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Manufacturer: Singani Pharma

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# Uso Crônico de Decanoato de Nandrolona Como Fator de Risco Para Hipertensão Arterial Pulmonar em Ratos Wistar

Chronic Use of Nandrolone Decanoate as Risk Factor for Pulmonary Arterial Hypertension in Wistar Rats

Ciências do Exercício e do Esporte



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## RESUMO

**Introdução:** O uso indiscriminado de esteróides anabolizantes sintéticos, análogos à testosterona, implica aumento do risco cardiovascular e hipertrofia cardíaca. Assim, o aumento da massa ventricular direita corrigido pelo peso corporal (i.e., hipertrofia ventricular direita - HVD), poderia elevar o risco para o desenvolvimento de hipertensão arterial pulmonar (HAP). **Objetivos:** Examinar os efeitos do tratamento em longo prazo com decanoato de nandrolona na HVD e sua relação com a HAP em ratos. **Métodos:** 16 ratos Wistar com três meses de idade foram aleatoriamente divididos em dois grupos: 1) controle-sham (CONT, n = 8); 2) tratados com decanoato de nandrolona (DECA, n = 8). O tratamento consistiu na aplicação intramuscular de Deco-durabolín® 6,0mg/kg<sup>-1</sup> de peso corporal durante quatro semanas. Após tratamento, os animais foram anestesiados com hidrato de cloral (4,0mL/kg<sup>-1</sup>, ip), submetidos à cateterização da artéria femoral para registro da pressão arterial média (PAM) e frequência cardíaca (FC). O coração, os rins e o fígado foram retirados, pesados e avaliados os índices de hipertrofia, os quais foram calculados pela razão da massa do órgão pelo peso corporal (mg.g<sup>-1</sup>). **Resultados:** Os animais tratados com DECA apresentaram aumento (p < 0,01) do peso corporal (338 ± 6g) vs. CONT (315 ± 5g). Não houve alterações da PAM, embora houvesse (p < 0,01) bradicardia nos animais tratados com DECA (321 ± 13bpm) vs. CONT (368 ± 11bpm). Verificou-se significativa (p < 0,01) hipertrofia dos ventrículos e rins, mas não no fígado. A correlação entre a HVD e PAM no grupo DECA apresentou coeficiente de Pearson positivo e maior (r<sup>2</sup> = 0,4013) quando comparado com o controle (r<sup>2</sup> = 0,0003). **Conclusões:** Esses dados demonstram que o uso em longo prazo de decanoato de nandrolona induz importante bradicardia e HVD, o que sugere aumento do risco para HAP.

**Palavras-chave:** esteróide anabolizante, pressão sanguínea, hipertrofia ventricular, hipertensão arterial pulmonar.

## ABSTRACT

**Introduction:** The unsystematic use of anabolic steroids, synthetic analogs of testosterone, implies enhanced cardiovascular risk and cardiac hypertrophy. Thus, increased right ventricular mass corrected by the body weight (i.e. right ventricular hypertrophy - RVH) could raise the risk for development of pulmonary arterial hypertension (PAH). **Objectives:** to examine the effects of long-term chronic treatment with nandrolone decanoate on the RVH and its relationship with PAH in rats. **Methods:** 16 three-month Wistar male rats were treated with nandrolone decanoate (6.0 mg/kg<sup>-1</sup> body weight; DECA, n=8) or control vehicle (CONT, n=8). The drug and vehicle were administered by a single injection in the femoral muscle once a week for 4 weeks. After the treatment, rats were anesthetized with chloral hydrate (4.0mL/kg<sup>-1</sup>, ip), and catheterized in the femoral artery. Twenty-four hours later, mean arterial pressure (MAP) and heart rate were measured. The heart, kidneys and liver were removed, weighed and the rates of hypertrophy (RH) were measured, which were calculated by the ratio of the weight of the organs by the body weight (mg.g<sup>-1</sup>). **Results:** DECA treatment increased body weight (338 ± 6g; p <0.01) vs. CONT (315 ± 5g). This treatment had no effect on the MAP (CONT, 110±4mmHg; DECA, 113 ± 4mmHg). However, the bradycardia of animals treated with DECA (321 ± 13bpm, p<0.01) was significantly lower than that of CONT (368 ± 11bpm). RH increased (p <0.01) the cardiac ventricles and the kidneys, but not in the liver. The correlation between the RVH and MAP in DECA showed positive and higher Pearson's coefficient (r<sup>2</sup> = 0.4013) vs. CONT (r<sup>2</sup> = 0.0003). **Conclusions:** It was concluded that chronic nandrolone decanoate treatment induced bradycardia and RVH, which suggests increased risk for PAH.

**Keywords:** anabolic steroids, blood pressure, ventricular hypertrophy, pulmonary arterial hypertension.

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