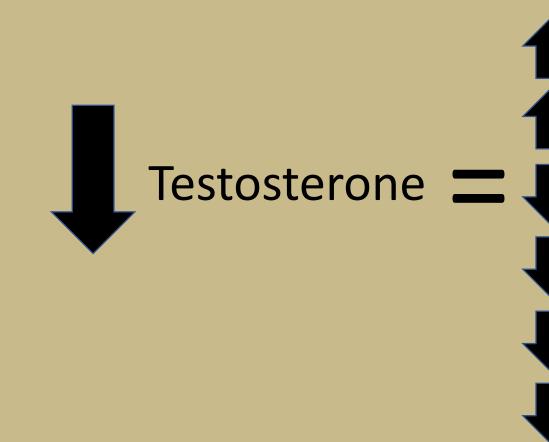


Introduction

Testosterone plays a major role in penile structure and function. As men age, many experience a decrease in testosterone production, which correlates to an increase in Erectile dysfunction (ED). ED is the inability to achieve or maintain an erection satisfactory for sexual performance.⁴ It is often associated with other underlying health problems such as obesity, cardiovascular disease, diabetes, and Hypogonadism. Hypogonadism is the inability of the testes in producing testosterone.⁴ Research has found that lowered levels of testosterone can lead to an increase in oxidative stress which then decreases nitric oxide (NO) and hydrogen sulfide (H2S) levels.^{1,2} These two are important gasotransmitters that mediate relaxation. Current research has shown H2S has vasorelaxant properties and its production is stimulated by testosterone.² However, there is no evidence of its effects on ED in a model deprived of testosterone.



Erectile Dysfunction Oxidative Stress Antioxidant Defense Development NOS production of NO Hydrogen Sulfide

Figure 1. The effects of testosterone deprivation. ^{4,1}

Our research project aims to assess penile function following treatment with two H2S-enriched diets in mice deprived of testosterone via castration. Function will be measured through myograph experiments with various dilators and constrictors. We hypothesize that H2S treatment in mice deprived of testosterone will experience more relaxation and less constriction than the non-treated castrated group.

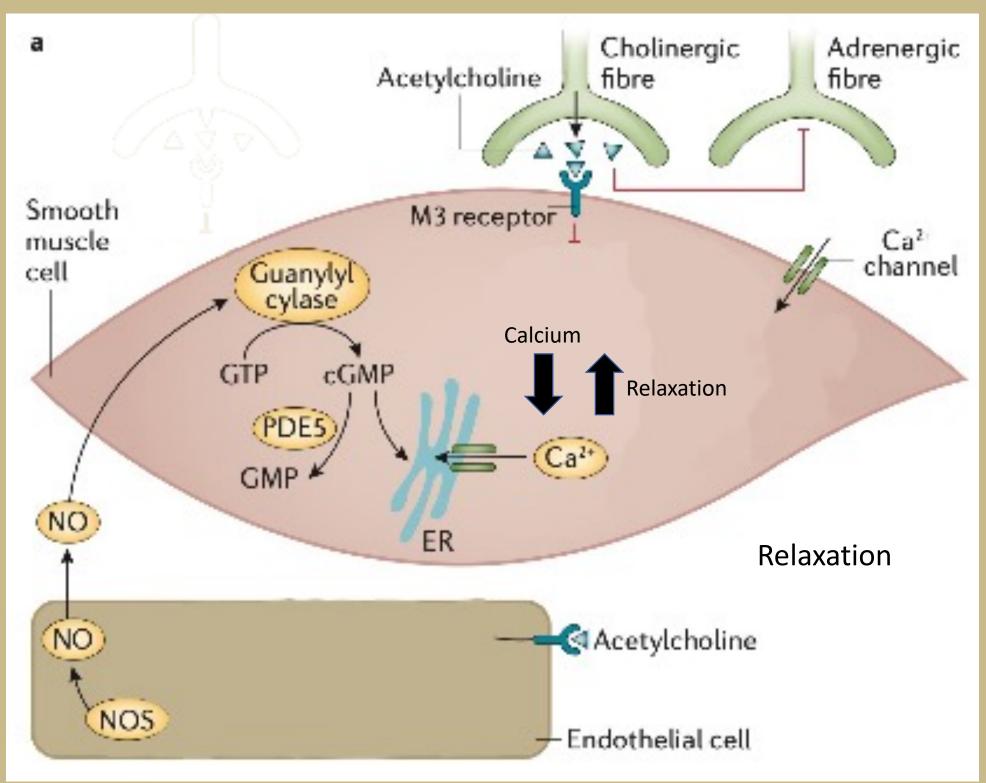


Figure 2. Penial smooth muscle relaxation– erect state. ⁴

Effects of Hydrogen Sulfide on Corpus Cavernosum Function following Testosterone Deprivation

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Results

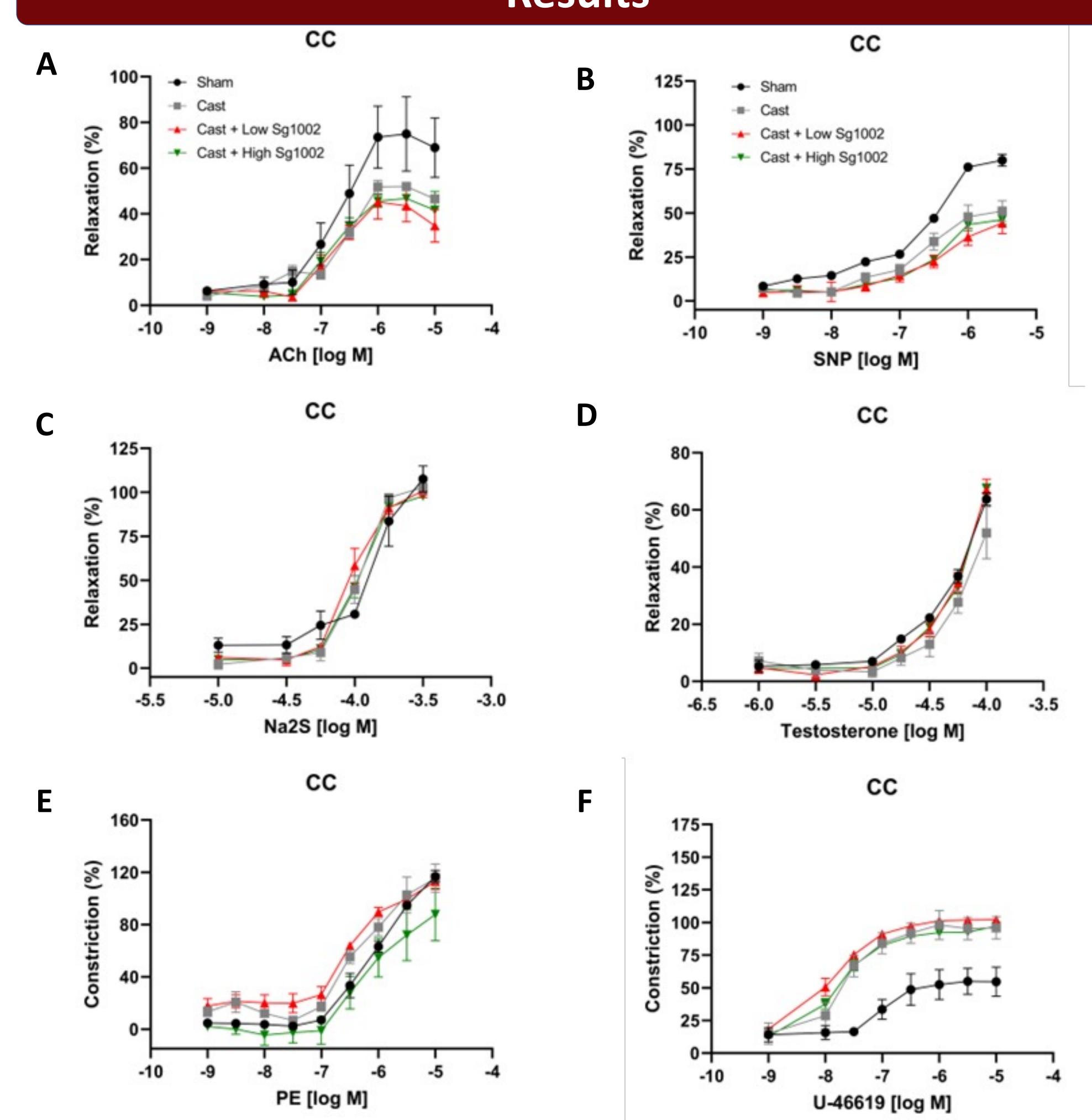


Figure 3. Assessment of vasoreactivity of the corpus cavernosum (CC). (A) Relaxation was tested with 0.001 µM-10 µM of acetylcholine (ACh). (B) Relaxation was tested with 0.001 µM-3 µM of sodium nitroprusside (SNP). (C) Relaxation was tested with 10 µM-300 µM of sodium sulfide (Na2S). (D) Relaxation was tested with 1 μ M-100 μ M of testosterone. (E) Constriction was tested with 0.001 μ M-10 μ M of phenylephrine (PE). (F) Constriction was tested with 0.001 μ M-3 μ M of U-46619. Values represent means ± SEM for n = 3-4 animals per group.

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- Animals: 12-week-old C57BL/NH6SD mice SHAM- Sham surgery & Normal Diet (n=3) CAST- Castration surgery & Normal Diet (n=3) CLS- Castration & Low Dosage SG1002 (n=4) CHS- Castration & High Dosage SG1002 (n=4)

Experimental Design

Erectile Function Assessment

Dilators

- Acetylcholine promotes NO production from endothelial cells. Endothelial dependent relaxation Sodium Nitroprusside - NO donor. Test smooth muscle reactivity
- to NO. Endothelial-independent relaxation
- Testosterone male sex hormone
- Sodium Sulfide (Na2S) an H2S donor

Constrictors

- Phenylephrine- Mimics norepinephrine and constricts smooth muscle
- U-46619- a prostaglandin/ thromboxane A2 agonist and initiates constriction via different mechanisms

Statistical Analysis

analysis.

- H2S diets seems to improve the loss in testosterone-mediated relaxation and lowers PE-induced constriction following testosterone deprivation. However, H2S diets does not appear to reverse the dysfunction in endothelial-dependent and independent relaxation and U-46619-induced constriction caused from testosterone deprivation.
- As this is an on-going project, we are unable to make a conclusive statement.
- More data and statistical analysis is required before making a conclusion
- Future projects include western blots and qRT-PCR.





Methods

- Day 0: Start dietary intervention Day 3: Mice underwent castration surgery Week 5: Mice were sacrificed
- Erectile function was assessed using DMT myograph system. Vasoreactivity was tested in corpus cavernosum using several dilator and constrictor agonists.
- All relaxation protocols were pre-constricted with 10 µM PE

Two-Way Repeated Measures ANOVA were used to compare differences between groups. Significance was set at p≤0.05 for all

Conclusion