

# Natriuretic Peptides and Calcium Signaling in Cardiac Myofibroblasts: Experimental Models, Ac16 Cells and Related Systems

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## SUMMARY

Natriuretic peptides (primarily ANP, BNP, and CNP) are cardiac hormones with fundamental endocrine and paracrine functions in cardiovascular homeostasis. Their signaling through receptors with guanylate cyclase activity (NPR-A and NPR-B) and the NPR-C receptor regulates physiological and pathological processes, such as cGMP modulation, cell proliferation, fibrosis, and intracellular calcium homeostasis. Although most of the literature has focused on generic cardiomyocytes or cardiac fibroblasts, there is evidence indicating that these signals can indirectly modulate Ca<sup>2+</sup> release and the myofibroblastic phenotype especially via cGMP/PKG-dependent mechanisms or L-type calcium inhibition, with potential antifibrotic impact.

## Natriuretic Peptide System and Intracellular Signaling

### Composition and Receptors

The PNs include:

- ANP (atrial natriuretic peptide)
- BNP (B-type natriuretic peptide)
- CNP (C-type natriuretic peptide)
- These join:
  - **NPR-A/GC-A:** main ligand of ANP and BNP → ↑cGMP via guanylate cyclase.

- **NPR-B/GC-B:** preferential receptor for CNP → ↑cGMP.
- **NPR-C:** traditionally considered a “capture/degradation” receptor, but with the ability to signal via Gi that modulates cAMP and influences ion channels. Wikipedia

The generation of cGMP triggers effects through PKG (protein kinase G), regulation of ion channels, and other cellular targets, and negatively modulates pro-fibrogenic pathways such as TGF-β1. MDPI

### Calcium Signaling Mechanisms Affected by Natriuretics

#### Direct Effects on Calcium Channels

Although there are no direct studies on AC16 myofibroblasts, classic works show that:

- CNP using NPR-C can inhibit currents of L-type  $\text{Ca}^{2+}$  channels in cardiomyocytes, reducing  $\text{Ca}^{2+}$  influx and modulating excitability. PubMed

This modulation of the  $\text{Ca}^{2+}$  channel suggests a potential *indirect effect* in that cellular  $\text{Ca}^{2+}$  loads also occur in non-excitable cells (such as fibroblasts), since  $\text{Ca}^{2+}$ -dependent channels can influence profibrotic signaling pathways.

### cGMP-Dependent Signaling and $\text{Ca}^{2+}$

The increase in cGMP by ANP/BNP/CNP can have multiple effects on  $\text{Ca}^{2+}$  regulation:

- Activation of PKG, which can modulate proteins that interact with the  $\text{Ca}^{2+}$  release and reuptake machinery.
- Interaction with  $\text{Ca}^{2+}$  channels mediating entry or mobilization, for example, TRP channels or SOCE ventilators involved in cardiac fibroblasts. PMC

## Effects of Natriuretics on Cardiac Fibroblasts and Myofibroblasts

### Proliferation, Differentiation and Fibrosis

Several lines of research show:

- ANP and BNP inhibit proliferation and transformation to myofibroblasts and decrease the synthesis of extracellular matrix in cardiac fibroblasts. MDPI+1
- This occurs through antagonism to profibrogenic signals (TGF- $\beta$ 1, AngII), modulating intracellular  $\text{Ca}^{2+}$  signaling indirectly by suppressing fibrogenesis-dependent  $\text{Ca}^{2+}$  promoting pathways. MDPI

Although these actions have not been directly linked to  $\text{Ca}^{2+}$  release in AC16 myofibroblasts, the inhibitory role in proliferation and transformation suggests a modulation of  $\text{Ca}^{2+}$ -dependent routes, since Ion  $\text{Ca}^{2+}$  is central to the activation of differentiation pathways (e.g.  $\text{IP}_3$ , TRP, SOCE). MDPI

### $\text{Ca}^{2+}$ Signals in Cardiac Fibroblasts

Cardiac fibroblasts depend on increases in intracellular  $\text{Ca}^{2+}$  for differentiation into myofibroblasts and ECM production. Multiple channels and mechanisms—such as  $\text{IP}_3$ -R, TRP channels, SOCE, Orai1—give shape to these  $\text{Ca}^{2+}$  signals. MDPI, PNs, by modulating second messenger pathways (cGMP/PKG), can interact with these pathways by modulating the global intracellular  $\text{Ca}^{2+}$  profile, although this effect requires specific direct evidence for AC16 or human cardiac myofibroblasts.

## Integration of Natriuretic Signals with Calcium Signaling in Cardiac Remodeling

### Anti-Fibrosis Mechanisms

PN antagonize fibrogenic signals that typically trigger elevated  $\text{Ca}^{2+}$  responses in fibroblasts:

- Inhibition of TGF- $\beta$ 1 and the activation of Smad mediated by PKG. PubMed
- They reduce proliferation and conversion to myofibroblasts. MDPI

### Connectivity with $\text{Ca}^{2+}$ Signals

Although many studies of  $\text{Ca}^{2+}$  in fibroblasts focus on TRP channels, SOCE, and other mechanical sensors, PN via cGMP can indirectly affect these pathways by modulating the expression or function of those proteins [1-6].

## Conclusion and Knowledge Gaps

- Direct evidence of  $\text{Ca}^{2+}$  release in AC16 myofibroblasts in response to PN is limited or nonexistent.
- In general cardiac cells, PN modulate  $\text{Ca}^{2+}$  influx (e.g., inhibition of L-type channels by CNP/NPR-C). PubMed
- In cardiac fibroblasts, PN inhibit profibrogenic pathways and transformation to myofibroblast, which implies influence on  $\text{Ca}^{2+}$ -dependent signaling of profibrogens such as TGF- $\beta$ 1. MDPI
- $\text{Ca}^{2+}$  pathways ( $\text{IP}_3$ , SOCE, TRP) are central to fibroblast activation, and natriuretics can modulate these pathways indirectly through effects on second messengers and pro/anti-fibrotic signals, but specific evidence is required in AC16 or equivalent human models.

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