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Title: Infrared spectroscopic investigation on erythrocyte membrane-smoke interactions due to chronic cigarette smoking

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Abstract

Cigarette smoking is a serious health problem throughout the world, with a complicated and not totally clear bio-effect. In this study, erythrocytes were obtained from healthy male volunteers aged 22±2 years and, the possible effects of three cigarette smoking rates namely 10, 15 and 20 cigarette/day on erythrocytes membrane characteristics were examined by Fourier transform infrared spectroscopy (FTIR). The results of this study indicate many smoking-dependent variations on erythrocytes membrane without an obvious dose-response relationship. There was disruption in the acyl chain packing; changes in membrane order and phases as well as membrane proteins becoming more folded. These physico-chemical changes should have an impact on the function of erythrocytes and may explain the complex interaction of cigarette smoke mainstream with erythrocyte membrane and to some extent clarify the pathological processes associated with cigarette smoking.

Keywords: Cigarette smoke; Erythrocyte membrane; FTIR; Protein; Lipid

Changelog

Dear Editor

The authors of this manuscript took all the comments and suggestions of both reviewers 1 and 2 on board and we made all the required corrections. Also, we added two citations as both reviewers ask for. All these changes are yellow-highlighted throughout the manuscript. Finally, the reference list is also updated.

Thank you for your efforts with this manuscript Corresponding author Sherif S. Mahmoud

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2	to chronic cigarette smoking
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15 Abstract

Cigarette smoking is a serious health problem throughout the world, with a complicated and 16 not totally clear bio-effect. In this study, erythrocytes were obtained from healthy male 17 volunteers aged 22±2 years and, the possible effects of three cigarette smoking rates namely 18 19 10, 15 and 20 cigarette/day on erythrocytes membrane characteristics were examined by Fourier transform infrared spectroscopy (FTIR). The results of this study indicate many 20 smoking-dependent variations on erythrocytes membrane without an obvious dose-response 21 relationship. There was disruption in the acyl chain packing; changes in membrane order and 22 23 phases as well as membrane proteins becoming more folded. These physico-chemical changes should have an impact on the function of erythrocytes and may explain the complex 24 25 interaction of cigarette smoke mainstream with erythrocyte membrane and to some extent 26 clarify the pathological processes associated with cigarette smoking.

27 Key words: Cigarette smoke, Erythrocyte membrane, FTIR, Protein, Lipid.

29 Introduction

Cigarette smoking - a worldwide social habit - is associated with well documented numerous 30 health hazards that include lung cancer, stroke, respiratory, cardiovascular diseases and 31 32 osteoporosis (Mello 2010). These health risks result from the entrance of the mainstream smoke into the blood which leads to alterations in the blood constituents, plasma, 33 erythrocytes, platelets and leukocytes (Freeman et al. 2005), and have been attributed to the 34 35 abundance of reactive oxygen species and reactive nitrogen species (Barua et al. 2003). More smoking health hazards that should be addressed are the ocular ones aggravated by cigarette 36 smoke which include dry eye (Arffa 1991), conjunctival irritation, age-related macular 37 degeneration, cataract, ocular inflammation and change in tear characteristics (Satici et al. 38 2003, Sprague et al. 2006, Thorne et al. 2008, Roesel et al. 2011, Lin et al. 2010). In addition, 39 40 the retina is known to have the highest rate of oxygen consumption of any organ in the body (Kewal 2011). Therefore any alterations in the structure and/or function of the erythrocyte 41 membranes should have an impact on retinal function. 42

43 Padmavathi et al. (2010) found that chronic cigarette smoking alters the content of individual phospholipids of erythrocytes membrane that was associated with increased membrane lipid 44 peroxidation. The erythrocytes membrane-cigarette smoke interactions appear to be more 45 complex and the exact mechanism that enhance these effects remain uncertain. Therefore, the 46 present study is aimed to understand the causation of chronic cigarette smoke on the 47 48 erythrocyte membrane structural and conformational characteristics that were studied by Fourier transform infrared spectroscopy (FTIR) while taking into account the smoking rate 49 (number of cigarette smoked/day) and the dose-response relationship if any. 50

51 **Participants and Methods**

52 Subjects

53 Four groups of healthy male subjects were involved in this study, where each group composed of 25 age-matched subjects (22±2 years). Three groups were cigarette smokers for 54 3 ± 1 years but differ in the daily smoking rate as 10, 15 and 20 cigarette/day, and the last 55 56 group served as the control one. All study subjects had normal renal and hepatic functions with no evidence of any acute infection or active inflammatory process. None of the subjects 57 had hypertension, were taking any medications or receiving vitamin supplementation. There 58 was no significant obesity was observed between all subjects (BMI= 22.4 ± 3.6), as well as 59 cholesterol (155±15 mg/dl) and triglycerides (125±8 mg/dl), with normal fasting blood 60 glycemic level (90±5 mg/dl). All subjects signed an informed consent with tenets of the 61 Declaration of Helsinki. 62

63 Preparation of erythrocyte membranes

64 Blood was obtained by veinpuncture, collected into heparinized syringes and immediately centrifuged at 500 g at 4 °C for 10 min. The plasma and buffy coat were discarded, and 65 erythrocytes were re-suspended and washed three times in physiological saline (0.9% NaCl). 66 67 Erythrocyte membranes were prepared as previously mentioned by Sprague et al. 2006. That is washed packe erythrocytes were added to 200 ml of hypotonic buffer (5 mmol/1 Tris-HCl, 68 69 2 mmol/EDTA, pH 7.4) and stirred vigorously for 20 min. The mixture was centrifuged at 23,000 g for 15 min, and the supernatant was discarded. After repeating the last step one 70 more time, membranes were pooled, resuspended in buffer and centrifuged. Finally, after 71 discarding the supernatant, membranes were freeze-dried and kept under N2 gas atmosphere 72 for further analysis. 73

74 Fourier transform infrared spectroscopy

First Erythrocytes membrane was mixed with finely ground powder KBr to prepare the KBr-disks that were used in analysis. This mixture was placed in a special holder provided by the manufacturer and pressed under vacuum at 3 tons (13.8 MPa) for 2 min to produce IR-KBr

78 disks (Sherif 2010). FTIR measurements were carried out using Nicolet-iS5 infrared spectrometer (ThermoFisher Scientific Inc, Madison, USA) with effective resolution of 2 cm⁻ 79 ¹. Each spectrum was derived from 100 sample interferograms. The spectrometer was 80 operated under a continuous dry N₂ gas purge to remove interference from atmospheric CO₂ 81 and H₂O vapor. The spectra were baseline corrected and then smoothed with Savitsky–Golay 82 to remove the noise before Fourier transformation. Three spectra from each sample were 83 obtained and averaged using OriginPro 7.5 software to obtain the final average group 84 spectrum that was normalized and analyzed for the following spectral regions: 4000-3000 cm⁻ 85 ¹ (NH-OH region), 3000-2800 cm⁻¹ (CH stretching region), 1800-1600 cm⁻¹ (amide I region) 86 and 1600 -900 cm⁻¹ (fingerprint region), and then subjected to curve enhancement analysis 87 using a combination of Fourier deconvolution and non-linear curve fitting. The second 88 89 derivative of the group spectrum was employed to confirm the number of the estimated 90 peaks.

91 Statistical analysis

92 Results were calculated and expressed as mean±standard deviation (SD). Comparison 93 between multiple groups was performed using analysis of variance (ANOVA); commercially 94 available statistical software package (SPSS-11 for Windows) was used where the 95 significance level was set at p<0.05. All spectral analyses were performed with OriginPro 7.5 96 software package (Origin Lab Corporation, Northampton, MA, USA).

97 **Results**

98 The erythrocytes infrared spectra were analyzed according to the following regions:

99 NH-OH region

100 In figure (1), the contour of the control erythrocytes membrane indicates the presence of 101 several absorption bands that were resolved into 8 structural components using the curve 102 enhancement procedure as given in table (1). In the same context, the contour of smokers'

erythrocytes membrane was also resolved into 8 structural peaks that differed in band
position, band area and bandwidth as well as their assignment (table 1). The stretching OH
(strOH) compositional bands were reduced from four components in the control and 10
cig/day groups to three structural components as the number of smoked cigarettes increased
to 15/20 daily.

The two structural components of the asymmetric OH (asymOH) bond were reduced to one 108 component in two groups only; 10 cig/day and 20 cig/day that were characterized by 109 significantly increased bandwidth and band area. At a smoking rate of 15 cig/day, the two 110 111 detected structural component show paradox characteristics; where the higher frequency band has an increased band area and bandwidth while the lower frequency one has decreased band 112 area and bandwidth. On the other hand, symmetric OH (symOH) band showed a different 113 114 behavior; increased vibrational frequency and band area that were associated to different smoking rates, this is in addition to its splitting into 2 structural components at a daily 115 smoking rate of 10 and 20 cigarette compared to control one as shown in table 1. 116 For all smoking groups, the symmetric NH (symNH) stretching vibrational mode was 117 detected. Comparing the three smoking groups, it is noticed that this vibrational mode was 118 characterized by increased vibrational frequency, band area as well as bandwidth as the 119 number of cigarette smoked increased from 10 to 15/20 daily while, the asymmetric 120 vibrational mode of the NH band (asymNH) was restricted at 10 cig/day smoking group, then 121 122 detected again as the smoking rate increased to 15/20 daily and is characterized by increased vibrational frequency and bandwidth as well. The band area was reduced at 20 cig/day 123 smoking group. 124

125 CH stretching region

126 The CH stretching pattern of the control erythrocytes indicated the presence of four

absorption bands that were centered at 2962 ± 3 , 2920 ± 2 , 2870 ± 2 and 2846 ± 3 cm⁻¹ and

assigned to asymmetric CH₃ (asymCH₃), asymmetric CH₂ (asymCH₂), symmetric CH₃ (symCH₃) 128 and symmetric CH_2 (sym CH_2) respectively (figure 2). This pattern was changed in all smoking 129 subjects. The number of absorption bands was decreased at 10 and 15 cig/day smoking 130 131 groups with restricted symCH₂ vibrational mode. Subjects with smoking rate of 20 cig/day showed a different CH vibrational pattern; in addition to the restricted symCH₂ mode, there is 132 an additional stretching mode of vibration that was detected at 2904 ± 2 cm⁻¹ and attributed to 133 aliphatic CH (CH_{aliph}). There is no change in band position or bandwidth of smoking 134 subjects' asymCH₃ or symCH₃ while, the band position of smoking asymCH₂ was found to be 135 136 increased relative to the control pattern as given in table 2. This table also shows undetectable changes in band area of asymCH₃, asymCH₂ and symCH₃ bands relative to their corresponding 137 control ones. 138

139 Amide I region

Analysis of amide I band by using the curve enhancement procedure (figure 3) resolved the 140 control band into three structural components that are centered at 1688 ± 3 , 1655 ± 2 and 141 $1623 \pm 2 \text{ cm}^{-1}$ and can be attributed to β -turn structure, α -helix and β -sheet respectively (Lin 142 et al. 1998). Due to cigarette smoking, the contour of amide I can be resolved into five 143 structural components with additional structural components that were centered on 1663 ± 3 144 and $1612 \pm 2 \text{ cm}^{-1}$ and can be assigned to turns and antiparallel β -sheet. The significance of 145 these results is presented in table 3, which shows the area percentage of each structural 146 component relative to the total band area. Alpha-helix content is significantly decreased in all 147 smoking groups concomitant with a significant increase in β -turn and β -sheet structures. The 148 interesting finding is the detection of Turns-structure that was associated to all smoking rates 149 (Rose et al. 1985). 150

151 Fingerprint region

The other frequency range under consideration is $1600-900 \text{ cm}^{-1}$, which is shown in figure 4. 152 There is broadening in the contour of smoking groups with reduction in the absorption 153 intensities; concomitant to reduced number of the estimated peaks. The control pattern shows 154 seven absorption bands with eleven estimated structural peaks as given in table 4. No change 155 in the band characteristics (frequency, bandwidth or band area) of amide II while, reduced 156 band area of asymmetric COOC (asymCOOC) band was found. The splitting noticed in both 157 scissoring CH₂ (scissCH₂) and symmetric PO₂ (symPO₂) bands of control group was restricted 158 in all smoking ones. Another common feature noticed in these two bands is the increased 159 bandwidth that was associated to different smoking rates. The band position of symPO2 was 160 sensitive to all smoking rates (decreased), while that of scissCH₂ was increased in 10 and 15 161 cig/day groups only. The symmetric COO (symCOO) higher frequency estimated component 162 163 was characterized by decreased vibrational frequency in all smoking subjects, and this is contrary to the lower frequency one where its vibrational frequency was increased while, both 164 of them were associated with reduced band area and vibrational motion (bandwidth). 165 166 Reduced band position and band area was detected for the asymmetric $PO_2(a_{sym}PO_2)$ band without any change in its vibrational motion. Also, no splitting in the rocking CH₃ (rockCH₃) 167 band in all smoking groups with fluctuations in its vibrational frequency that was associated 168 with increasing vibrational motion. In the same context, increased band area was also 169 detected for the higher frequency band relative to its corresponding control band. 170

171 Discussion

Cigarette mainstream is a complex and heterogeneous mixture that contains volatile
chemicals (e.g. formaldehyde), particles (e.g. nicotine) and gases (e.g. carbon monoxide).
Moreover, a puff of cigarette smoke can contain about 300 million to 3.5 billion particles
(Satici et al. 2003, Galor and Lee 2011). It also contains more than 10¹⁴ low-molecular

carbon and oxygen centered radicals per puff with almost 500 ppm nitric oxide and otherreactive nitrogen oxides (Pryor et al. 1993).

The obtained results from NH-OH region showed several fluctuated changes associated to 178 different smoking rates, and only two structural components -namely strOH that detected at 179 an average vibrational frequency of 3535 ± 10 cm⁻¹ and _{sym}NH one – can be directly related to 180 cigarette smoking, meaning that can be used to monitor/probe the impact of cigarette 181 smoking on the erythrocytes membrane. This region also indicates that the detected symNH 182 mode should had another impact on the function of erythrocytes membranes since it is an 183 184 indicator that the membrane become more ordered as previously reported by Schultz et al. 1998 that symmetric stretching vibrations are functioning as a marker for membrane order. 185 In spectroscopy, the area under the peak is used as an estimate of the concentration of the 186 187 compound. Regarding this issue, the increased membrane order is also evident by the increased concentration of all structural components of symOH band and to clarify this last 188 finding, the ratio of total band areas of symOH/asymOH in control erythrocytes was 0.2 while it 189 190 increased as the smoking rate increased to 15 and 20 cigarette/day to be 0.4 and 0.6 respectively. In the same context, the relative-total concentration of the individual structural 191 components of strOH bands was also found to be increased from $93 \pm \frac{4}{4}$ in the control 192 erythrocytes and reaches $187 \pm \frac{5}{2}$, $111 \pm \frac{2}{2}$ and $118 \pm \frac{2}{2}$ that corresponds to smoking rates of 193 10, 15 and 20 cigarette/day. The OH bond can be found in many membrane constituents and 194 one of these possibilities is cholesterol, which may support this finding about increased 195 erythrocytes membrane order. 196

197 On the other hand, the CH region was greatly affected by all smoking rates involved in this 198 study and, in particular symmetric and asymmetric CH_2 bands which again give the impetus 199 about the possibility of using these two bands to probe cigarette smoking-induced changes. 200 This vibrational region is used generally to characterize the lipid molecules within the cell

201 membrane. As shown in figure 2 and table 2, there are changes in the molecular environment of the asymCH₂ as reflected by increased band position. The disappeared symCH₂ mode of 202 vibration was previously reported by Szalontai et al. (2003) and Sherif (2010) and referred to 203 204 it as a lipid-related phenomenon correlated with changes in protein secondary structure. This vibrational region can also be used to monitor the compositional changes of the erythrocytes 205 membrane by considering the concentration ratio asymCH₃ (lipids)/symCH₃ (protein). For 206 207 control erythrocyte membrane this ratio was found to be 0.9, while it decreased for smoking rates of 10 and 20 cigarette/day to 0.8 and 0.7 respectively; and mimicking the control value 208 209 for 15 cigarette/day group. This reveals that erythrocyte membranes, and due to different smoking rates are suffer from fluctuating lipid/protein ratio and it may be a buffering 210 211 response for the induced cigarette stress.

212 Proteins in biological membranes can perturb the lipid environment and, depending on their nature and concentration, influence membrane fluidity (Chapman et al. 1979, Szalontai et al. 213 2003). The erythrocyte proteins are essential for the linkage connecting the membrane 214 215 skeleton to the lipid bilayer, which is also essential for membrane stability (Lux et al. 1978). The skeletal protein network appears to play a key role in the maintenance of the membrane's 216 discoid shape and in restriction of the lateral mobility of its molecules (Goodman and 217 Branton 1978, Low et al. 1991). Amide I mode of vibration in the 1800-1600 cm⁻¹ spectral 218 region was used to study the protein secondary structure in infrared spectroscopy since this 219 220 absorption is mainly associated with C=O stretching vibrations and it is suitable as a probe to 221 determine the different secondary structures and polypeptides (Lux 1979, Susi et al. 1967). The obtained results (figure 3 and table 3) show that the protein secondary structure was 222 223 affected by all smoking rates. It has been suggested that protein insolubility is functioning in the content of β -sheet structure: more β -sheet structure means more insoluble protein and, the 224 225 formation of β -sheet can be deduced by firstly increasing the disordered structure of the

helical structure, and then, the disordered chains aggregate to form β -sheet structure (Lin et 226 al. 1998, Zagorski and Barrow 1992). Accordingly, smoking rates of 10, 15 and 20 cig/day 227 strongly affect the solubility of erythrocytes membrane protein and resulted in insoluble 228 protein as indicated by both reduced α -helix content and the associated increased β -sheet 229 content, as well as protein becomes more folded due to increased β -turns and turns structure. 230 These complex changes in erythrocytes membrane protein secondary structure explain the 231 disappearance of symCH₂ mode of vibrations as previously mentioned. Maintenance of 232 233 appropriate membrane lipid composition and fluidity are important for the proper functioning of integral membrane proteins, membrane bound enzymes, receptors and ion channels 234 235 (Reddy et al. 2009, Swapna el al. 2006).

236 The complicated effects of smoking are also evident in the fingerprint region. The erythrocytes membrane pattern shown in figure 4 and analyzed in table 4, reflect the fact that 237 erythrocytes hydrocarbon chains ($_{sciss}CH_2$ and $_{rock}CH_3$) and the phospholipids ($_{svm}PO_2$) can be 238 found in two different phases, which greatly affected -by all smoking rates involved in this 239 study- and turned into one phase. Moreover, the scissCH2 vibrations are characteristic of the 240 nature of the acyl chain packing (Cameron et al. 1980, Swapna et al. 2006) hence; cigarette 241 smoking has an effective impact on the acyl chain packing within the erythrocytes membrane. 242 Altogether showed that erythrocytes membrane reacts positively with cigarette smoke 243 244 mainstream in a complicated manner without any specific trends where all membrane constituents are involved, and there were certain vibrational modes that can be used as a 245 probing marker for cigarette smoking aggravated changes. Regardless the number of cigarette 246 247 smoked/day, it affects the NH-OH region of either proteins or phospholipids where each smoking rate has its own effects. Cigarette smoking resulted in increased erythrocytes 248 membrane order which affects the membrane fluidity and accordingly its function. The 249

- 250 changes in protein secondary structure, acyl chain packing and the detected compositional
- 251 changes of the CH region could influence the discoid shape of the erythrocytes.

252 Conflict of interest

- 253 There are no conflicts of interest related to any of the participants in this research work.
- 254 **References**
- 255 Arffa R. C. (1991): Grayson's Diseases of the Cornea, St Louis, Mosby Year Book.
- 256 Barua R.S., Ambrose J.A., Srivastava S., DeVoe M.C., Eales-Reynolds L.J. (2003): Reactive
- 257 oxygen species are involved in smoking induced dysfunction of nitric oxide biosynthesis and
- 258 upregulation of endothelial nitric oxide synthase: an in vitro demonstration in human
- coronary artery endothelial cells. Circulation. 107, 2342–2347
- 260 Cameron D.G., Casal H.L., Mantsch H.H. (1980): Characterization of the pretransition in
- 261 1,2-dipalmitoyl-sn-glycero-3-phosphocholine by Fourier transform infrared spectroscopy.
- 262 Biochemistry. 19, 3665 3672
- 263 Chapman D., Gomez-Fernandez J.C., Goni F. M. (1979): Intrinsic protein-lipid interactions.
- 264 Physical biochemical evidence. FEBS Letters. 98, 211–223
- 265 Freeman T.L., Haver A., Duryee M.J., Tuma D.J., Klassen L.W., Hamel F.G., White R.L.,
- 266 Rennard S.I., Thiele G.M. (2005): Aldehydes in cigarette smoke react with the lipid
- 267 peroxidation product malonaldehyde to form fluorescent protein adducts on lysines. Chem
- 268 Res Toxicol. 18, 817–824
- 269 Galor A., Lee D.J. (2011): Effects of smoking on ocular health. Current Opinion in
- 270 Ophthalmol. 22, 477–482
- 271 Goodman S.R., Branton D. (1978): Spectrin binding and the control of membrane protein
- 272 mobility. J Supramolecular Structure. 8, 455–463
- 273 Kewal K. J. (2011): The handbook of neuroprotection, Humana Press, Springer NY.

- Lin P., Loh A.R., Margolis T.P., Acharya N.R. (2010): Cigarette smoking as a risk factor for
- uveitis. Ophthalmology. **117**, 585–590
- 276 Lin S.Y., Li M.J., Liang R.C., Lee S.M. (1998): Non-destructive analysis of the
- 277 conformational changes in human lens lipid and protein structures of the immature cataracts
- associated with glaucoma. Spectrochemica Acta A. 54, 1509–1517
- 279 Low P.S., Willardson B.M., Mohandas N., Rossi M., Shohet S. (1991): Contribution of the
- band 3-ankyrin interaction to erythrocyte membrane mechanical stability. Blood. 77, 1581–
 1586
- Lux S.E. (1979): Spectrin-actin membrane skeleton of normal and abnormal blood cells.
- 283 Seminars in Hematology. 16, 21–51
- Lux S.E., John K.M., Ukena T.E. (1978): Diminished spectrin extraction from ATP depleted
- human erythrocytes. Evidences relating spectrin to changes in erythrocyte shape and
- deformability. J Clin Invest. 61, 815–827
- Mello N.K. (2010): Hormones, nicotine, and cocaine: clinical studies. Horm Behav. 58, 57–
 71
- 289 Padmavathi P., Reddy V.D., Kavitha G., Paramahamsa M., Varadacharyulu N. (2010):
- 290 Chronic cigarette smoking alters erythrocyte membrane lipid composition and properties in
- 291 male human volunteers. Nitric Oxide. 23, 181-186
- 292 Pryor W.A., Stone K. (1993): Oxidants in cigarette smoke: radicals, hydrogen peroxide,
- 293 peroxynitrate, and peroxynitrite. Ann NY Acad Sci. 686, 12–28
- 294 Reddy V.D., Padmavathi P., Paramahamsa M., Varadacharyulu N.C. (2009): Modulatory
- 295 role of *Emblica officinalis* against alcohol induced biochemical and biophysical changes in
- rat erythrocyte membranes. Food Chem Toxicol. 47, 1958–1963
- 297 Rose G.D., Glerasch L. M., Smith J.A. (1985): Turns in peptides and proteins. Adv. Protein
- 298 Chem. **37**, 1-109

- 299 Roesel M., Ruttig A., Schumacher C., Heinz C., Heiligenhaus A. (2011): Smoking
- 300 complicates the course of noninfectious uveitis. Graefes Arch Clin Exp Ophthalmol. 249,
 301 903–907
- 302 Satici A., Bitiren M., Ozardali I., Vural H., Kilic A., Guzey M. (2003): The effects of chronic
- 303 smoking on the ocular surface and tear characteristics: a clinical, histological and
- biochemical study. Acta Ophthalmol. 81, 583–587
- 305 Schultz C.P., Wolf V., Lange R., Mertens E., Wecke J., Naumann D., Zähringeri U. (1998):
- 306 Evidence for a New Type of Outer Membrane Lipid in Oral Spirochete *Treponema denticola*.
- 307 J biol Chem. 273, 15661–15666
- 308 Sherif S.M. (2010): The impact of elevated blood glycemic level of patients with type 2
- diabetes mellitus on the erythrocyte membrane: FTIR study. Cell Biochem Biophys. 58, 45-
- 310 51
- 311 Sprague R.S., Stephenson A.H., Bowles E.A., Stumpf M.S., Lonigro A.J. (2006): Reduced
- 312 expression of G(i) in erythrocytes of humans with type 2 diabetes is associated with
- impairment of both cAMP generation and ATP release. Diabetes. 55, 3588–3593
- Susi H., Timasheff S.N., Stevens L. (1967): Infrared spectra and protein conformations in
- aqueous solutions. I. The amide I band in H₂O and D₂O solutions. J Biol Chem. 242, 5460–
 5466
- 317 Swapna I., Sathyasaikumar K.V., Murthy C.R., Dutta-Gupta A., Senthilkumaran B. (2006):
- 318 Changes in cerebral membrane lipid composition and fluidity during thioacetamide-induced
- 319 hepatic encephalopathy. J Neurochem. 98, 1899–1907
- 320 Szalontai B., Kóta Z., Nonaka H., Murata N. (2003): Structural consequences of genetically
- 321 engineered saturation of the fatty acids of phosphatidylglycerol in tobacco thylakoid
- membranes. An FTIR study. Biochemistry. 42, 4292-4299

- 323 Thorne J.E., Daniel E., Jabs D.A., Kedhar S.R., Peters G.B., Dunn J.P. (2008): Smoking as a
- 324 risk factor for cystoids macular edema complicating intermediate uveitis. Am J Ophthalmol.
- **145**, 841–846
- 326 Zagorski M.G., Barrow C.J. (1992): NMR studies of amyloid betapeptides: protein
- 327 assignments, secondary structure, and mechanism of an alpha-helix-beta-sheet conversion for
- a homologous, 28-residue N-terminal fragment. Biochemistry. **31**, 5621–5631

330	Figure	caption
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Figure 1. Erythrocytes membrane NH-OH region (4000-3000 cm^{-1}) of the control group and cigarette smoking ones, showing the underlying bands that detected upon using curve fitting analysis. The numbers above the peaks to facilitate their assignment.

335

Figure 2. Stretching CH region (3000-2800 cm⁻¹) of control and cigarette smoking
erythrocytes membrane.

338

Figure 3. Analysis of Amide I band showing the mean peak and the underlying structuralcomponents. The numbers above the peaks is to facilitate their assignment.

341

Figure 4. FTIR spectra of fingerprint region of different erythrocytes membranes involved inthis study.

345 Table	captions
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Table 1. Vibrational frequencies, band area and bandwidth of NH-OH structural componentsof control and cigarette smoking erythrocytes membrane.

349

350 Table 2. Erythrocytes membrane characteristics of CH stretching region of control and 351 cigarette smoking groups.

352

353 Table 3. Protein secondary structure components expressed as the area percentage of each 354 structural component relative to the total band area.

355

Table 4. Analysis of erythrocytes membrane fingerprint region of all subjects included in the study.

Fig. 1 Download full resolution image









Fig. 4 Download full resolution image

