

DOI:10.16781/j.CN31-2187/R.20230068

• 综述 •

## 中药小分子抑制新生血管形成机制的研究进展

周宇坤, 李青, 张昊瑞, 聂政, 宋洪元, 沈炜\*

海军军医大学(第二军医大学)第一附属医院眼科, 上海 200433

**[摘要]** 一系列中药复方在临床实践和基础实验中被证明能够抑制病理性新生血管形成。中药小分子是中药复方中实际发挥药效的活性成分, 特定中药小分子通过不同途径抑制血管内皮细胞生长因子的表达, 从而抑制新生血管形成, 为相关血管新生疾病的治疗提供了新思路。新生血管形成在糖尿病性视网膜病变等视网膜新生血管疾病中扮演了重要的角色, 也对恶性肿瘤的发生、发展具有重要作用。本文概述了新生血管形成的过程和机制, 并以黄酮类、皂苷类、生物碱等中药小分子为主, 讨论了中药小分子抑制新生血管形成的机制。

**[关键词]** 病理性新生血管形成; 视网膜新生血管; 肿瘤新生血管; 中药小分子; 黄酮类; 生物碱类; 皂苷类

**[中图分类号]** R 285; R 364.3      **[文献标志码]** A      **[文章编号]** 2097-1338(2023)05-0616-06

### Small molecules of traditional Chinese medicine inhibiting neovascularization: research progress on mechanism

ZHOU Yu-kun, LI Qing, ZHANG Hao-rui, NIE Zheng, SONG Hong-yuan, SHEN Wei\*

Department of Ophthalmology, The First Affiliated Hospital of Naval Medical University (Second Military Medical University), Shanghai 200433, China

**[Abstract]** A series of traditional Chinese medicine decoction have been proved to inhibit pathological neovascularization in both clinical practice and laboratory experiment. Small molecules of traditional Chinese medicine are the active components of compound decoction of traditional Chinese medicine. Some small molecules of traditional Chinese medicine can inhibit neovascularization by suppressing the expression of vascular endothelial cell growth factors in different ways, which provides new ideas for the treatment of angiogenesis diseases. Neovascularization plays an important role not only in retinal angiogenesis diseases such as diabetic retinopathy, but also in the development and progression of malignant tumors. In this review, the process and the mechanism of neovascularization were briefly described, and the mechanisms of inhibiting neovascularization by flavonoids, saponins, alkaloids and other small molecules of traditional Chinese medicine were reviewed in detail.

**[Key words]** pathological neovascularization; retinal angiogenesis; tumor angiogenesis; small molecules of traditional Chinese medicine; flavonoids; alkaloids; saponins

[Acad J Naval Med Univ, 2023, 44(5): 616-621]

病理性新生血管形成是一系列促血管生成信号和抑制血管生成信号共同维持的动态平衡受到破坏, 导致血管内皮增生、延伸而形成新血管的过程, 可见于多种病理性疾病<sup>[1]</sup>。近年来随着中药复方及其有效成分研究的不断深入, 越来越多中药小分子被发现具有抑制新生血管形成的作用, 对其机制研究已深入至细胞分子层面<sup>[2]</sup>。本文综述了中

药小分子抑制新生血管形成机制的研究进展。

### 1 新生血管形成

人体中新血管的形成分为2种形式, 即血管发生和新生血管形成。血管发生是指从内皮祖细胞开始从头分化并形成新的血管, 通常发生于不存在既有血管系统的情况下; 与血管发生对应, 从既有

[收稿日期] 2023-02-22      [接受日期] 2023-04-20

[基金项目] 国家自然科学基金(82271106), 上海申康医院发展中心项目(SHDC2020CR1043B, SHDC2020CR5014), 海军军医大学(第二军医大学)第一附属医院“234学科攀峰计划”(2020YXK058)。Supported by National Natural Science Foundation of China (82271106), Shanghai Hospital Development Center Program (SHDC2020CR1043B, SHDC2020CR5014), and the “234 Discipline Peak Climbing Plan” of The First Affiliated Hospital of Naval Medical University (Second Military Medical University) (2020YXK058)。

[作者简介] 周宇坤, 硕士生. E-mail: zhou139958@163.com

\*通信作者(Corresponding author). Tel: 021-31161999, E-mail: shenwei@smmu.edu.cn

血管系统萌发新的毛细血管继而形成新的血管系统的过程称为新生血管形成<sup>[3]</sup>。一般来说,新生血管形成的过程主要包括血管内皮细胞激活、尖细胞与茎细胞分化、新生血管腔形成、血管成熟<sup>[4]</sup>。研究揭示多种生长因子或物质具有促新生血管形成的作用,主要包括血管内皮生长因子(vascular endothelial growth factor, VEGF)、血小板源生长因子(platelet-derived growth factor, PDGF)、胎盘生长因子(placental growth factor, PLGF)、成纤维细胞生长因子(fibroblast growth factor, FGF)、血管生成素(angiopoietin, Ang)等<sup>[5]</sup>。其中VEGF最为重要,它与其特异性受体结合可激活下游一系列信号转导通路,包括MAPK/ERK、PI3K/Akt等,从而增强血管内皮细胞的增殖、迁移、成管等功能,并最终促进新生血管的形成<sup>[6]</sup>。

在以伤口愈合为代表的特定情形下,新生血管形成具有重要的病理生理学意义。在伤口愈合的生长阶段,随着炎症的消退,促炎的M1型巨噬细胞转化为抗炎的M2型巨噬细胞,并提高VEGF和PDGF的表达,增强血管内皮细胞的增殖、迁移、成管等功能,最终促进新生血管和肉芽组织的形成<sup>[7]</sup>。增强特定情形下的新生血管形成也是许多疾病治疗的重要切入点,如Ning等<sup>[8]</sup>的研究显示氩气能够在体内和体外实验中提高TGF-β和VEGF的表达,加速糖尿病模型小鼠的伤口愈合。

成年人体内血管系统在生理条件下基本保持静止,很少形成新的分支。新生血管形成过程的异常激活在许多疾病的发生、发展中有重要的作用,是一系列新生血管性疾病共同的病理特征。如在糖尿病性视网膜病变中,高血糖导致视网膜毛细血管周细胞凋亡、血管内皮细胞凋亡与基底膜增厚,使视网膜毛细血管闭塞缺血,继而上调缺氧诱导因子1α(hypoxia-inducible factor 1α, HIF-1α)水平、促进VEGF表达,最终促进视网膜新生血管形成,加重糖尿病性视网膜病变<sup>[9]</sup>。恶性肿瘤的发生、发展也存在明显的病理性新生血管形成<sup>[10]</sup>,除肿瘤特征性的缺氧微环境能够上调HIF-1α外<sup>[11]</sup>,恶性肿瘤中癌基因与抑癌基因的突变还可以通过不同途径上调VEGF等促新生血管形成因子的表达<sup>[12-13]</sup>。因此,针对性地选择能够抑制VEGF表达或与其特异性受体结合的药物以抑制新生血管形成是相关疾病的一种重要治疗思路。

## 2 中药复方与中药小分子

在临床实践中,一系列中药复方被证实具有抗新生血管形成的疗效。如四妙勇安汤通过抑制NF-κB/TNF-α与HIF-1α/VEGF通路降低一系列炎症因子及VEGF的水平,从而抑制糖尿病模型小鼠视网膜新生血管的形成<sup>[14]</sup>。三黄汤能够通过与极光激酶A作用抑制MAPK/ERK信号通路、降低VEGF的表达,从而抑制乳腺癌异种移植模型小鼠的肿瘤新生血管形成<sup>[15]</sup>。十全大补汤能够使鼠结肠癌模型小鼠的VEGF表达降低、内皮抑素表达升高,从而抑制肿瘤的生长、血管形成和转移<sup>[16]</sup>。近年来随着对中药有效成分认识的不断深入,结合现代生物医学研究方法,中药复方中许多具有抑制新生血管形成活性的中药小分子被发现<sup>[2]</sup>。

中药小分子主要指分子量<2 500的中药活性成分,通常不具有免疫原性,但有较好的生物相容性<sup>[17-18]</sup>,常见的如黄酮类、皂苷类、生物碱等。中药小分子发挥抑制新生血管形成作用的机制相对复杂,同一种中药小分子对于不同疾病可能存在不同甚至相反的作用,如人参皂苷Rg1被发现能够借由PI3K/Akt信号通路促进缺血性脑卒中患者的血管新生<sup>[19]</sup>,还可通过调节lncRNA核仁小RNA宿主基因7(small nucleolar RNA host gene 7, SNHG7)/miRNA-2116-5p/线粒体去乙酰化酶3(sirtuin 3, SIRT3)信号通路抑制高糖诱导的视网膜内皮细胞中VEGF的表达,呈现出抗新生血管形成的作用<sup>[20]</sup>。总体来说,中药小分子抑制新生血管形成的机制需要更为全面、深入的研究。

## 3 对新生血管形成有抑制作用的中药小分子

### 3.1 黄酮类

黄酮类化合物广泛存在于自然植物中,在植物中常与糖结合以糖苷的形式存在,常见的对病理性新生血管形成有抑制作用的黄酮类中药小分子包括黄芩苷、槲皮素、橙皮苷等<sup>[21]</sup>。

黄芩苷提取自植物黄芩的干燥根中。Shehatta等<sup>[22]</sup>研究发现,在小鼠艾氏实体瘤模型中黄芩苷能够通过抑制NF-κB/IL-1β信号通路及VEGF表达水平的升高抑制新生血管形成。Zhu等<sup>[23]</sup>研究发现,黄芩苷可以使鸡胚绒毛尿囊膜模型的细胞增殖能力呈现剂量依赖性降低,抑制模型新血管形成,基因测序结果发现以基质金属蛋白酶(matrix

metallopeptidase, MMP) -9 为代表的一系列基因表达下调。结合血管发生与新生血管形成在过程和机制上的相似性,以及 MMP-9 在新生血管形成等其他病理生理过程中溶解细胞外基质的功能<sup>[24-25]</sup>,可以推测黄芩苷能够通过下调 MMP-9 的水平抑制新生血管形成。此外还有证据表明黄芩苷在氧化应激中能够调节氧自由基水平、抑制蛋白激酶 C 表达,从而降低 VEGF 等促新生血管形成细胞因子的水平<sup>[26]</sup>。

槲皮素广泛分布于植物茎、皮、叶、芽中,多以芦丁或槲皮苷的形式存在。槲皮素能够使人脐静脉内皮细胞(human umbilical vein endothelial cell, HUVEC)及前列腺癌转基因大鼠模型的 VEGF、MMP-2 水平降低,抑制 PI3K/Akt 信号通路,从而抑制 HUVEC 的迁移、成管能力和肿瘤新生血管形成<sup>[27]</sup>。也有研究显示在链脲霉素诱导的糖尿病小鼠模型中,槲皮素能够经 Toll 样受体 4 (Toll-like receptor, TLR4) /NF-κB 信号通路降低 VEGF 的表达,抑制视网膜新生血管的形成<sup>[28]</sup>。

橙皮苷主要提取自酸橙、甜橙的干燥幼果中。Kim 等<sup>[29]</sup>发现橙皮苷能够抑制紫外线诱导的 VEGF 表达和 PI3K/Akt 信号通路激活,从而抑制无毛小鼠皮肤新生血管形成。

**3.2 皂苷类** 人参皂苷是分离自人参的一组皂苷化合物,分为原人参二醇和原人参三醇两组<sup>[30]</sup>,前者具有不同程度的抑制病理性新生血管形成活性,主要包括人参皂苷 Rb1、Rh2、Rg3 等。人参皂苷 Rb1 是人参中含量最高的皂苷,Lu 等<sup>[31]</sup>发现人参皂苷 Rb1 能够通过调节 miRNA-33a 和色素上皮源性因子(pigment epithelial-derived factor, PEDF) 的表达,经过氧化物酶体增殖物激活受体 γ (peroxisome proliferator-activated receptor γ, PPAR-γ) /NF-κB 通路在体外细胞实验中抑制 HUVEC 成管能力,具有抑制新生血管形成的潜力。有研究显示,人参皂苷 Rh2 在前列腺癌荷瘤小鼠模型中能够下调细胞周期调节蛋白 1 的水平,通过影响细胞周期抑制 VEGF、PDGF 等因子的表达,具有抑制新生血管形成的活性<sup>[32]</sup>。人参皂苷 Rg3 则在体外实验中通过抑制环氧合酶 2 和 VEGF 的表达抑制肺癌细胞的活力与迁移、侵袭、血管生成功能<sup>[33]</sup>。此外,Sun 和 Zhou<sup>[34]</sup>的研究发现人参皂苷 Rg3 能够降低链脲佐菌素诱导的糖尿病小鼠模型 TNF-α 与 VEGF 的表达,具有抑制视网膜新生血管

形成的活性。

除人参皂苷外,源于桔梗的桔梗皂苷 D 也能够抑制病理性新生血管形成。Li 等<sup>[35]</sup>发现桔梗皂苷 D 能够在非小细胞肺癌 A549 细胞中降低 VEGF 和 MMP-2 的表达,具有抑制新生血管形成的活性。

**3.3 生物碱类** 长春新碱是提取自长春花的生物碱,对新生血管形成和肿瘤细胞生长具有强烈抑制作用,在淋巴瘤、横纹肌肉瘤、白血病、小细胞肺癌等恶性肿瘤的治疗中作为化疗药物应用<sup>[36-39]</sup>。长春新碱发挥药理作用的主要机制为抑制微管蛋白聚合、干扰细胞周期,进而抑制细胞的增殖及其他功能<sup>[40]</sup>。有研究发现,用低于 IC<sub>50</sub> 的长春新碱处理缺氧状态下的胶质母细胞瘤细胞,能够下调过表达的 HIF-1α 水平并抑制 VEGF 的表达,从而发挥抑制肿瘤新生血管形成的作用<sup>[41]</sup>。

苦参碱是一类提取自苦参的生物碱,Ao 等<sup>[42]</sup>研究发现苦参碱能够在体外实验中降低 HUVEC 中 HIF-1α 水平,并抑制 VEGF 的表达,经由 PI3K/Akt 信号通路抑制 HUVEC 的增殖与成管能力,且在以关节滑膜新生血管形成为病理特征的类风湿关节炎大鼠模型中具有抑制新生血管形成的作用。

另一种具有抑制病理性新生血管形成活性的生物碱类小分子为汉防己甲素,Chen 等<sup>[43]</sup>的研究显示汉防己甲素在肺癌 A549 细胞中通过下调 HIF-1α 的水平抑制 VEGF 表达,进而抑制新生血管形成。

**3.4 其他** 丹参素与丹参酮均提取自丹参,丹参素为水溶性芳香酸类化合物,丹参酮为脂溶性二萜醌类化合物。Zhang 等<sup>[44]</sup>发现丹参素能够抑制 HUVEC 的迁移、成管能力,并降低 B16F10 黑色素瘤细胞中 VEGF、MMP-2 等促血管生成因子的表达,具有抑制新生血管形成的活性。Zhou 等<sup>[45]</sup>发现丹参酮 II A 能够抑制人卵巢癌细胞 A2780 中 VEGF 和环氧合酶 2 的表达,且在基于荷瘤小鼠模型的体内实验中抑制新生血管的形成。

姜黄素是一种提取自姜黄根茎的黄色色素,Pan 等<sup>[46]</sup>发现姜黄素通过抑制 VEGF 的表达抑制 PI3K/Akt 信号通路,进而抑制新生血管形成。Yang 等<sup>[47]</sup>发现姜黄素在体外实验中能够抑制人视网膜微血管内皮细胞的增殖,还能降低氧诱导视网膜病变模型小鼠的 VEGF 表达水平,从而抑制视网膜新生血管形成。

雷公藤红素和雷公藤甲素均提取自雷公藤的根皮,具有很强的抗氧化作用和毒性<sup>[48]</sup>。Li等<sup>[49]</sup>发现雷公藤红素可抑制HUVEC中HIF-1 $\alpha$ 和VEGF表达,在鸡胚绒毛尿囊膜实验中具有抑制血管形成活性。Luo等<sup>[50]</sup>的研究发现雷公藤甲素能够诱导内源性线粒体途径细胞凋亡,具有细胞毒性,且它还可通过下调VEGF水平抑制4T1乳腺癌细胞荷瘤模型小鼠的肿瘤新生血管形成。

#### 4 小结

新生血管形成在一系列恶性肿瘤与视网膜新生血管性疾病的发生、发展中扮演重要角色,抑制新生血管形成是治疗这些疾病的重要切入点之一。贝伐珠单抗和雷珠单抗作为VEGF单克隆抗体的代表性药物多年来被广泛应用于多种恶性肿瘤和视网膜新生血管性疾病的治疗中,其对新生血管形成的抑制作用切实有效,但其作用机制单纯针对VEGF,而不涉及VEGF上游或下游的信号通路,需要多次重复治疗且药效难以长久维持,单独使用甚至可能发生耐药<sup>[51-53]</sup>。因此,探寻新的能够从VEGF上下游信号通路抑制新生血管形成的治疗药物具有重大的现实意义,也是当前和未来抑制新生血管形成药物的主要研究方向之一。

在长期的临床实践中,中药复方被证实对各类血管新生疾病有明显的抑制作用,其药效在细胞和动物实验中也得到验证。中药小分子是中药复方或单药发挥药效的物质基础,随着对其认识的深入及分离、提取方法的进步,越来越多的中药小分子的作用机制被揭示。综合本文整理的研究结果,中药小分子抑制新生血管形成的主要途径包括对NF- $\kappa$ B信号通路及HIF-1 $\alpha$ 的抑制、下调VEGF和MMP的表达、抑制下游PI3K/Akt信号通路的激活,或通过干扰细胞周期影响细胞增殖、迁移能力,最终抑制新生血管形成。在未来,对于这些蛋白和信号通路的深入研究或发现更多受中药小分子作用调控的蛋白和信号通路,将有助于更全面地了解中药小分子抑制新生血管形成的作用机制,为临床治疗血管新生疾病提供新思路。

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