

NONPROLIFERATIVE RETINOPATHY

Vascular

Microaneurysms

Acellular (nonperfused) capillaries

Pericyte loss

Varicose, hypercellular capillaries (IRMA)

Thickening of capillary basement membrane

Hemorrhage

Edema (especially macular)

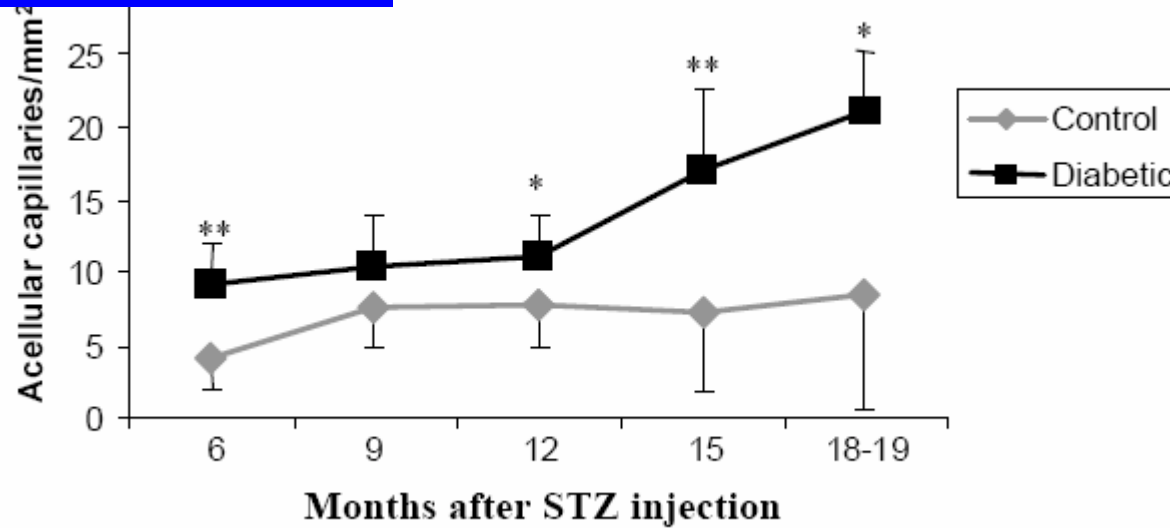
Nonvascular

Death of neurons (and glia?)

PROLIFERATIVE RETINOPATHY

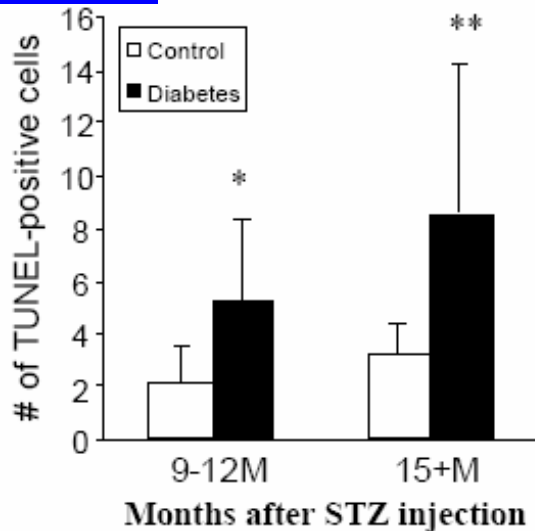
Neovascularization

Acellular capillaries

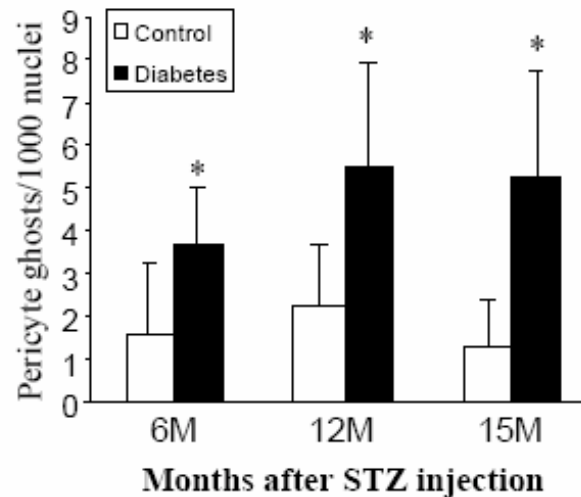


Diabetic C57B1/6J mice develop vascular lesions of early stages of diabetic retinopathy

TUNEL



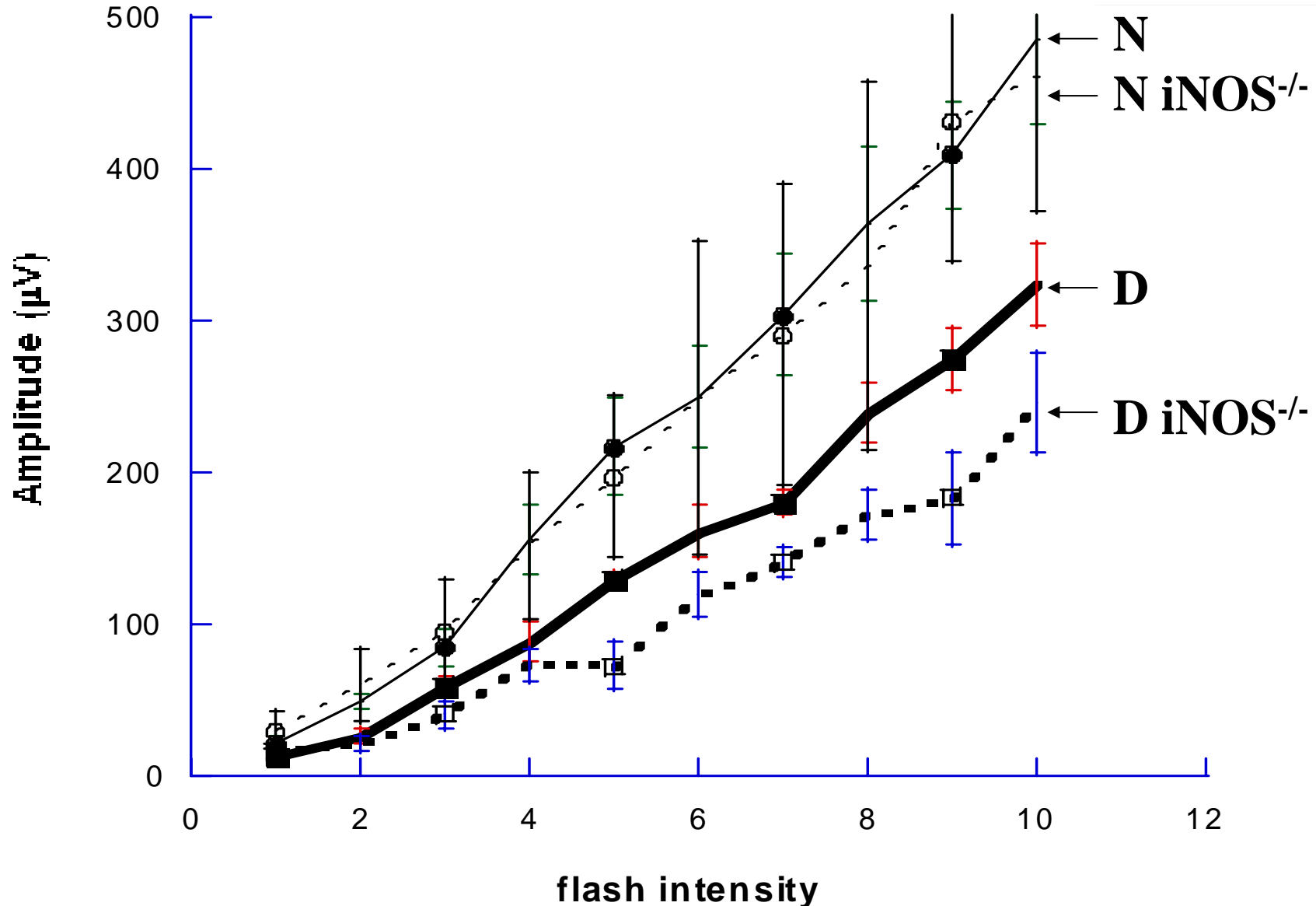
Pericyte ghosts



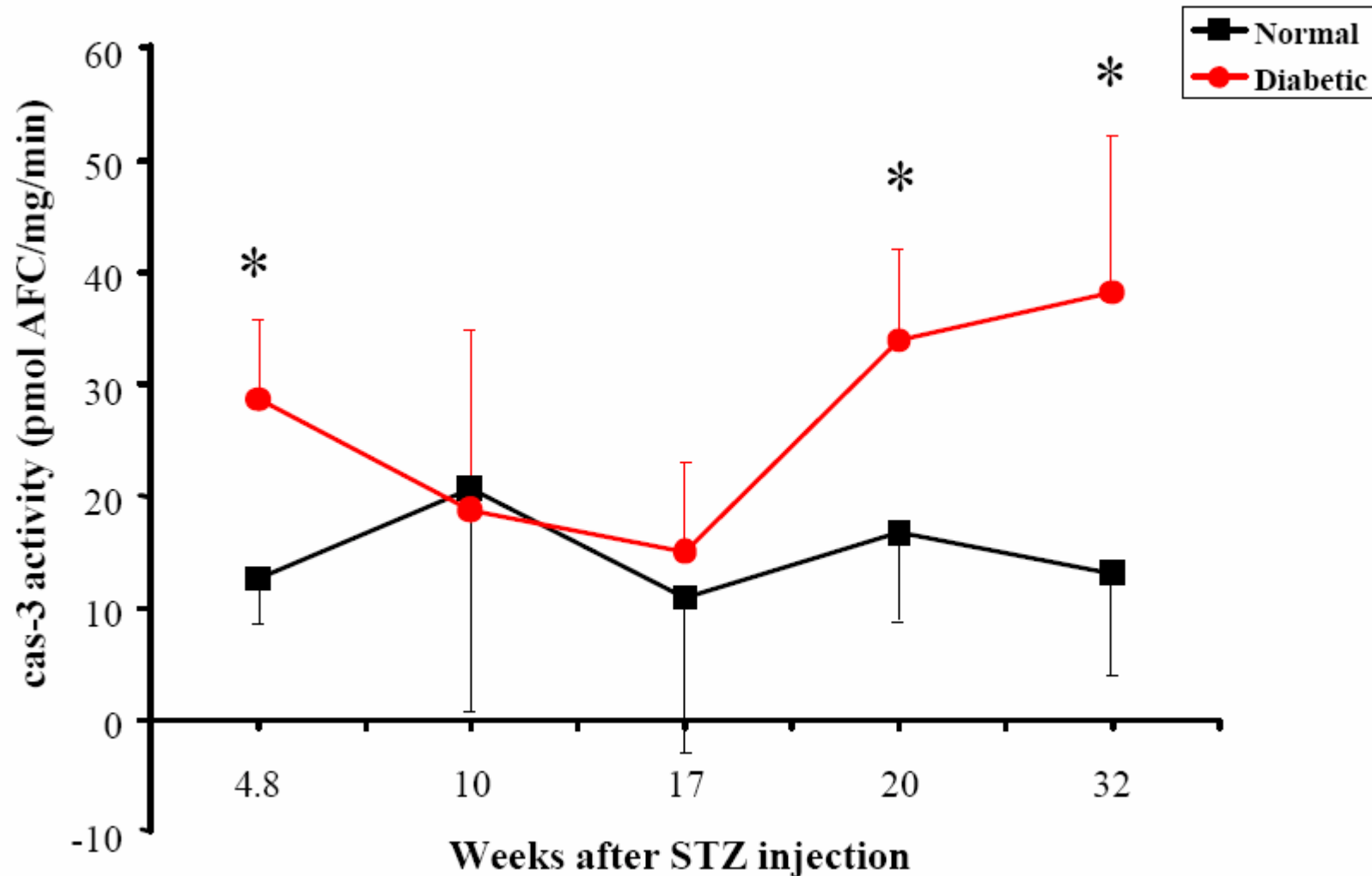
Relation of vascular lesions and
neurodegeneration in diabetes:
C57BL/6J mouse:

Collaboration with DongFen Chen, Schepens
Eye Research Institute, Boston

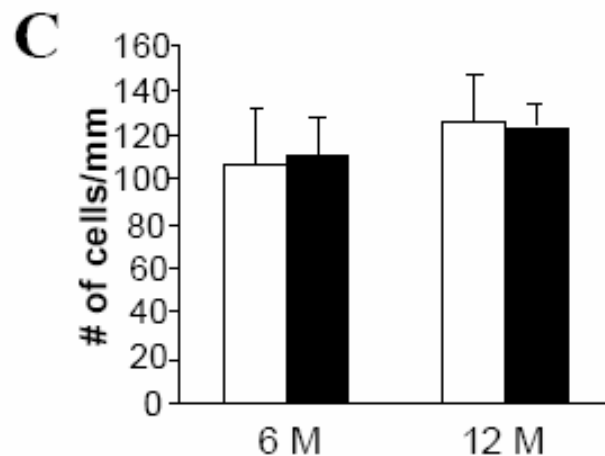
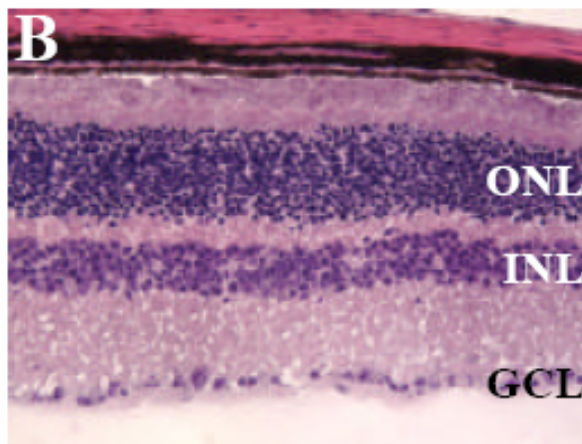
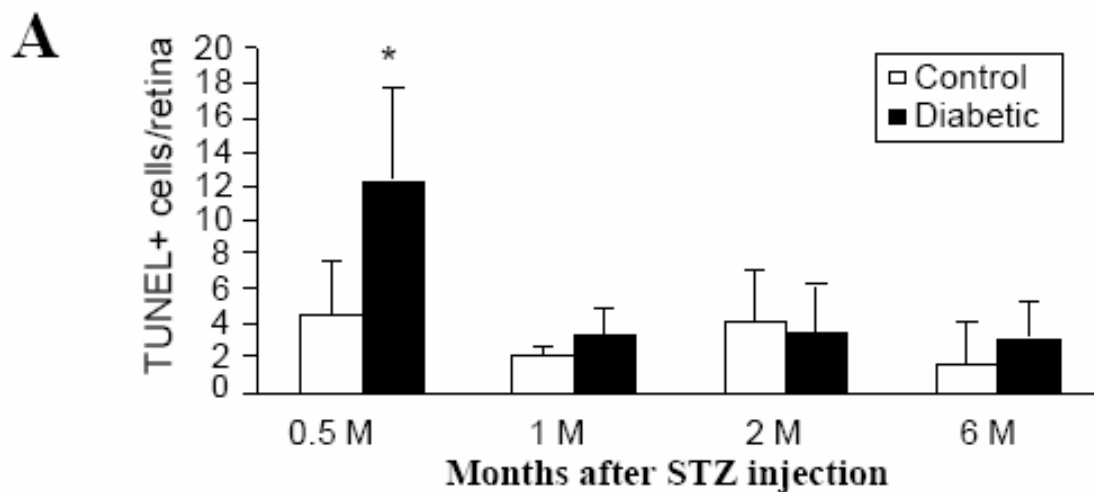
Diabetes-induced decrease in retinal function in C57Bl/6 mice (8 mos diabetes)



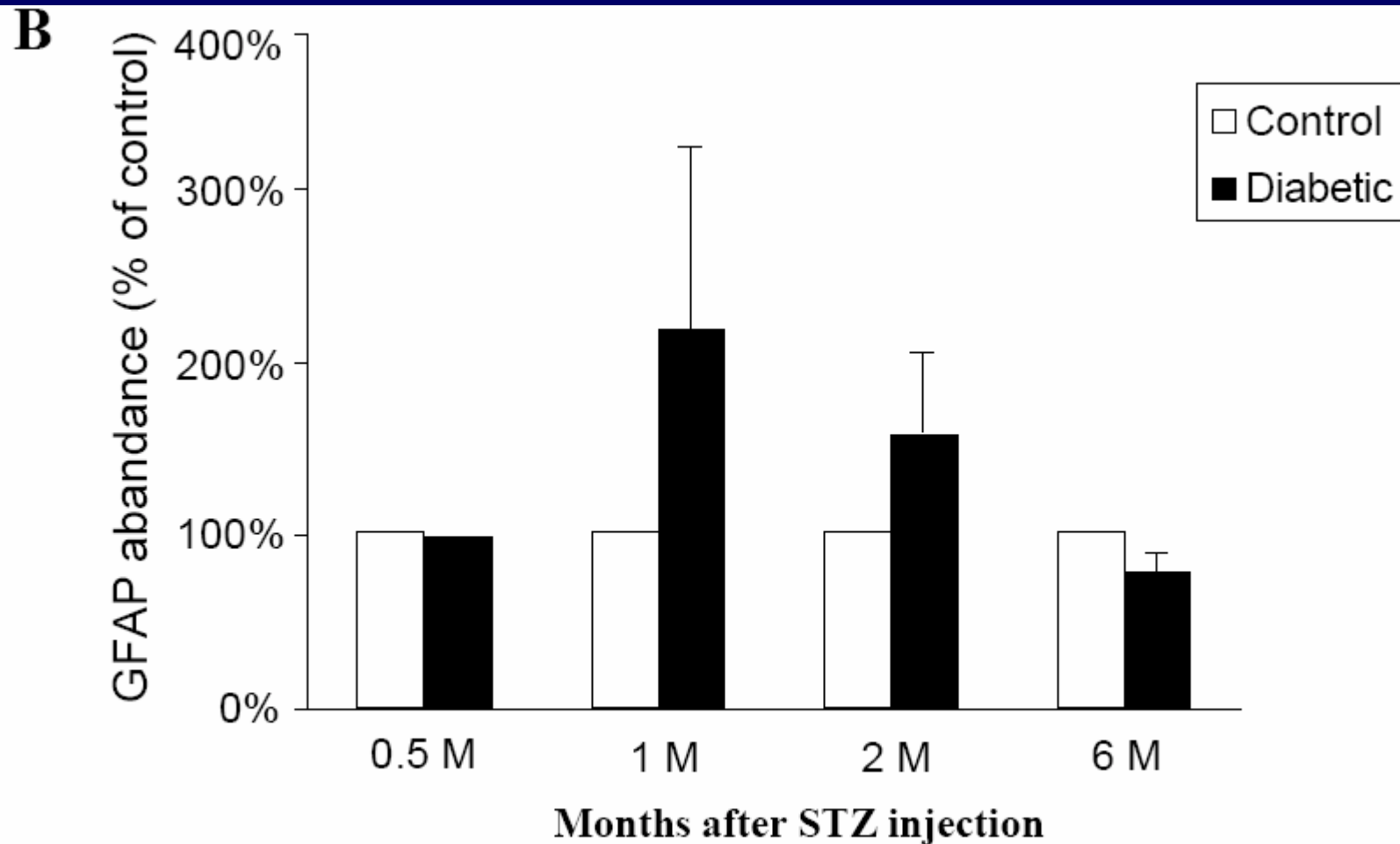
Pro-apoptotic signals occur in multiple phases in retina of diabetic C57Bl/6J mice



Apoptotic signals in retinal ganglion cells are not maintained in diabetic mice



Glial activation is transient in retina of diabetic mice



In contrast to rats, diabetic C57Bl/6J mice develop vascular lesions consistent with the early stages of diabetic retinopathy, in the apparent absence of neuronal degeneration or glial activation.

This suggests that neurodegeneration does not play a critical role in the development of vascular lesions of diabetic retinopathy

Strain comparison of rates at which lesions of retinopathy develop

Induced diabetes

C57B1/6J

129P3J

DBA/1LacJ

MRL/MpJ

A/J

All animals killed at
6 mos diabetes

Spontaneous diabetes

KK.Cg-A^y/J

Akita

Models that would be predicted to accelerate development of diabetic retinopathy:

increased capillary occlusion

(ICAM transgenic)

increased rate of capillary degeneration

increased oxidative stress

increased aging

increased lipid concentration (LDLr KO)

Eye collection for evaluation of retinopathy

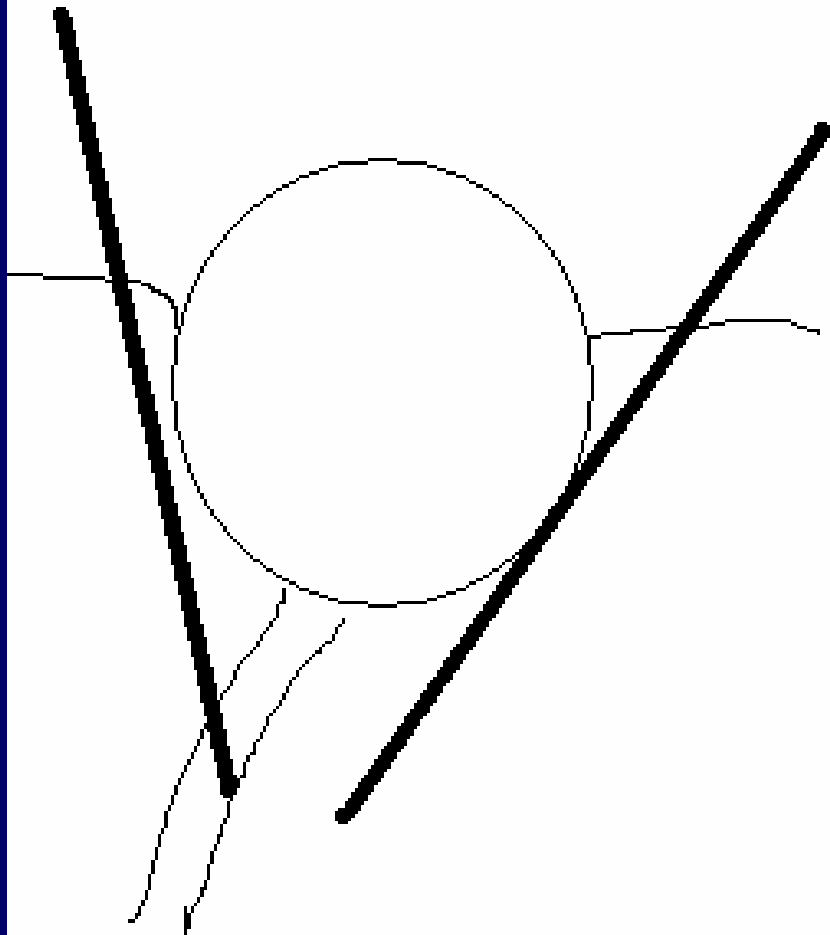
At least 5 animals per experimental group (include age-matched nondiabetic and diabetic controls). The longer the duration of diabetes, the better (C57bl/6 mice require at least 6 mos diabetes before retinal microvascular lesions can be detected).

Enucleate eye. Tissue needs to be collected fresh. Be careful not to push or compress the eye.

Fix both eyes into 10% buffered formalin (pH 7.4) in a microfuge tube. pH seems to be important.

To enucleate the eye:

DO cut deep into the socket



DO NOT cut across the socket

