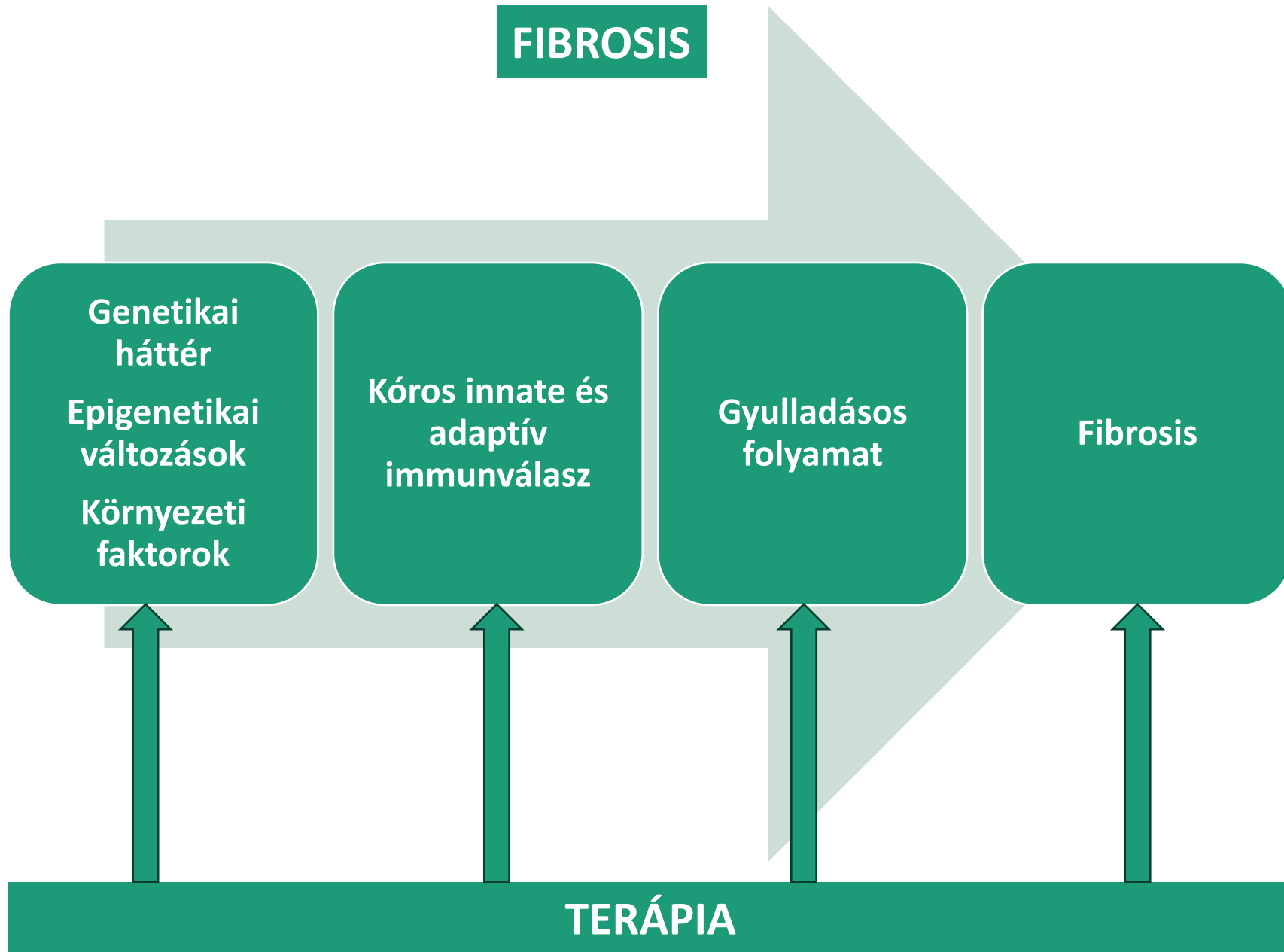
# Senescence and tissue fibrosis: opportunities for therapeutic targeting

Trends in Molecular Medicine, December 2024, Vol. 30, No. 12

Table 1. Senescence in fibrosis *in vivo*

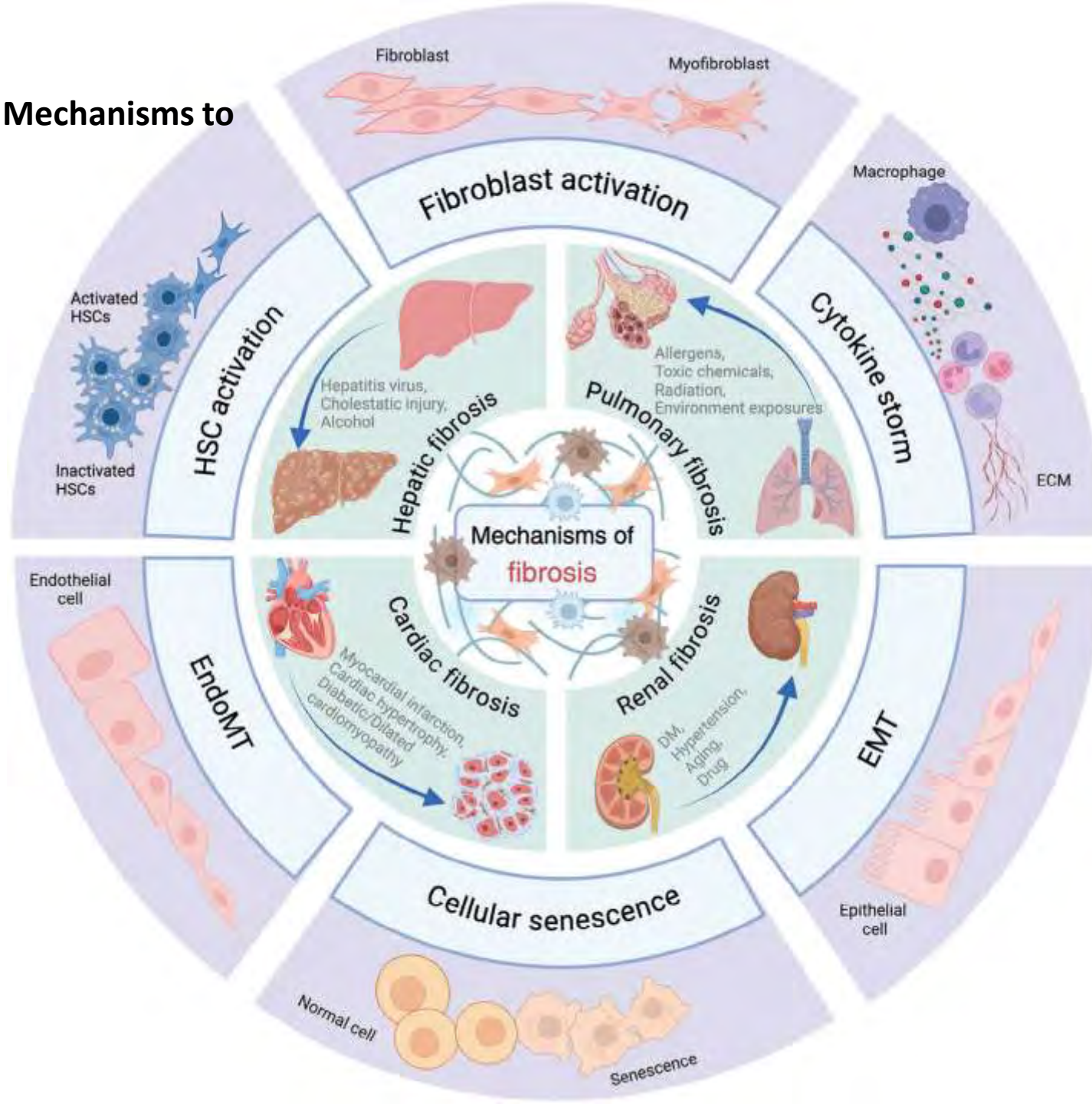
Target organ	Disease model	Senotherapeutic agent(s)	Outcomes	Refs
Cardiac fibrosis	Aged INK-ATTAC and C57BL/6J mice	ABT-263 (navitoclax)	Pharmacological or genetic clearance of senescent cells in mice alleviated myocardial hypertrophy and fibrosis	[93]
	Ischemia reperfusion model in C57BL/6J mice	ABT-263 (navitoclax)	Navitoclax reduced senescence and improved cardiac function by attenuating the profibrotic SASP, reducing scar, and enabling increased angiogenesis	[94]
	Human cardiac fibrosis on a chip model	Quercetin, dasatinib	The senolytic drugs led to an improvement in contractile function, reduced passive tension, and downregulated senescence-related gene expression in the tissue	[95]
Renal fibrosis	Renal artery stenosis in INK-ATTAC mice	Quercetin, dasatinib	Both p16-specific and quercetin-dasatinib improved renal function and structure	[96]
	C57BL/6J mice on high fat diet	Quercetin	Improved renal function indices and alleviated fibrosis	[97]
	Aged and/or kidney injury models in C57BL/6J mice	ABT-263 (navitoclax)	ABT-263 treatment resulted in improved functional recovery and reduced fibrosis	[44]
	Lupus nephritis in MRL/lpr mice	Fisetin	Fisetin treatment attenuated kidney fibrosis, reduced SASP expression, and increased tubular epithelial cell proliferation	[98]
Lung fibrosis	Bleomycin lung fibrosis in INK-ATTAC mice	Quercetin, dasatinib	Both p16-specific and quercetin-dasatinib improved renal function and structure	[43]
	Ex vivo fibrotic 3D lung tissue	Quercetin, dasatinib	Pharmacological treatment significantly eliminated senescent markers and the SASP	[99]
	Bleomycin lung fibrosis in C57BL/6J mice	Nintedanib	Nintedanib suppressed senescent cell survival through the JAK2/STAT3 signaling pathway in the lung fibrosis model	[100]
	Intratracheal $\gamma$ -irradiated IMR90 cells in mice	Digoxin	Digoxin effectively eliminated senescence-induced lung fibrosis	[101]
	Bleomycin and crystalline silica-induced lung fibrosis in mice	ABT-263 (navitoclax)	ABT-263 induced fibroblast apoptosis, decreased fibroblast numbers, and reduced fibrosis	[67,102]
	Bleomycin-induced lung fibrosis in mice	Rapamycin	Rapamycin inhibited pulmonary fibrosis and epithelial-mesenchymal transition in mice	[103]
	Radiation-induced lung fibrosis in C57BL/6 mice	FOXO4-DRI	FOXO4-DRI alleviated pulmonary fibrosis by targeting senescence-like fibroblasts <i>in vivo</i>	[104]
	Senescent IMR90 cells-induced lung fibrosis in mice	ABT-263 (navitoclax)	Navitoclax significantly reduced collagen content in fibrotic lungs, comparable with the effect of nintedanib and pirfenidone	[105]
Liver fibrosis	CCl <sub>4</sub> - or NASH-induced liver fibrosis in C57BL/6N mice	$\alpha$ PAR-specific CAR T cells	CAR T cells efficiently eliminated senescent cells, reduced fibrosis, and improved liver function in mice	[98]

# FIBROSIS





# Targeting Fibrosis: From Molecular Mechanisms to Advanced Therapies



# Inflammation and immunity in IPF pathogenesis and treatment

Heukels P et al. Respiratory Medicine 147 (2019) 79–91.

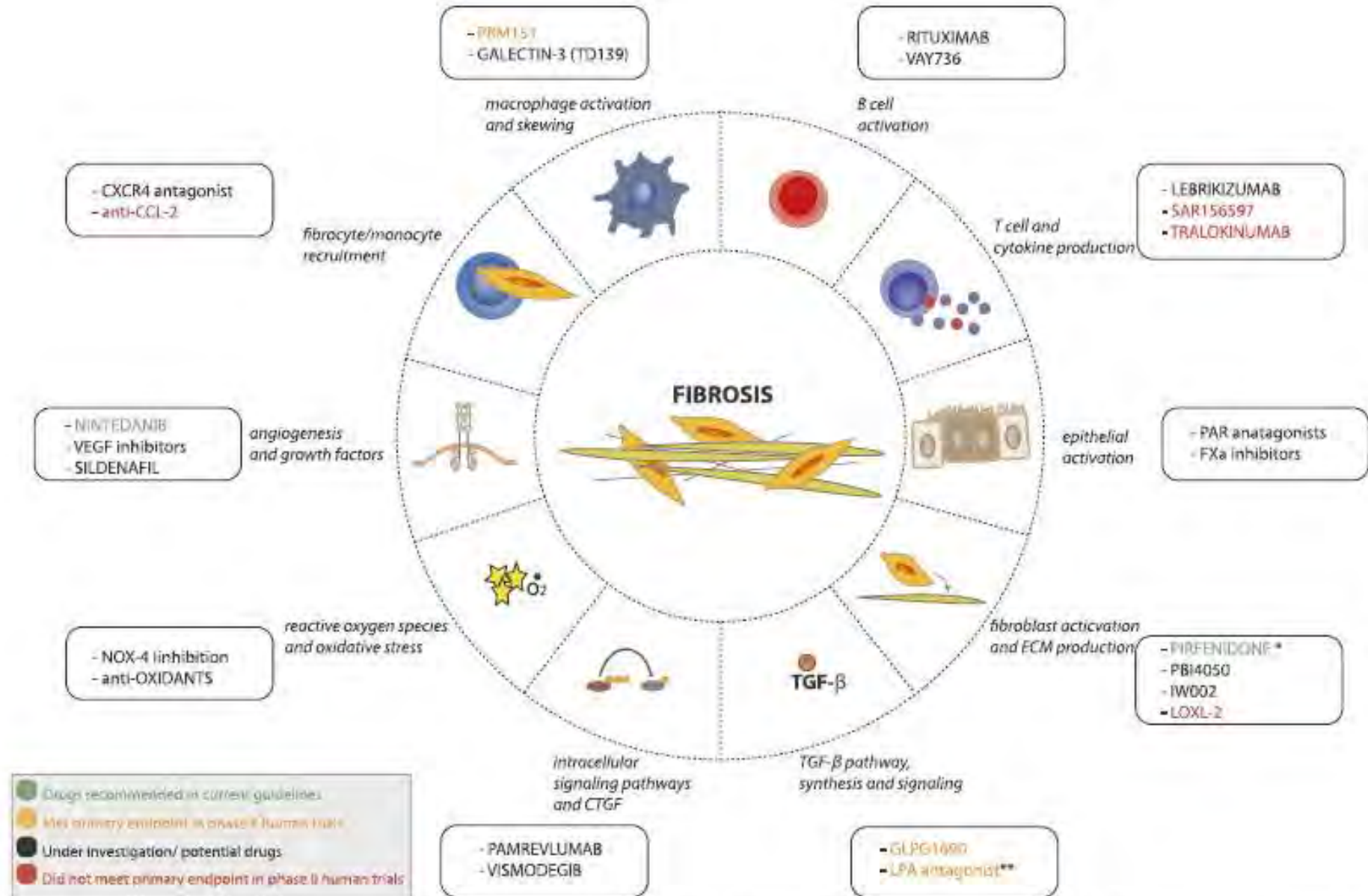


Fig. 3. Please overview of the most recent anti-inflammatory drugs and their target of different features of IPF disease pathogenesis. Depicted in green are drugs that





Paracrine effects

**Anti-inflammatory effects**

- Inhibit secretion of cytokines, chemokines and growth factors (IL-1 $\beta$ , IL-5, IL-6, IFN $\gamma$ , TNF $\alpha$ , TGF $\beta$ )
- Inhibit immunocyte infiltration
- Promote polarization of M2 macrophage

**Antifibrotic effect**

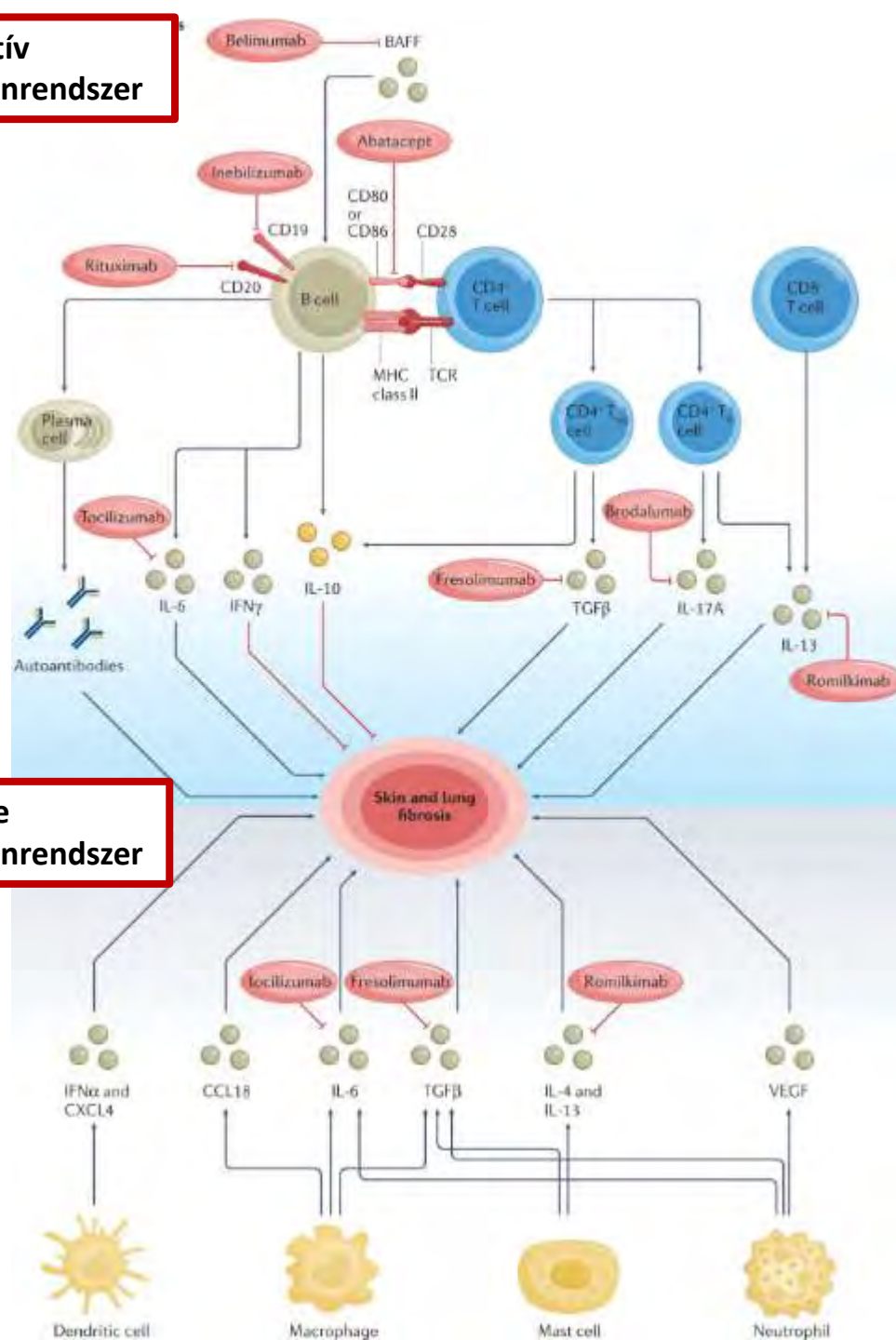
- Inhibit EMT
- Inhibit ECM deposition
- Inhibit activation of myofibroblasts
- CAR-T against FAP<sup>+</sup> cardiac myofibroblasts
- Inhibit synthesis of TIMPs, increase synthesis of MMPs

**Tissue regeneration**

- Inhibit AEC2s senescence
- Promote AEC2s proliferation
- Replacement of damaged cells
- Promote remuscularization of fibrotic tissue in the heart

**Mechanisms of mesenchymal stem cell (MSC)-based therapy for fibrosis**

**Adaptív  
immunrendszer**

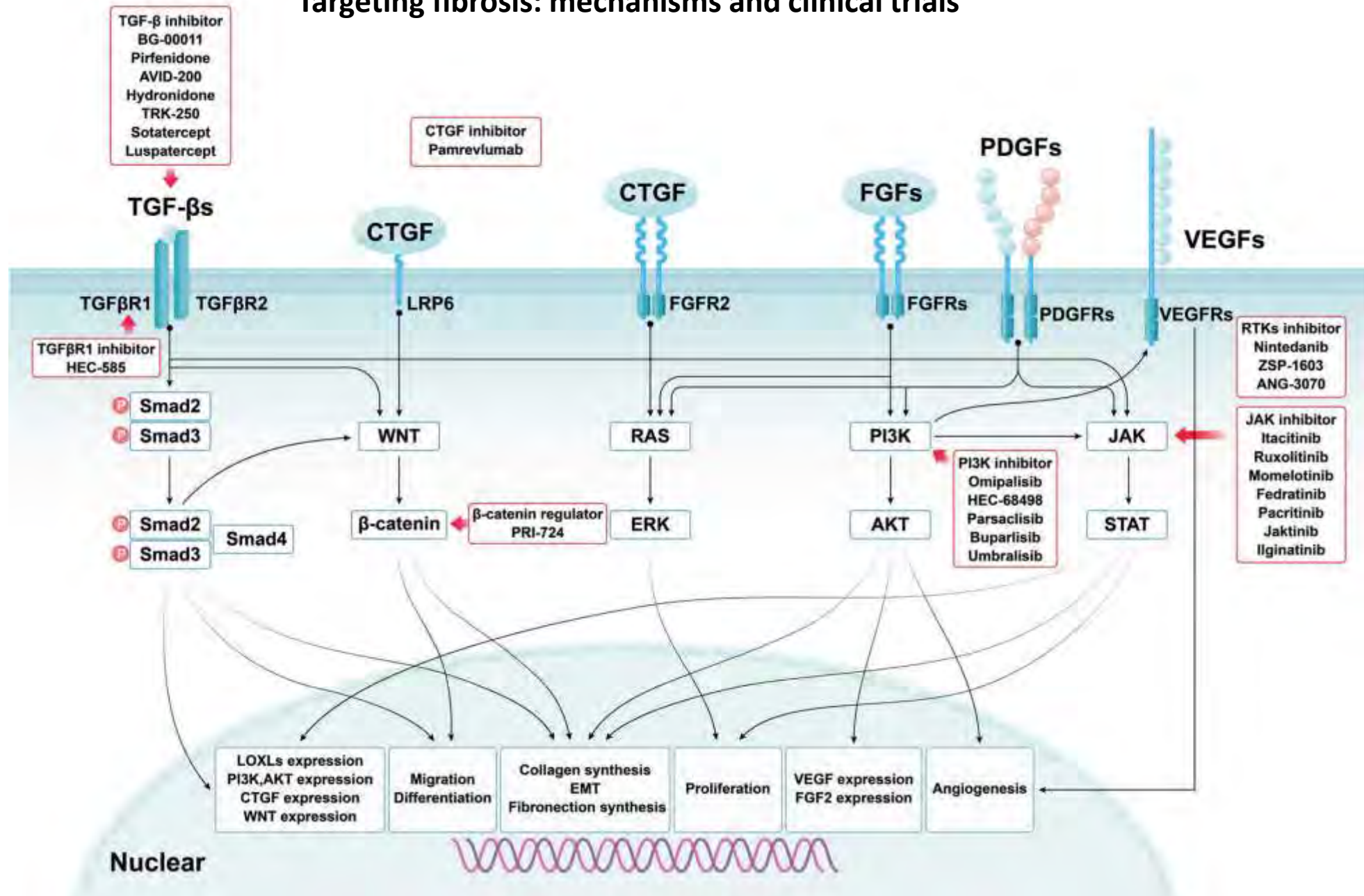


**Innate  
immunrendszer**

## Szisztémás sclerosis Terápiás célpontok



# Targeting fibrosis: mechanisms and clinical trials



ORIGINAL RESEARCH



# CAR-Macrophage Therapy Alleviates Myocardial Ischemia-Reperfusion Injury

Jiawan Wang<sup>1</sup>, Heng Du<sup>2</sup>, Wanrun Xie<sup>3</sup>, Jinmiao Bi<sup>4</sup>, Hao Zhang<sup>5</sup>, Xu Liu<sup>6</sup>, Yuhan Wang, Shaolong Zhang, Anhua Lei, Chuting He, Hailong Yuan, Jiahe Zhang<sup>7</sup>, Yujing Li, Pengfei Xu, Siqi Liu<sup>8</sup>, Yanan Zhou, Jianghua Shen<sup>9</sup>, Jingdong Wu<sup>10</sup>, Yihong Cai<sup>11</sup>, Chaofan Yang<sup>12</sup>, Zeya Li, Yingxin Liang<sup>13</sup>, Yang Zhao<sup>14</sup>, Jin Zhang, Moshi Song<sup>15</sup>

Circulation Research. 2024;135:1161–1174

Cell

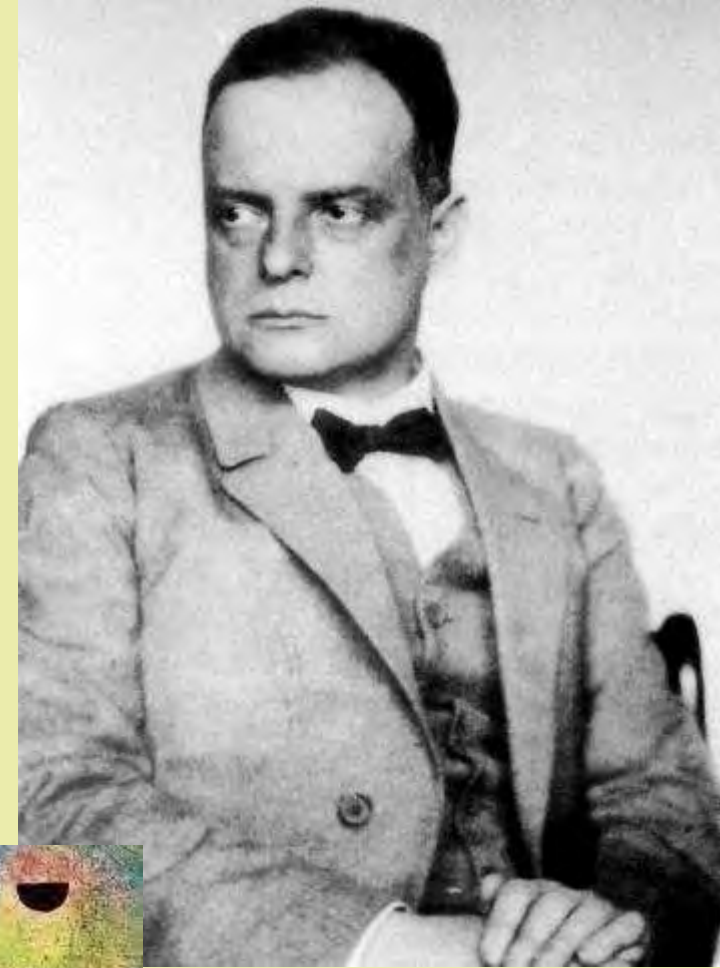
Article

## Allogeneic CD19-targeted CAR-T therapy in patients with severe myositis and systemic sclerosis

Cell 187, 4890–4904, September 5, 2024



**KÖSZÖNÖM A  
FIGYELMET!**



1879-1940

