



*Printemps de la
Cardiologie*

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Facultés des sciences médicales
et paramédicales, Marseille
*Faculty of Medical and Paramedical
Sciences, Marseille*

MOBIDIC: Use peripheral blood MOnonuclear cells as Biomarkers of DIabetic Cardiomyopathy

Maëlle Cherpaz, Hélène Thibault, Mélanie Paillard et Cyrille Bergerot.

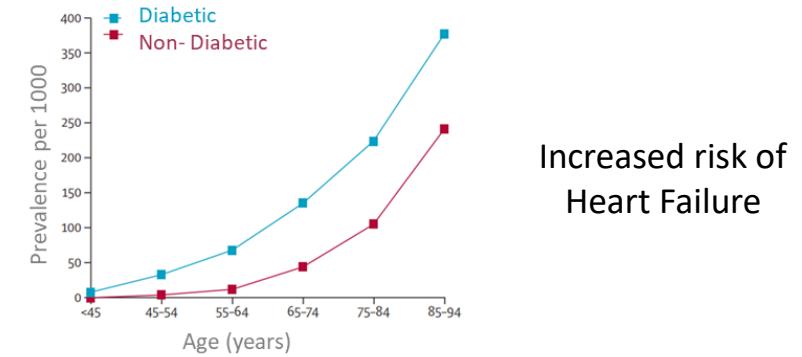
Statement of Competing of Interest

I do not have any potential disclosure to report

Introduction



First cause of death:
cardiovascular diseases



Increased risk of
Heart Failure

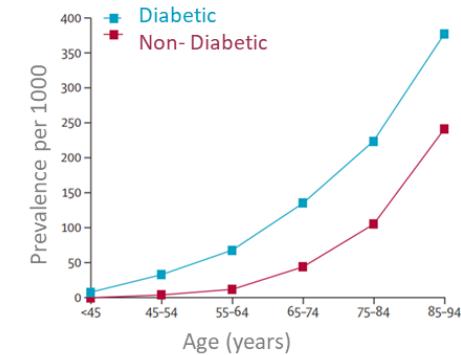
Introduction



T2D associated with Metabolic Syndrome (MS)



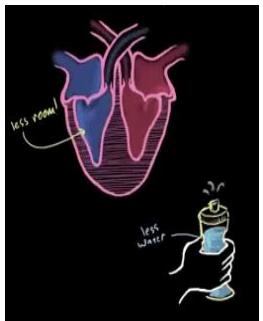
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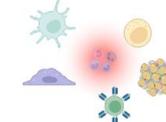


Hypertrophy



Diabetic Cardiomyopathy (DCM): High Risk of Evolution towards Heart Failure with preserved Ejection Fraction (HFpEF)

- Thickening of heart muscle walls
- Decreased cardiac filling
- Preserved ejection fraction



NT-proBNP



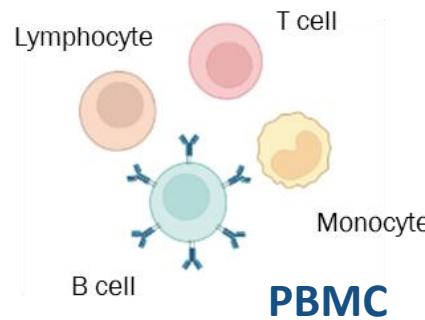
Cardiac phenotype by imaging



Late and Non T2D specific → Find new biomarkers

Introduction

Peripheral Blood Mononuclear Cells (PBMC): novel non-invasive biomarkers



Ca²⁺ signalling involved in activation/ polarization of PBMC

+

In B cells of T2D patients: Alteration of calcium homeostasis

Belia et al, 2009; Balasubramany et al, 2000

PBMC: inflammatory signature

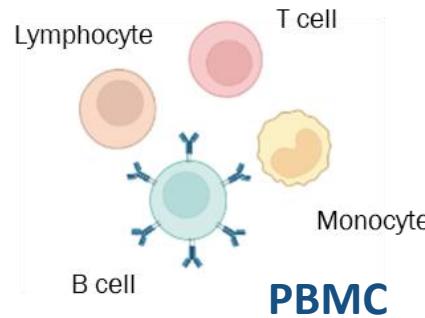
Shift in lymphocyte profile
Increased intermediate monocytes

- ➔ Association with T2D and obesity
- ➔ Use of monocyte as biomarker of cardiac dysfunction

Rattik et al, 2018; Olson et al, 2015; Al Dubayee et al, 2018 Zhong et al, 2022

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Hypothesis:

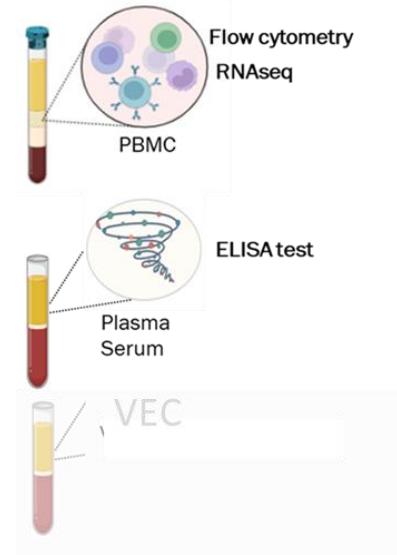
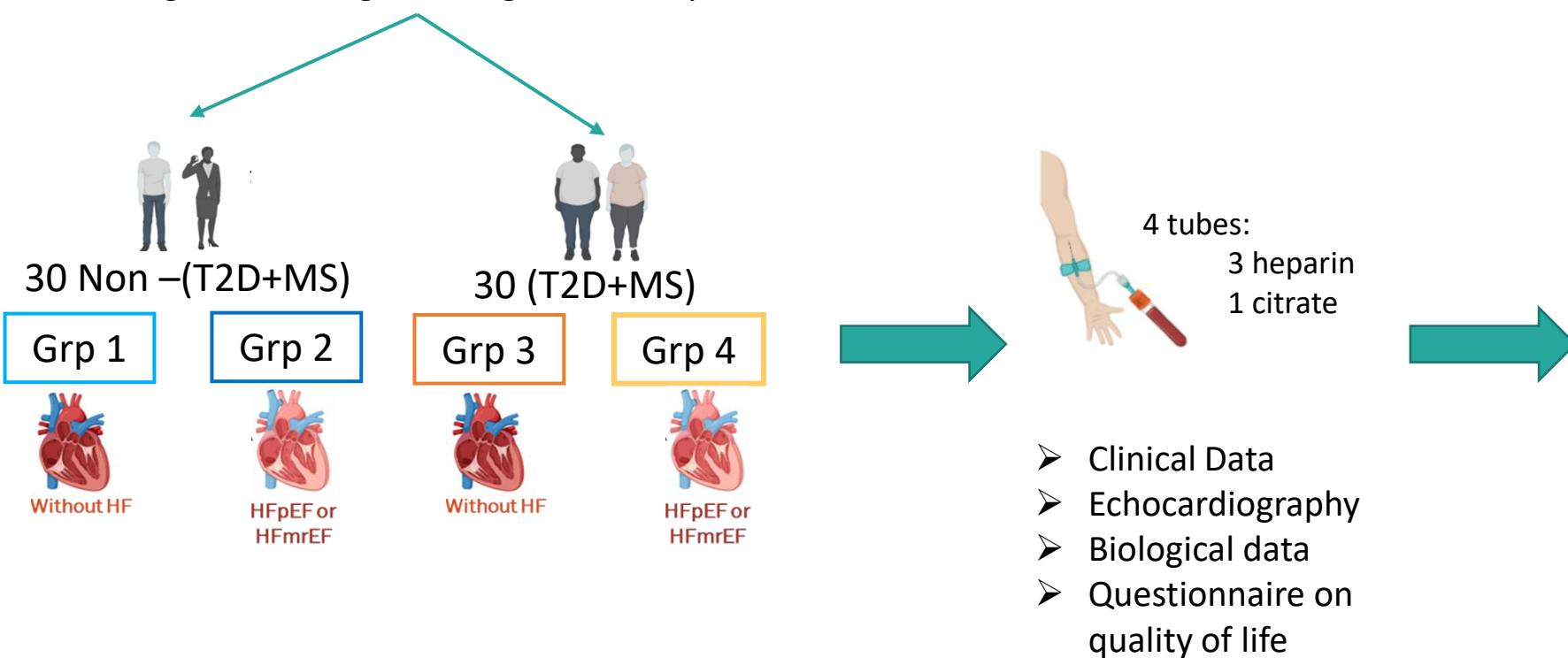
PBMC may carry the :

- **molecular signature of cardiac remodelling and function**
- **may be a DCM biomarker**

Methods

Commun Criteria:

- ✓ Men – Women 40 at 80 years old
- ✓ LVEF > 40%
- ✓ Agree to biological and genetic analysis



Expected results

Scientific objective: compare PBMC profile from T2D+MS with non T2D+MS patients with or without HFpEF/HFmrEF (LVEF > 40%)

