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Letter to the Editor

MEG3/miR-223: A potentially reliable risk factor predictor for myocardial ischemia-reperfusion injury

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Dear Editor,

Recently, Mayer et al. reported that miR-223 was associated with all-cause or cardiovascular mortality in stable chronic cardiovascular patients, but its predictive power disappeared when entered into one regression model together with miR-19 [1]. However, we found that circulating miR-223 maybe a potentially reliable risk factor predictor for myocardial ischemia-reperfusion (MI/R) injury.

Currently, Zampetaki et al. confirmed the circulating miR-223 is negatively associated with disease risk of myocardial infarction [2]. Furthermore, Liu et al. revealed that miR-223 protect MI/R and maybe a potential target in the treatment of MI [3]. These evidences indicate that miR-223 maybe a potential biomarker and treatment for MI/R injury. In addition, lncRNAs play important roles in cardiovascular pathology. Wu et al. confirmed that lncRNA MEG3 was increased in clinical heart failure samples and mouse injured heart after MI/R [4]. Furthermore, Zhang et al. found that MEG3 acted as an endogenous sponge by sequence complementarity to suppress the function of miR-223 and enhance endothelial cell pyroptosis [5]. This implies that circulating MEG3/miR-223 axis maybe a potential biomarker and risk factor predictor for MI/R injury.

Therefore, we speculated that circulating MEG3/miR-223 axis maybe a potential biomarker and risk factor predictor for MI/R injury. However, this speculation needs to be further verified by experimental evidence.

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Declaration of Competing Interest

None.

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