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The relationship between high-density lipoproteins and monocytes in older adults.

Gavrila Ang

BIOL-
606

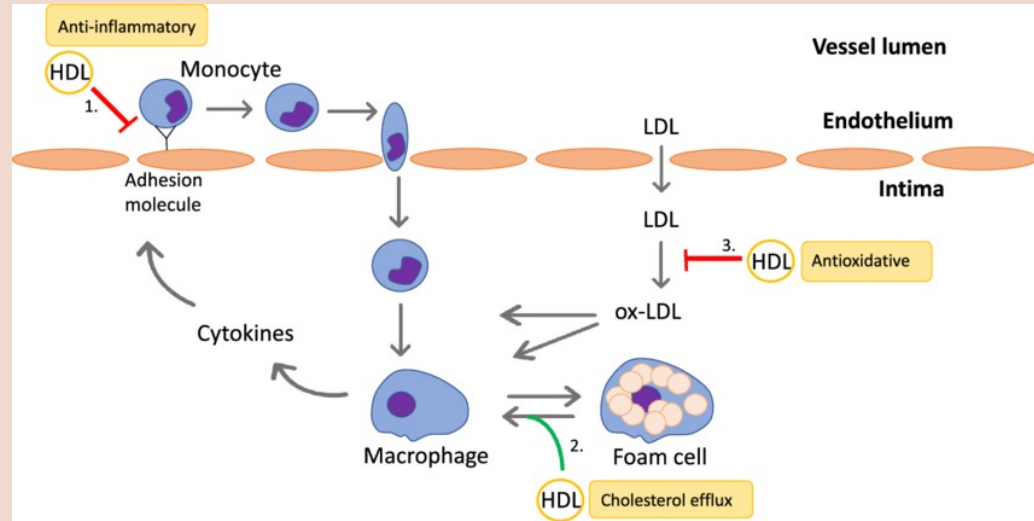
...

Background

Atherosclerosis is caused by the accumulation and subsequent oxidation of LDL in the arterial intima

Ox-LDL promotes differentiation of monocytes into macrophages that scavenge ox-LDL and transform into foam cells.

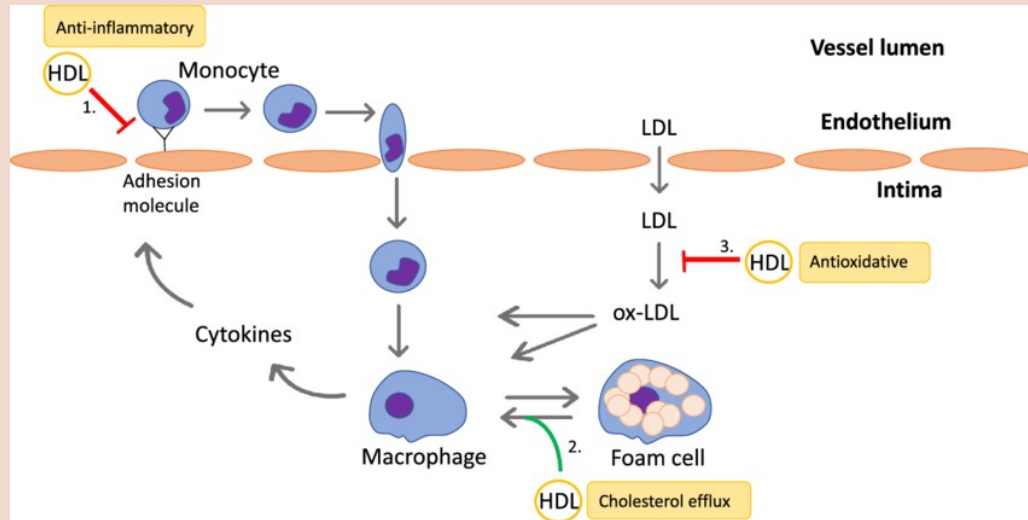
Macrophages express cytokines which stimulate the endothelium to express adhesion molecules leading to interaction with circulating monocytes.



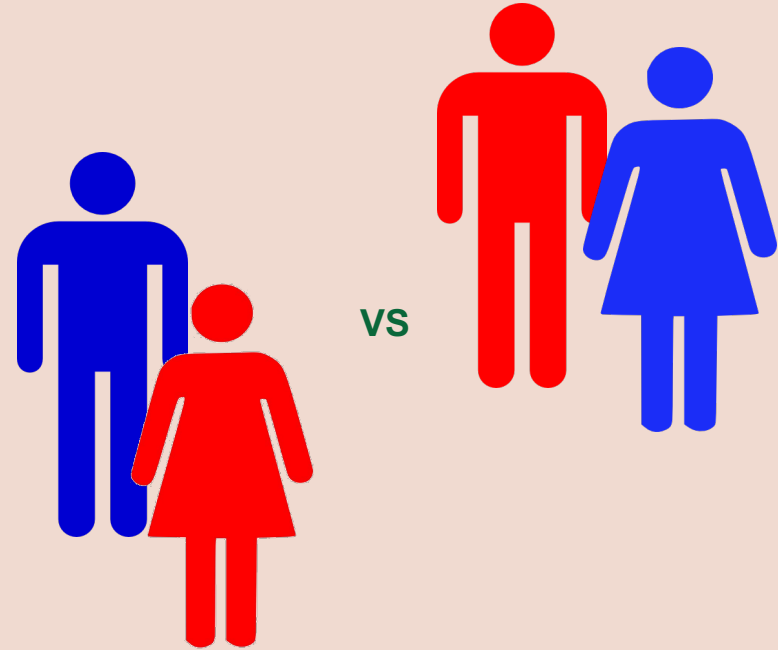
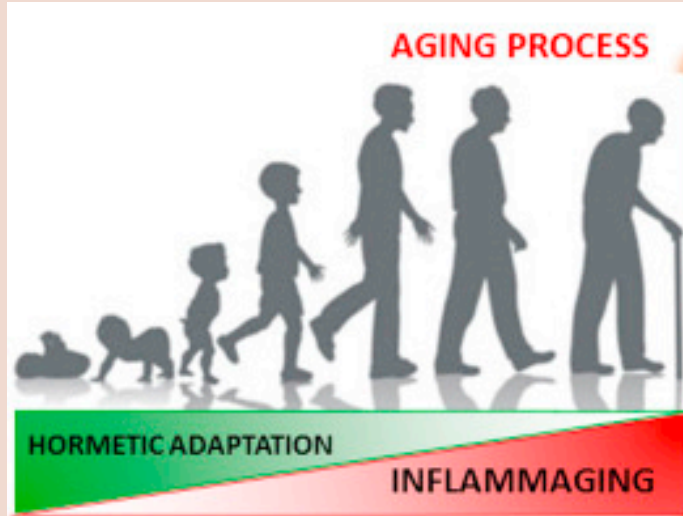
... The effects of HDL on monocytes



- 1) HDL inhibits expression of adhesion molecules on the endothelium and thereby inhibits monocyte chemotaxis and formation of foam cells.
- 2) HDL mediates cholesterol efflux and thereby decreases the accumulation of foam cells.
- 3) The primarily antioxidative effect of HDL is inhibition of oxidation of LDL.



... Age and Sex Differences in Inflammation



Quick Overview

Lab Session Overview:

10:30 AM - 4PM – transportation provided by HAPI-CHI

Morning

Blood & Urine Sample Collection
Health History Interview
Balance & Posture Tests

Lunch – Meal is provided by HAPI-CHI

Blood Pressure & Blood Flow Testing

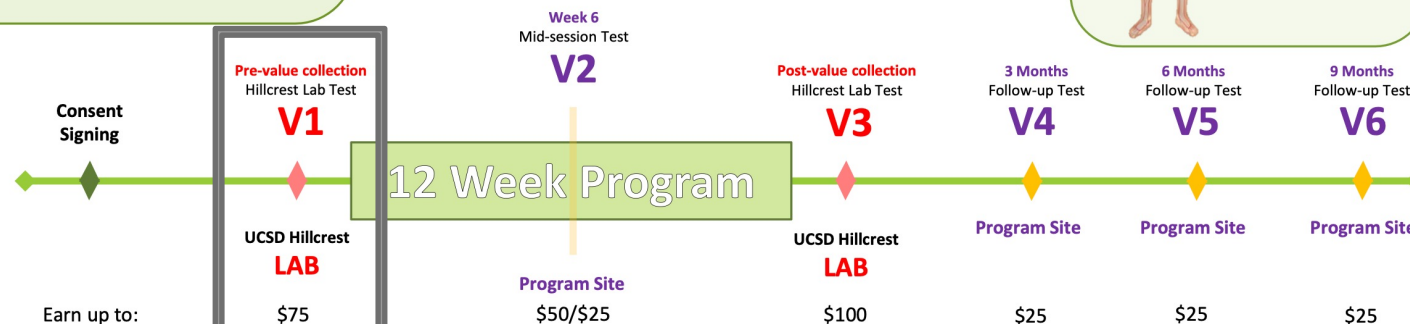
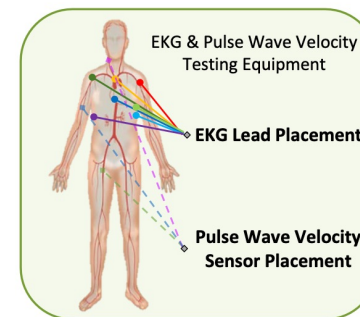
- EKG measurements various positions
- Pulse Wave Velocity
- Stationary Bicycle Test

Randomization: By participating in the HAPI-CHI research study, you are agreeing to participate in an assigned program. Your assignment will be based on chance and is randomly assigned to you.

Interactive seminar series: 1 class per week – 2h each

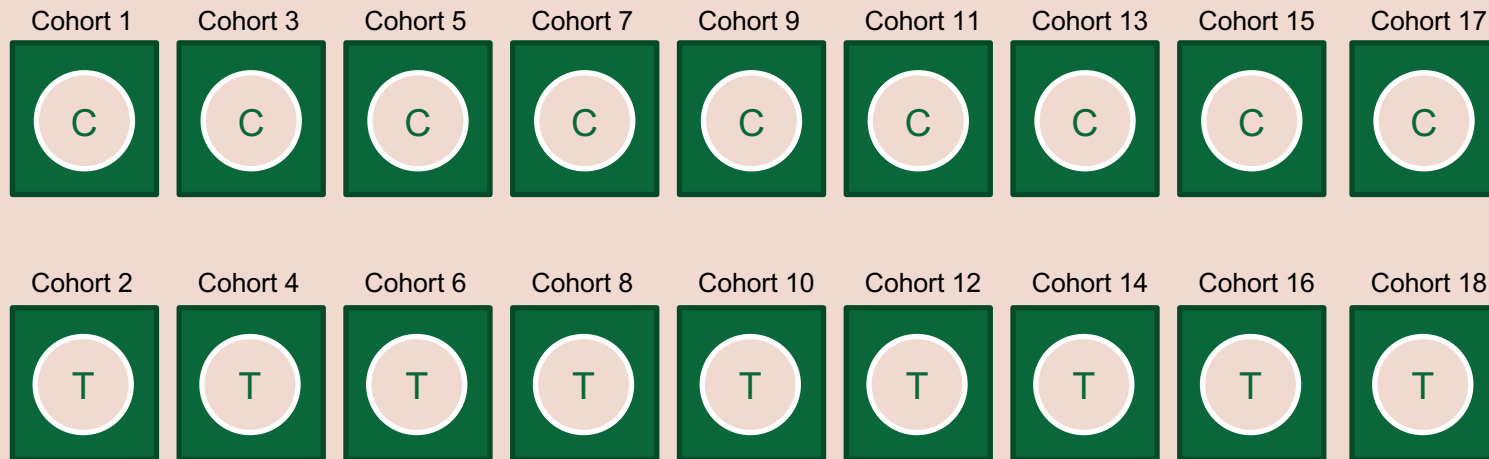
Movement based Tai Chi: 2 class per week – 1h each

Participation in all aspects of this study are strictly voluntary.
You may refuse to participate or withdraw at any time without penalty or loss of benefits to which you are entitled.





STUDY DESIGN



Clinical population = 189 older adults (65-80 yrs)

C = control group [12 weeks of health instruction]

T = Tai-Chi group [12 weeks of instructor led Tai-Chi classes]

Group-Randomised Trials; each cohort progressed independently



Variables



Response

Frequency of circulating
monocytes in whole
blood



Predictor

High density lipoproteins
(mg/dL), Age



Confounding

Sex at Birth



Random

Cohort group



HYPOTHESIS



Old Hypothesis

H_0 : There is no inverse correlation between high-density lipoprotein levels and circulating monocyte frequencies in the blood of older adults.

H_A : There is an inverse correlation between high-density lipoprotein levels and circulating monocyte frequencies in the blood of older adults.



New Hypotheses:

H_0 : There is no inverse correlation between high-density lipoprotein levels and circulating monocyte frequencies in the blood of older adults, when accounting for age, gender and cohort factors.

H_A : There is an inverse correlation between high-density lipoprotein levels and circulating monocyte frequencies in the blood of older adults, when accounting for age, gender and cohort factors.

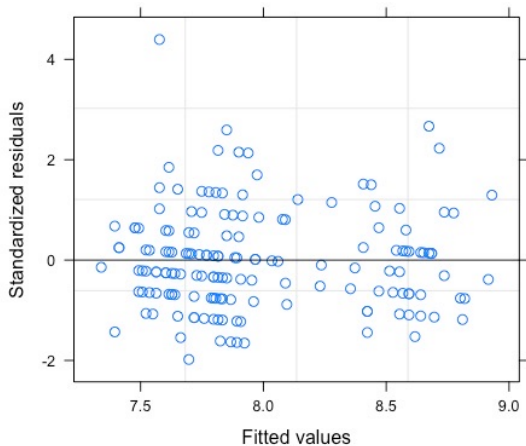
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Model 0: Assumptions



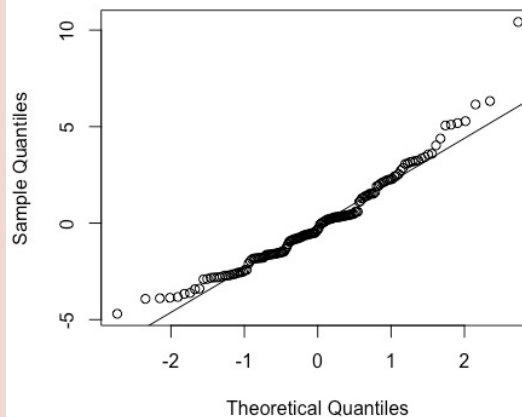
```
mod0 <- lme(monocytes ~ log(hdl_cholesterol) + sex, random =  
~1|cohort, data = df, method = "ML", na.action = na.omit)
```

Errors have a constant variance



the errors have constant variance

Normal Q-Q Plot



the errors are normally distributed



Model 0 : Stats Summary



Analysis of Deviance Table (Type II tests)

	Chisq	Df	Pr(>Chisq)
log(hdl_cholesterol)	0.8617	1	0.35326
sex	4.9262	1	0.02645 *

Summary Table of Fixed Effects

	Value	p-value
Intercept	5.129	0.0739
log(hdl_cholesterol)	0.632	0.3594
sexMale	0.977	0.0295 *

Random effects:

Formula: ~1 | cohort

(Intercept) Residual

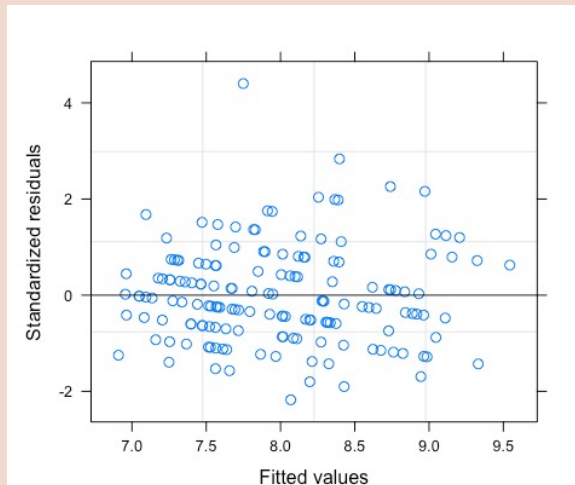
StdDev: 0.0001292081 2.371389

...

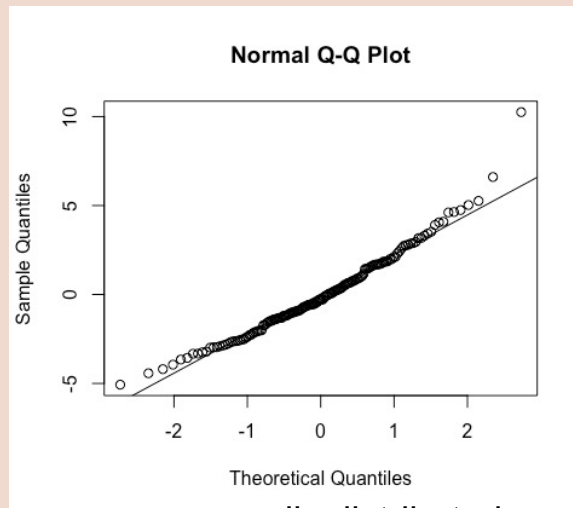
Model 1: Assumptions



```
mod1 <- lme(monocytes ~ log(hdl_cholesterol) + age + sex,
random = ~1|cohort, data = df, method = "ML", na.action =
na.omit)
```



the errors have constant variance



the errors are normally distributed



Model 1: Stats Summary



Analysis of Deviance Table (Type II tests)

	Chisq	Df	Pr(>Chisq)
log(hdl_cholesterol)	0.251	1	0.617
age	5.848	1	0.016 *
sex	4.836	1	0.028 *

Summary Table of Fixed Effects

	Value	p-value
Intercept	2.0323894	0.5121
log(hdl)	0.3402411	0.6219
age	0.0593750	0.0183 *
sexMale	0.9513485	0.0316 *



anova (mod 0 vs mod 1)

p-value = 0.0166
#model 1 fits the data better than
model 0

Random effects:

Formula: ~1 | cohort

(Intercept) Residual

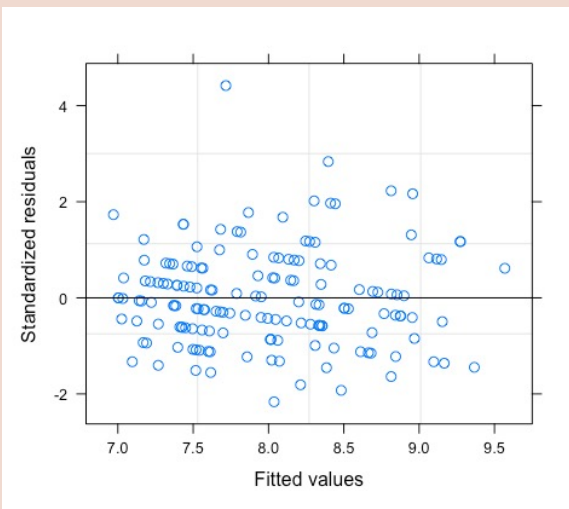
StdDev: 0.0001067637 2.328944

...

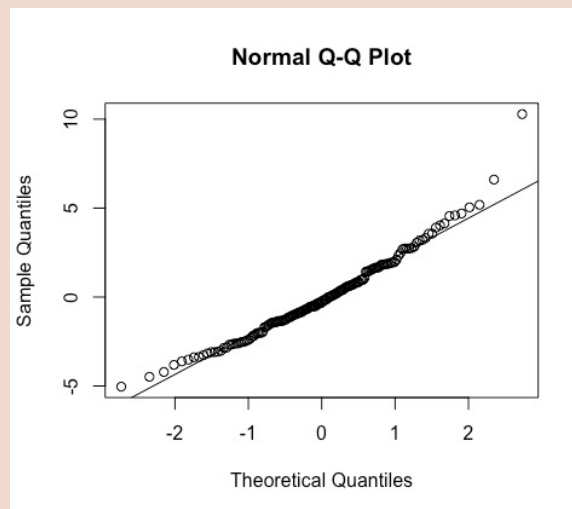
Model 2: Assumptions



```
mod2 <- lme(monocytes ~ log(hdl_cholesterol) * age + sex,
random = ~1|cohort, data = df, method = "ML", na.action =
na.omit)
```



the errors have constant variance



the errors are normally distributed



Model 2: Stats Summary



Analysis of Deviance Table (Type II tests)

	Chisq	Df	Pr(>Chisq)
Intercept	0.2439	1	0.62138
log(hdl)	0.1261	1	0.72253
age	0.0575	1	0.81053
sex	4.8659	1	0.02739 *
log(hdl):age	0.1721	1	0.67828

Summary Table of Fixed Effects

	Value	p-value
Intercept	12.203004	0.6277
log(hdl)	-2.118180	0.7273
age	-0.081809	0.8138
sexMale	0.953871	0.0316 *
log(hdl):age	0.034079	0.6837

Random effects:
Formula: ~1 | cohort
(Intercept) Residual
StdDev: 0.0001053432 2.327685



anova (mod 1 vs mod 2)

p-value = 0.6784

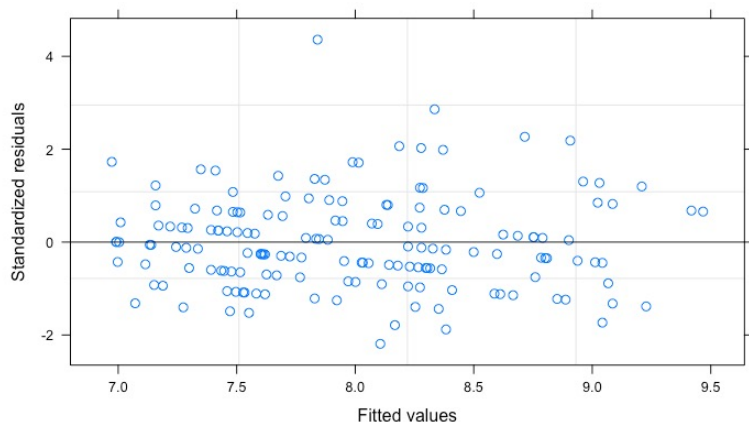
not significantly different and so the
interaction effect will be dropped



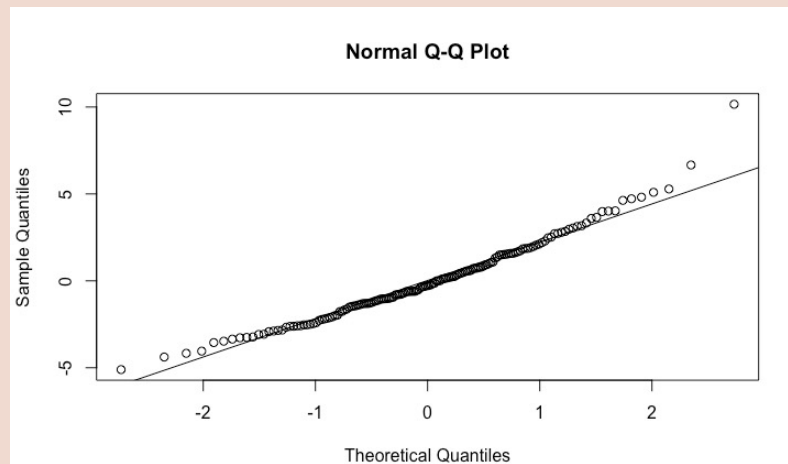
Model 3: Assumptions



```
mod3 <- lme(monocytes ~ age + sex, random = ~1|cohort, data =  
df, method = "ML", na.action = na.omit)
```



the errors have constant variance



the errors are normally distributed



Model 3 : Stats Summary



Analysis of Deviance Table (Type II tests)

	Chisq	Df	Pr(>Chisq)
age	6.4810	1	0.01090 *
sex	4.6618	1	0.03084 *

Random effects:

Formula: ~1 | cohort

(Intercept) Residual

StdDev: 0.0001072882 2.330779

Summary Table of Fixed Effects

	Value	p-value
Intercept	3.279638	0.0680
age	0.061558	0.0128 *
sexMale	0.875341	0.0342 *

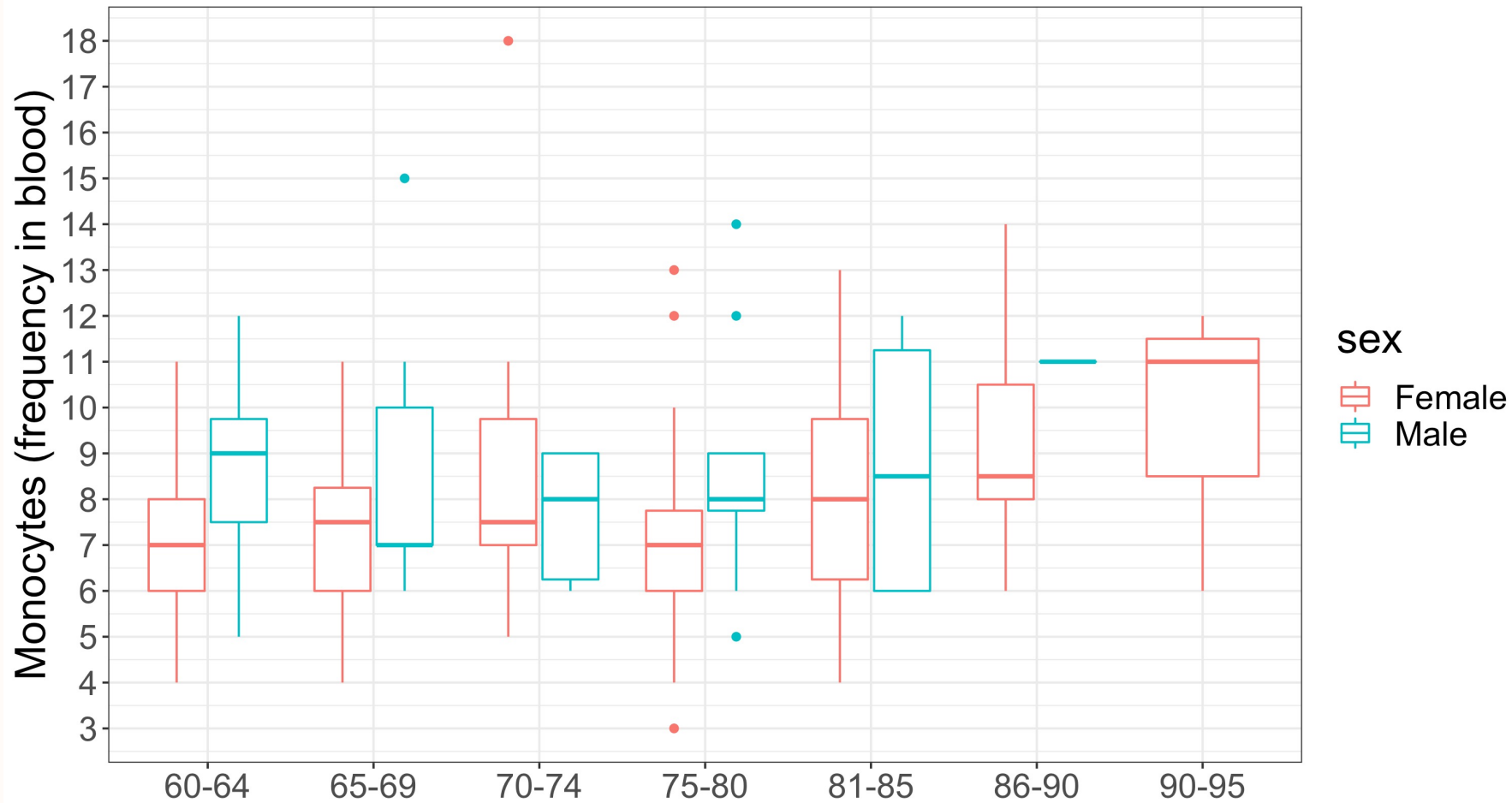


anova (mod 1 vs mod 3)

p-value = 0.6168

not significantly different and so the conservative model 3 is preferred

Figure 1: Monocytes vs Subject Characteristics





CONCLUSIONS



Conclusion 1:

We fail to reject the null hypothesis



Conclusion 2:

High density lipoproteins is not correlated with the frequency of circulating monocytes.



Conclusion 3:

Males have a higher frequency of monocytes in blood compared to females.



Conclusion 4:

Age is significantly and positively correlated with the frequency of circulating monocytes.



OUR TEAM



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Clinical Research Associate Amanda Walker

Clinical Research Associate Chad Spoon

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Resources



1. Fox J, Weisberg S (2019). *An R Companion to Applied Regression*, Third edition. Sage, Thousand Oaks CA. <https://socialsciences.mcmaster.ca/jfox/Books/Companion/>.
2. R Core Team (2021). *R: A language and environment for statistical computing*. R Foundation for Statistical Computing, Vienna, Austria. URL <https://www.R-project.org/>.
3. RStudio Team (2021). *RStudio: Integrated Development Environment for R*. RStudio, PBC, Boston, MA URL <http://www.rstudio.com/>.
4. <https://pubmed.ncbi.nlm.nih.gov/18617650/>
5. <https://www.nature.com/articles/s41467-020-14396-9>
6. <https://bsd.biomedcentral.com/articles/10.1186/s13293-021-00387-y>