

A fibrosis molekuláris pathogenezise

Szűcs Gabriella

Debreceni Egyetem

ÁOK Reumatológiai Tanszék

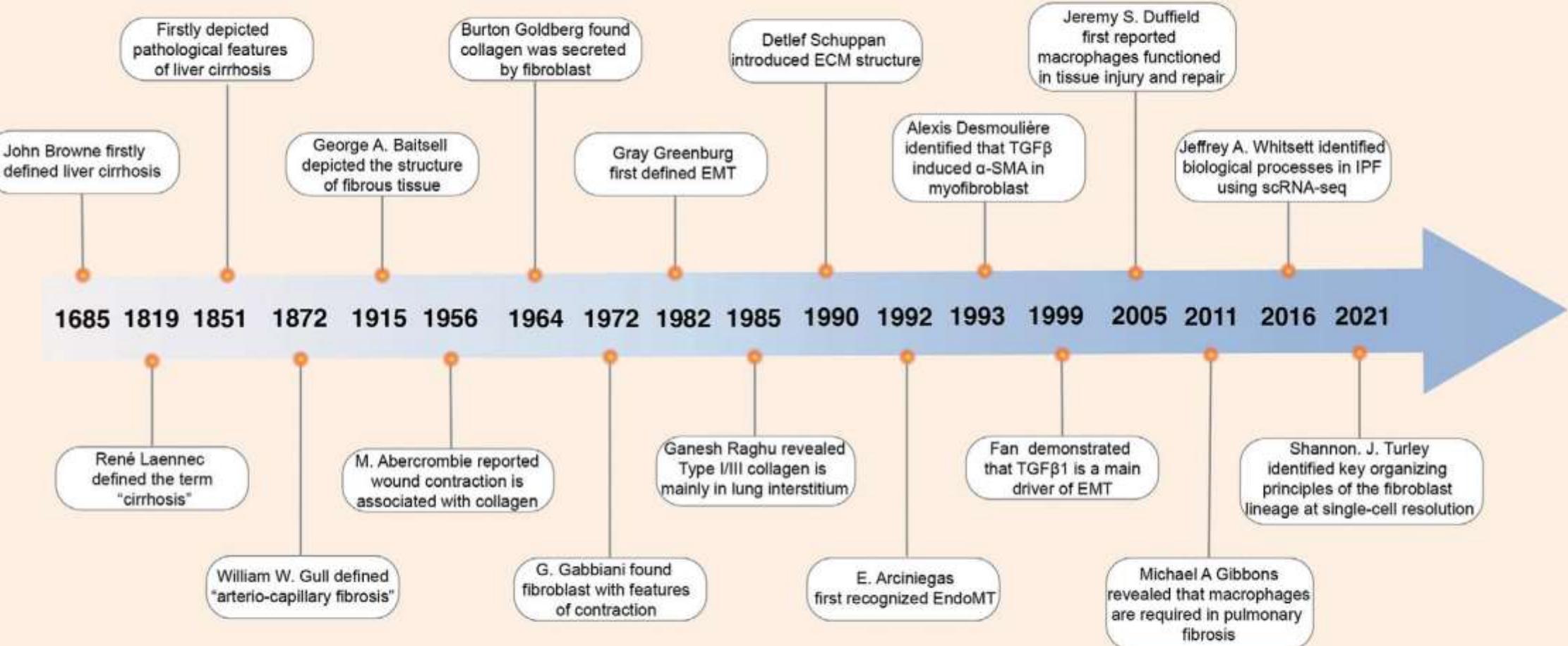
KK Reumatológiai és Immunológiai Klinika



**DEBRECENI
EGYETEM**



Sejtek közötti és sejten belüli interakciók szerepe az immunválasz kialakításában és szabályozásában
PhD kurzus, SE, Reumatológiai és Klinikai Immunológiai Tanszék
2025. április 3-4.

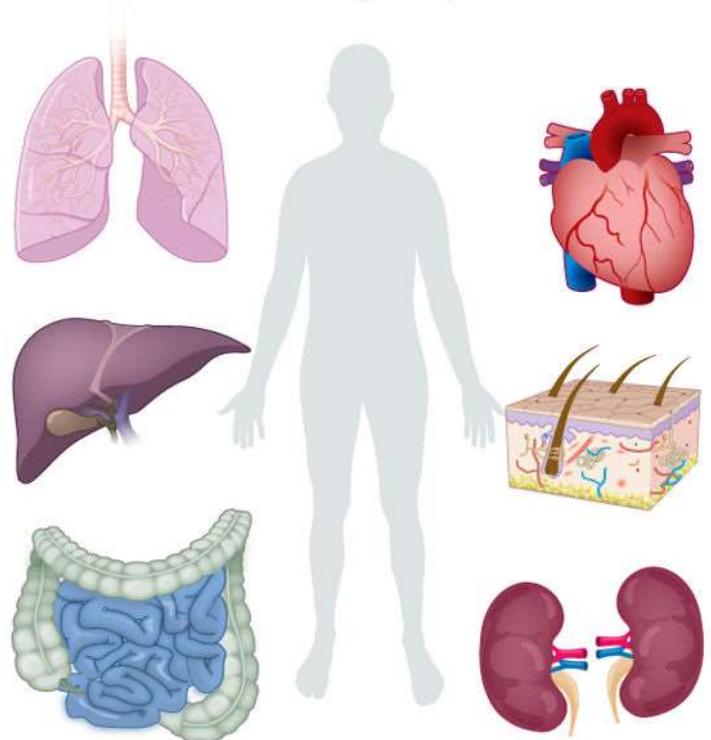


Timeline of the milestones in the investigation of fibrosis over the past 300 years

FIBROSIS: FROM MECHANISMS TO MEDICINES

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

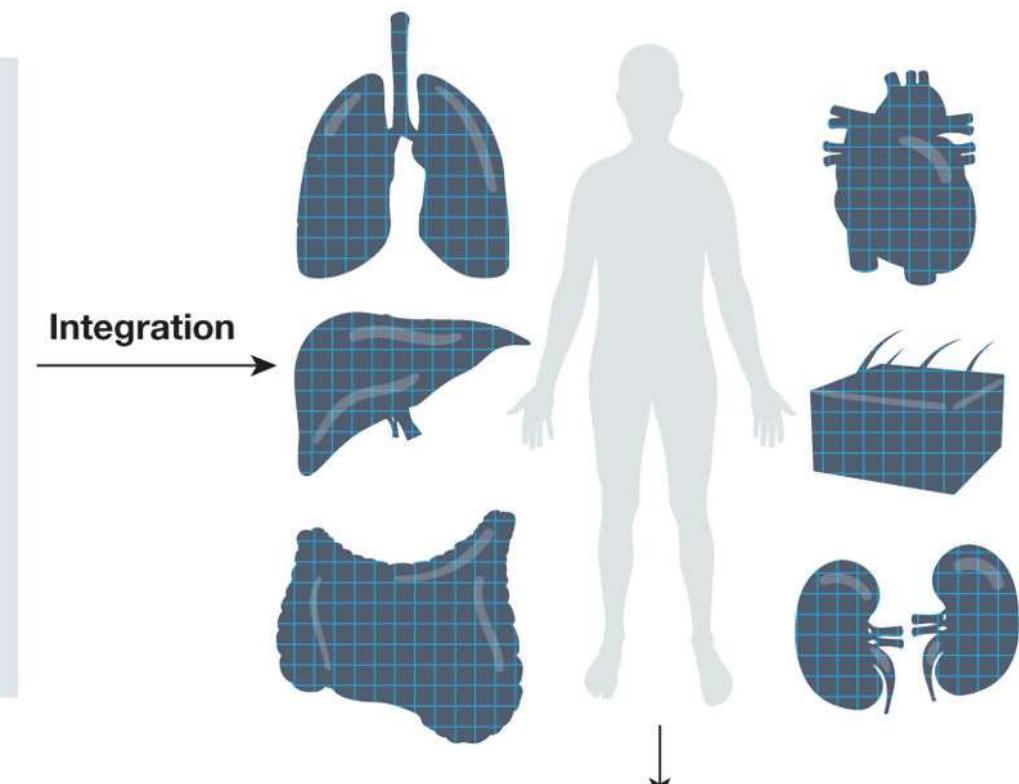
Fibrotic organ system



Multi-modal single-cell approaches

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

Integrated single-cell maps of organ fibrosis



Identification and interrogation
of cell subpopulations and
antifibrotic targets

FIBROSIS: FROM MECHANISMS TO MEDICINES

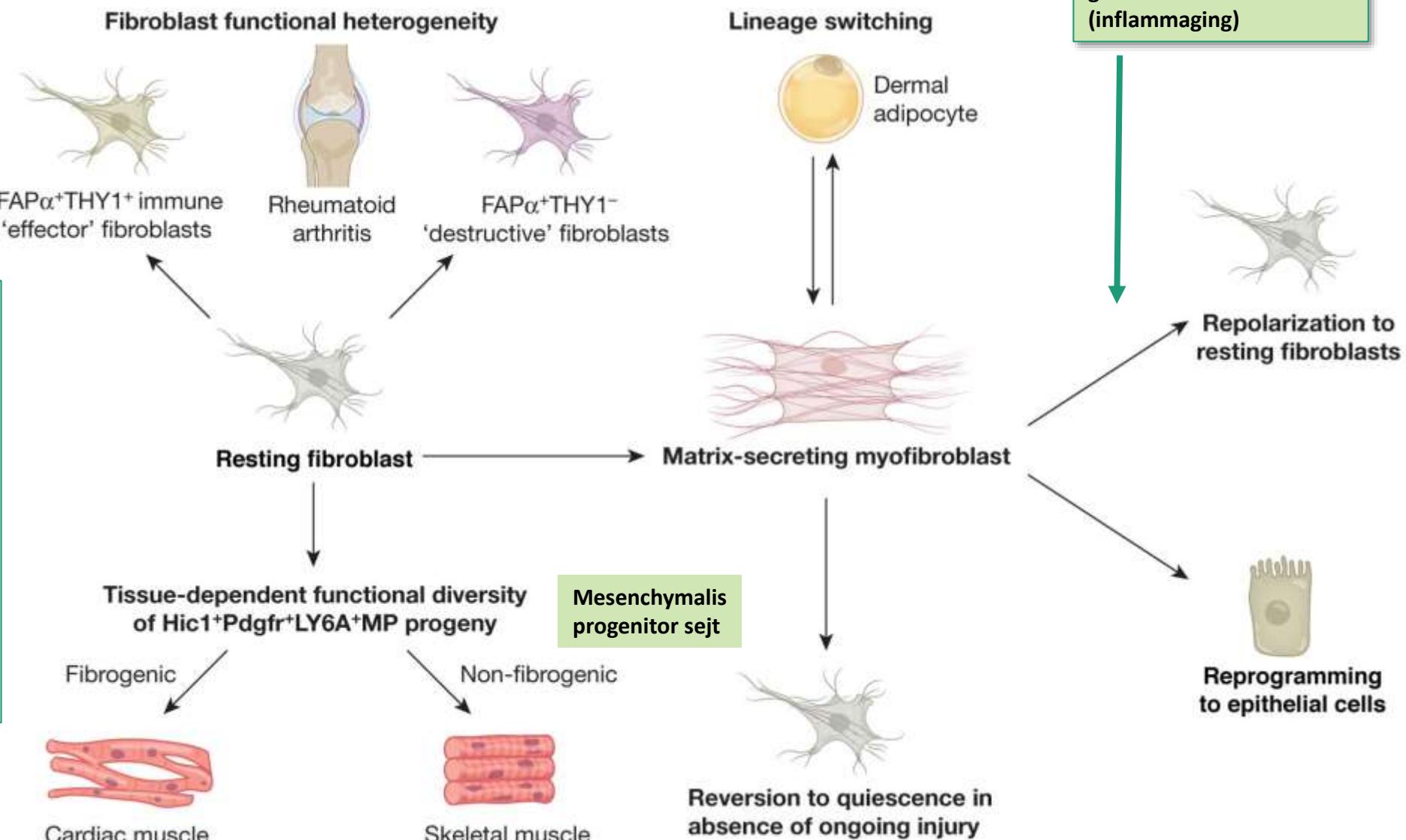
Henderson NC et al. Nature. 2020 November ; 587(7835): 555–566.

Fibrotikus szövet kialakúsa – 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

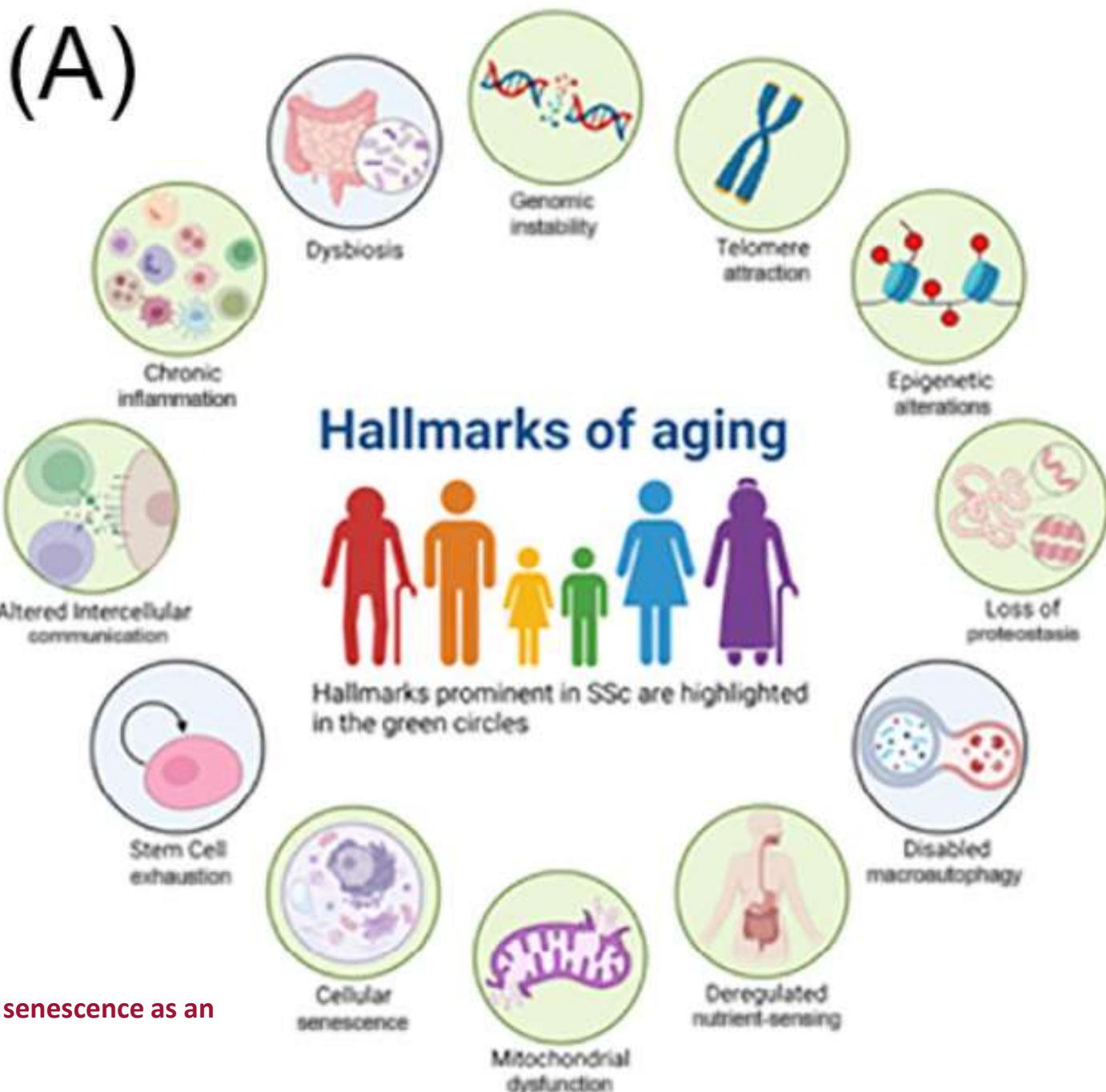
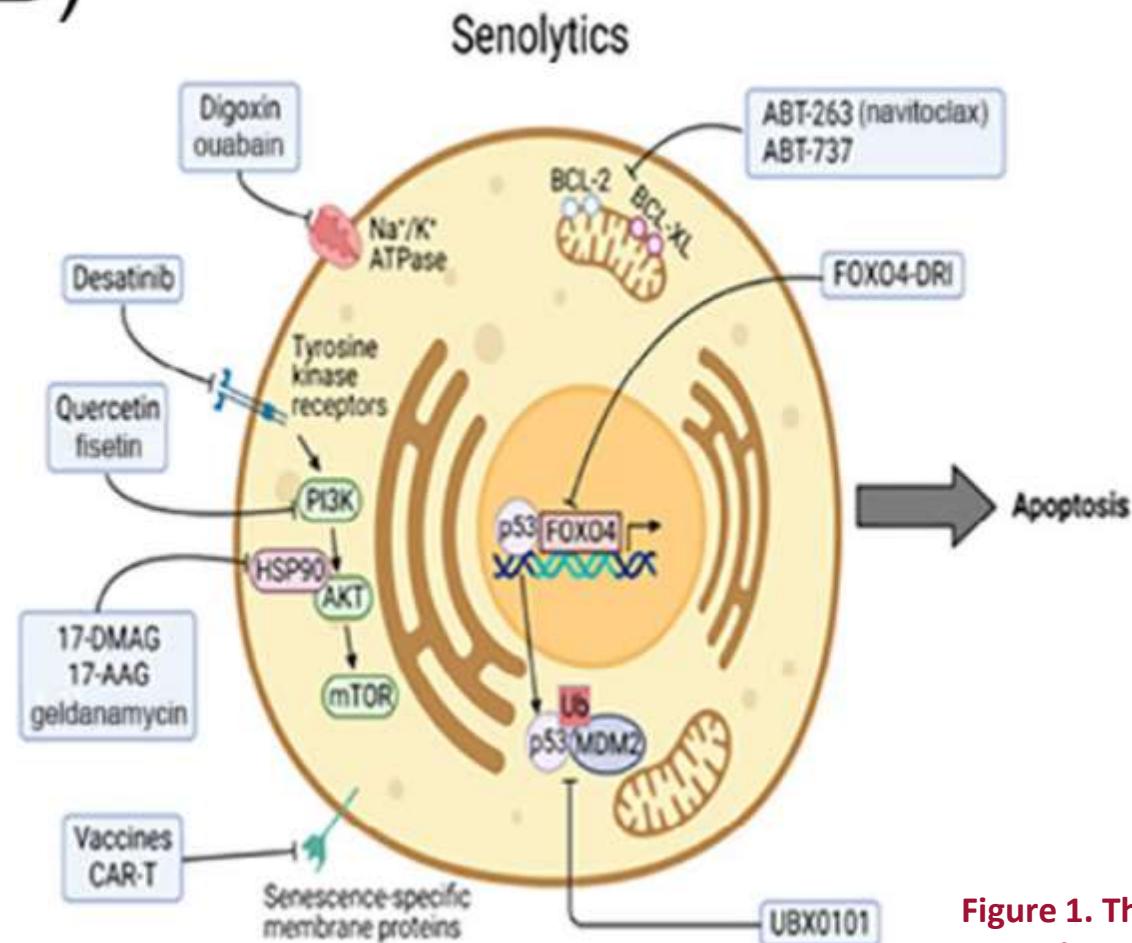


Figure 1. The 12 hallmarks of aging and targeting cellular senescence as an emerging novel therapeutic strategy for fibrosis

Senescence and tissue fibrosis: opportunities for therapeutic targeting

(B)



(C)

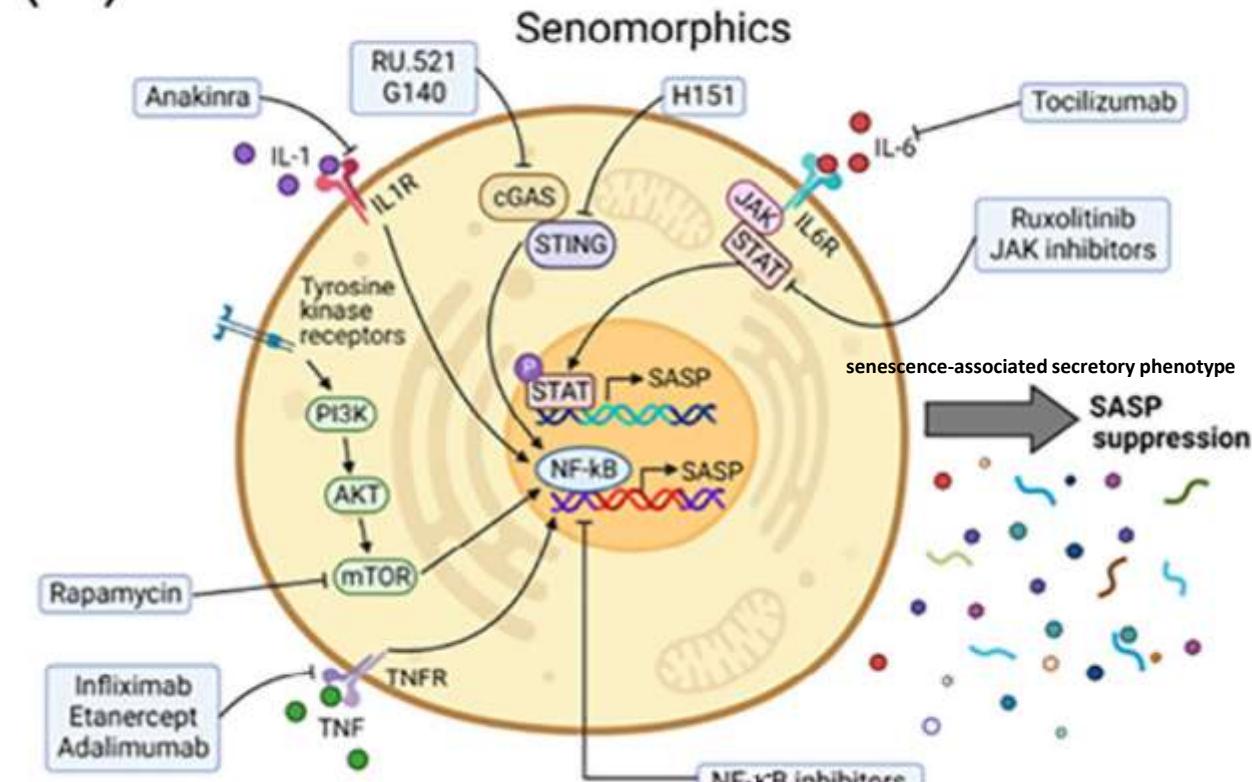
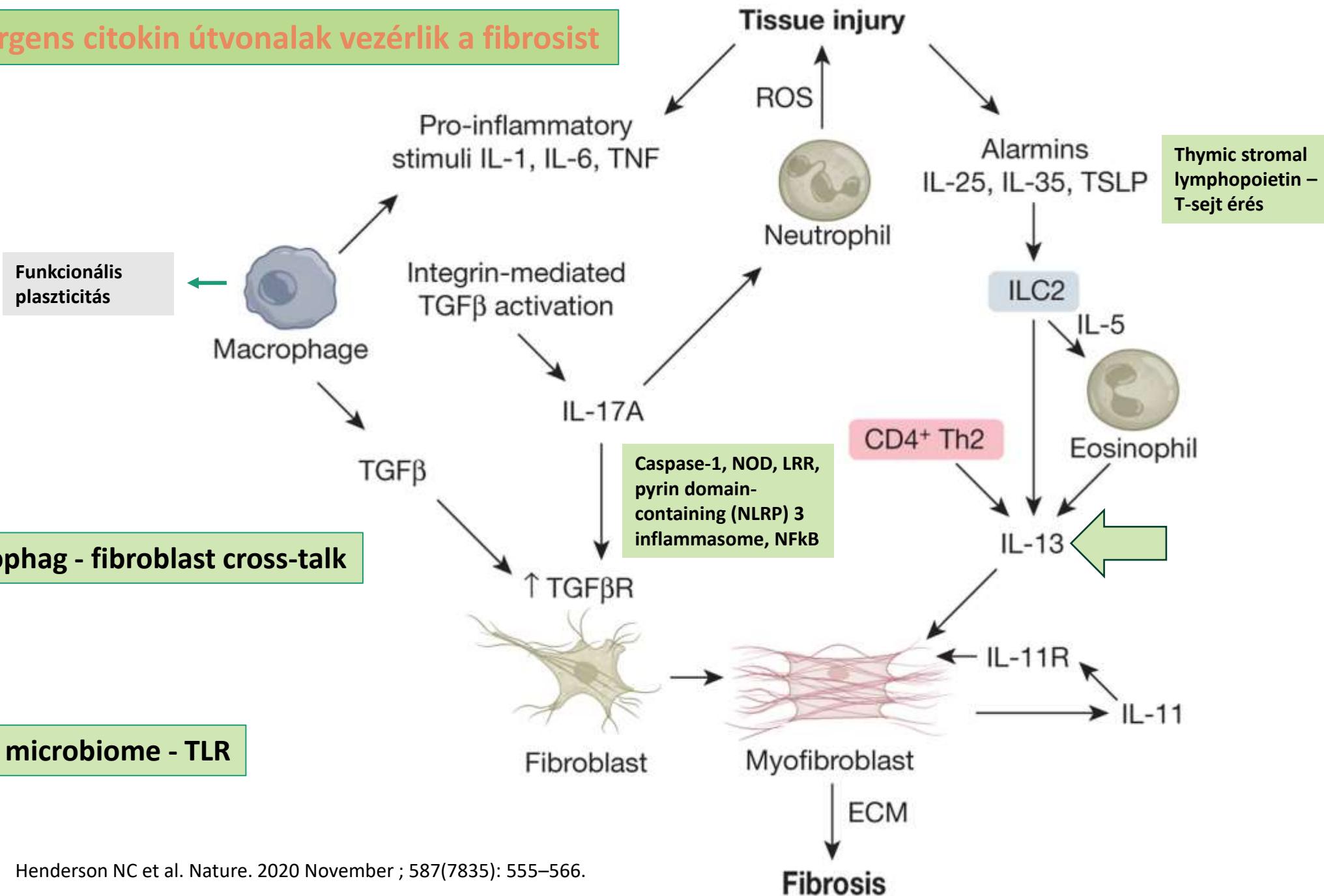
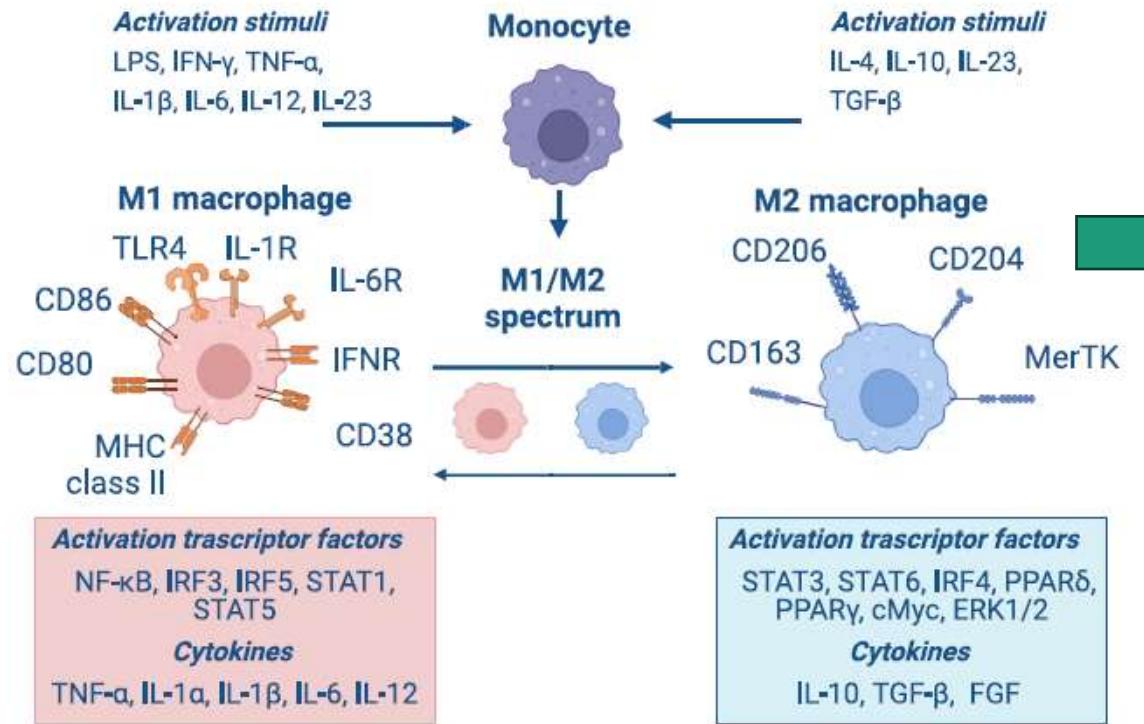


Figure 1. The 12 hallmarks of aging and targeting cellular senescence as an emerging novel therapeutic strategy for fibrosis

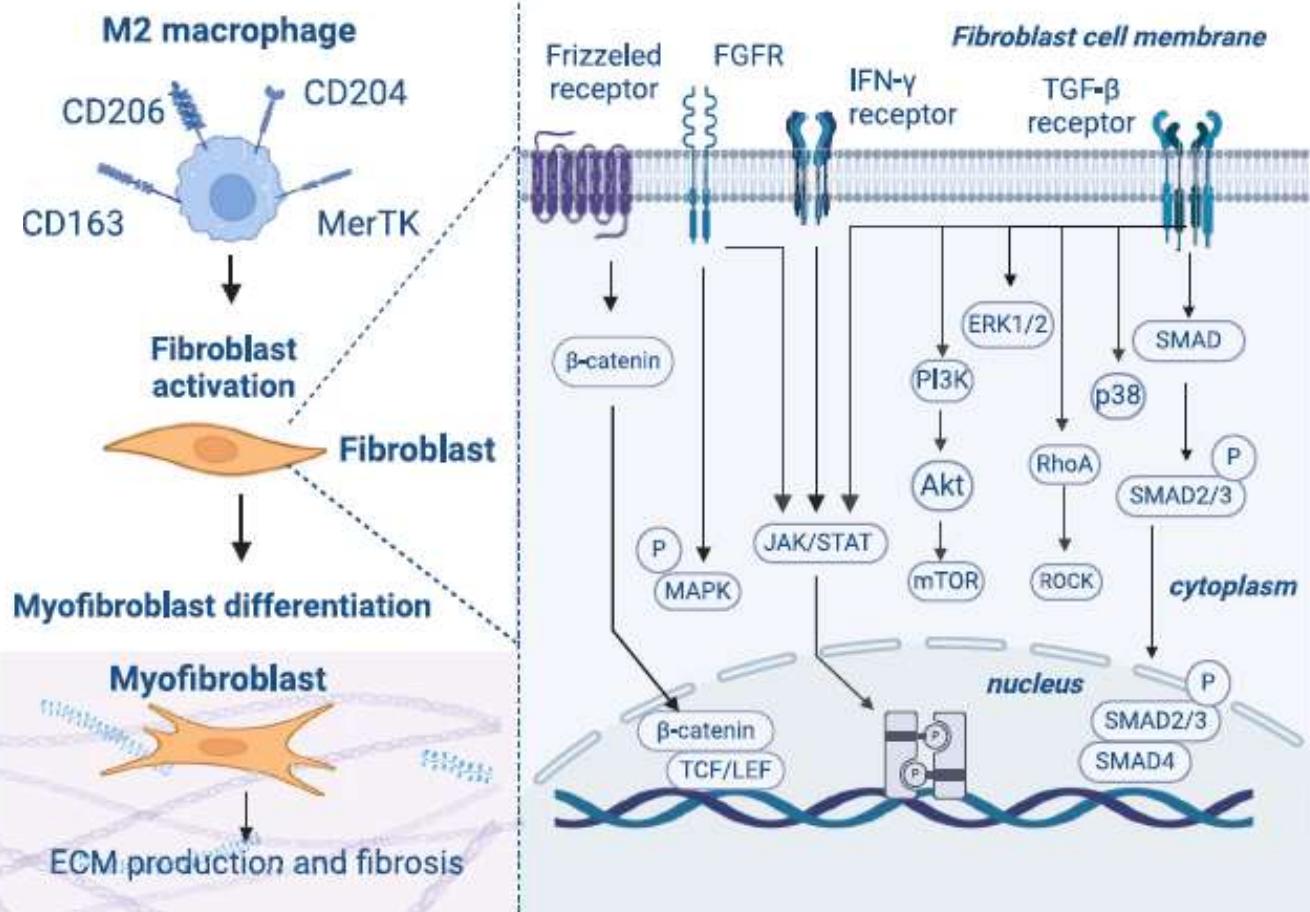
Divergens citokin útvonalak vezérlék a fibrosist



Monocyte-derived-macrophages



Macrophag - fibroblast cross-talk



The NLRP3 inflammasome in fibrosis and aging: The known unknowns

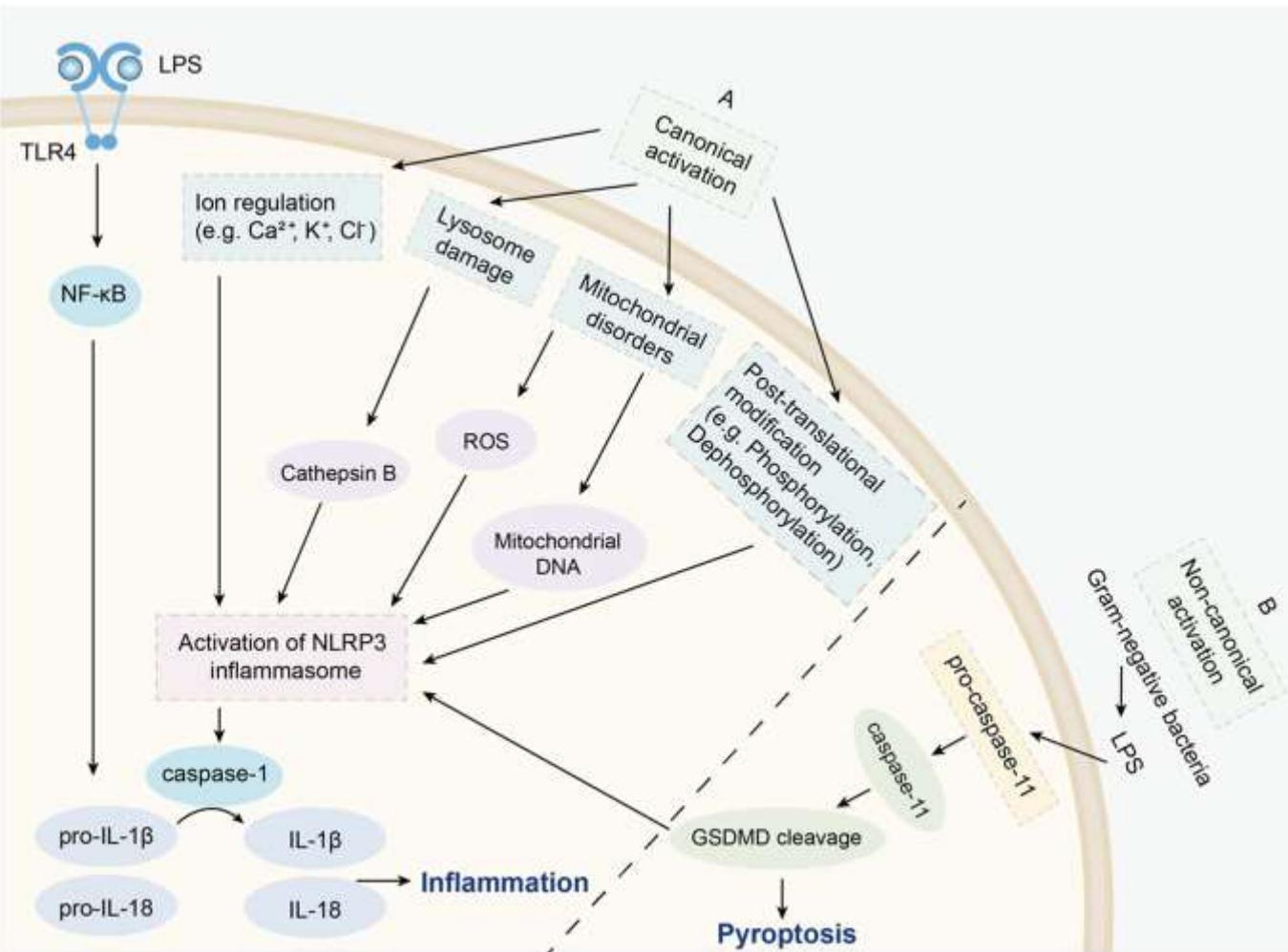
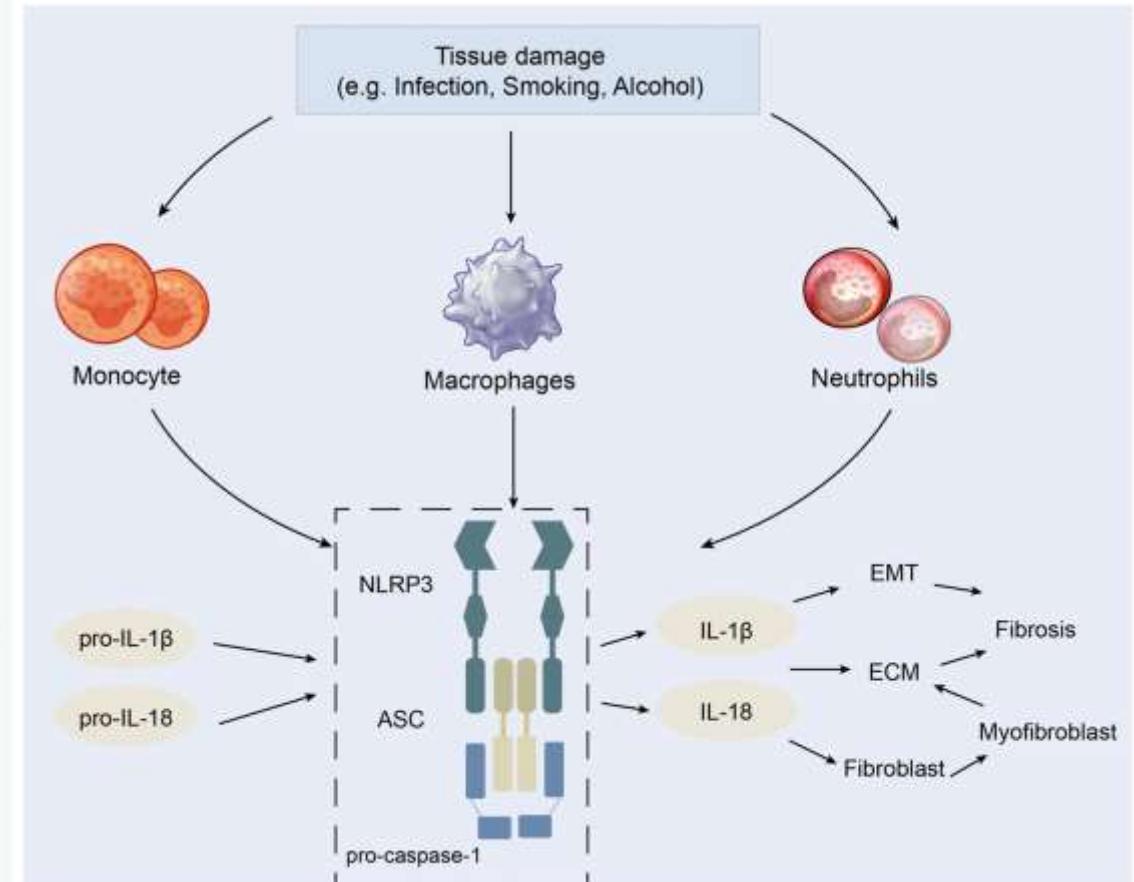


Fig. 1. Regulatory mechanism of the NLRP3 inflammasome.

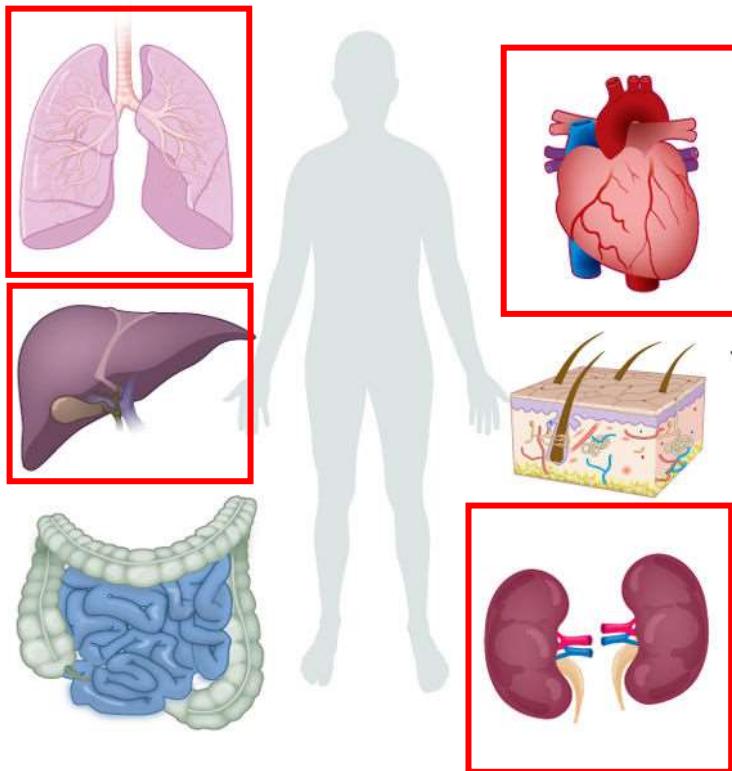


ASC: apoptosis-associated speck-like protein

FIBROSIS: FROM MECHANISMS TO MEDICINES

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

Fibrotic organ system



Szisztemás sclerosis
IgG4-related betegség

Multi-modal single-cell approaches

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

Mesenchymalis
sejtek
Profibrogen
alveolaris
macrophagok

Integrated single-cell
maps of organ fibrosis

Integration

Hepatic
stellate cells
(TREM)2+CD9+
macrophagok

Colon
mesenchymalis
eredetű fibroblasok

Az ipari világ halálozásának 45%-a

Identification and interrogation
of cell subpopulations and
antifibrotic targets

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



Genetikai vizsgálatok vizsgálatok:

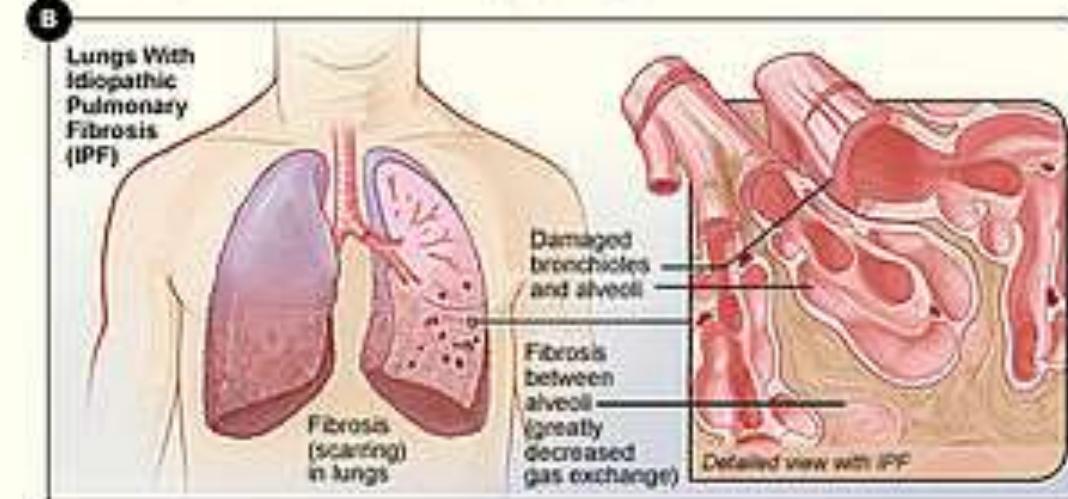
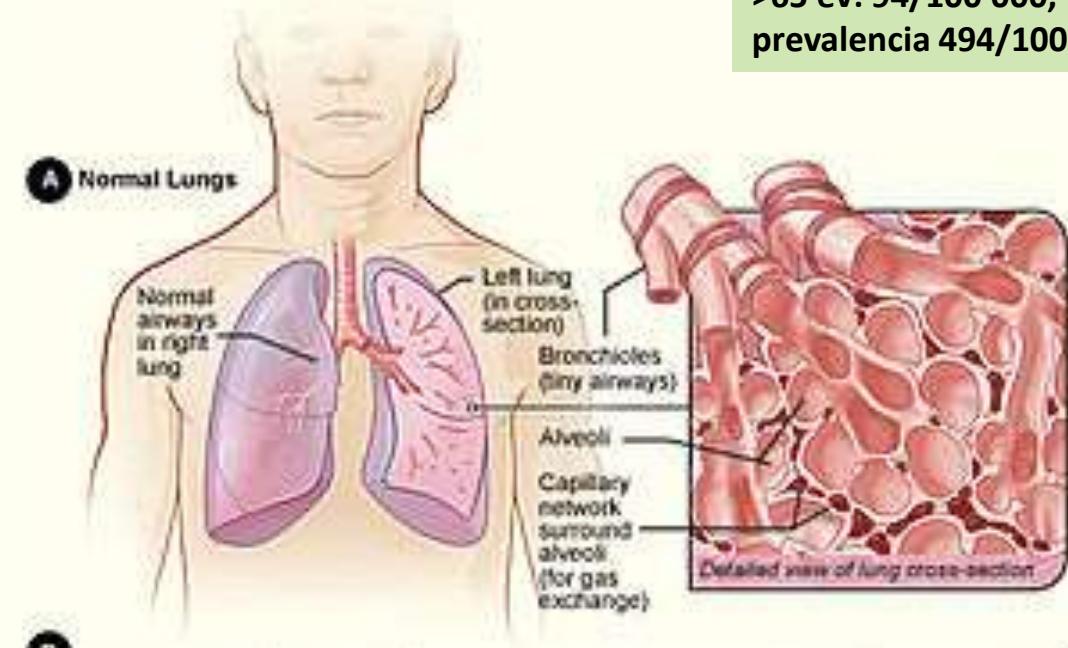
FAM13A (4q22), *DSP* (6p24), *OBFC1* (10q24)

WNT, *TGF*, *NOTCH*, sonic hedgehog (*SHH*)

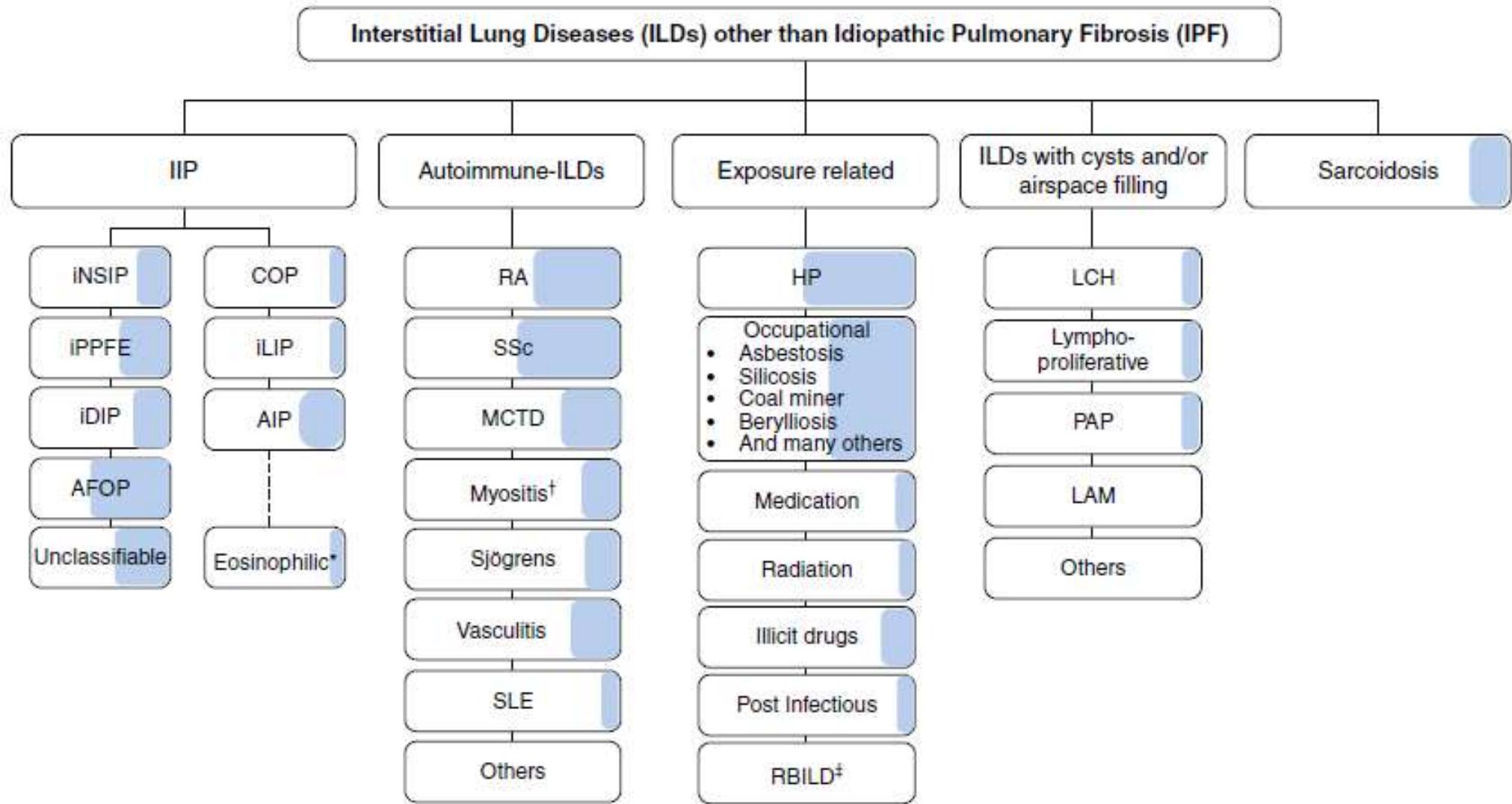
TOLLIP (Toll-interacting protein), the inhibitory protein of the Toll-like receptor (TLR)

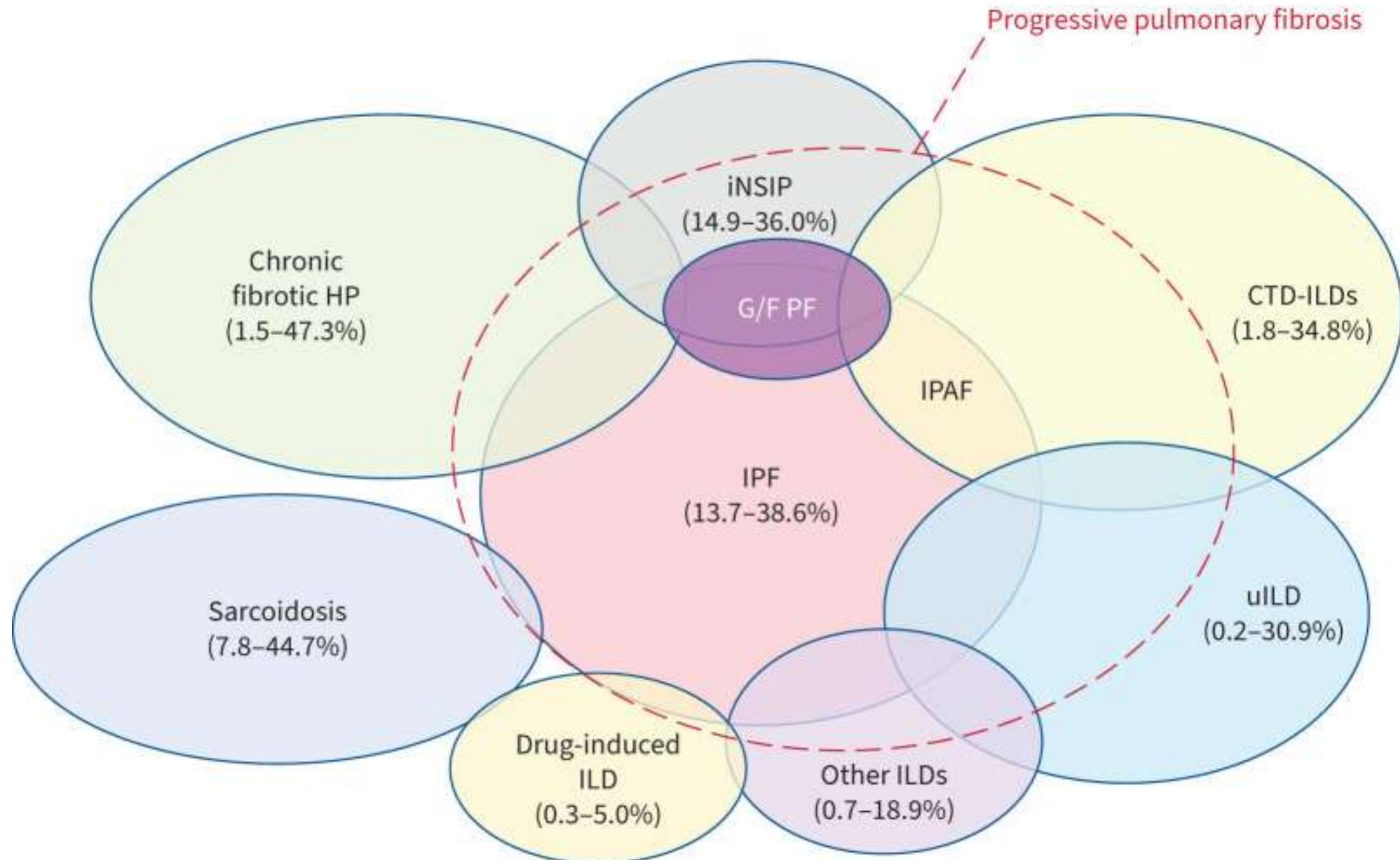
*DRB1*15:01* and *DQB1*06:02*

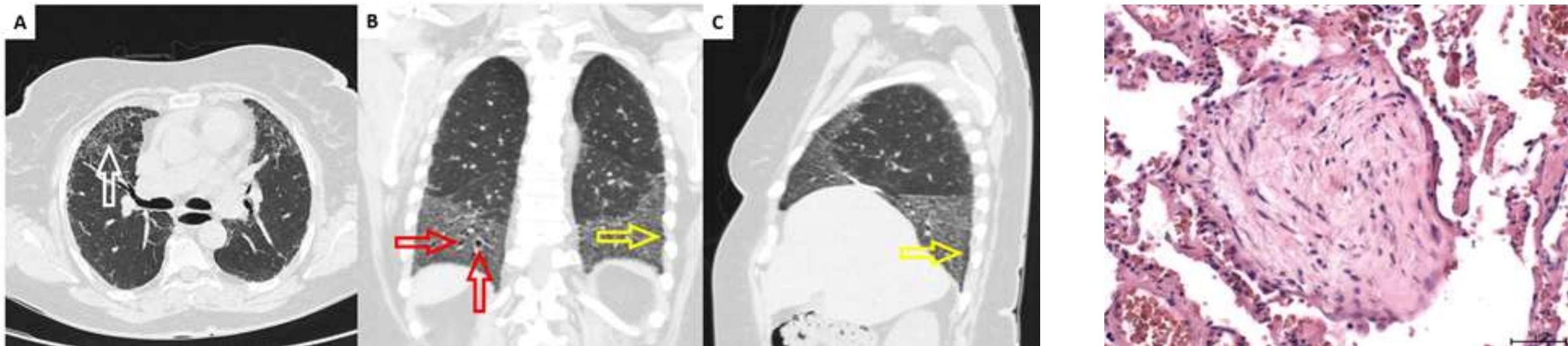
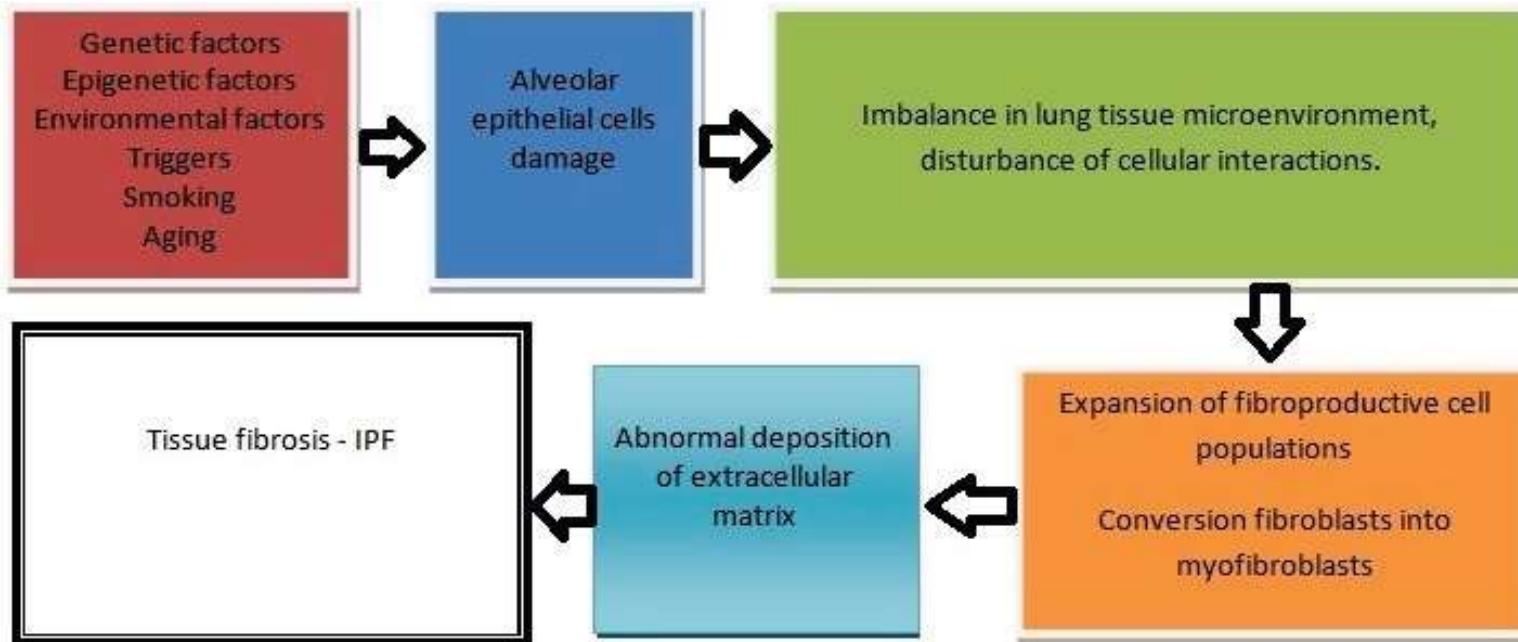
MUC5B gén



Az ILD klasszifikációja







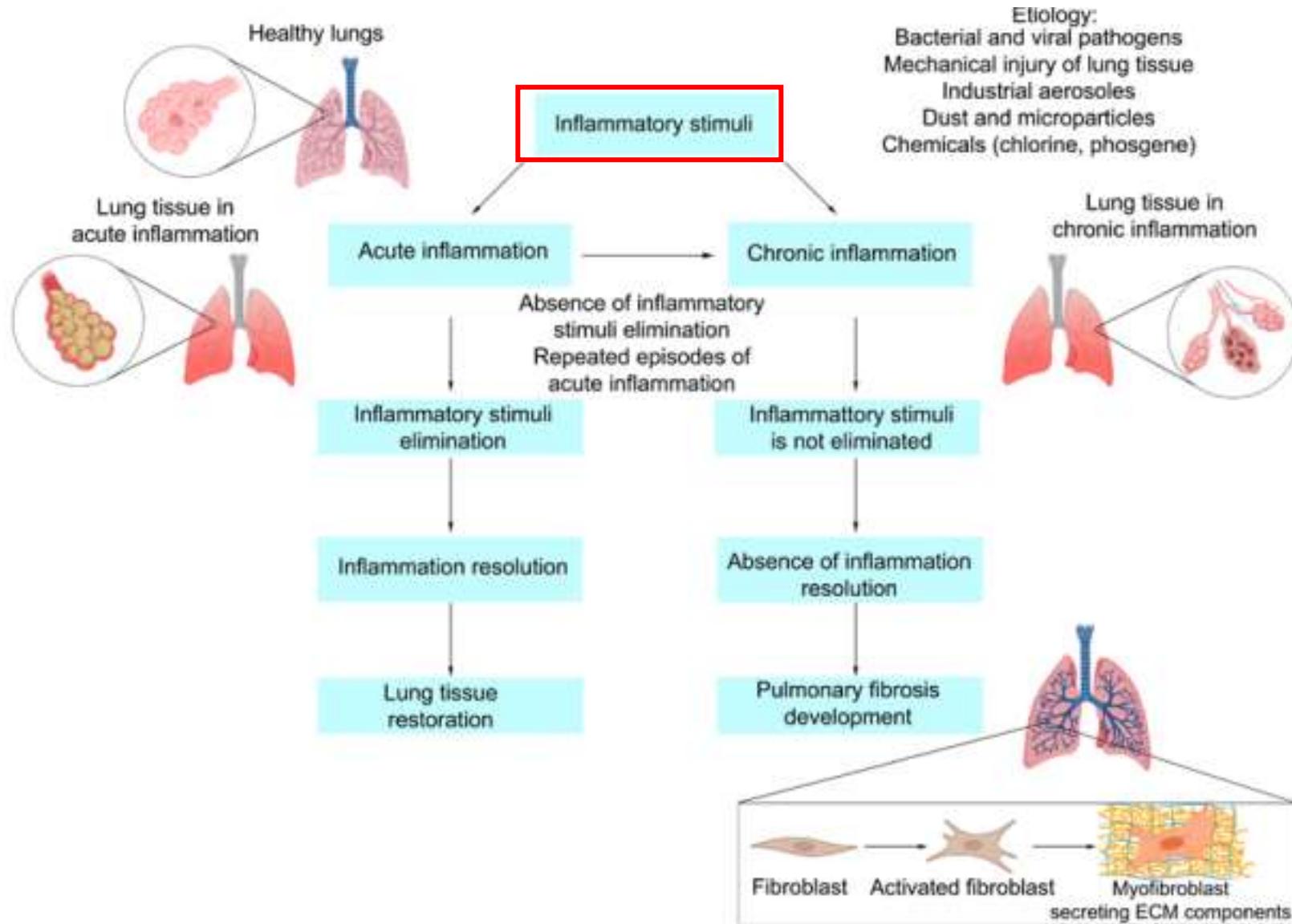
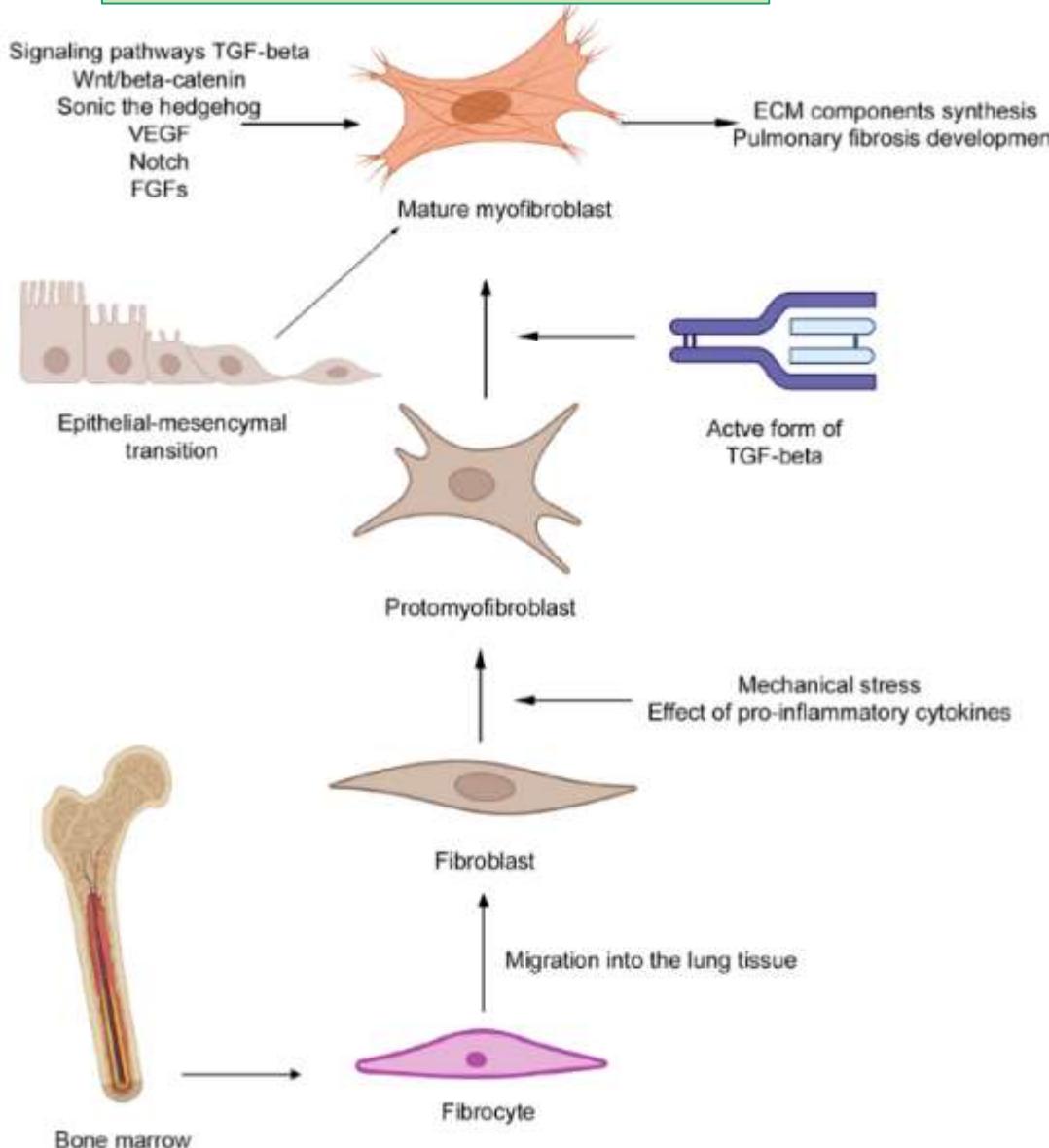


Figure 1. General scenarios of lung inflammation development: variants and outcomes.

Fibrocyta – myofibroblast átalakulás



Szignál-transzdukció folyamata

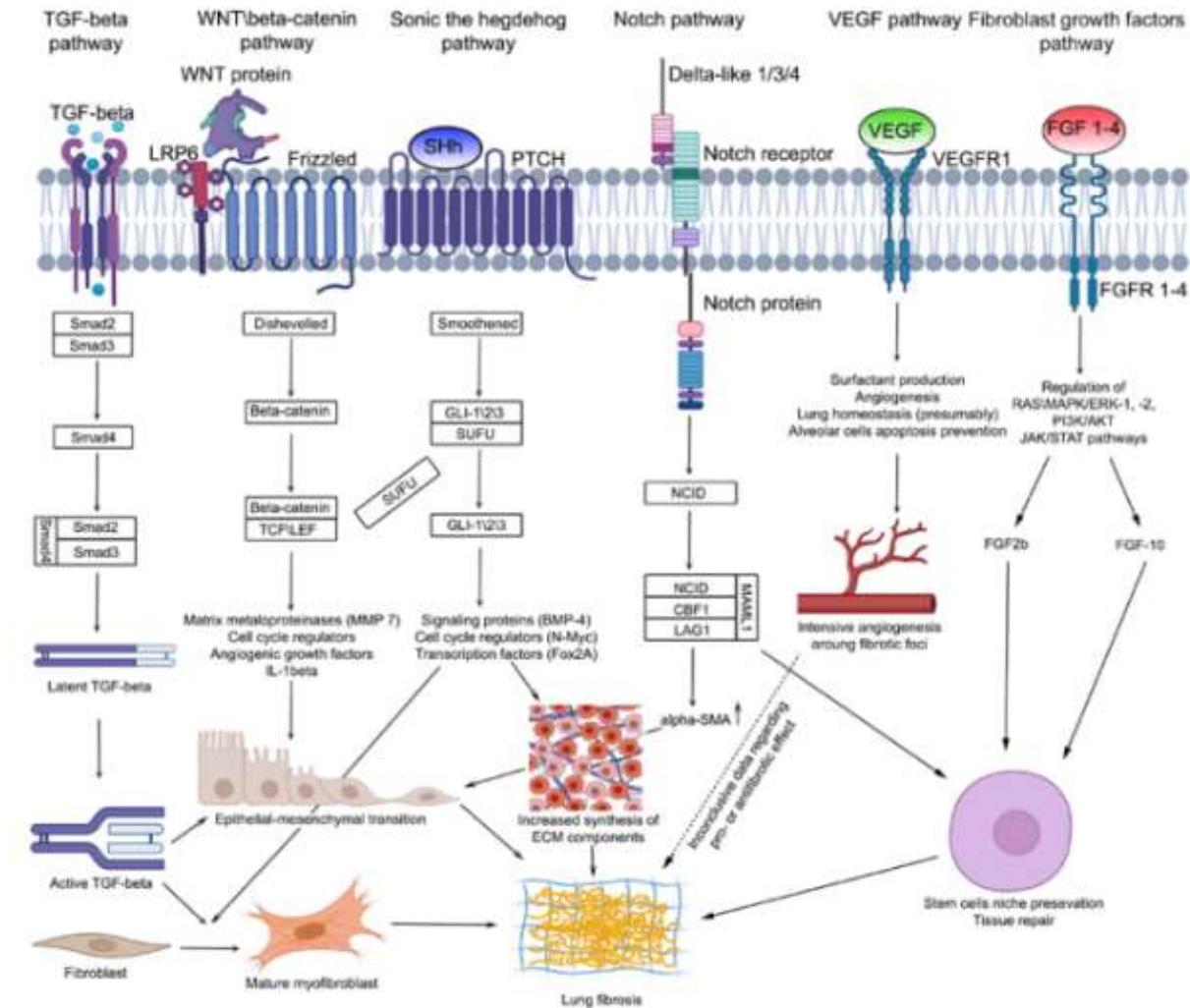


Figure 3. Overview of particular signaling pathways regulating pulmonary fibrosis development.

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

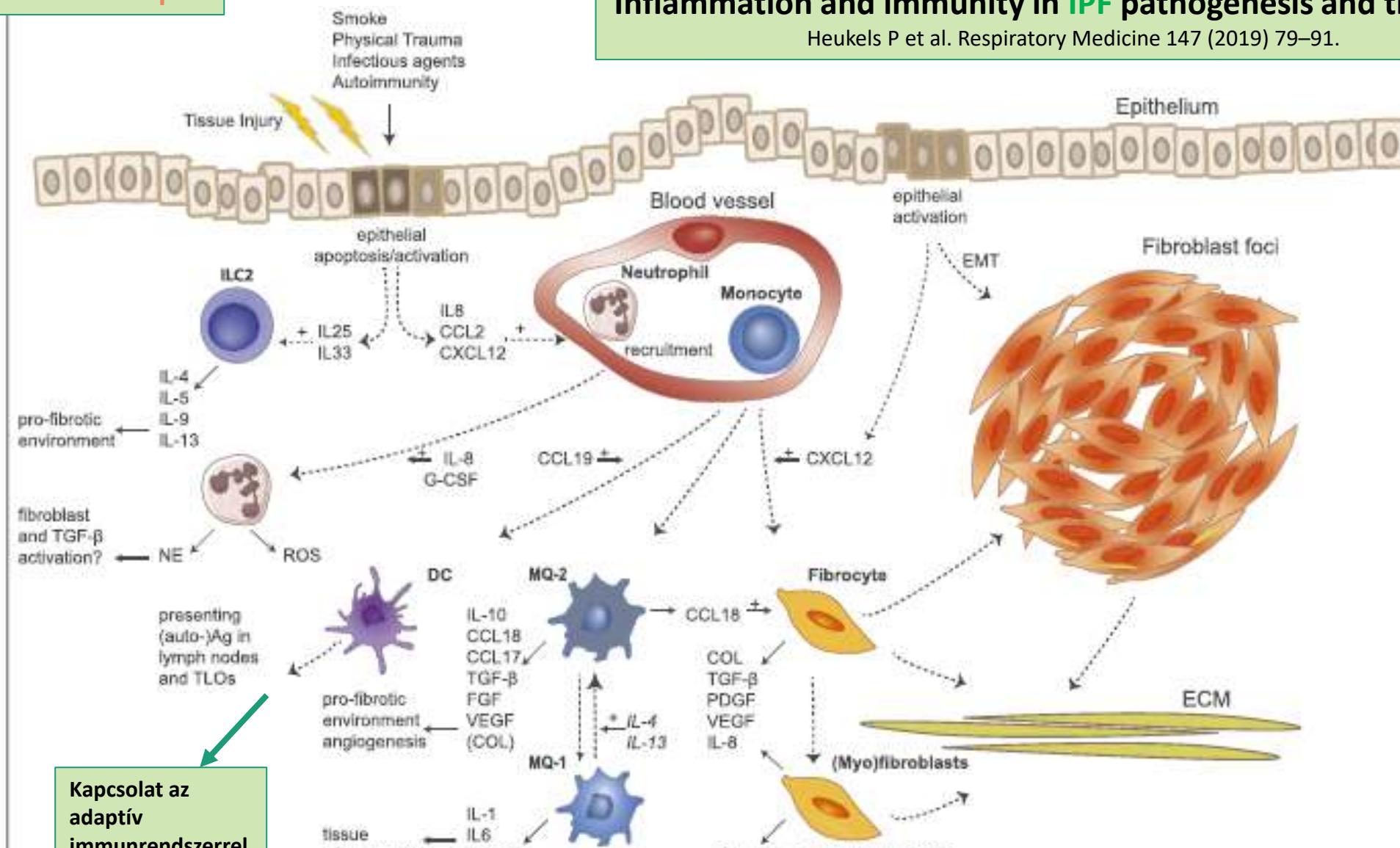


Fig. 1. Schematic overview of the role of the innate immune system in IPF pathogenesis. Abbreviations: EMT = epithelial–mesenchymal transition, II

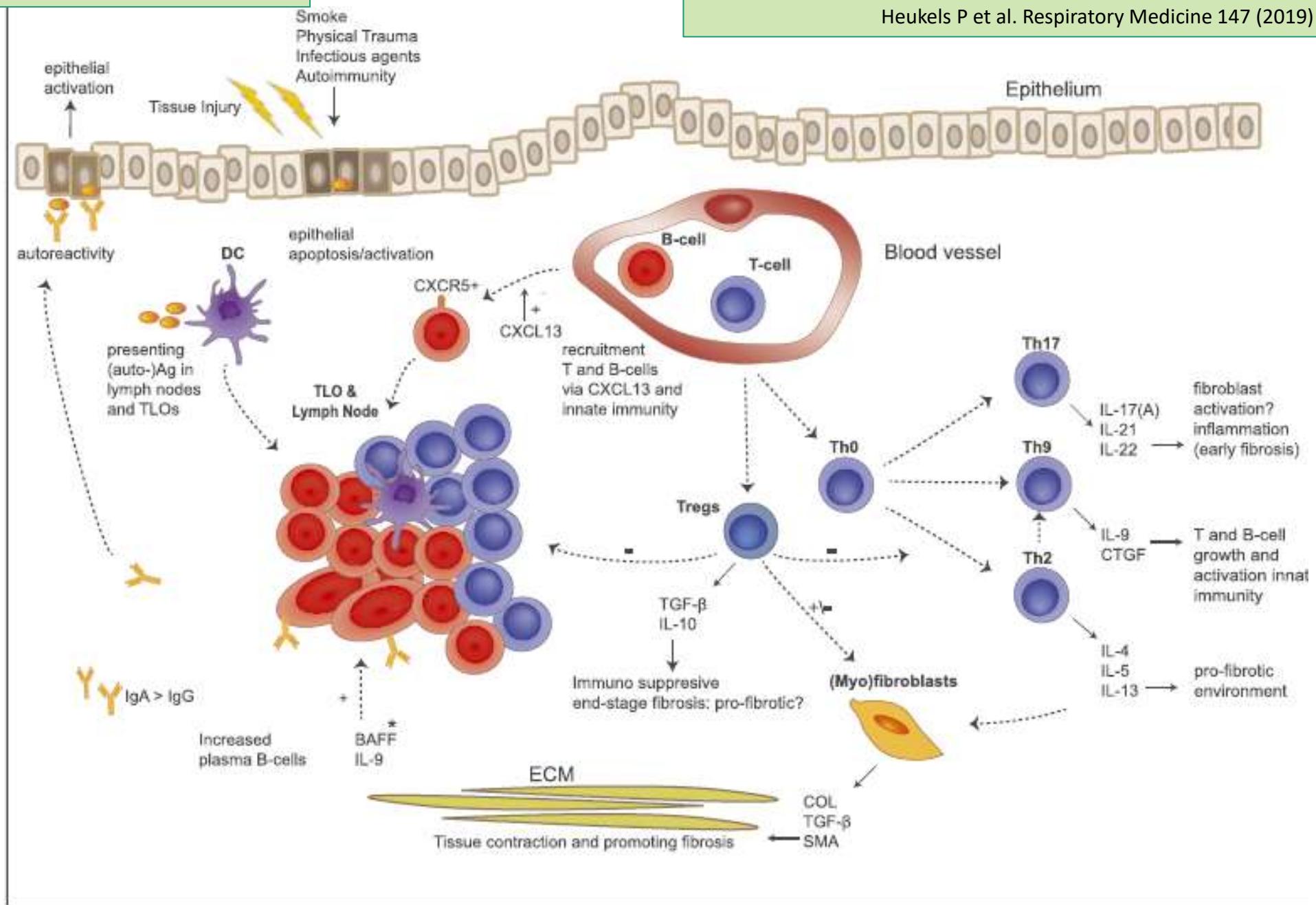
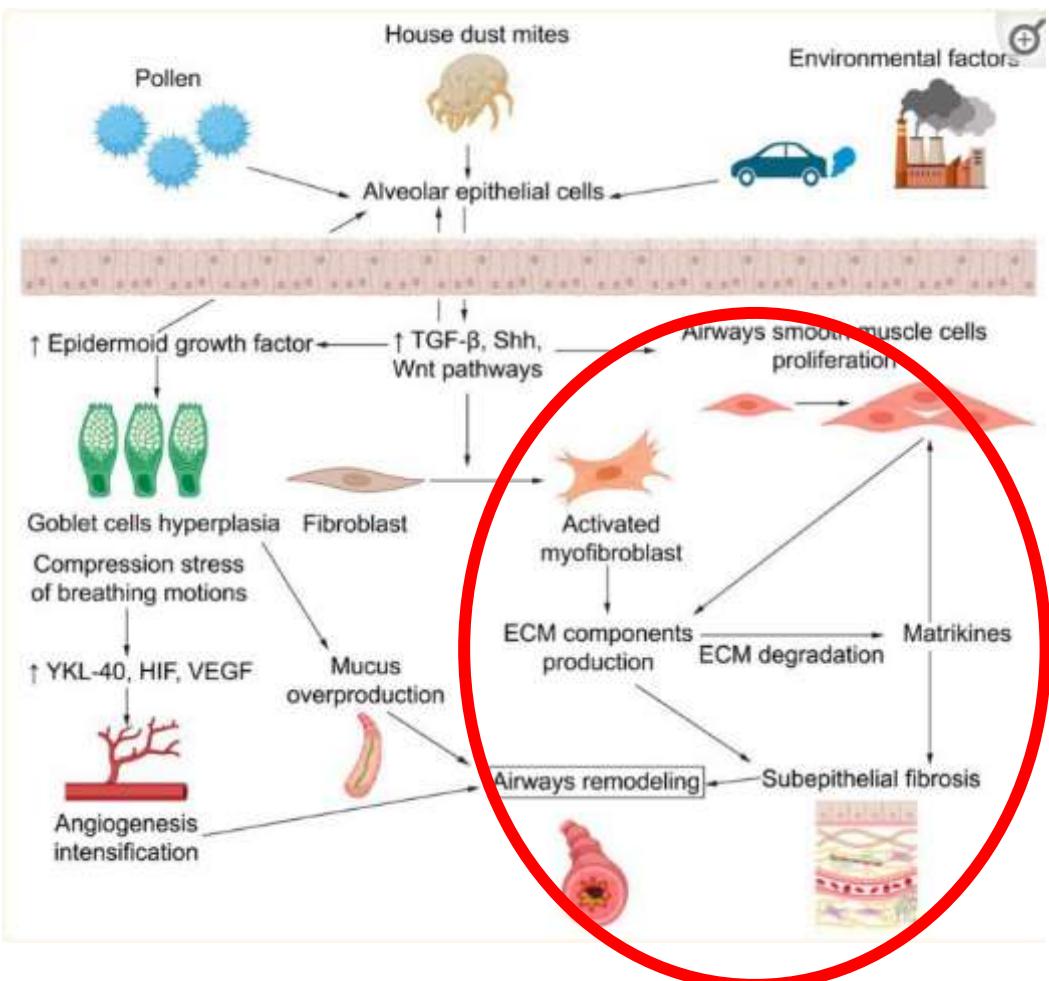
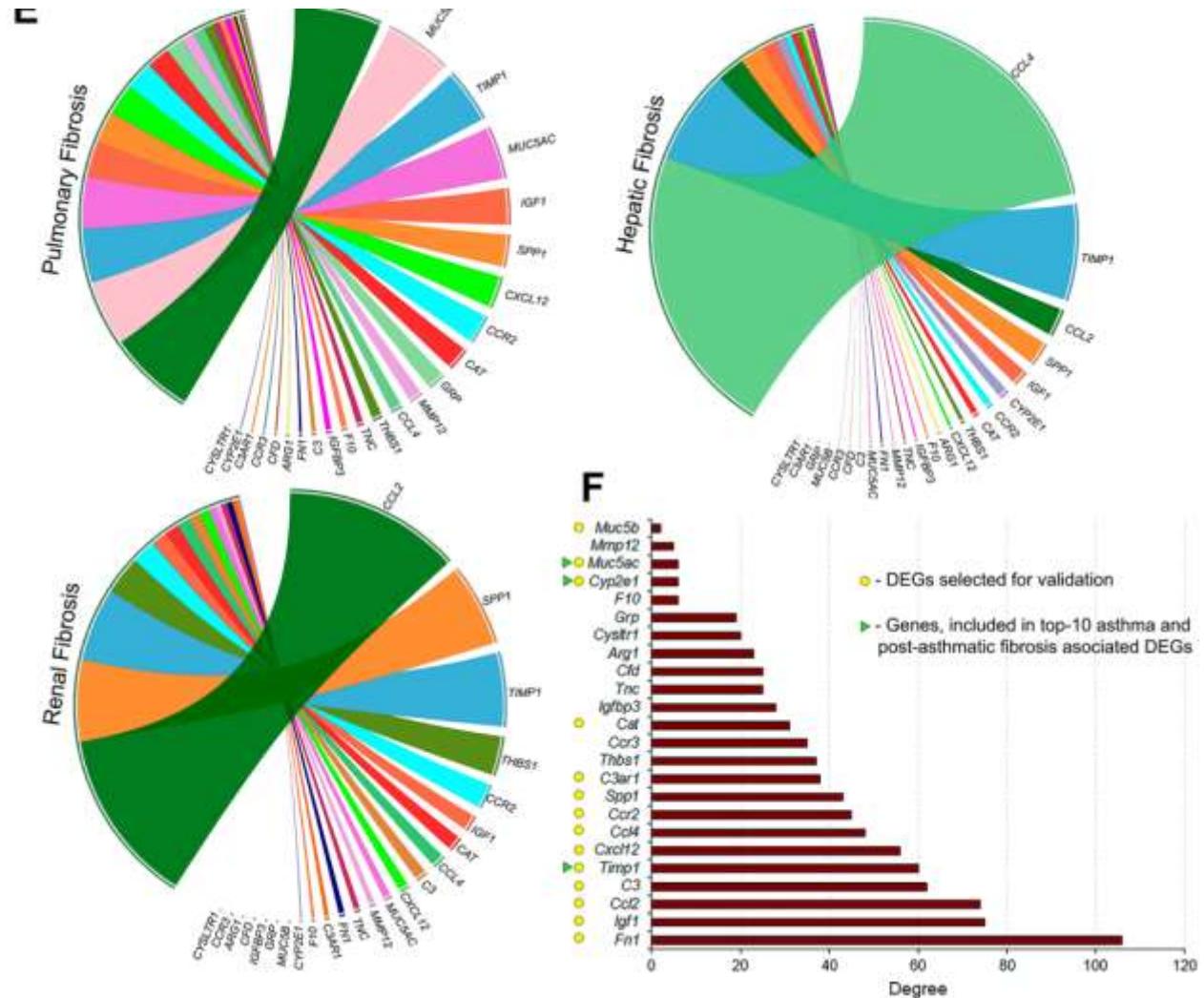


Fig. 2. Schematic overview of the role of the **adaptive immune system** in IPF pathogenesis. * also known as B lymphocyte stimulator (BL)

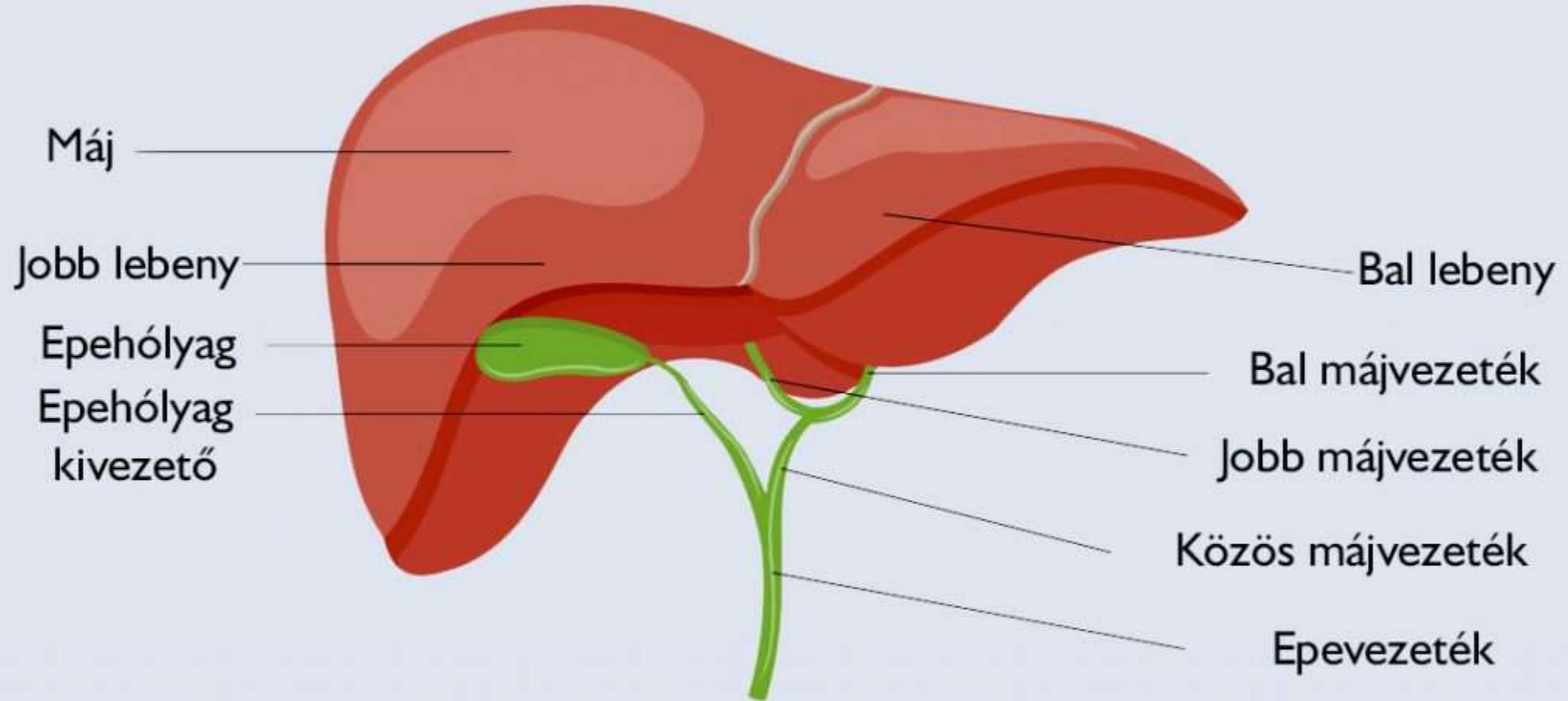
Asthma és fibrosis

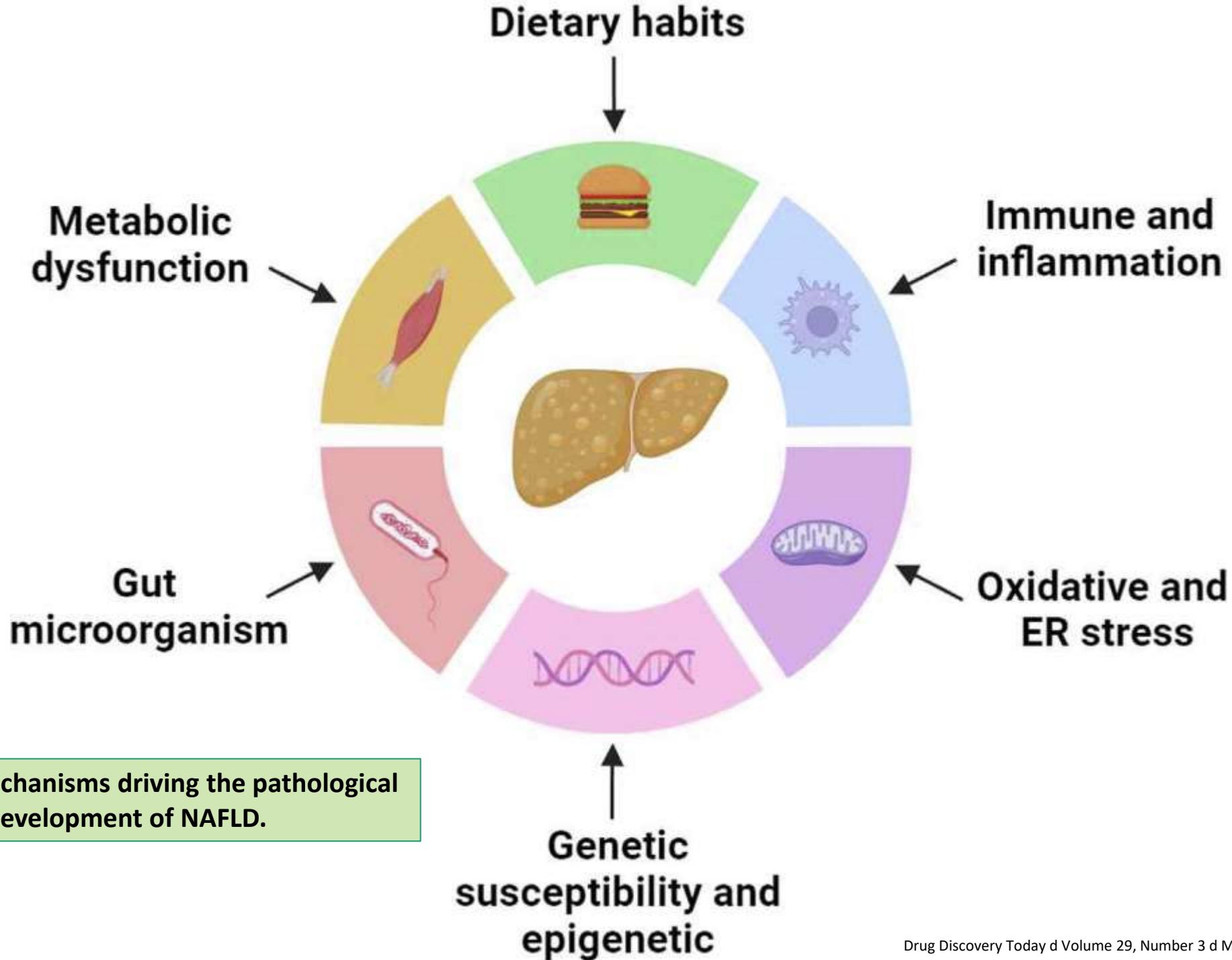


Principal pathophysiological components of airway remodeling emergence in allergic asthma.



Asthma and Post-Asthmatic Fibrosis





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

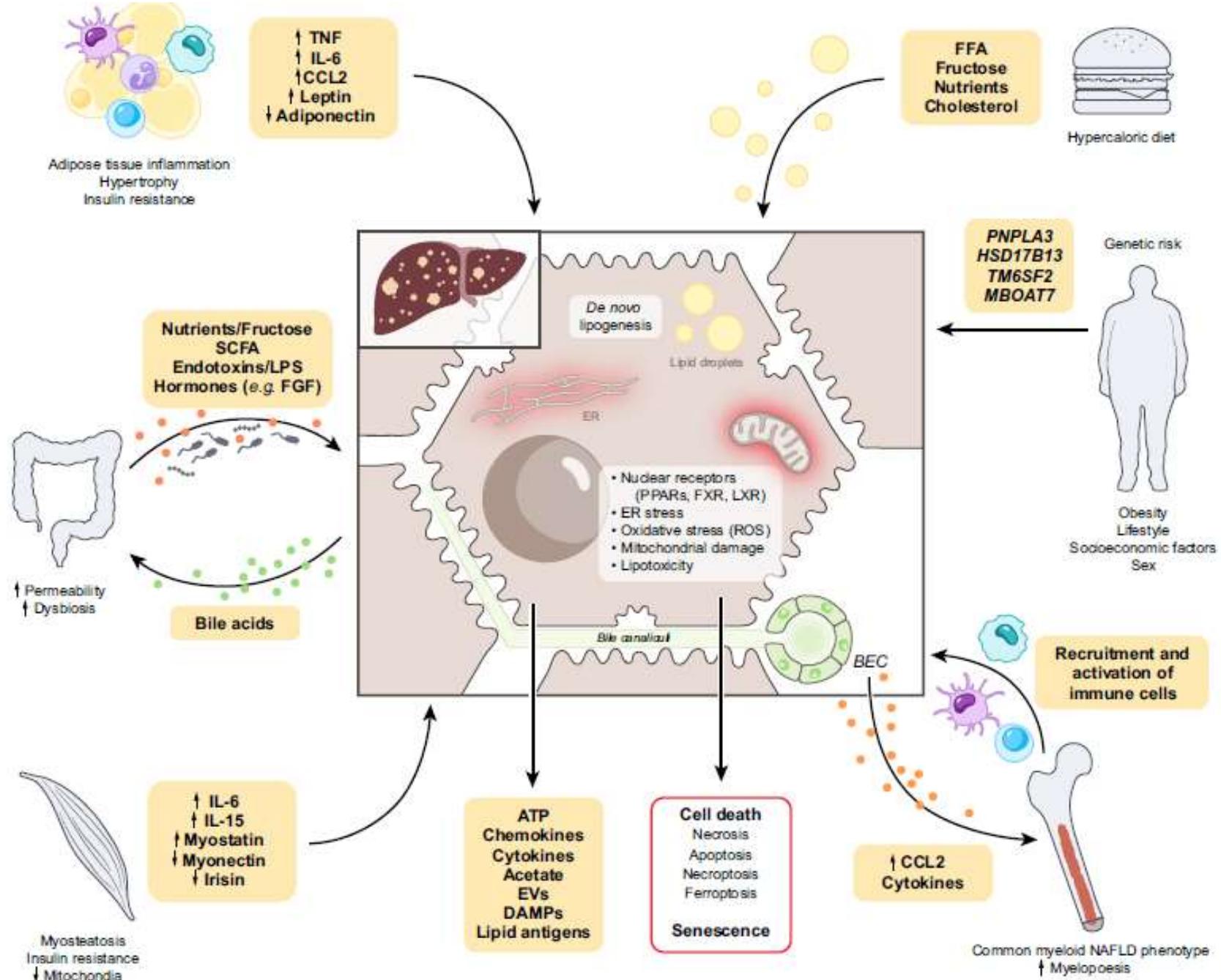


Fig. 1. Triggers of inflammation in NAFLD. Intra- and extrahepatic factors trigger inflammation in NAFLD. Hypercaloric diet, obesity, lifestyle, and genetic risk

Metabolic reprogramming in liver fibrosis

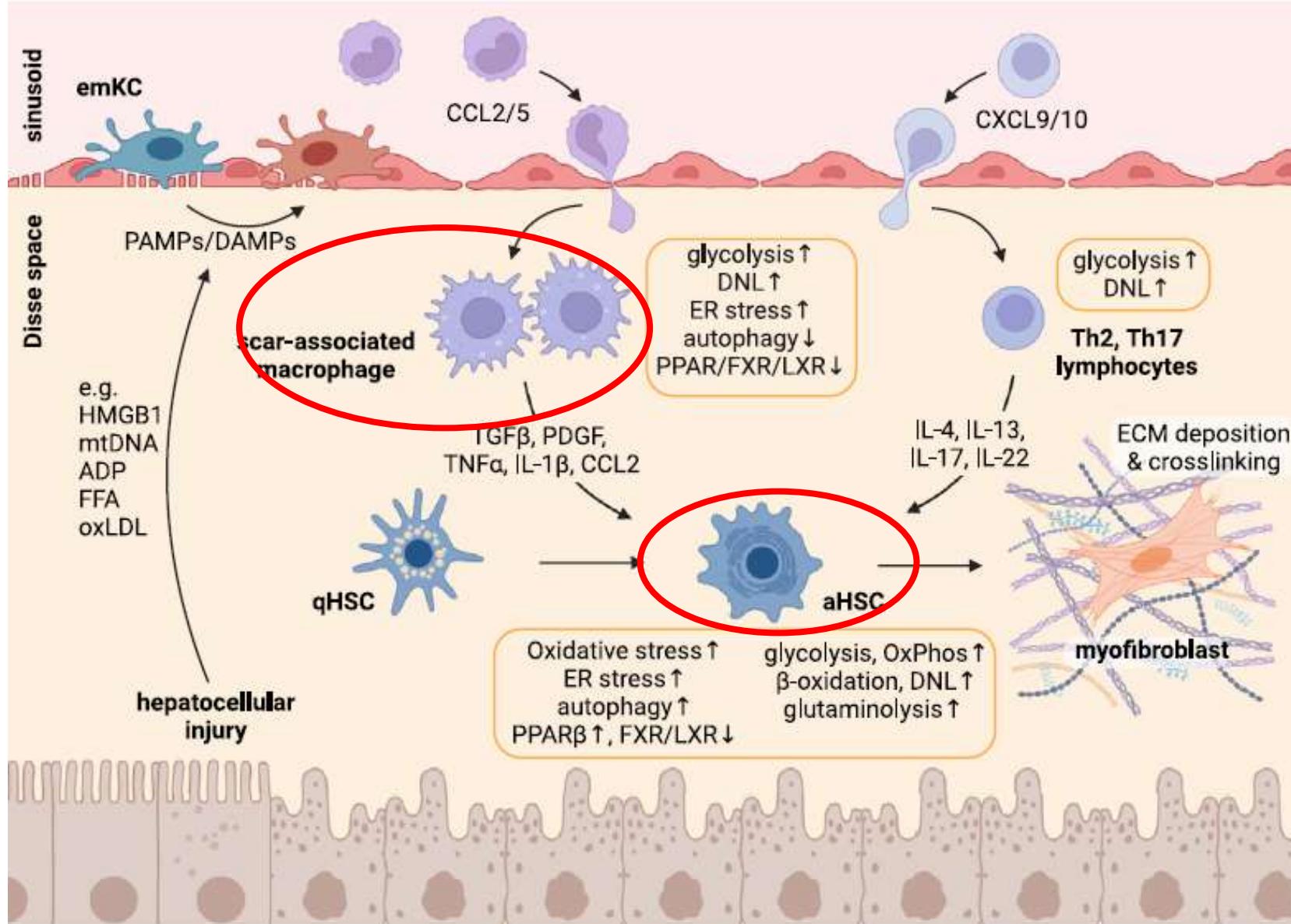


Figure 1. General mechanisms of liver fibrosis and main metabolic adaptations in macrophages, lymphocytes, and activated hepatic stellate cells

Metabolic reprogramming in liver fibrosis

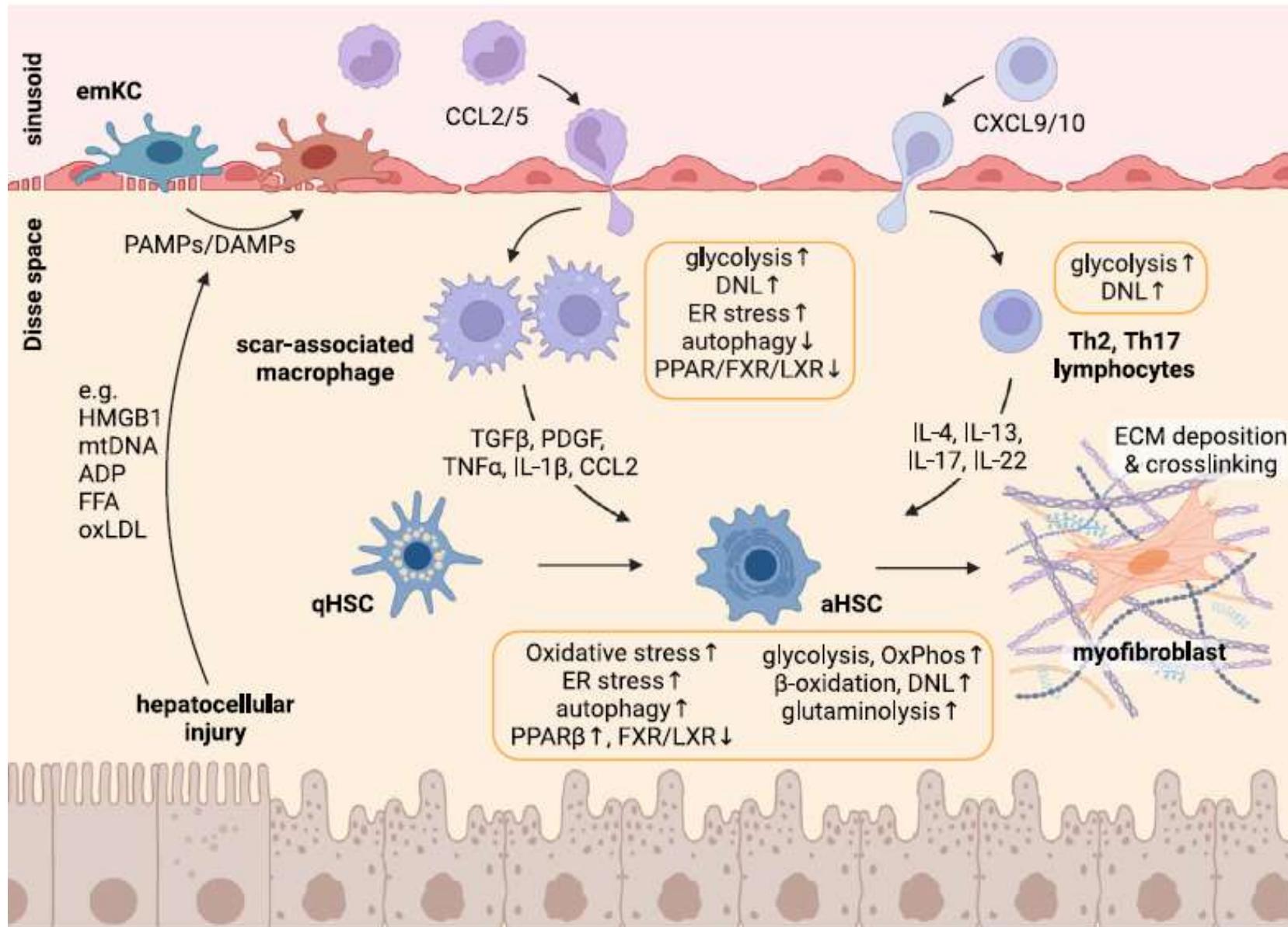


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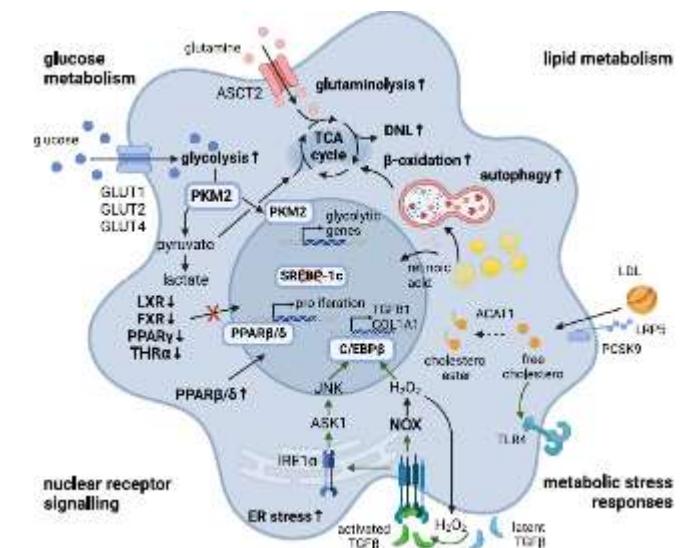


Figure 3. Metabolic reprogramming in fibrogenic hepatic stellate cell activation

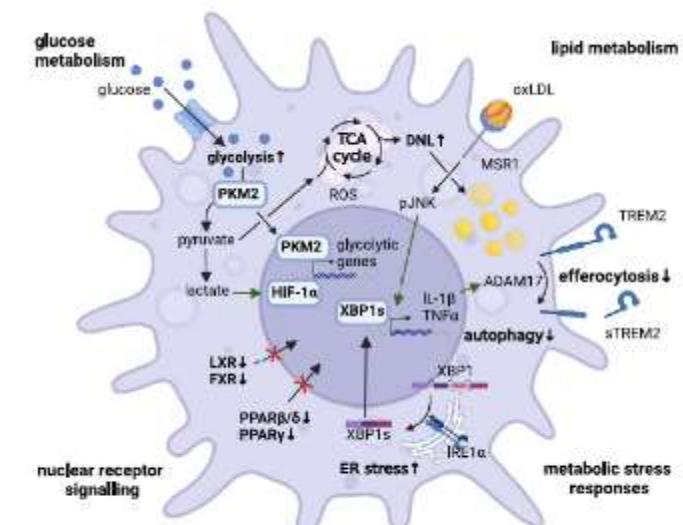
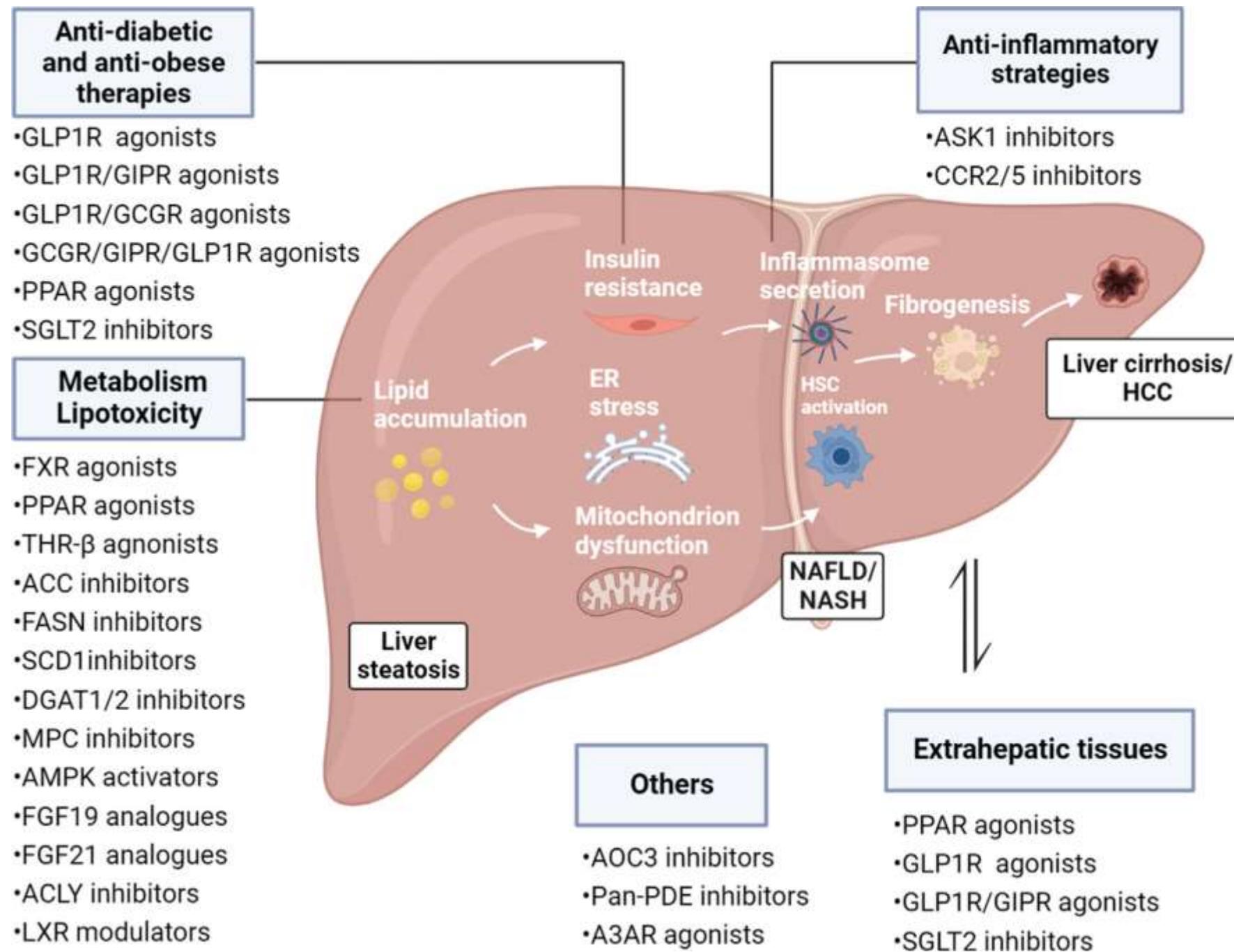


Figure 2. Metabolic reprogramming in hepatic macrophage activation during liver fibrogenesis





Diffuse myocardial fibrosis: mechanisms, diagnosis and therapeutic approaches

Begoña López^{1,2,4}, Susana Ravassa^{1,2,4}, María U. Moreno^{1,2,4}, Gorka San José^{1,2}, Javier Beaumont^{1,2}, Arantxa González^{1,2} and Javier Díez^{1,2,3}✉

Box 1 | Conditions associated with diffuse myocardial fibrosis

Ischaemic heart disease

- Coronary artery disease⁵
- Alterations of the coronary microcirculation caused by hypertension⁷ or diabetes mellitus⁸

Cardiac pressure overload

- Systemic arterial hypertension⁹
- Aortic stenosis¹⁰
- Coarctation of the aorta¹¹
- Pulmonary arterial hypertension¹²

Cardiac volume overload

- Obesity¹³
- Aortic regurgitation¹⁴
- Mitral regurgitation¹⁵

Cardiac inflammation

- Myocarditis¹⁶
- Sarcoidosis¹⁷

Genetic cardiac diseases

- Hypertrophic cardiomyopathy¹⁸

Cardiac metabolic alterations

- Obesity¹³

- Diabetes mellitus¹⁹
- Chronic kidney disease^{6,20}

Infiltrative cardiac alterations

- Amyloidosis²¹

Cardiac storage diseases

- Anderson–Fabry disease^{6,22}

Congenital heart diseases

- Tetralogy of Fallot²³
- Ebstein anomaly^{6,24}
- Transposition of the great arteries^{6,25}

Other conditions

- Ageing²⁶
- Non-ischaemic dilated cardiomyopathy²⁷
- Atrial fibrillation-mediated cardiomyopathy²⁸
- Exposure to pharmacological cardiotoxic agents²⁹

*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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Cardiac injury

Biological and mechanical stress

ECM-synthesizing activated cardiac fibroblasts and myofibroblasts

- Procollagen precursors
- Profibrotic secretome

- Increased synthesis of fibrillary collagen
- Unchanged or reduced degradation of fibrillary collagen

Excess of type I and type III collagen fibres

Diffuse deposition of fibrotic tissue

Myocardial stiffness and architectural disarray

Mechanical and electrical alterations

Progressive cardiac dysfunction

Heart failure and unfavourable outcomes

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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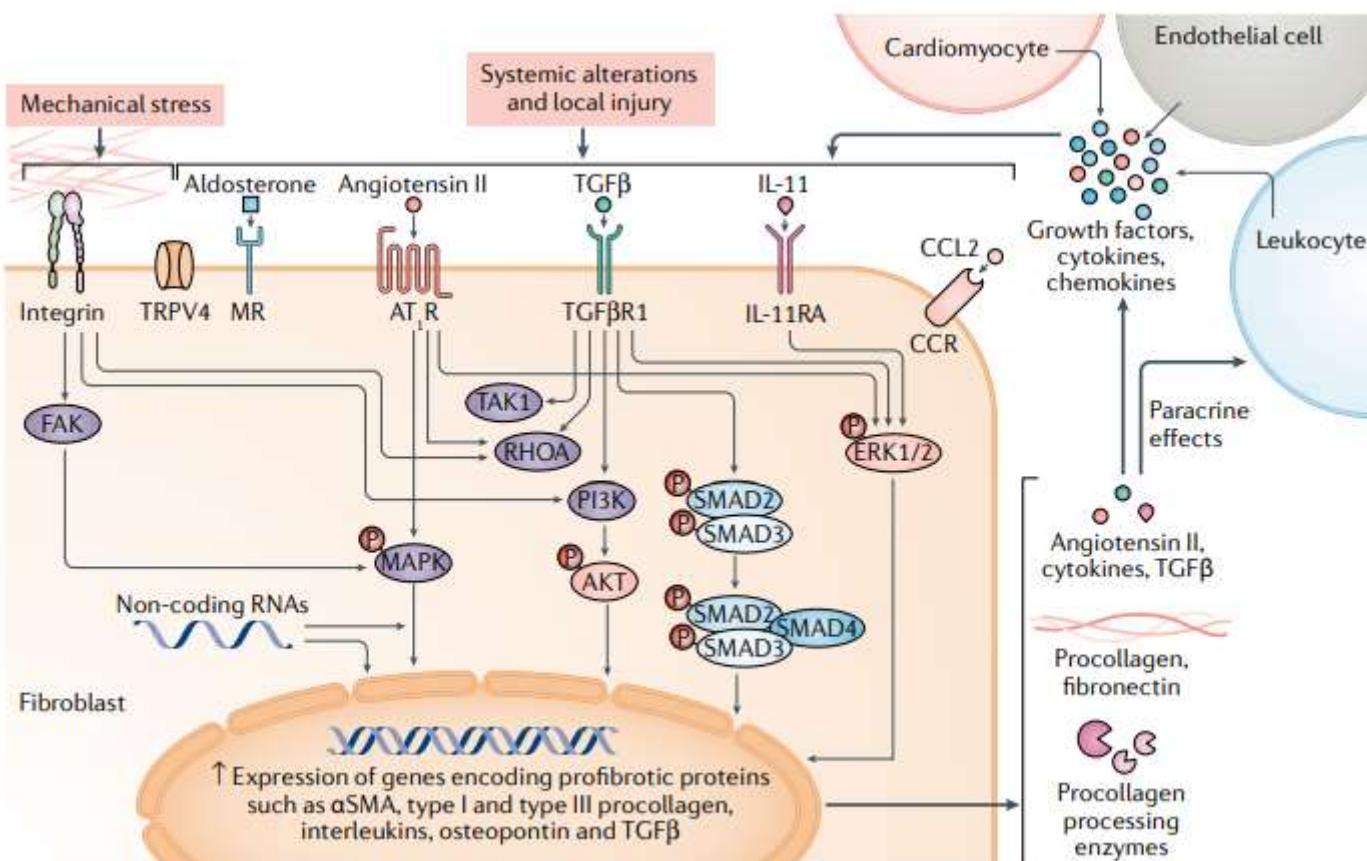
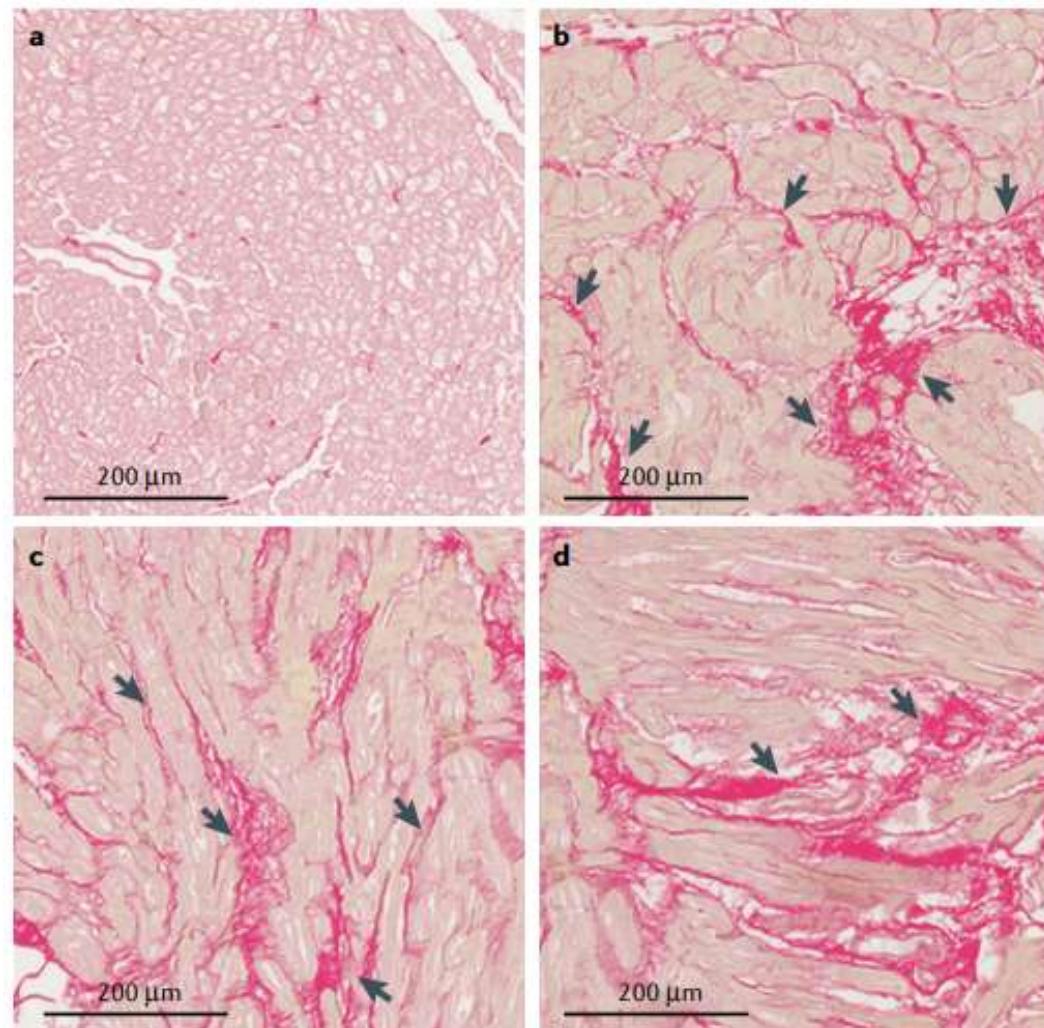
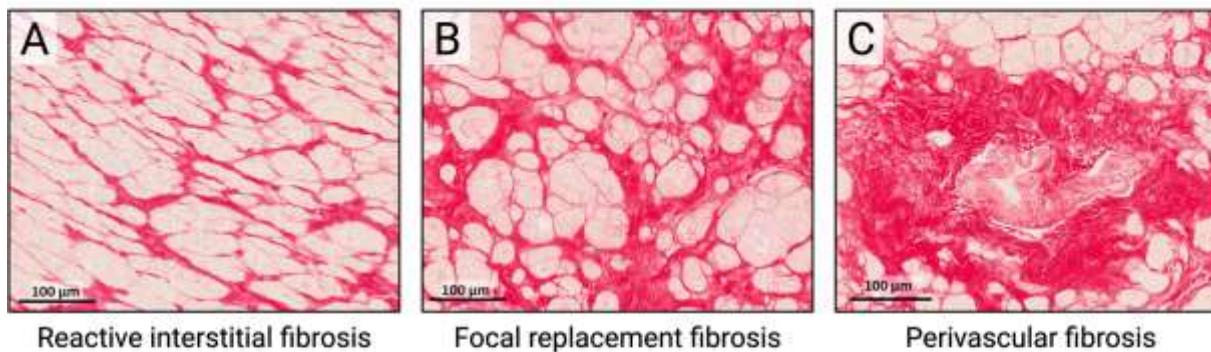


Fig. 3 | Major signalling pathways involved in the activation of **cardiac fibroblasts** In response to increased

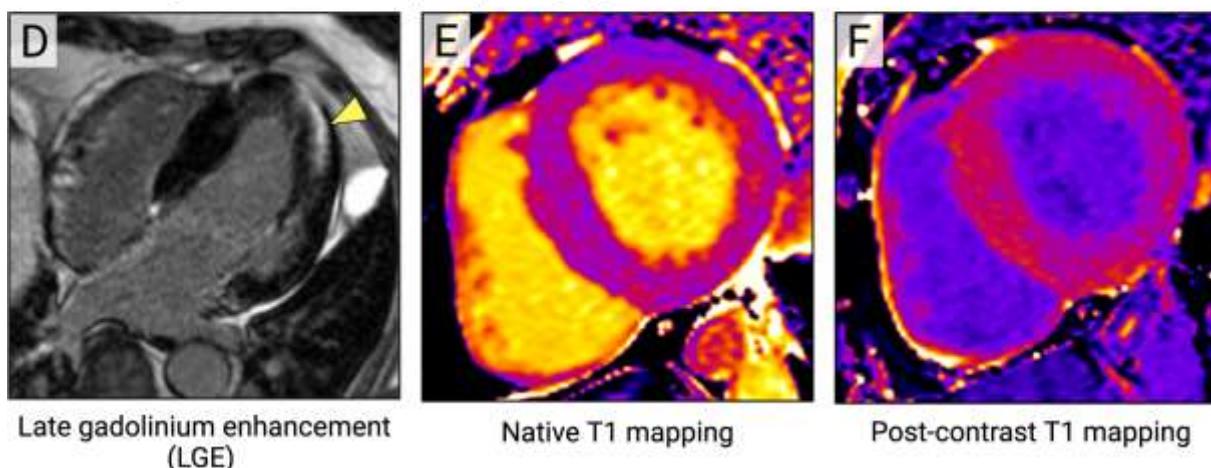


Myocardial fibrosis from the perspective of the extracellular matrix: Mechanisms to clinical impact

Endomyocardial biopsy (EMB)



Cardiac magnetic resonance (CMR) imaging



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

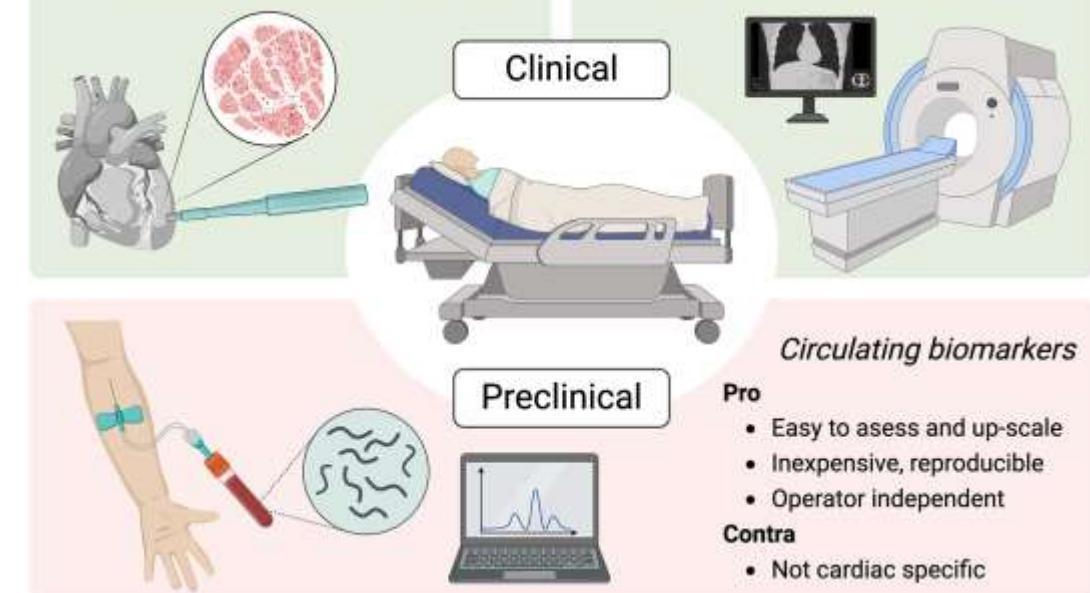
Cardiac MRI or CT

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



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

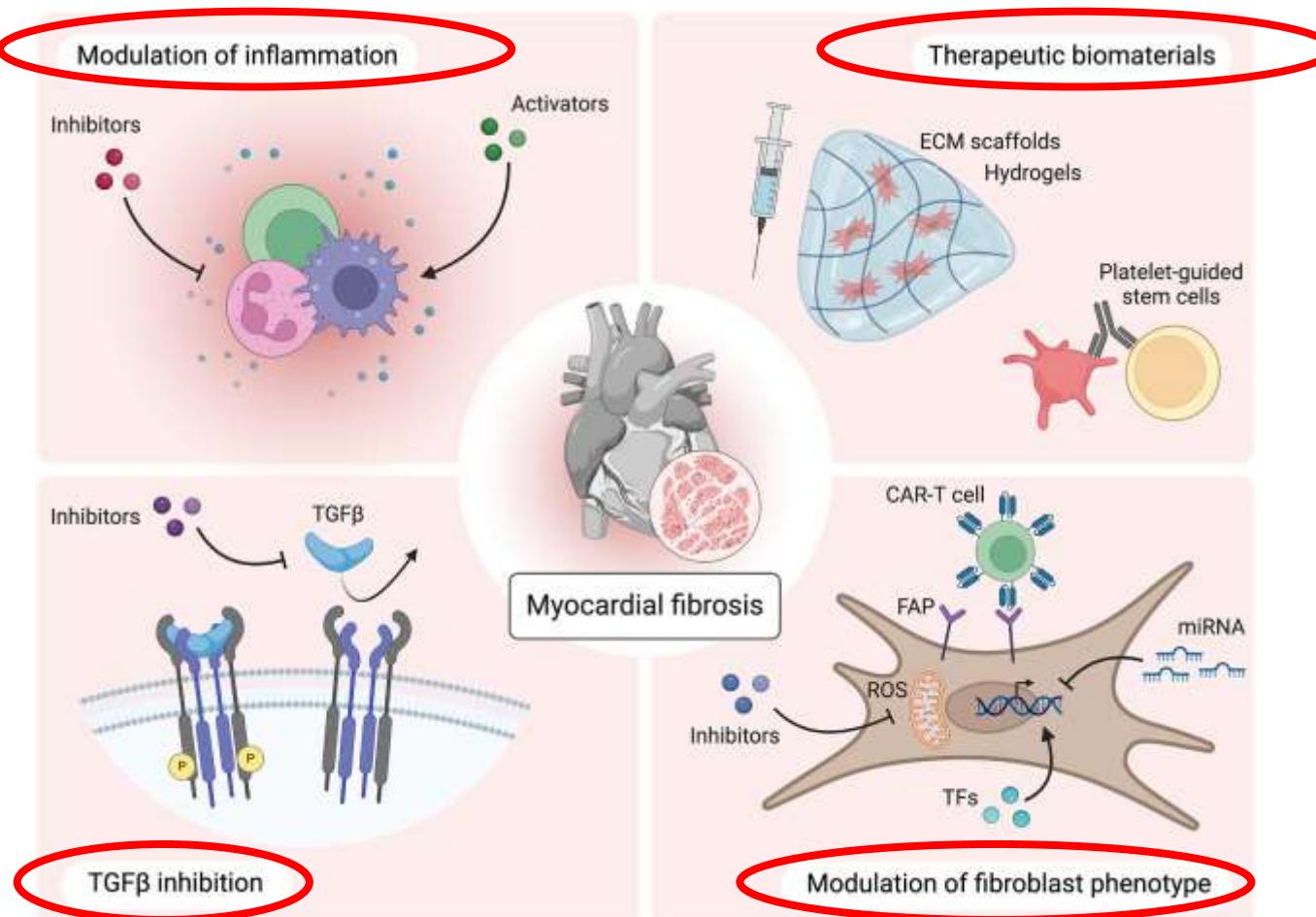


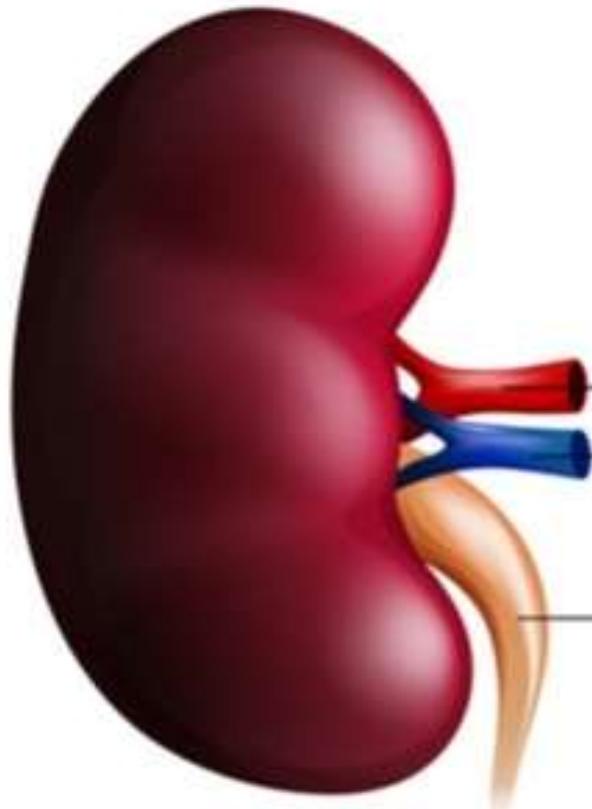
Table 3 | Novel therapies potentially applicable to reverse diffuse myocardial fibrosis

Target	Therapeutic strategy	Study stage	Status	Ref.
TGF β 1 signalling	Inhibiting connective tissue growth factor activity with the monoclonal antibody pamrevlumab	Phase II trial in patients with idiopathic pulmonary fibrosis	Completed	²³⁴
	Phase III trial in patients with idiopathic pulmonary fibrosis	Ongoing		²³⁵
Non-coding RNAs	Inhibiting miR-21 with RG-012	Phase I trials in patients with Alport syndrome	Completed	²⁴¹
	Mimicking miR-29a with remlarsen	Phase II trials in patients with Alport syndrome	Ongoing	²⁴²
	Phase I trial in healthy volunteers	Completed		²⁴⁵
Metabolic pathways	Phase II trial in patients with cutaneous fibrosis	Ongoing		²⁴⁶
	Omega-3 fatty acid supplementation	Phase III clinical trial in patients with myocardial infarction	Completed	²⁴⁵
Extracellular collagen processing	LOXL2 inhibition with simtuzumab	Phase II clinical trial in patients with idiopathic pulmonary fibrosis	Completed	²⁵⁴
	Matrix metalloproteinase inhibition with low-dose doxycycline	Phase II clinical trials in patients with acute myocardial infarction and heart failure	Completed	²⁵⁶
	Phase II trial in patients with myocardial infarction	Ongoing		²⁵⁷
Inflammation	Therapy with modified citrus pectin (a galectin 3 inhibitor)	Phase I trial in patients with chronic kidney disease	Ongoing	²⁵⁹
	Therapy with BLD-2660 (a calpain inhibitor)	Phase IIa trial in patients with idiopathic pulmonary fibrosis	Ongoing	²⁶⁰
	Therapy with sodium thiosulfate (a hydrogen sulfide-releasing agent)	Phase II trial in patients with myocardial infarction	Ongoing	²⁶²

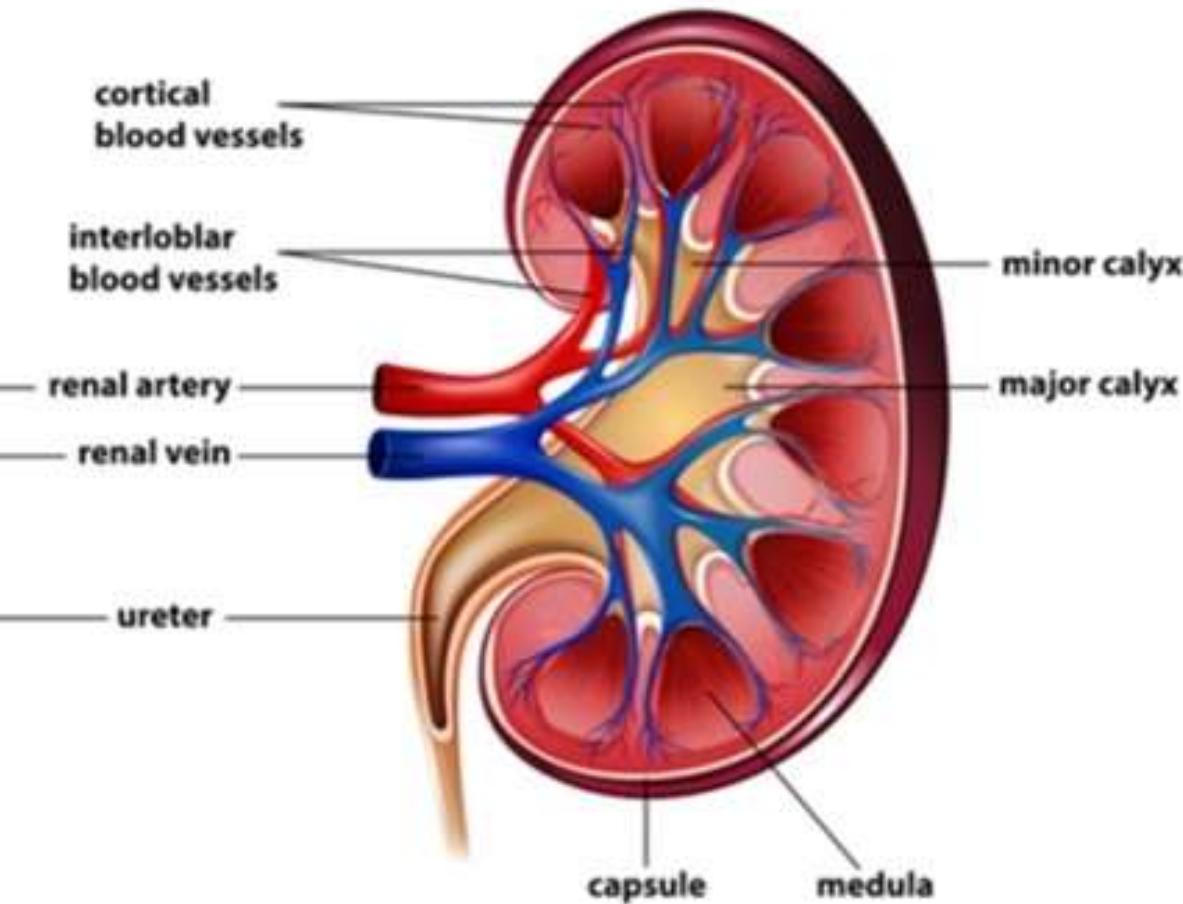
LOXL2, lysyl oxidase homologue 2; TGF β 1, transforming growth factor- β 1.

Human Kidney Anatomy

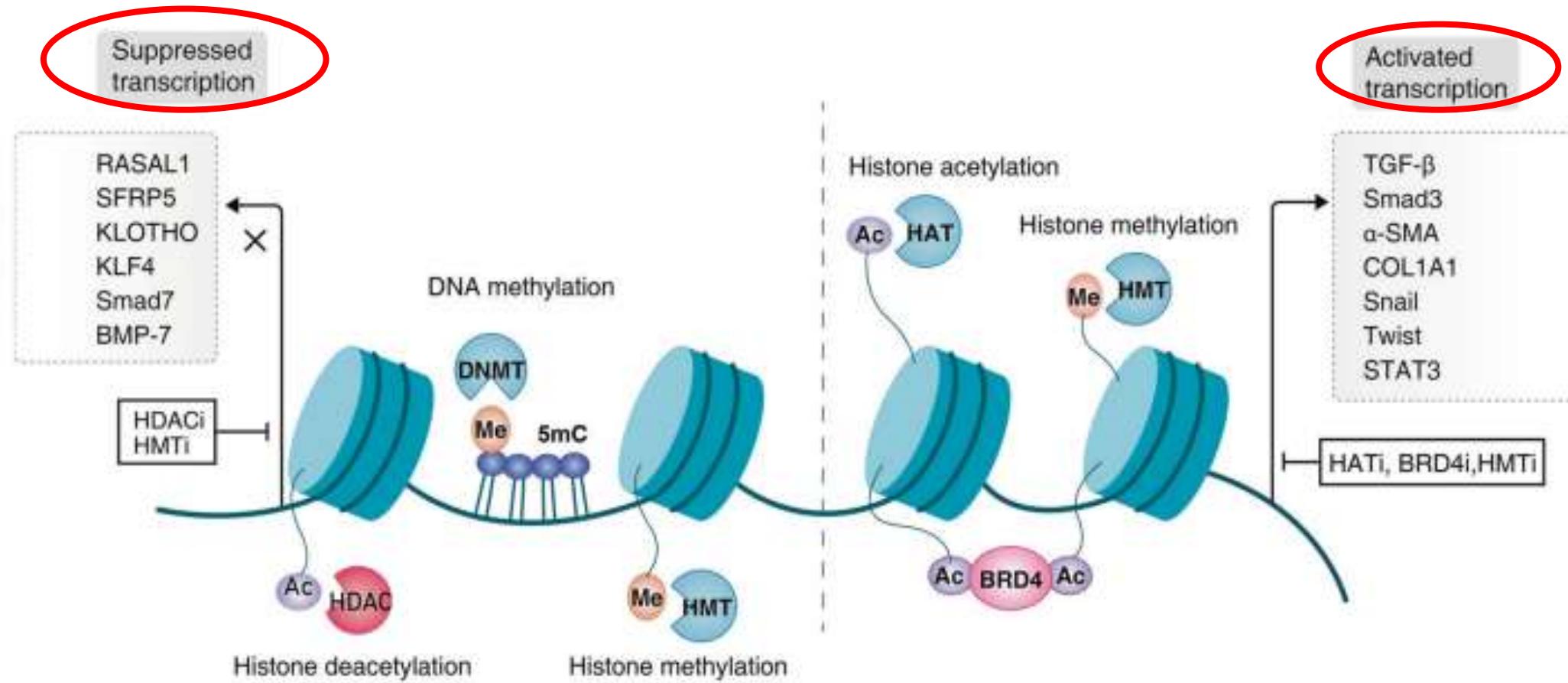
External View



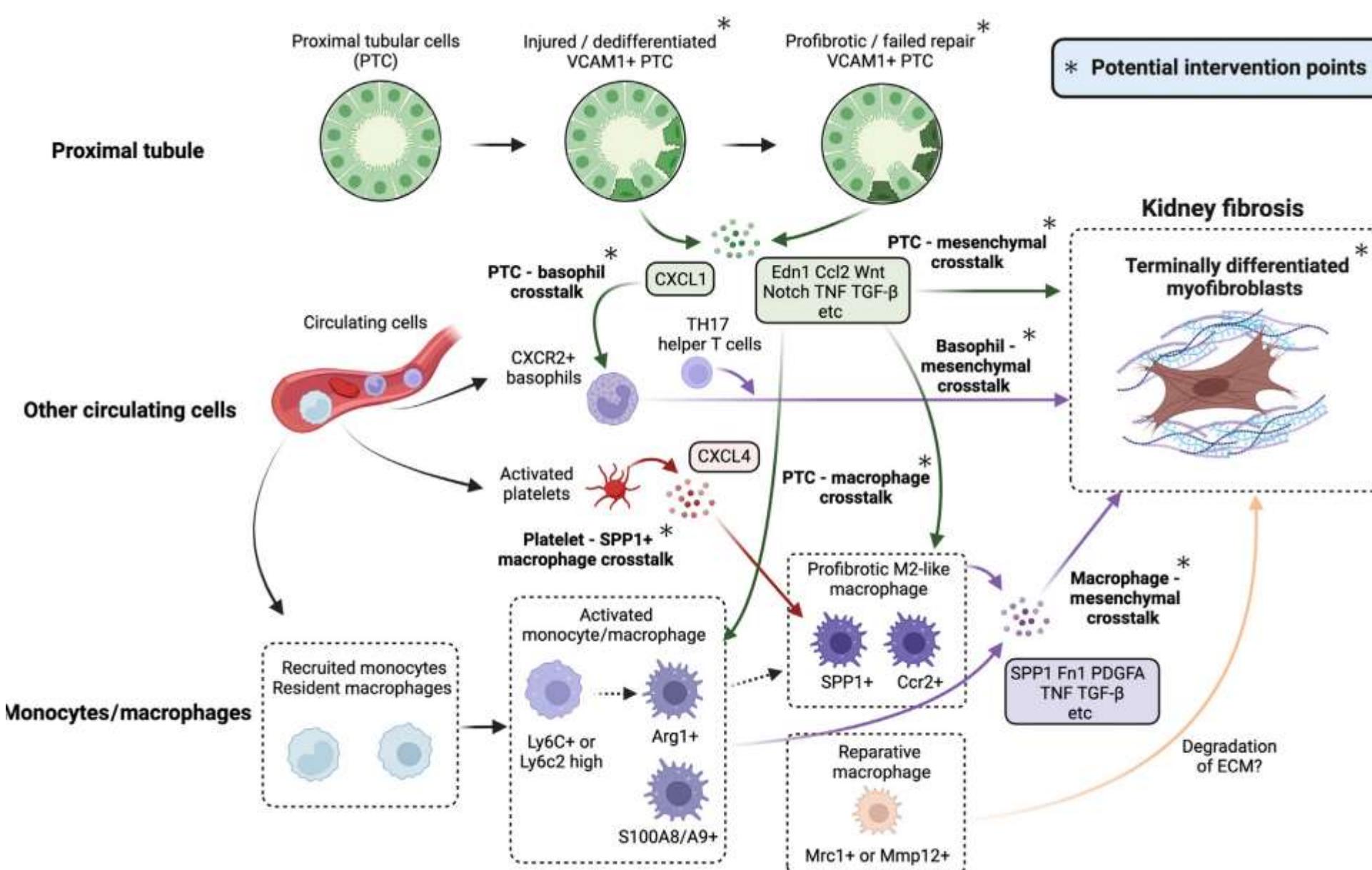
Internal View



Kidney fibrosis: from mechanisms to therapeutic medicines



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



Szisztemás sclerosis

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



Patogenezis



Immunsejtek

- B-sejtek
- Γδ T-sejtek
- CD4+ T-sejtek
- CD8+ T-sejtek
- Macrophagok
- Hízósejtek
- pDC-k
- Dermális DC-k

Vascularis sérülés

Endothel aktiváció

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

Hypoxia Thrombosis

Infiltráció Aktiváció

Fibroblast aktiváció

- Autokrin TGF-β aktiváció és visszacsatolás
- Megváltozott válaszreakció
- Th1/Th2/Th17 citokinek

Szervek fibrosisa

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

Krónikus gyulladás

Raynaud tünet

Vazokonstrikció ↑

A simaizomsejtek α-2
adrenoreceptorok reaktivitása↑



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

Endothel sérülés

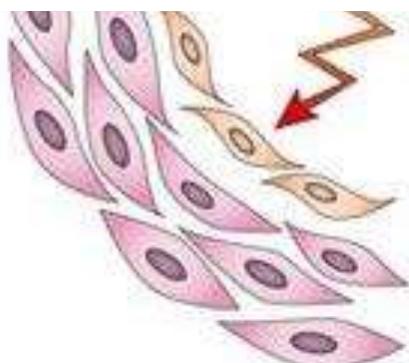
Sejtek közötti adhézió, tight junction
fellazulása

Idegrostok
(szimpatikus
és szenzoros)

Simaizomsejtek
Endotheliális sejtek

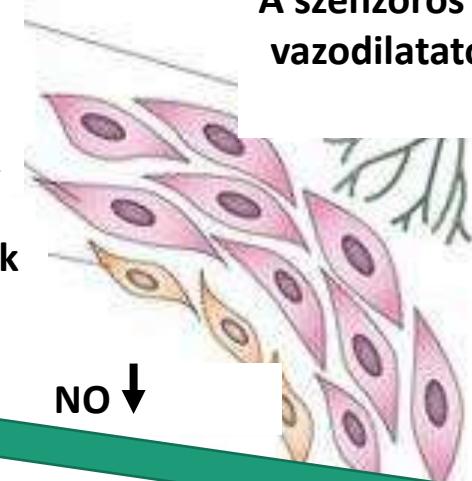
Endothelin-1↑

PDGF receptor elleni antitestek
Oxidatív stressz
Endothel sejtek elleni antitestek

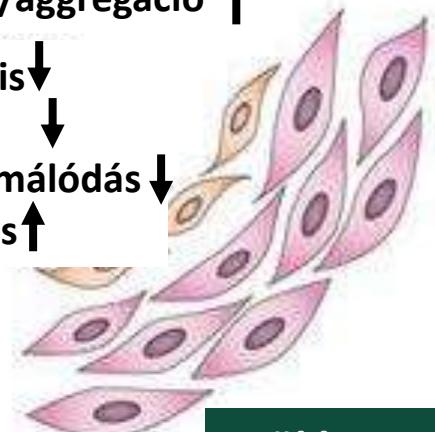


Vazodilatáció ↓

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



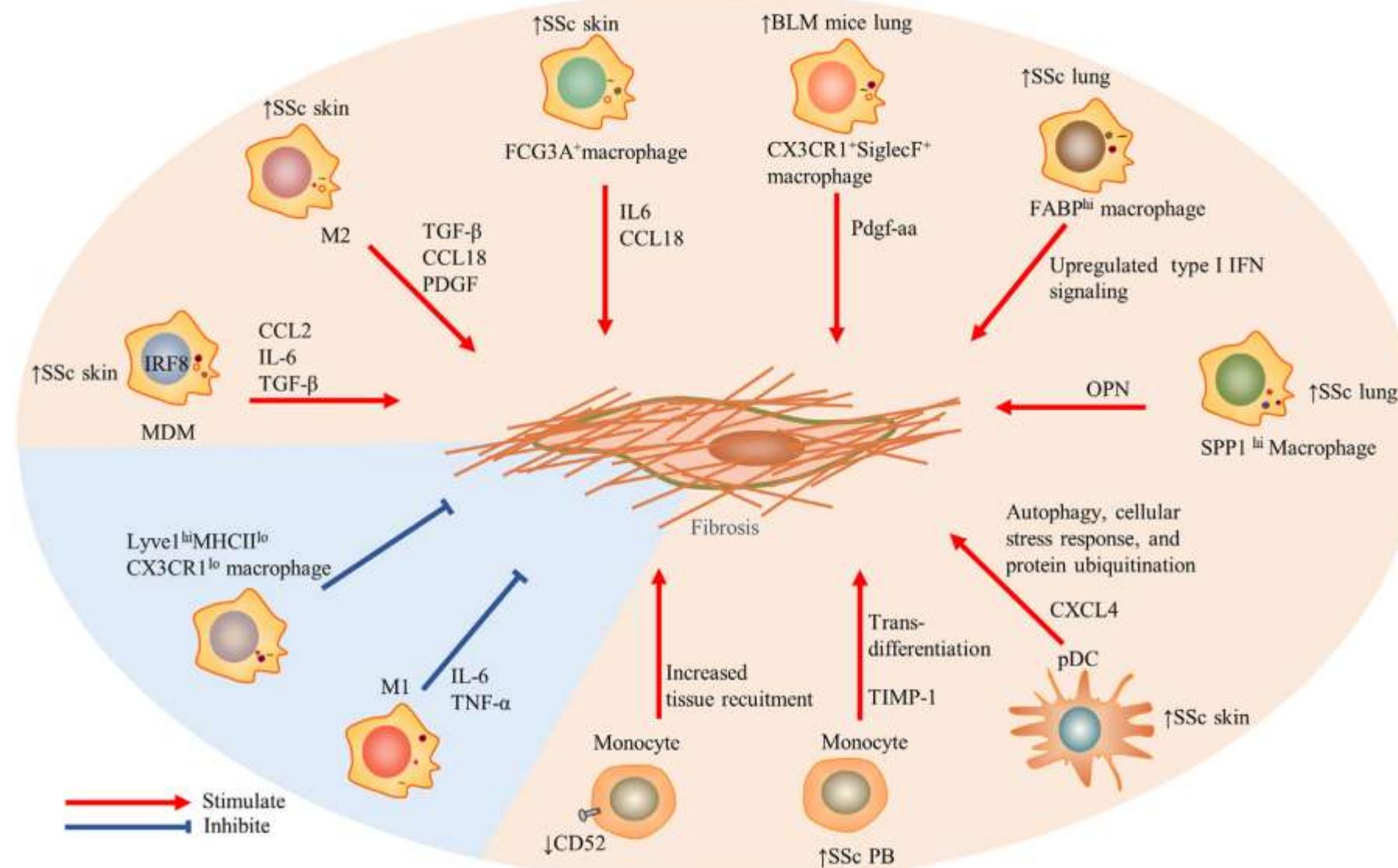
NO ↓
Thrombocytá
aktiváció/aggregáció ↑
Fibrinolysis ↓
Thrombin ↓
Vvt deformálódás ↓
Viszkozitás ↑



Csökkent véráramlás/
prokoaguláns állapot

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

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



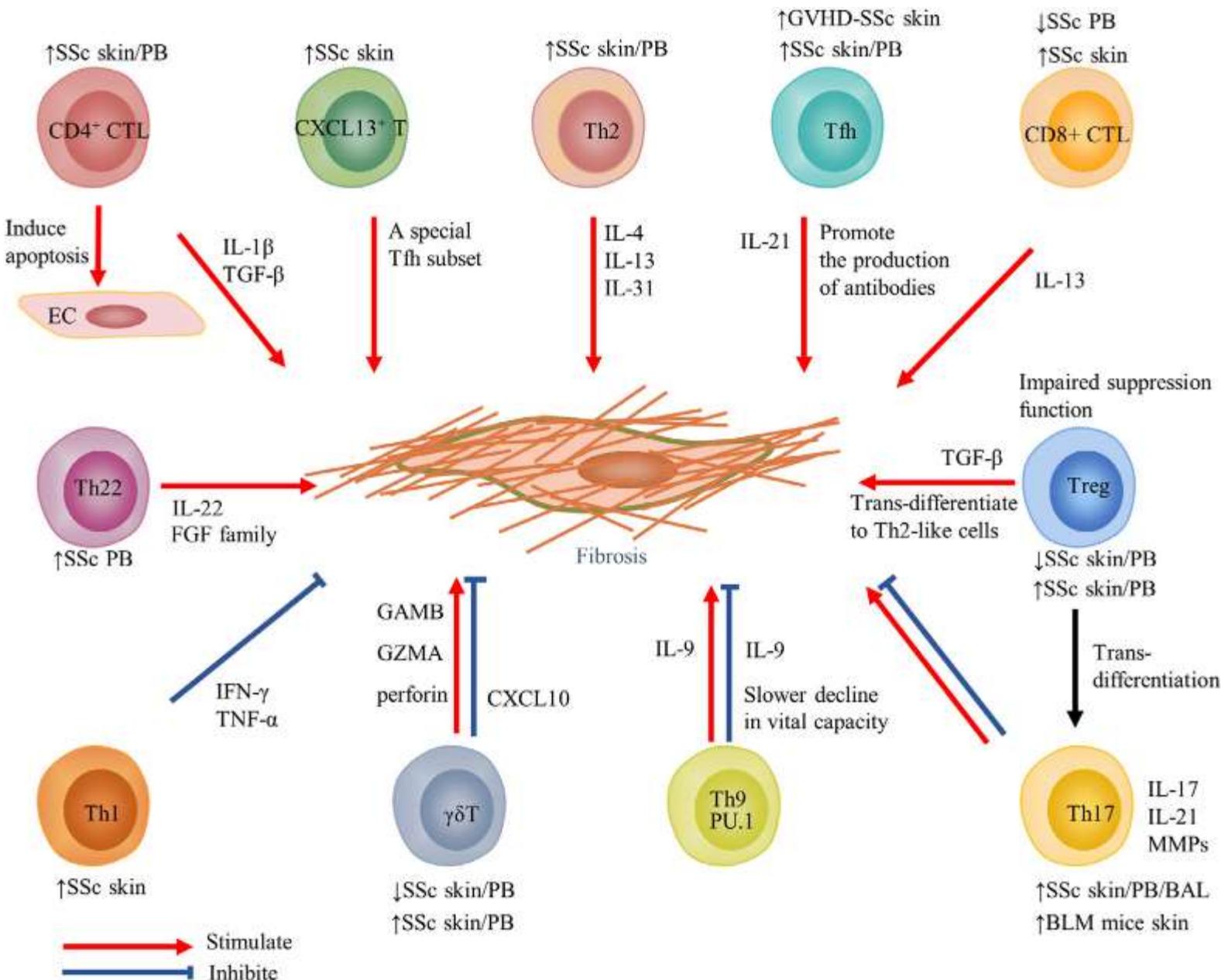
The role of innate immune cells including monocytes, macrophages, and dendritic cells in the fibrosis in SSc.

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

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Adaptív immunitás

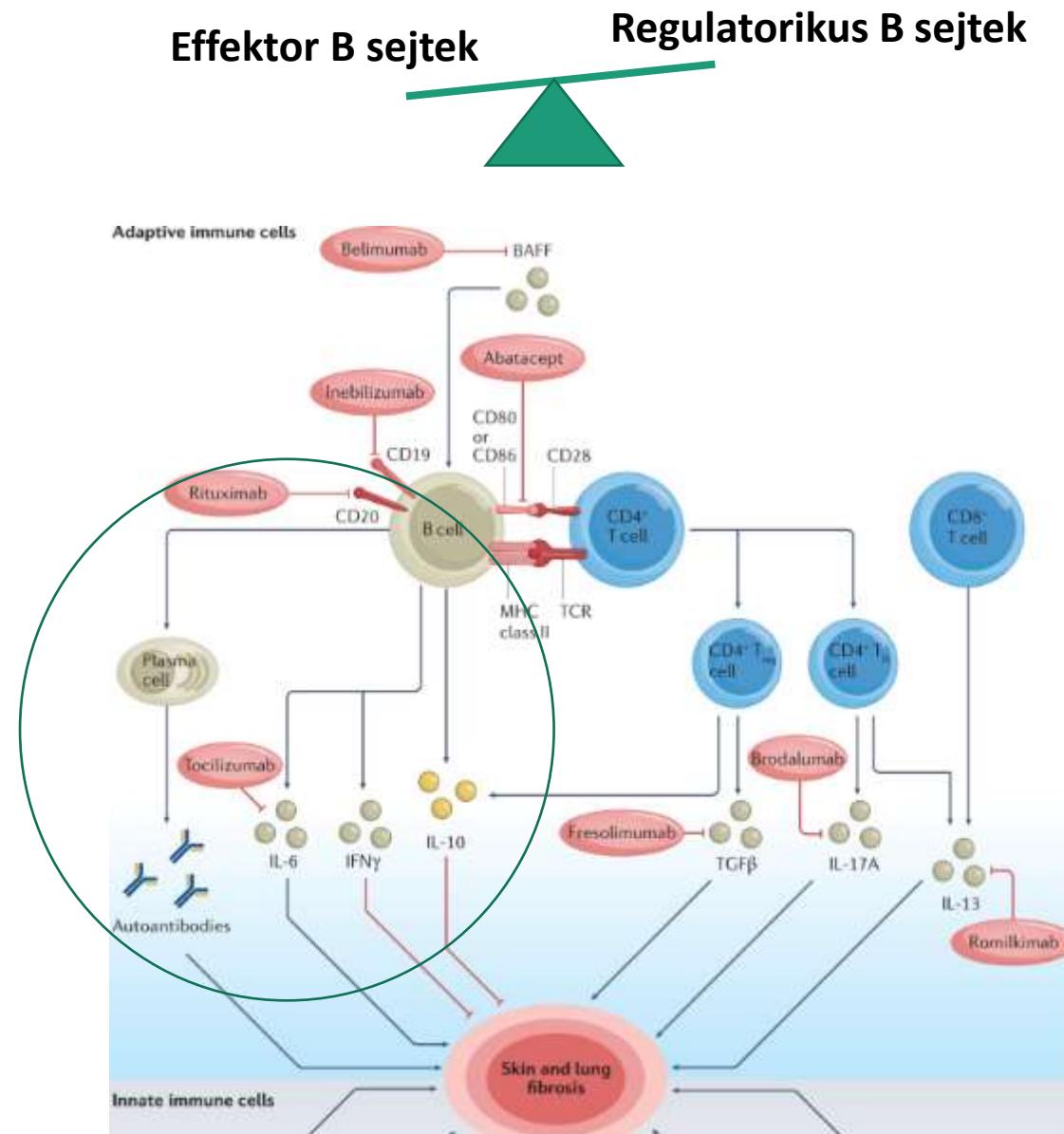
Contribution of T-cell subsets and their cytokines to fibrosis in SSc



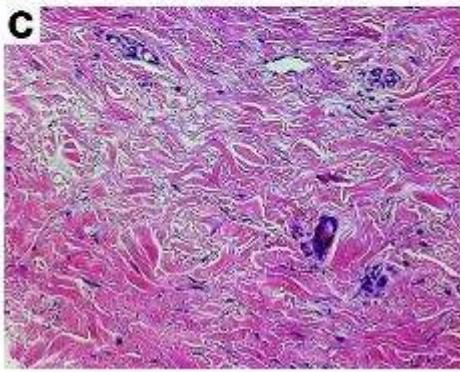
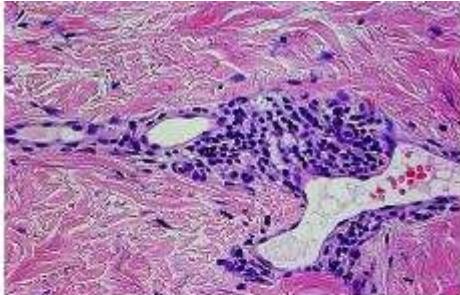
Adaptív immunitás

B-sejtek:

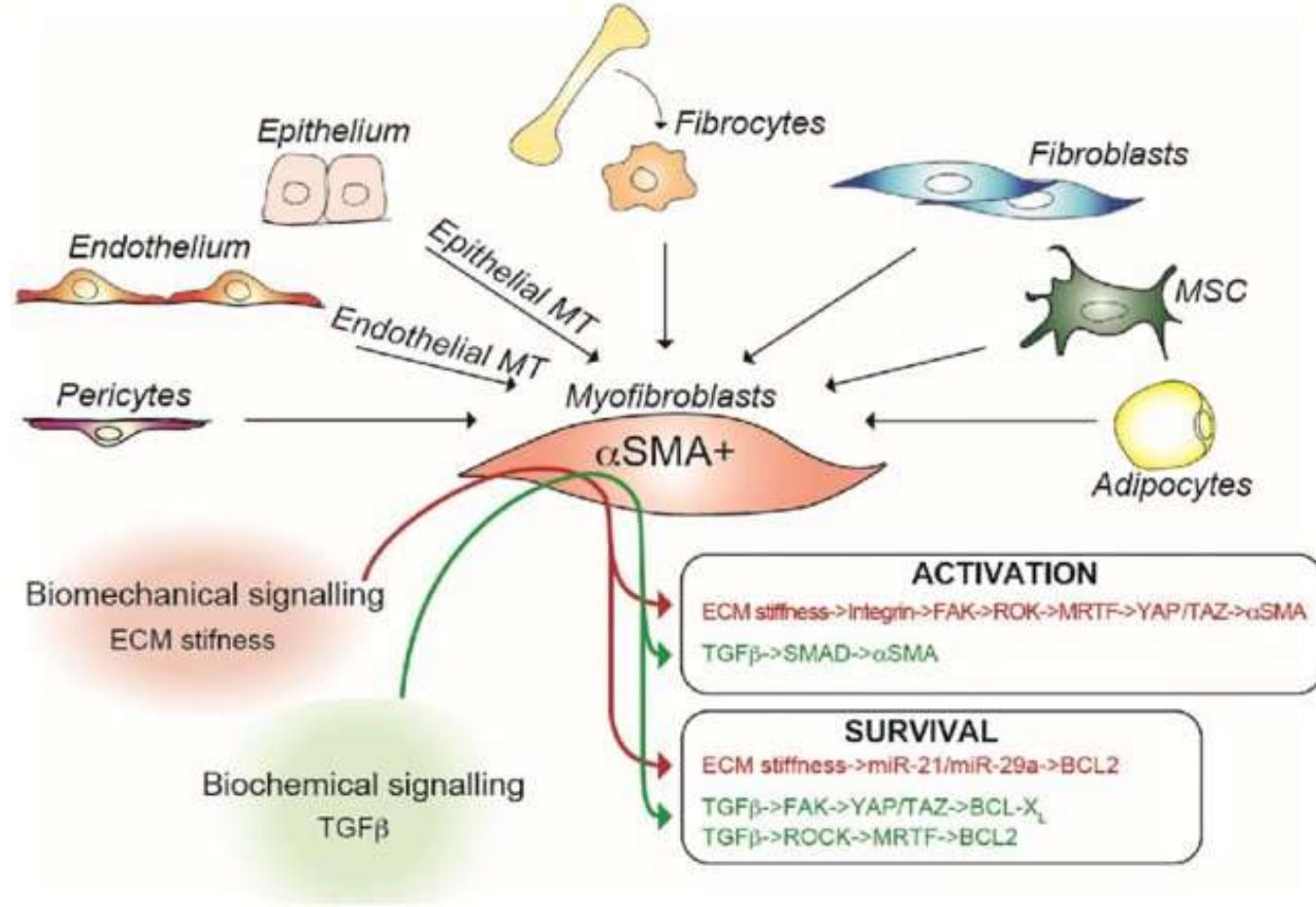
- Antitest termelés, citokin szekréció
- IL-6, IFN γ , GM-CSF
- Breg sejtek száma és funkciója is csökken: IL-10
- BAFF: B-sejtek profibrotikus aktivitása nő, fokozódik a citokin szekréció
- Macrophagok M2 polarizációjában, T-sejtek, dendritikus sejtek aktivációjában is részt vesznek: innate-adaptív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



Fibrosis



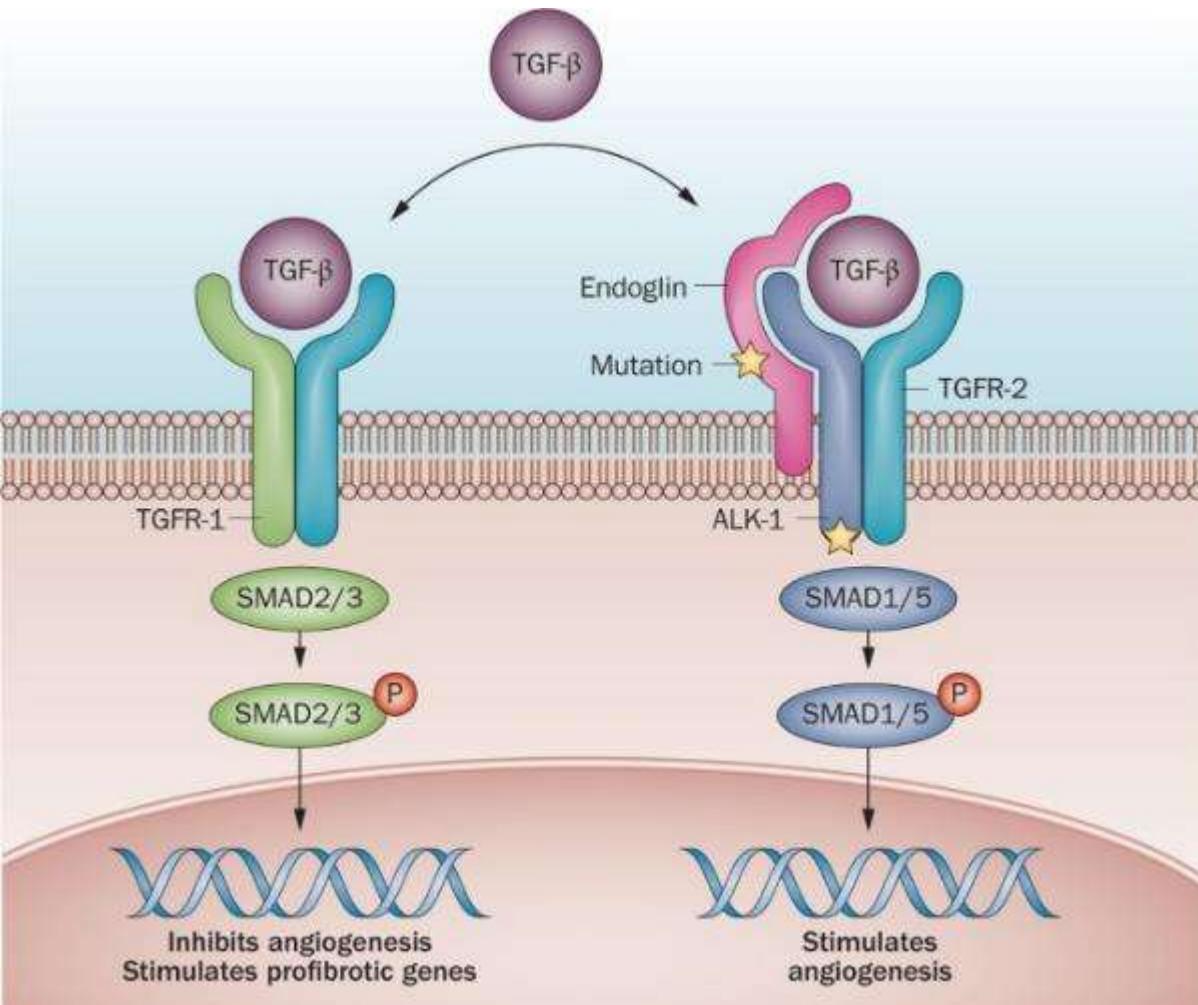
Gyulladásos
mikrokörnyezet
+
Szöveti sérülés, hypoxia,
stressz



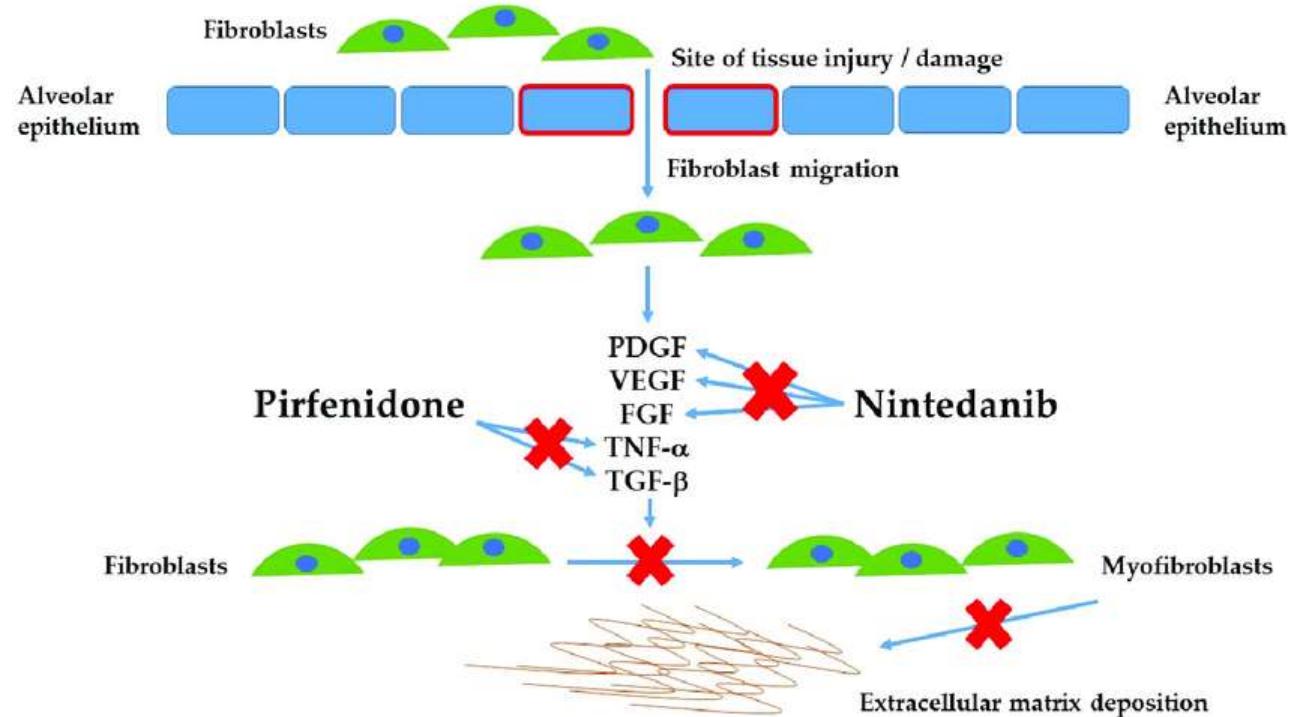
Kóros fibrosis: fibroblast-myofibroblast (α -simaizom aktint expresszáló) átalakulás, fibroblast apoptosis csökkenés, autokrin aktiváció miatt túlzott kollagén és ECM termelés

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

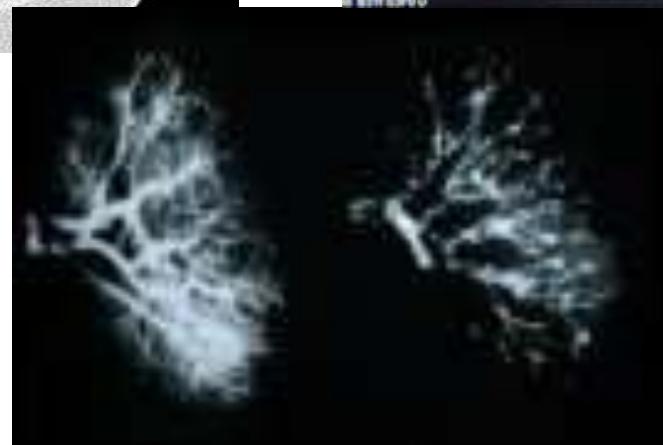
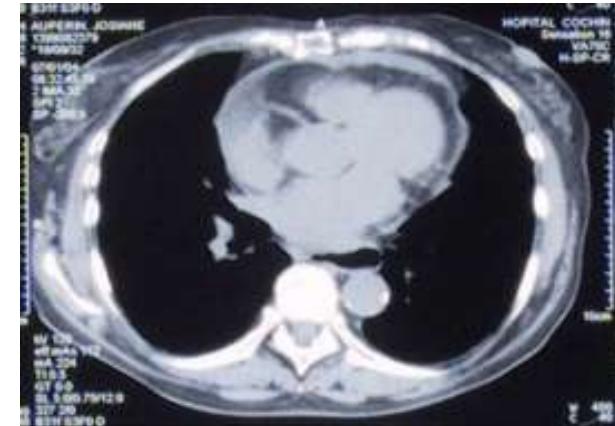
TGF- β



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

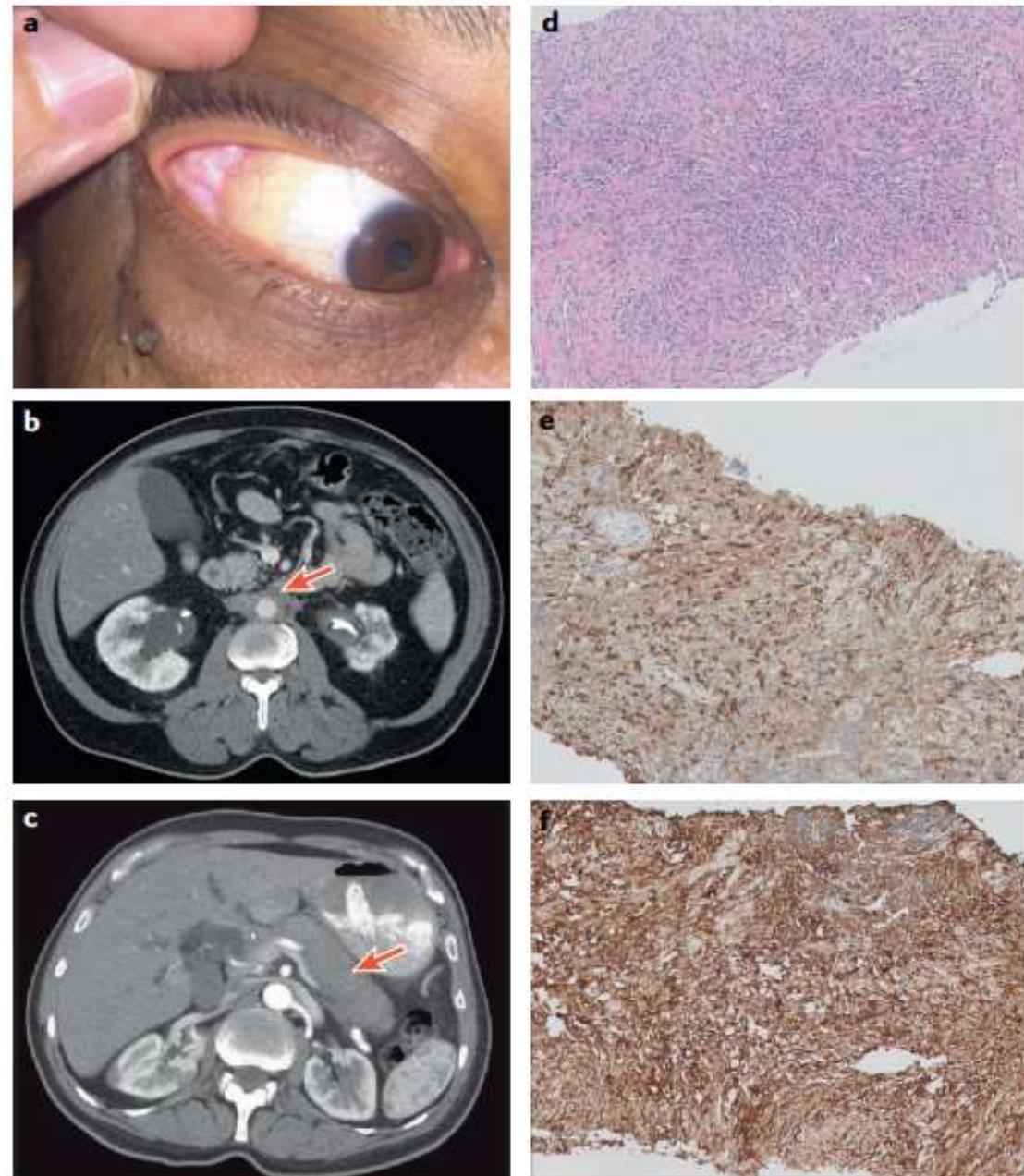
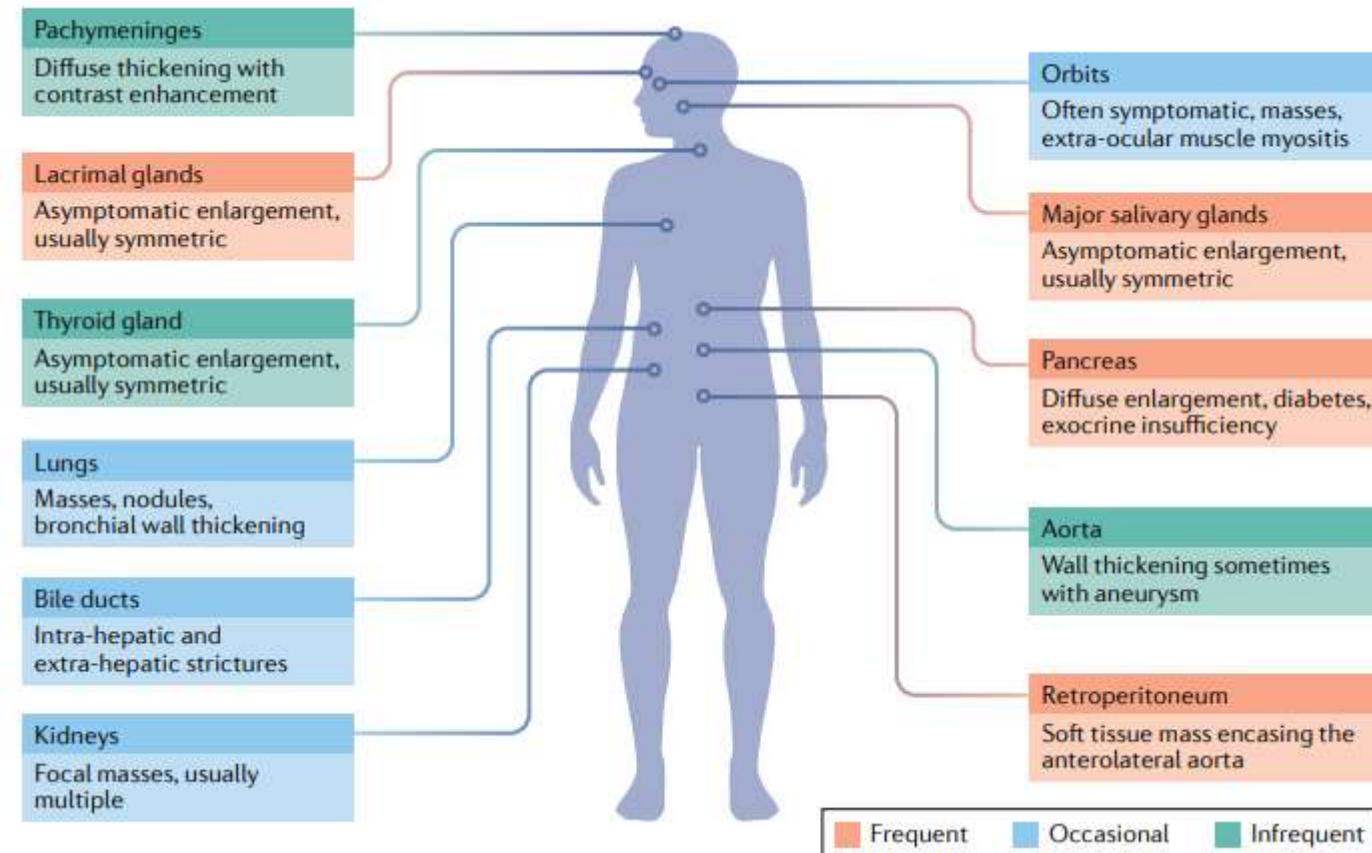


Szervi érintettségek pathogenezise



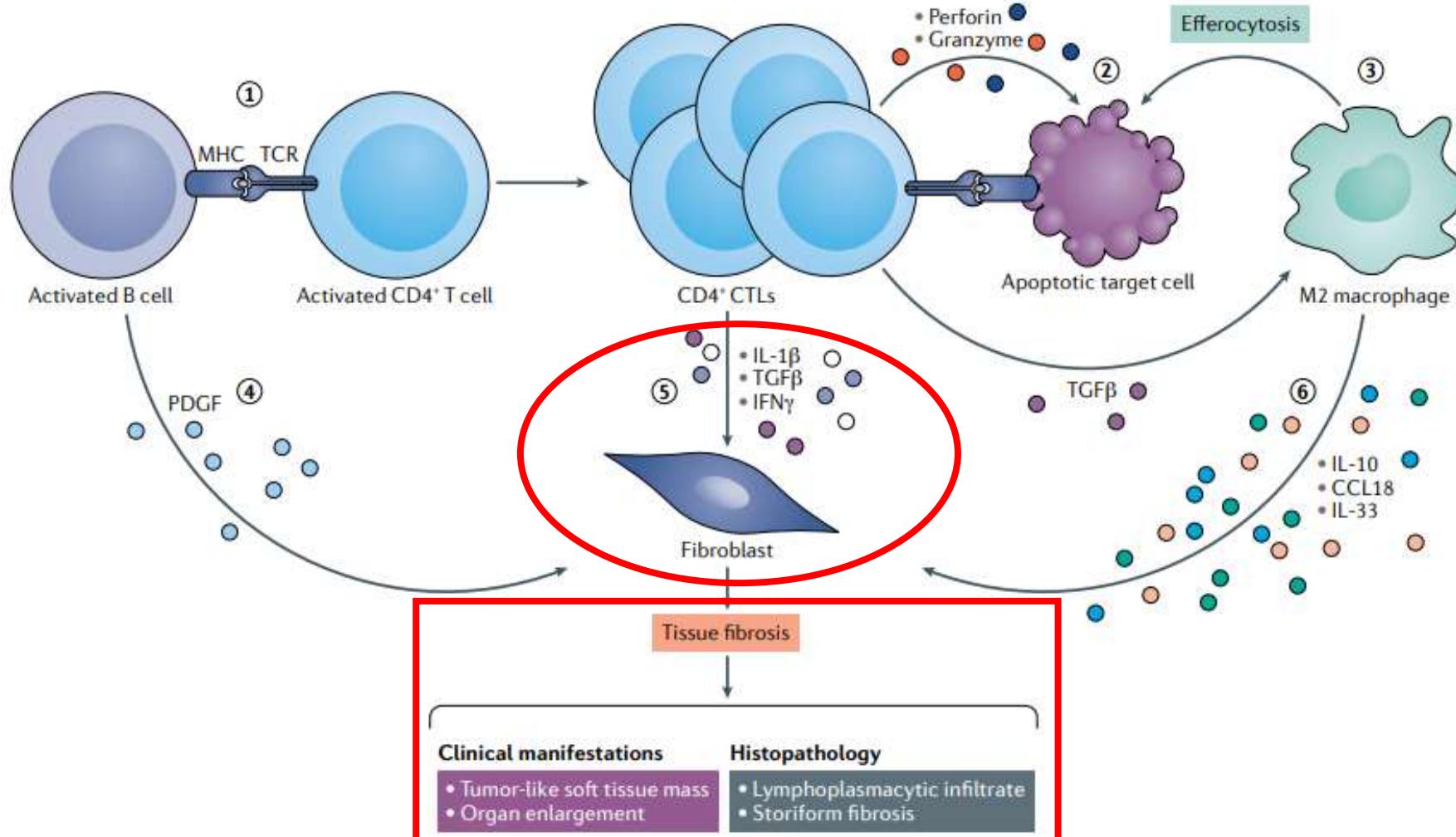
IgG4-related disease: an update on pathophysiology and implications for clinical care

Cory A. Perugino^{1,2} and John H. Stone¹✉



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

Cory A. Perugino^{1,2} and John H. Stone¹ 



Fibrosissal járó kórképek kezelése

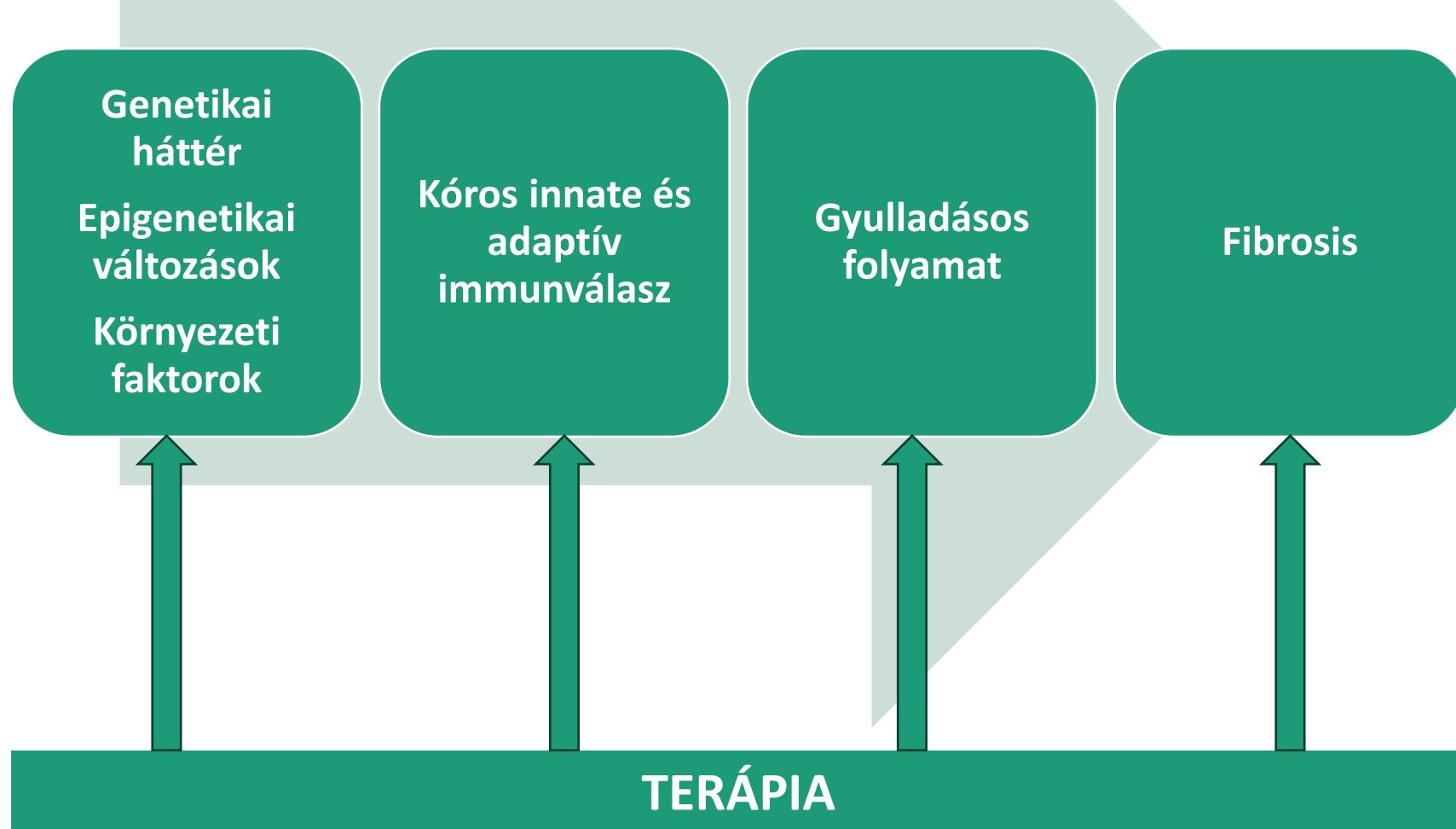
Senescence and tissue fibrosis: opportunities for therapeutic targeting

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

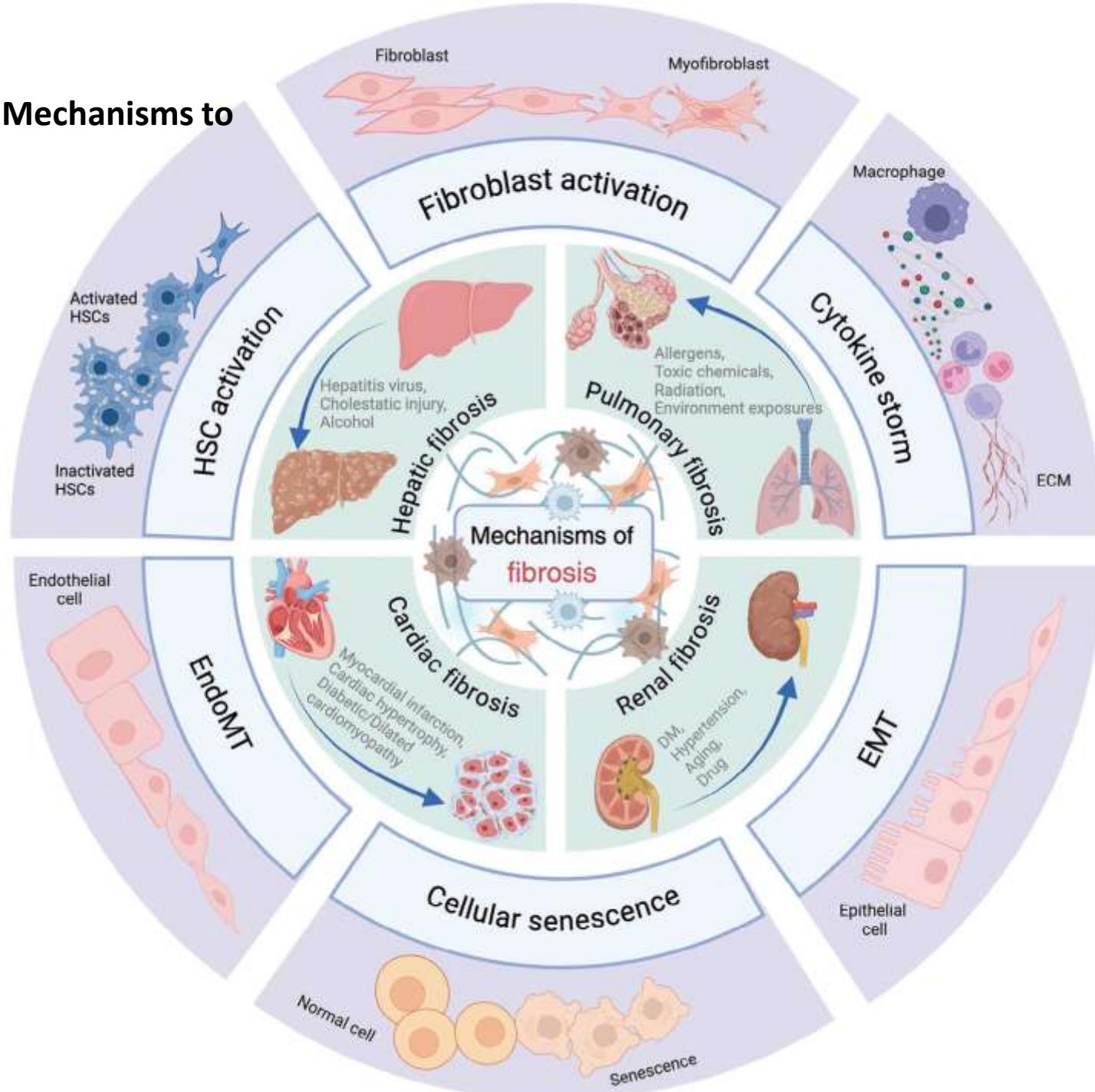
Table 1. Senescence in fibrosis *in vivo*

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 γ -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	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 ₄ - or NASH-induced liver fibrosis in C57BL/6N mice	α PAR-specific CAR T cells	CAR T cells efficiently eliminated senescent cells, reduced fibrosis, and improved liver function in mice	[88]

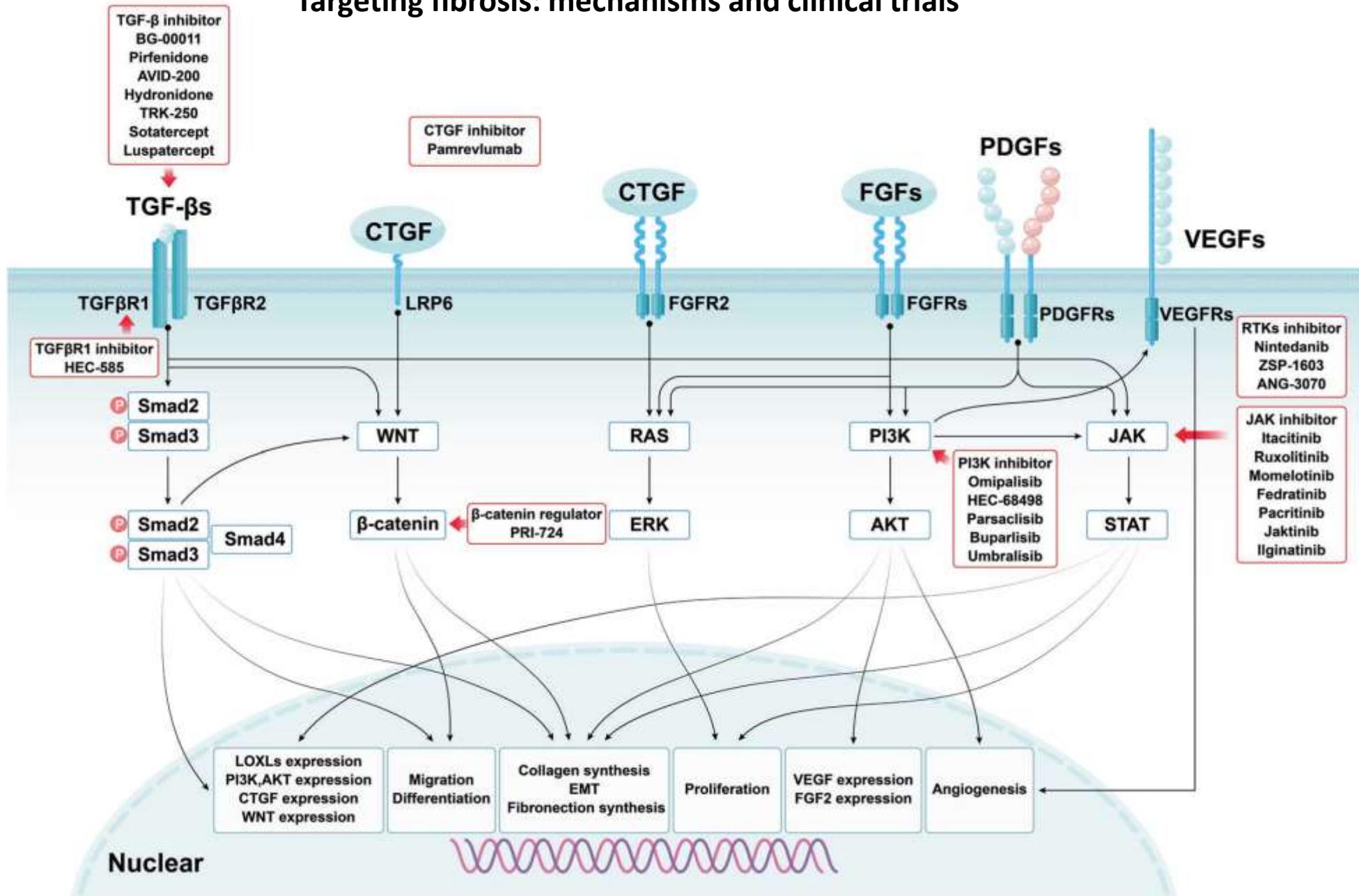
FIBROSIS



Targeting Fibrosis: From Molecular Mechanisms to Advanced Therapies

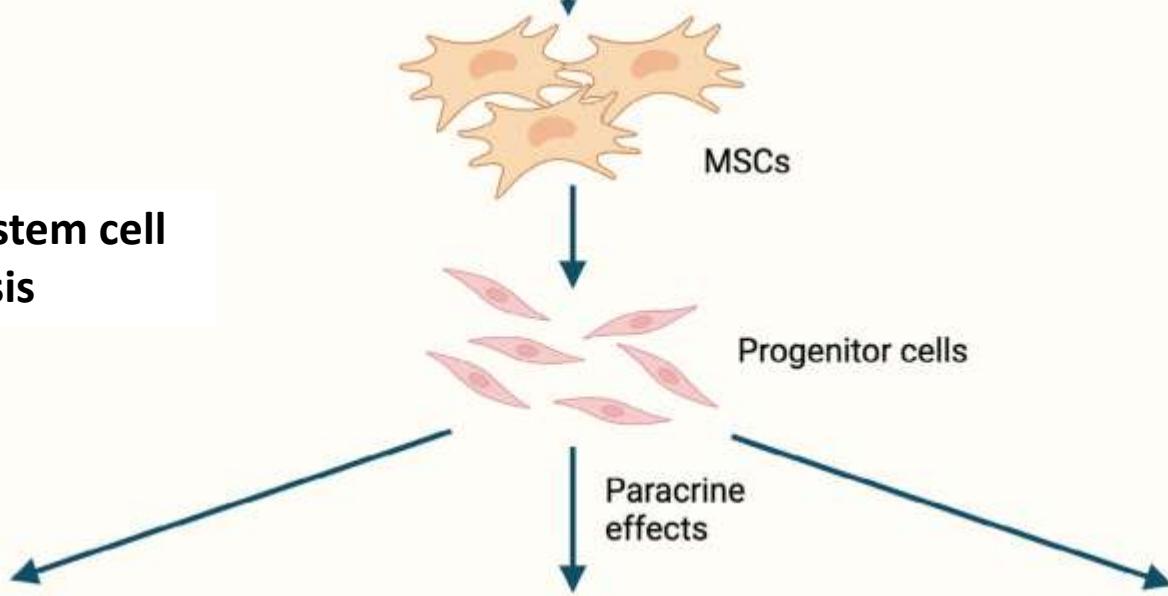


Targeting fibrosis: mechanisms and clinical trials





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



Anti-inflammatory effects

- Inhibit secretion of cytokines, chemokines and growth factors (IL-1 β , IL-5, IL-6, IFN γ , TNF α , TGF β)
- Inhibit immunocyte infiltration
- Promote polarization of M2 macrophage

Antifibrotic effect

- Inhibit EMT
- Inhibit ECM deposition
- Inhibit activation of myofibroblasts
- CAR-T against FAP $^+$ 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

ORIGINAL RESEARCH



CAR-Macrophage Therapy Alleviates Myocardial Ischemia-Reperfusion Injury

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

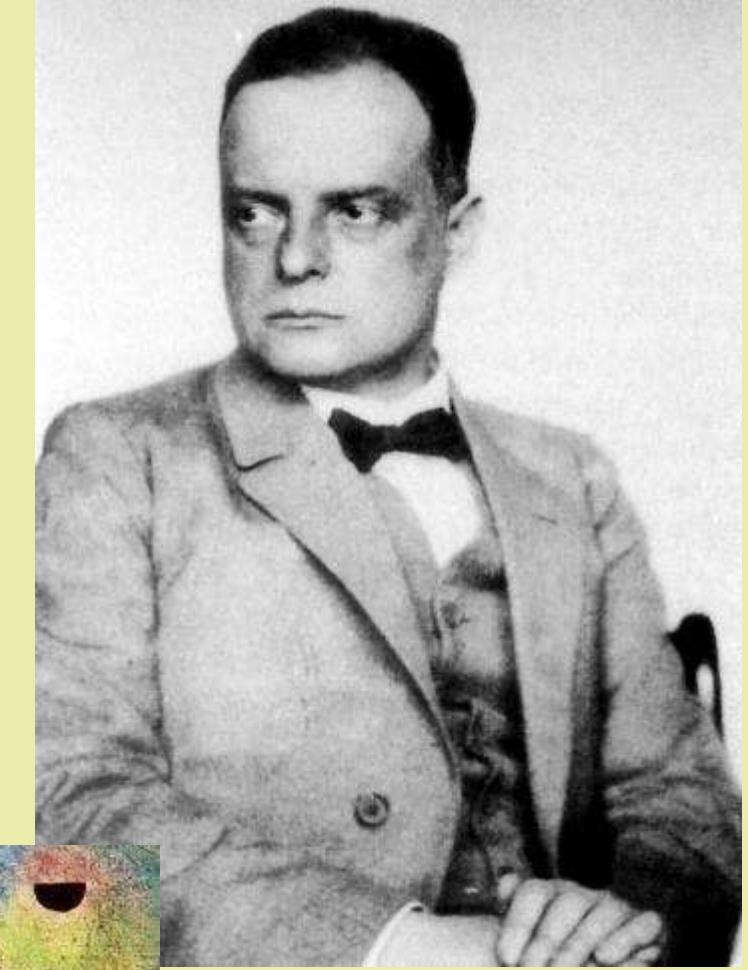
Circulation Research. 2024;135:1161–1174

Cell

Article

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

KÖSZÖNÖM A
FIGYELMET!



1879-1940

