UC Office of the President

Research Grants Program Office (RGPO) Funded Publications

Title

Cardiovascular consequences of vaping

Permalink https://escholarship.org/uc/item/31r375hp

Journal Current Opinion in Cardiology, 37(3)

ISSN 0268-4705

Authors

Echeagaray, Oscar Savko, Clarissa Gallo, Andrea <u>et al.</u>

Publication Date

2022-05-01

DOI

10.1097/hco.000000000000952

Peer reviewed



Cardiovascular consequences of vaping

Oscar Echeagaray, Clarissa Savko, Andrea Gallo, and Mark Sussman

Purpose of review

Vaping activity continues to increase worldwide. Promoted as a 'healthier' alternative to traditional smoking, emerging evidence indicates 'healthier' should not be confused with 'harmless'. Direct inhalation exposure of the respiratory tract in experimental research demonstrates pulmonary consequences of vaping. However, cardiovascular consequences of vaping are poorly characterized and are a priority area of research to reveal vaping-induced pathogenesis.

Recent findings

Alterations in cardiovascular homeostasis, inflammation, and molecular changes following vaping exposure demonstrate vaping-related health concerns.

Summary

This review summarizes cardiovascular consequences of vaping from cumulative research findings. Strategic application of emerging technologies to understand the impact of vaping upon the cardiovascular system will be essential for defining the true risks of vaping-associated injury.

Keywords

cardiopulmonary, cardiovascular disease, electronic cigarettes, research, vaping, vascular

INTRODUCTION

Vaping continues to gain popularity over the last decade across a diverse spectrum of users. In 2018 an estimated 14.9% of United States (US) adults over 18 years old reported use of electronic cigarettes (Ecig) [1]. Use among youth has also increased with 19.6% of US high-school students and 4.7% middle school students using E-cigs as of 2020 [2]. Ill-conceived distribution of so called 'Dank Vapes' contributed substantially to hospitalizations with 2807 patients suffering from E-cig or vaping product useassociated lung injury (EVALI) in the United States as of February of 2020 [3,4]. Clinical trials report acute impact of E-cig and nicotine use on cardiac physiology [5,6[•],7] with pathological and economic costs derived from long-term exposure still being delineated [8,9]. Documented smoke-related cardiovascular disease (CVD) [10] and the associated financial burden on healthcare [11,12] foreshadows the future of vaping-associated CVD. Information on the intersection between vaping and cardiovascular health and homeostasis is still in early stages with a clear need for additional research to define susceptibility of cardiac structure and function to vaping.

Systemic biological consequences of vaping are too broad to consider in a short overview of the field. Therefore, this review focuses upon cardiovascular health and vaping with an emphasis upon recent trends and future directions. For detailed information on vaping-related impact on lung, vasculature, and other biological aspects, there are excellent recent reviews covering these subjects in depth [13–16]. Topics addressed here on the consequences of vaping include: cardiovascular health, function, remodeling and homeostasis; cardiac cell and molecular biology; impact from localized and systemic immune responses; and consideration of emerging technologies and experimental approaches. Evaluation of current research is necessary for planning approaches that will ultimately mitigate morbidity and mortality consequential to vaping.

IMPACT ON CARDIAC STRUCTURE AND FUNCTION

Adverse effects of vaping have been observed in lungs with growing evidence indicating

Curr Opin Cardiol 2022, 37:000-000 DOI:10.1097/HCO.000000000000952

0268-4705 Copyright $\ensuremath{{\ensuremath{\mathbb C}}}$ 2022 Wolters Kluwer Health, Inc. All rights reserved.

www.co-cardiology.com

San Diego Heart Research Institute and Integrated Regenerative Research Institute, San Diego State University, San Diego, California, USA

Correspondence to Mark Sussman, Life Sciences North, Room 426 5500 Campanile Drive, San Diego, CA 92182-4614, USA. E-mail: heartman4ever@icloud.com

Copyright © 2022 Wolters Kluwer Health, Inc. Unauthorized reproduction of this article is prohibited.

KEY POINTS

- Adverse effects of vaping have been observed with growing evidence indicating impact in cardiac structure as well as deleterious impact upon function.
- Current research suggest E-cigs are not innocuous for cardiac endothelium, localized immune cell populations, and overall cardiovascular homeostasis.
- Further research is required to clarify discrepancies in the field and evaluate health and safety consequences of long-term vaping exposure.

involvement of the heart and pulmonary circulation as well as deleterious impact upon function [17[•]]. Vaping can lead to acute respiratory distress syndrome (ARDS) in severe cases, which is characterized by pulmonary hypertension and remodeling of the blood vessels of the lung [16,18,19] (Fig. 1). Increased vascular resistance drives right ventricular dysfunction, exacerbating cardiopulmonary damage. Acute cardiomyopathic events are rare and often reversible [20[•]]; however, subsequent development of heart failure has also been documented [21]. Potential preventive and therapeutic approaches require insight derived from integrative examination of individual/vaping interactions, which includes chemical makeup and toxicity of vaping liquids, responses in subject's comorbidities and impact on cardiac tissue and cellulome.

Nicotine, propylene glycol/vegetable glycerin (PG/VG), other E-cig components and their byproducts are detrimental to cardiovascular health [22]. Nicotine is a highly addictive sympathoexcitatory drug, increasing heart rate and blood pressure and causing vasospasm during acute administration. Increased sympathetic stimulation can increase risk of arrhythmias and ischemia [23]. Numerous confounding effects, such as sensitization and desensitization responses, individual differences, and unclear dose-response ratios complicate simple interpretation of nicotine effects upon the cardiovascular system [24]. A murine model of high-level nicotine exposure results in both systemic and pulmonary hypertension and subsequent right ventricle remodeling [25]. Systemic hypertension was present only during the first 3 weeks of exposure until development of nicotine tolerance. However, at 8 weeks, right ventricular systolic pressure was increased accompanied by increased right ventricular internal diameter, wall thickness, and Mitogen-Activated Protein Kinase (MAPK) Pathway activation indicative of remodeling. Inhaled nicotine led to right ventricular remodeling mediated by Angiotensin II type 1 receptor by acting upon the

renin–angiotensin system [26[•]]. Administration of nicotine to young rats induced ROS production, promoting cardiomyocyte death by interfering with mitophagy and the intrinsic apoptotic pathway [27]. E-cig aerosol promotes alterations in a similar manner to tobacco smoke by promoting myocardial oxidative stress and inflammation leading to fibrosis [28]. As with tobacco cigarettes, recent studies found an association between E-cig use and self-reported hypertension in the population [29] and measured systemic hypertension in animal models [30[•]], mainly driven by nicotine's effect on vasoconstriction and elevation of systemic vascular resistance. Combustible cigarettes cause a greater increase in sympathetic stimulation compared with E-cigs [23]. Labeling inaccuracies and elevated nicotine concentrations pose novel risks not inherent to combustible cigarettes [31]. Moreover, it is still not known if subsequent increases in adrenaline level have clinically relevant cardiovascular effects among vapers.

Although nonnicotine components and byproducts are more abundant in combustible cigarettes compared with electronic cigarettes, the presence and variety of these components in vape aerosol together with systemic and cardiovascular impact should not be underestimated. Flavoring additives to vaping juice are of particular interest, such as electrophysiological effects of toxic aldehydes, such as vanillin and cinnamaldehyde [32[•]]. Flavoring aldehydes increased sympathetic stimulation compared with fruit-flavored e-vapor. Additionally, oxidizing compounds, metals, volatile organic compounds, carbonyls, and other components in E-cig vapor are dangerous for the circulatory system [33]. Further experimental and clinical assessment is needed to determine the impact of heterogeneous byproducts present in vape aerosol.

Vaping is particularly problematic in patients with underlying health conditions because of increased susceptibility to damage from acute and chronic insults. Administration of nicotine to rats increased myocardial infarct size [34]. A high-fat diet and E-cig smoke with nicotine exposure decreased left ventricular contractility with increased apoptosis and structural alteration of the heart in mice [35]. Thus, preexisting conditions and comorbidities are likely to contribute significantly to vapinginduced CVD.

VAPING CONSEQUENCES ON THE VASCULAR ENDOTHELIUM

Cardiac endothelium plays a significant role in the control of vascular relaxation/contraction. The established relationship between smoking-mediated endothelial dysfunction and cardiovascular disease

2 www.co-cardiology.com

Volume 37 • Number 00 • Month 2022

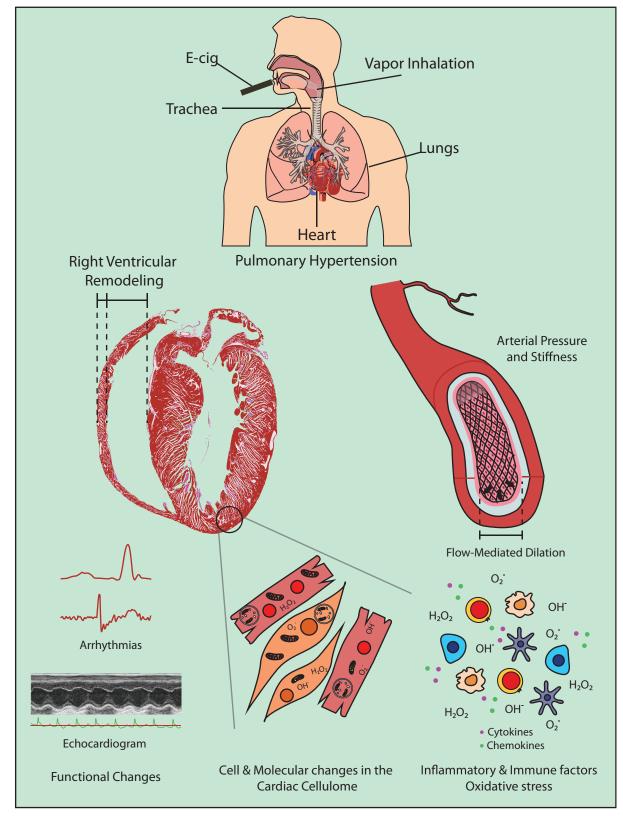


FIGURE 1. Summary of reported cardiovascular consequences of vaping.

[36,37] supports the importance of understanding vaping exposure upon endothelial health. A randomized controlled trial showed reduction in

endothelial dysfunction on individuals switching from tobacco cigarettes to vaping, independently of nicotine content of the latter [38]. Impaired flow-

Copyright © 2022 Wolters Kluwer Health, Inc. Unauthorized reproduction of this article is prohibited.

mediated dilation (FMD), a metric for endothelial dysfunction and a predictor of cardiovascular risk, was reported in acute smokers but not E-cig vapers [39]. In contrast, tobacco cigarettes and JUUL E-cig decreased FMD at comparable levels [40]. Blood biomarkers of inflammation were increased and FMD decreased after a single episode of E-cig inhalation in otherwise healthy adults [41]. These superficially irreconcilable results could be explained because of the diversity of exposure protocols, invivo models, variation in voltage settings, and E-cig brands in each study.

In addition to dysfunction, vascular oxidative stress [42,43], decreased of vascular endothelial growth factor (VEGF) expression, and a reduction of the density of capillaries have been reported [44]. There is significantly increased carotid plaque burden that young adult smokers and vapers exhibit compared with matched nonsmokers [45[•]]. Increased atherosclerotic lesions, burden, and risk mediated by TLR9 pathway in response to vaping exposure was demonstrated in a mouse model [46[•]]. Increased circulating endothelial progenitor cells, increased acute microvascular endothelial dysfunction, and arterial stiffness are additional factors altered in Ecig studies [47,48]. Evidence for long-term effects of vaping upon the circulatory system is lacking, but available data suggest E-cigs should not be marketed as 'safe' alternatives to cigarettes. However, vaping could mitigate smoking endothelial dysfunction in the short-term when employed as a smoking cessation strategy. However, E-cigs are not innocuous and further research is required to clarify discrepancies in the field and evaluate health and safety consequences of long-term vaping exposure.

CELLULAR AND MOLECULAR RESPONSE TO E-CIGARETTES IN THE CARDIOVASCULAR SYSTEM

Mitigating strategies and therapeutic approaches require identification of pathways driving cardiac disease as well as insight regarding molecular responses to E-cig. Molecular processes, such as inflammation and reactive oxygen species (ROS) contribute significantly to CVD and vaping diseases. Disruption in the balance of prooxidant and antioxidant systems in vasculature is associated with arrhythmias and myocardial remodeling because of pathogenic hypertrophy and apoptotic signaling [49]. E-cig exposure increases ROS in cardiomyocytes and aortic tissue vas detected by dihydroethidium (DHE) fluorescence [30[•],42,50]. Increased ROS coincided with decreased endothelial nitric oxide synthase (eNOS) following 3 days of exposure in mice, suggesting that decreased antioxidant nitric oxide is involved in the increase in oxidative stress [42]. The oxidative stress phenotype was alleviated by knocking out the ROS-producing enzyme NADPH Oxidase Subunit 2 (NOX2), confirming that oxidative stress is NOX2-dependent [42]. It is unclear the extent to which ROS accumulation observed in animal E-cig exposure studies translates to chronic users.

The cellular response to E-cig exposure is vital to understand mechanisms of pathogenesis. RNAsequencing data of iPSC-derived cardiomyocytes exposed to E-cig extract for 2 days in vitro altered gene expression signatures for proliferation and apoptosis [50]. Notably, natriuretic peptide B (NPPB) upregulation was observed alongside downregulated myosin light chain kinase (MYLK) and troponin I3 (TNNI3). Proper levels of these proteins are essential for healthy heart function and appropriate stress responses. Increased apoptotic nuclei and increased cleaved-caspase 3 protein levels were reported in a high-fat diet/E-cig exposure study [35]. Increased apoptosis appears related to dysregulation of the AMPK pathway as apoptosis regulator AMP-activated protein kinase (AMPK) was decreased in E-cig exposed mice with no expression of its downstream target Acetyl-CoA carboxylase (ACC) [35]. Cellular and molecular responses to vaping implicate increased oxidative stress and apoptosis but data correlating these risk factors with reported disease is still lacking. Further characterization of the signaling pathways and mechanism for vaping-induced molecular stress and damage, such as vascular dysfunction, inflammation, remodeling, and impaired function are required to inform the public of the risks associated with E-cig use and will be essential for development of therapeutic interventions.

INNATE AND ADAPTIVE IMMUNE RESPONSE TO E-CIGARETTES

The innate and adaptive immune response to E-cig exposure has been predominantly examined in the pulmonary system and to a lesser extent in the cardiovascular system [51-56]. Sustained inflammation caused by typical recurring vape exposure could lead to downstream toxicity from oxidative stress and exert compounding effects to increase risk for cardiovascular disease. Additionally, immune response to vaping could exacerbate risk for CVD, such as atherosclerosis and coronary artery disease. Environmental stressors, such as E-cig vapor promote macrophage transition into foam cells, which build up in arteries as atherosclerotic plaques [57]. Ecig exposure for 16 weeks in ApoE-/- mice led to development of atherosclerotic plaques with increased levels of Mac2+ macrophages compared

4 www.co-cardiology.com

Volume 37 • Number 00 • Month 2022

with controls [46[•]]. Inhibition of TLR9 ameliorated the phenotype suggesting that TLR9 is mediating the atherosclerotic response. Additionally, macrophage marker CD68 was found to have increased protein levels in the aorta of mice following acute Ecig exposure [42]. Human studies have reported conclusions consistent with animal studies reporting increased levels of lymphocytes, monocytes, and neutrophils in the blood of E-cig users compared with nonusers [58[•]].

Increased levels of inflammatory cytokine IL-6 in blood has been reported in both human and mouse models of E-cig exposure following a wide range of exposure time lengths [42,46,59,60]. Other cytokines including ICAM-1, MCSF, MCP-1, and IL-8 increase following acute exposure times in humans but it is unclear whether this is a transient response to initial E-cig exposure or if the inflammatory response is sustained long enough to be associated with pathogenesis [59,60]. Analysis of immune cell populations and signaling in animal studies on a timescale analogous to decades in humans can serve as approximations of future risk for E-cig users. The current SARS-CoV-2 (COVID-19) pandemic [61,62[•]] drew attention regarding concerns related to immune system response following infection when combined with E-cig exposure. Alterations of immunocompetency pursuant to vaping are likely to have as yet poorly understood consequences for cardiopulmonary protection and homeostasis.

EMERGING TECHNOLOGIES AND EXPERIMENTAL APPROACHES

Emerging consequences of vaping on cardiovascular homeostasis will require real-time solutions, creative experimental approaches, and innovative therapeutic approaches. Fortunately, state-of-the-art and high throughput technologies continue to be developed with some already deployed to elucidate the impact of vaping. Single-cell and nuclei RNA sequencing (sc/snRNA-Seq) has proven to be a valuable tool to characterize the lung changes in response to senescence [63], fibrosis [64], and smoking [65]. Exploration of the cardiac transcriptome has yielded a remarkable framework to study the biological diversity, interplay, and plasticity of identified cardiac cell subpopulations. Single-cell transcriptional analysis has revealed the phenotypical diversity and intercommunication within the murine cardiac cellulome at the baseline [66] and under chronic cardiac fibrosis [67[•]]. Cardiac topology and chamber-specific transcriptional signatures of the human heart have been contextualized with genes implicated in cardiomyopathies using snRNA-

Seq [68]. Dynamic interactions and insight on immune changes following acute injury in mouse models via myocardial infarction [69,70] or ischemia reperfusion [71[•]] have been derived from using scRNA-Seq platforms. Vaping effects on cardiac development can be cross-referenced to published datasets of temporal and chamber-specific benchmarks of cardiac development [72,73]. Framework to assess changes on in-vitro phenotypes and protocols of culture-expanded cardiac cell will be critical to evaluate the influence of vaping [74,75]. Organism-wide transcription cell atlas like the Tabula Muris project [76] and the Mouse Cell Atlas [77,78] can be used as baselines for comparison of cardiac and systemic changes derived from vaping exposure. New technologies and approaches in transcriptional analysis are currently underway to determine the impact of vaping upon cardiovascular biology. Paradigm development will benefit from high-throughput technologies targeting the proteome and secretome including mass spectrometry and mass cytometry [79], together with epigenomic platforms, and spatial approaches recently adopted to address standing biological questions of intercellular heterogeneity and communication.

FUTURE CONSIDERATIONS

Vaping popularity and activity continue to evolve with diverse, complex, and dynamic societal pressures advancing E-cig adoption and product development. Cardiopulmonary effects and documentation of pathogenesis continues to benefit from research studies tackling the complex and diverse array of possible exposure regimens (Fig. 2 and Table 1). Acute consequences of vaping exposure include changes in pulmonary hypertension, cardiac remodeling, function, arterial pressure and stiffness, and cell and molecular changes (Figs. 1 and 2, Table 1). Long-term cardiovascular effects of recreational vaping will eventually be revealed in decades ahead, as popularization of the vaping lifestyle is a relatively recent phenomenon, in the near term, implications of acute and chronic vaping for cardiopulmonary health will be revealed through carefully executed studies that reveal vaping impact.

Datasets [80], research observations, and experimental strategies for assessing vaping pathogenesis can be rooted in the approaches and concepts derived from the decades-long pursuit of biological studies on traditional cigarette smoking. Experimental animal models of chronic exposure with vaping protocols relevant and comparable with human recreational vaping will be crucial to evaluate long-term progression of cardiovascular health. Experimental approaches should consider cardiac

0268-4705 Copyright $\ensuremath{\mathbb{C}}$ 2022 Wolters Kluwer Health, Inc. All rights reserved.

www.co-cardiology.com 5

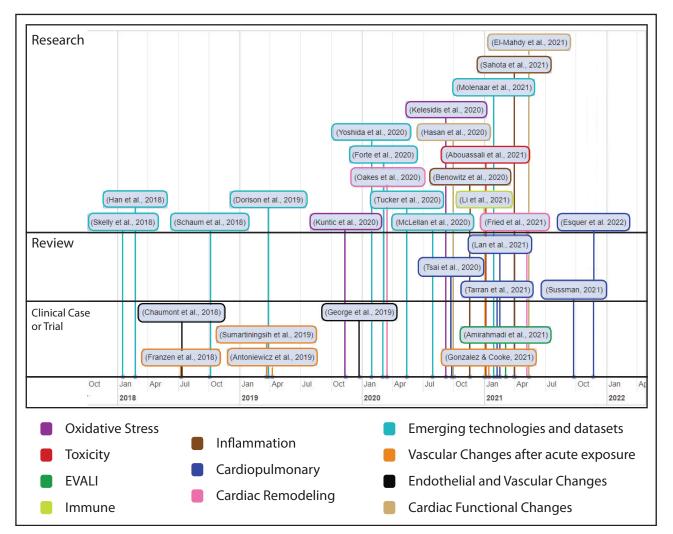


FIGURE 2. Cardiovascular consequences of vaping research timeline.

cellular composition, heterogeneity, and topology, together with constraints inherent in handling and preservation of mammalian cardiopulmonary tissues.

CONCLUSION

In conclusion, there is a profound need for thoughtful and translationally relevant research to address cardiovascular consequences of vaping. New devices, vape juice mixtures, and trends continue to be introduced, increasing variation among previous as well as ongoing studies. A composite strategy incorporating robust longitudinal assessments to investigate vaping-induced pathogenesis will need to account for variability of available products and experimental designs. Clinical evaluations of right ventricular systolic and diastolic function have been centered on ARDS patients [81,82]. However, signs of right

ventricular dysfunction, such as chest discomfort and breathlessness manifest only after left ventricular function is compromised, ultimately complicating early assessment of pulmonary involvement [83]. Right ventricular remodeling observed in a mouse vaping model [84"] implicates cardiopulmonary consequences that can contribute to not only cardiac remodeling but also increased risk for secondary debilitating conditions. Current studies suggest a correlation between vaping and atherosclerosis but additional experimental and clinical data is needed to define causality. Another area worthy of attention is the study of cell and molecular processes potentially affected by vaping, such as mitochondrial metabolism and energetics, stress response, and genotoxicity.

Collectively, these considerations emphasize the need for promotion and expansion of vaping research. Associations between harm perception and

			f • • •		I• I		r ·
Table 1.	Selected	articles a	ot interest	on carc	liovascular	consequences	of vaping
	00100100	arneies (51 111101 051	on care	novascolai	consequences	or raping

Authors, year	Reference	Article type	Title	Keywords
Esquer et al., 2022	[84"]	Research	Fundamentals of vaping-associated pulmonary injury leading to severe respiratory distress	Cardiopulmonary, cardiac remodeling and functional changes
Li et al., 2021	[46"]	Research	Electronic Cigarettes Induce Mitochondrial DNA Damage and Trigger TLR9 (Toll-Like Receptor 9)-Mediated Atherosclerosis	Immune
Benowitz <i>et al.,</i> 2020	[59"]	Research	Twenty-Four-Hour Cardiovascular Effects of Electronic Cigarettes Compared With Cigarette Smoking in Dual Users	Inflammation
Kelesidis <i>et al.,</i> 2020	[58"]	Research	Elevated Cellular Oxidative Stress in Circulating Immune Cells in Otherwise Healthy Young People Who Use Electronic Cigarettes in a Cross-Sectional Single-Center Study: Implications for Future Cardiovascular Risk	Oxidative stress, inflammation
Fried <i>et al.,</i> 2021	[26"]	Research	Angiotensin II type 1 Receptor Mediates Pulmonary Hypertension and Right Ventricular Remodeling Induced by Inhaled Nicotine.	Cardiac remodeling
El-Mahdy <i>et al.,</i> 2021	[30"]	Research	Long-term Electronic Cigarette Exposure Induces Cardiovascular Dysfunction Similar to Tobacco Cigarettes: Role of Nicotine and Exposure Duration	Cardiac functional changes
Raymond <i>et al.,</i> 2018	[31]	Research	The Nicotine Content of a Sample of E-cigarette Liquid Manufactured in the United States	Nicotine content of e-liquid samples
Hasan <i>et al.</i> , 2020	[35]	Research	Electronic Cigarettes Cause Alteration in Cardiac Structure and Function in Diet- induced Obese Mice	Cardiac Functional Changes
Amirahmadi <i>et al.</i> , 2021	[20"]	Clinical case or Trial	Electric Cigarette-related Lung Injury and Cardiovascular Insult	EVALI
Sahota <i>et al.,</i> 2021.	[45"]	Research	Atherosclerosis Inflammation and Burden in Young Adult Smokers and Vapers Measured by PET/MR	Inflammation
Abouassali <i>et al.</i> , 2021	[32"]	Research	In vitro and In-vivo Cardiac Toxicity of Flavored Electronic Nicotine Delivery Systems	Toxicity
Lan <i>et al.,</i> 2021	[62"]	Review	Right Ventricular Damage in COVID-19: Association Between Myocardial Injury and COVID-19	Cardiopulmonary
Tsai <i>et al.,</i> 2020	[17"]	Review	Effects of e-Cigarettes and Vaping Devices on Cardiac and Pulmonary Physiology	Cardiopulmonary
Gonzalez and Cooke, 2021	[6"]	Clinical case or Trial	Acute Effects of Electronic Cigarettes on Arterial Pressure and Peripheral Sympathetic Activity in Young Nonsmokers	Vascular changes after acute exposure
McLellan <i>et al.,</i> 2020	[67"]	Research	High-Resolution Transcriptomic Profiling of the Heart During Chronic Stress Reveals Cellular Drivers of Cardiac Fibrosis and Hypertrophy	Emerging technologies and datasets
Molenaar <i>et al.,</i> 2021	[71"]	Research	Single-cell Transcriptomics Following Ischemic Injury Identifies a Role for B2M in Cardiac Repair	Emerging technologies and datasets

desire to quit vaping have been established [85], which can be further reinforced by the scientific community contribution of elucidating mechanisms of vaping-induced pathology. Establishing a mechanistic basis of vaping-induced pathogenesis is critical for development of preventive and therapeutic interventional strategies. Efforts to curb the pathologic consequences of vaping are likely to involve multiple and potentially distinct approaches for young versus aged users. Fundamental research at tissue, cellular, molecular, and physiologic levels needs to keep pace with vaping industry initiatives and campaigns. Only through investment and expansion of research efforts on vaping will society be able to implement interventions designed to mitigate progression of injury and

0268-4705 Copyright $\ensuremath{\mathbb{C}}$ 2022 Wolters Kluwer Health, Inc. All rights reserved.

www.co-cardiology.com 7

prevent irreversible damage, thereby fostering repair and recovery.

Acknowledgements

O.E. acknowledges the support by NIH grants R01HL135661-02. M.S. acknowledges the support by California Tobacco Related Disease Research Program, T31IP1790 and T31IR1585.

Financial support and sponsorship

None.

Conflicts of interest

There are no conflicts of interest.

REFERENCES AND RECOMMENDED READING

Papers of particular interest, published within the annual period of review, have been highlighted as:

- of special interest
- of outstanding interest
- Villarroel MA, Cha AE, Vahratian A. Electronic cigarette use among U.S. Adults, 2018 key findings data from the National Health Interview Survey. 2018. Available at: https://www.cdc.gov/nchs/products/index.htm. [Accessed 19 October 2021]
- Wang TW. E-cigarette use among middle and high school students United States, 2020. MMWR Morb Mortal Wkly Rep 2020; 69:1310-1312.
- Outbreak of Lung Injury Associated with the Use of E-Cigarette, or Vaping, Products | Electronic Cigarettes | Smoking & Tobacco Use | CDC [Internet]. Available at: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/ severe-lung-disease.html#epi-chart. [Accessed 19 October 2021]
- Blount BC, Karwowski MP, Shields PG, et al., Lung Injury Response Laboratory Working Group. Vitamin E acetate in bronchoalveolar-lavage fluid associated with EVALI. N Engl J Med 2020; 382:697–705.
- Antoniewicz L, Brynedal A, Hedman L, et al. Acute effects of electronic cigarette inhalation on the vasculature and the conducting airways. Cardiovasc Toxicol 2019; 19:441–450.
- Gonzalez JE, Cooke WH. Acute effects of electronic cigarettes on arterial
 pressure and peripheral sympathetic activity in young nonsmokers. Am J
- Physiol Heart Circ Physiol 2021; 320:H248-H255. This trial reports increased mean arterial pressure and heart rate, and decreased

muscle sympathetic nerve activity (MSNA) as after-effects of E-cig use.

- Chaumont M, De Becker B, Zaher W, et al. Differential effects of E-cigarette on microvascular endothelial function, arterial stiffness and oxidative stress: a randomized crossover trial. Sci Rep 2018; 8:10378.
- Qasim H, Karim ZA, Rivera JO, *et al.* Impact of electronic cigarettes on the cardiovascular system. J Am Heart Assoc [Internet] 2017; 6:. Available from: https://www.ahajournals.org/doi/abs/10.1161/JAHA.117.006353 [cited 2 Nov 2021]
- Gallahan-Lyon P. Electronic cigarettes: human health effects. Tob Control [Internet] 2014; 23(Suppl 2):ii36-ii40.
- Rigotti NA, Chang Y, Tindle HA, et al. Association of E-cigarette use with smoking cessation among smokers who plan to quit after a hospitalisation. Annal Intern Med [Internet] 2018; 168:613–620.
- Xu X, Shrestha SS, Trivers KF, et al. U.S. healthcare spending attributable to cigarette smoking in. Prev Med (Baltim) 2021; 150:106529.
- 2014 Surgeon General's Report: The health consequences of smoking—50 years of progress | CDC [Internet]. Available at: https://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm#report. [Accessed 19 October 2021]
- Wehrli FW, Caporale A, Langham MC, Chatterjee S. New insights From MRI and cell biology into the acute vascular-metabolic implications of electronic cigarette vaping. Front Physiol 2020; 11:492.
- Smith M, Gotway M, Crotty Alexander L, et al. Vaping-related lung injury. Virchows Arch [Internet] 2021; 478:81-88.
- Lilly C, Khan S, Waksmundzki-Silva K, et al. Vaping-associated respiratory distress syndrome: case classification and clinical guidance. Crit care Explor 2020; 2:e0081.
- Sussman MA. VAPIng into ARDS: acute respiratory distress syndrome and cardiopulmonary failure. Pharmacol Ther [Internet] 2021; 108006. Available from: https://doi.org/10.1016/j.pharmthera.2021.108006. [Epub ahead of print]

- 17. Tsai M, Byun MK, Shin J, et al. Effects of e-cigarettes and vaping devices on
- cardiac and pulmonary physiology. J Physiol 2020; 598:5039-5062.
- This review summarizes cardiopulmonary physiological changes caused by vaping. **18.** Harvanko A, Havel CM, Jacob P, Benowitz NL. Characterization of nicotine salts in 23 electronic cigarette refill liquids. Nicotine Tob Res 2020; 22:1239–1243.
- Kaur G, Lungarella G, Rahman I. SARS-CoV-2 COVID-19 susceptibility and lung inflammatory storm by smoking and vaping. J Inflamm 2020; 17:1–8.
- Amirahmadi R, Childress J, Patel S, et al. Electric cigarette-related lung injury
 and cardiovascular insult. BMJ Case Rep 2021; 14:e238352.
- This case study reports a healthy patient without prior cardiopulmonary comorbid-
- ities developed severe, acute cardiac dysfunction in the setting of e-cigarette use.
- Sakla NM, Gattu R, Singh G, et al. Vaping-associated acute respiratory distress syndrome. Emerg Radiol 2019; 27:103–106.
- MacDonald A, Middlekauff HR. Electronic cigarettes and cardiovascular health: what do we know so far? Vasc Health Risk Manag [Internet] 2019; 15:159-174.
- Garcia PD, Gornbein JA, Middlekauff HR. Cardiovascular autonomic effects of electronic cigarette use: a systematic review. Clin Auton Res 2020; 30:507.
- 24. Tarran R, Barr RG, Benowitz NL, et al. E-cigarettes and cardiopulmonary health. Function 2021; 2:zqab004.
- Oakes JM, Xu J, Morris TM, et al. Effects of chronic nicotine inhalation on systemic and pulmonary blood pressure and right ventricular remodeling in mice. Hypertension 2020; 75:1305–1314.
- 26. Fried N, Morris TM, Whitehead A, et al. Angiotensin II type 1 receptor
- mediates pulmonary hypertension and right ventricular remodeling induced by inhaled nicotine. Am J Physiol Heart Circ Physiol 2021; 320:H1526-H1534.

This study targets angiotensin II type 1 receptor to mitigate reported pulmonary hypertension and right ventricular (RV) remodeling derived from E-cig exposure in mice.

- Jia G, Meng Z, Liu C, et al. Nicotine induces cardiac toxicity through blocking mitophagic clearance in young adult rat. Life Sci 2020; 257:118084.
- Mayyas F, Aldawod H, Alzoubi KH, et al. Comparison of the cardiac effects of electronic cigarette aerosol exposure with waterpipe and combustible cigarette smoke exposure in rats. Life Sci 2020; 251:117644.
- 29. Miller C, Shi H, Li D, et al. Cross-sectional associations of smoking and ecigarette use with self-reported diagnosed hypertension: findings from wave 3 of the population assessment of tobacco and health study. Toxics 2021; 9:52.
- 80. El-Mahdy M, Mahgoup EM, Ewees MG, et al. Long-term electronic cigarette
 exposure induces cardiovascular dysfunction similar to tobacco cigarettes:
 role of nicotine and exposure duration. Am J Physiol Heart Circ Physiol 2021;

320:H2112-H2129. This study reports impaired endothelium-dependent and endothelium-independent vasodilation with increased adrenergic vasoconstriction in a vaping mouse model.

- Raymond BH, Collette-Merrill K, Harrison RG, et al. The nicotine content of a sample of E-cigarette liquid manufactured in the United States. J Addict Med 2018; 12:127–131.
- Abouassali O, Chang M, Chidipi B, et al. In vitro and in vivo cardiac toxicity of flavored electronic nicotine delivery systems. Am J Physiol Heart Circ Physiol 2021; 320:H133-H143.

This research article reports increased sympathetic predominance in heart rate variability measurements after exposure with flavored e-vapor.

- Cheng T. Chemical evaluation of electronic cigarettes. Tob Control 2014; 23 Suppl 2:ii11-ii17.
- Zhao L, Dai W, Carreno J, et al. Acute administration of nicotine induces transient elevation of blood pressure and increases myocardial infarct size in rats. Heliyon 2020; 6:e05450.
- Hasan KM, Friedman TC, Parveen M, et al. Electronic cigarettes cause
 alteration in cardiac structure and function in diet-induced obese mice. PLoS One 2020; 15:e0239671.

This study reports cardiac alterations in a vaping model of induced obesity.

- Messner B, Bernhard D. Smoking and cardiovascular disease. Arterioscler Thromb Vasc Biol 2014; 34:509–515.
- Sumartiningsih S, Lin HF, Lin JC. Cigarette smoking blunts exercise-induced heart rate response among young adult male smokers. Int J Environ Res Public Health 2019; 16:1032.
- George J, Hussain M, Vadiveloo T, et al. Cardiovascular effects of switching from tobacco cigarettes to electronic cigarettes. J Am Coll Cardiol 2019; 74:3112-3120.
- Haptonstall K, Choroomi Y, Moheimani R, et al. Differential effects of tobacco cigarettes and electronic cigarettes on endothelial function in healthy young people. Am J Physiol Heart Circ Physiol 2020; 319:H547-H556.
- Rao P, Liu J, Springer ML. JUUL combusted cigarettes comparably impair endothelial function. Tob Regul Sci 2020; 6:30.
- Chatterjee S, Caporale A, Tao JQ, et al. Acute e-cig inhalation impacts vascular health: a study in smoking naïve subjects. Am J Physiol Heart Circ Physiol 2021; 320:H144-H158.
- 42. Kuntic M, Oelze M, Steven S, *et al.* Short-term e-cigarette vapour exposure causes vascular oxidative stress and dysfunction: evidence for a close connection to brain damage and a key role of the phagocytic NADPH oxidase (NOX-2). Eur Heart J 2020; 41:2472–2483.

Volume 37 • Number 00 • Month 2022

- 43. Kerasioti E, Veskoukis AS, Skaperda Z, et al. The flavoring and not the nicotine content is a decisive factor for the effects of refill liquids of electronic cigarette on the redox status of endothelial cells. Toxicol Rep 2020; 7:1095–1102.
- 44. Jaleel Z, Blasberg E, Troiano C, et al. Association of vaping with decreased vascular endothelial growth factor expression and decreased microvessel density in cutaneous wound healing tissue in rats. Wound Repair Regen 2021; 29:1024–1034.
- 45. Sahota A, Naidu S, Jacobi A, *et al.* Atherosclerosis inflammation and burden in young adult smokers and vapers measured by PET/MR. Atherosclerosis 2021; 325:110-116.

This study reports smokers and electronic cigarette users had significantly more carotid plaque burden compared with matched nonsmokers.

- 46. Li J, Huynh L, Cornwell WD, et al. Electronic cigarettes induce mitochondrial
 DNA damage and trigger TLR9 (toll-like receptor 9)-mediated atherosclerosis. Arterioscler Thromb Vasc Biol 2021; 41:839–853.
- This study investigates the mechanism of e-cig exposure-accelerated atherosclerotic lesion development.
- 47. Franzen KF, Willig J, Cayo Talavera S, et al. E-cigarettes and cigarettes worsen peripheral and central hemodynamics as well as arterial stiffness: A randomized, double-blinded pilot study. Vasc Med (United Kingdom) 2018; 23:419–425.
- Münzel T, Hahad O, Kuntic M, *et al.* Effects of tobacco cigarettes, e-cigarettes, and waterpipe smoking on endothelial function and clinical outcomes. Eur Heart J 2020; 41:4057–4070.
- 49. Münzel T, Camici GG, Maack C, et al. Impact of oxidative stress on the heart and vasculature: part 2 of a 3-part series. J Am Coll Cardiol 2017; 70:212-229.
- Basma H, Tatineni S, Dhar K, et al. Electronic cigarette extract induced toxic effect in iPS-derived cardiomyocytes. BMC Cardiovasc Disord 2020; 20:357.
- Chaumont M, van de Borne P, Bernard A, et al. Fourth generation e-cigarette vaping induces transient lung inflammation and gas exchange disturbances: results from two randomized clinical trials. Am J Physiol Lung Cell Mol Physiol 2019; 316:L705–L719.
- Madison MC, Landers CT, Gu BH, et al. Electronic cigarettes disrupt lung lipid homeostasis and innate immunity independent of nicotine. J Clin Invest 2019; 129:4290–4304.
- Muthumalage T, Lamb T, Friedman MR, Rahman I. E-cigarette flavored pods induce inflammation, epithelial barrier dysfunction, and DNA damage in lung epithelial cells and monocytes. Sci Rep 2019; 9:19035.
- 54. Pambuccian SE. Testing for lipid-laden macrophages in bronchoalveolar lavage fluid to diagnose vaping-associated pulmonary injury. Are we there yet? J Am Soc Cytopathol [Internet] 2020; 9:1–8.
- PG S, MA S, JL F, et al. Lipid laden macrophages and electronic cigarettes in healthy adults. EBioMedicine 2020; 60:102982.
- Szafran BN, Pinkston R, Perveen Z, et al. Electronic-cigarette vehicles and flavoring affect lung function and immune responses in a murine model. Int J Mol Sci 2020; 21:1–22.
- Moore KJ, Sheedy FJ, Sheedy FJ, Fisher EA. Macrophages in atherosclerosis: a dynamic balance. Nat Rev Immunol 2013; 13:709-721.
- 58. Kelesidis T, Tran E, Arastoo SET-AL>. Elevated cellular oxidative stress in circulating immune cells in otherwise healthy young people who use electronic cigarettes in a cross-sectional single-center study: implications for future cardiovascular risk. J Am Heart Assoc 2020; 9:e016983.

This study reports an increased proportion of proinflammatory monocytes/macrophages, NK cells, and T and B lymphocytes, in otherwise healthy young people who are long-term EC vapers compared with nonsmokers.

- 59. Benowitz N, St Helen G, Nardone NET-AL>. Twenty-four-hour cardiovascular
 effects of electronic cigarettes compared with cigarette smoking in dual
- users. J Am Heart Assoc 2020; 9:e017317. This study assesses the short-term vaping effects on biomarkers of inflammation.
- **60.** Lee WH, Ong SG, Zhou Y, *et al.* Modeling cardiovascular risks of E-cigarettes
- with human-induced pluripotent stem cell-derived endothelial cells. J Åm Coll Cardiol 2019; 73:2722-2737.
- Kaur G, Lungarella G, Rahman I. SARS-CoV-2 COVID-19 susceptibility and lung inflammatory storm by smoking and vaping. J Inflamm (Lond) 2020; 17:21.
- 62. Lan Y, Liu W, Zhou Y. Right ventricular damage in COVID-19: association
 ▶ between myocardial injury and COVID-19. Front Cardiovasc Med 2021; 8:606318.

This review summarizes right ventricular dysfunction associated to lung injury and COVID19 infection.

- Angelidis I, Simon LM, Fernandez IE, et al. An atlas of the aging lung mapped by single cell transcriptomics and deep tissue proteomics. Nat Commun 2019; 10:963.
- Reyfman PA, Walter JM, Joshi N, *et al.* Single-cell transcriptomic analysis of human lung provides insights into the pathobiology of pulmonary fibrosis. Am J Respir Crit Care Med 2019; 199:1517–1536.
- 65. Duclos GE, Teixeira VH, Autissier P, et al. Characterizing smoking-induced transcriptional heterogeneity in the human bronchial epithelium at single-cell resolution. Sci Adv 2019; 5:eaaw3413.
- Skelly DA, Squiers GT, McLellan MA, et al. Single-cell transcriptional profiling reveals cellular diversity and intercommunication in the mouse heart. Cell Rep 2018; 22:600–610.
- 67. McLellan MA, Skelly DA, Dona MSI, *et al.* High-resolution transcriptomic profiling of the heart during chronic stress reveals cellular drivers of cardiac fibrosis and hypertrophy. Circulation 2020; 142:1448–1463.
- This study maps the cellular landscape of the mouse heart and profiles intercellular communication in the context of angiotensin II-induced fibrosis.
- Tucker NR, Chaffin M, Fleming ŠJ, et al. Transcriptional and cellular diversity of the human heart. Circulation 2020; 142:466–482.
- 69. Forte E, Skelly DA, Chen M, et al. Dynamic interstitial cell response during myocardial infarction predicts resilience to rupture in genetically diverse mice. Cell Rep 2020; 30:3149.e6–3163.e6.
- Dorison A, Ho JWK, Wystub-Lis K, et al. Single-cell expression profiling reveals dynamic flux of cardiac stromal, vascular and immune cells in health and injury. Elife 2019; 8:1–39.
- 71. Molenaar B, Timmer LT, Droog M, et al. Single-cell transcriptomics following
- ischemic injury identifies a role for B2M in cardiac repair. Commun Biol 2021; 4:1-15.

This study indicates phase-specific changes in cellular heterogeneity during different stages of cardiac remodelling after ischemic injury.

- Tyser RCV, Ibarra-Soria X, McDole K, et al. Characterization of a common progenitor pool of the epicardium and myocardium. Science 2021; 371:eabb2986.
- DeLaughter DM, Bick AG, Wakimoto H, et al. Single-cell resolution of temporal gene expression during heart development. Dev Cell 2016; 39:480-490.
- Kim T, Echeagaray OH, Wang BJ, et al. In situ transcriptome characteristics are lost following culture adaptation of adult cardiac stem cells. Sci Rep [Internet] 2018; 8:12060.
- Esquer C, Echeagaray O, Firouzi F, et al. Transcriptional features of biological age maintained in human cultured cardiac interstitial cells. Genomics 2021; 113:3705–3717.
- 76. Tabula Muris Consortium, Overall coordination, Logistical coordination, Organ collection and processing, Library preparation and sequencing, Computational data analysis, Cell type annotation, Writing group, Supplemental text writing group, Principal investigators. Single-cell transcriptomics of 20 mouse organs creates a Tabula Muris. Nature 2018; 562:367–372.
- Sun H, Zhou Y, Fei L, et al. scMCA: a tool to define mouse cell types based on single-cell digital expression. Methods Mol Biol 2019; 1935:91–96.
- Han X, Wang R, Zhou Y, et al. Mapping the mouse cell atlas by Microwell-Seq. Cell 2018; 172:1091.e17–1107.e17.
- 79. Winkels H, Ehinger E, Vassallo M, et al. Atlas of the immune cell repertoire in mouse atherosclerosis defined by single-cell RNA-sequencing and mass cytometry. Circ Res [Internet] 2018; 22:1675–1688.
- Yoshida K, Gowers KHC, Lee-Six H, et al. Tobacco smoking and somatic mutations in human bronchial epithelium. Nature 2020; 578:266–272.
- Zochios V, Parhar K, Tunnicliffe W, et al. The right ventricle in ARDS. Chest 2017; 152:181–193.
- Repessé X, Vieillard-Baron A. Right heart function during acute respiratory distress syndrome Historical and physiological background. Ann Transl Med 2017; 5:295.
- Arrigo M, Huber LC, Winnik S, et al. Right ventricular failure: pathophysiology, diagnosis and treatment. Card Fail Rev 2019; 5:140–146.
- 84. Esquer C, Echeagaray O, Firouzi F, et al. Fundamentals of vaping-associated pulmonary injury leading to severe respiratory distress. Life Sci Alliance 2022; 5:e202101246.
- This study reports cardiac systemic output is moderately but significantly impaired with pulmonary side ventricular chamber enlargement.
- Cuccia AF, Patel M, Amato MS, et al. Quitting e-cigarettes: Quit attempts and quit intentions among youth and young adults. Prev Med Reports 2021; 21:2211–3355.