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### 1 Regular Article

# Cellular prion protein directly interacts with and enhances lactate dehydrogenase expression under hypoxic conditions

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#### ABSTRACT

Although a physiological function of the cellular prion protein (PrP<sup>c</sup>) is still not fully clarified a PrP<sup>c</sup>-mediated 22 neuroprotection against hypoxic/ischemic insult is intriguing. After ischemic stroke prion knockout mice 23 (Prnp<sup>0/0</sup>) display significantly greater lesions as compared to wild-type (WT) mice. Earlier reports suggested 24 an interaction between the glycolytic enzyme lactate dehydrogenase (LDH) and PrP<sup>c</sup>. Since hypoxic environment 25 enhances LDH expression levels and compels neurons to rely on lactate as an additional oxidative substrate for 26 energy metabolism, we examined possible differences in LDH protein expression in WT and Prnp<sup>0/0</sup> knockout 27 models under normoxic/hypoxic conditions in vitro and in vivo, as well as in a HEK293 cell line. 28 While no differences are observed under normoxic conditions, LDH expression is markedly increased after 60-min 29 and 90-min of hypoxia in WT vs. Prnp<sup>0/0</sup> primary cortical neurons with concurrent less hypoxia-induced damage in 30 the former group. Likewise, cerebral ischemia significantly increases LDH levels in WT vs. Prnp<sup>0/0</sup> mice with accom- 31 panying smaller lesions in the WT group. HEK293 cells overexpressing PrP<sup>c</sup> show significantly higher LDH expres- 32 sion/activity following 90-min of hypoxia as compared to control cells. Moreover, a cytoplasmic co-localization of 33 LDH and PrP<sup>c</sup> was recorded under both normoxic and hypoxic conditions. Interestingly, an expression of monocar-34 boxylate transporter 1, responsible for cellular lactate uptake, increases with PrP<sup>c</sup>-overexpression under normoxic 35 conditions. Our data suggest LDH as a direct PrP<sup>c</sup> interactor with possible physiological relevance under low oxygen 36 conditions. 37

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#### Q3 1. Introduction

The physiological function of the cellular prion protein (PrP<sup>c</sup>) remains unclear, although numerous studies point to its neuroprotective role (Walz et al., 1999; McLennan et al., 2004; Weise et al., 2004). PrP<sup>c</sup> is a multifunctional protein involved in counteraction of oxidative stress (Brown et al., 1997; Wong et al., 2001), modulation of cell death

http://dx.doi.org/10.1016/j.expneurol.2015.04.025 0014-4886/© 2015 Published by Elsevier Inc. (Kuwahara et al., 1999: Bounhar et al., 2001) and activation of several 49 signal transduction pathways known to promote neuronal survival 50 (Mouillet-Richard et al., 2000; Zanata et al., 2002). Interestingly, abla- 51 tion of the cellular prion protein gene (Prnp) is not crucial for viability 52 (Bueler et al., 1992; Kuwahara et al., 1999). However, under circum- 53 stances of increased physiological demands, such as brain seizures or is- 54 chemia the presence of PrP<sup>c</sup> becomes decisive (Walz et al., 1999; Weise 55 et al., 2004). Hence, cerebral PrP<sup>c</sup> is up-regulated early in response to 56 focal cerebral ischemia and prion protein knockout (Prnp<sup>0/0</sup>) mice dis- 57 play significantly greater infarct volumes as compared to wild-type 58 (WT) mice following both permanent and transient ischemia 59 (McLennan et al., 2004; Mitteregger et al., 2007). Even though it has 60 been suggested that PrPc exerts neuroprotective effects via phos- 61 phatidylinositol 3-kinase (PI3K)/Akt (Weise et al., 2006) and mitogen- 62 activated protein kinase/extracellular signal-regulated kinase (MAPK/ 63 ERK) pathway (Shyu et al., 2005b; Spudich et al., 2005), molecular 64 mechanisms underlying PrP<sup>c</sup> mediated neuroprotection after ischemic 65 brain injury require further characterization. 66

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S. Ramljak et al. / Experimental Neurology xxx (2015) xxx-xxx

Several earlier reports demonstrated beneficial effects of LDH prod-67 68 uct, lactate, on post-hypoxic/post-ischemic neuronal tissue (Schurr et al., 1988, 1997, 2001). The astrocyte-neuron lactate shuttle hypothe-69 70 sis postulates that lactate is an essential component of metabolic crosstalk between astrocytes and neurons enabling neuronal recovery 71 72under circumstances of high energy demand such as hypoxia/ischemia 73(Pellerin and Magistretti, 1994). Furthermore, administration of lactate 74directly after middle cerebral artery occlusion leads to a significant 75decrease in lesion size and an improvement in neurologic outcome in 76mice (Berthet et al., 2009).

A previous study demonstrated PrP<sup>c</sup> involvement in the regulation of 77 glutamate-dependent lactate transport of cultured astrocytes (Kleene 78 et al., 2007). We reported a marked PrP<sup>c</sup>-induced up-regulation of the 79 LDH isoform A (LDH-A) after introduction of PRNP gene into Prnp<sup>0/0</sup> 80 cells (Ramljak et al., 2008). Meanwhile, interactome analyses identified 81 the LDH-A isoform not only as a PrP<sup>c</sup> interaction partner but also as an 82 interactor of Doppel and Shadoo, two mammalian PrP<sup>c</sup> paralogues 83 84 (Watts et al., 2009), indicating a potential physiologically relevant association of both proteins. 85

A functional relation between PrP<sup>c</sup> and LDH could be particularly 86 intriguing in view of the beneficial effects cerebral lactate might exert 87 on neuronal recovery of WT as compared to Prnp<sup>0/0</sup> mice after hypox-88 89 ia/ischemia. In the present study, we verified LDH expression levels in primary cortical neurons derived from WT and Prnp<sup>0/0</sup> mice under 90 both normoxic and hypoxic conditions. In addition, we scrutinized 91LDH expression in WT and Prnp<sup>0/0</sup> mice subjected to transient focal 92cerebral ischemia. Finally, we employed a HEK293 cell line as a cell 93 94model and examined regulation of LDH protein levels/activity in PrP<sup>c</sup>-95overexpressing vs. control HEK293 cells (expressing endogenous levels 96 of PrP<sup>c</sup>) under normoxic and hypoxic conditions. Furthermore, we 97 investigated a possibility of direct interaction between LDH and PrP<sup>c</sup> by means of immunoprecipitation and co-localization experiments. 98

### 99 2. Material and methods

## 2.1. Preparation and maintenance of primary cortical neurons and hypox *ia-re-oxygenation treatment*

Pregnant WT and Prnp<sup>0/0</sup> mice were anaesthetized on day 14 of ges-102 tation using 2-bromo-2-chloro-1,1,1-trifluoroethane (Sigma-Aldrich, 103 Taufkirchen, Germany) and then sacrificed by cervical dislocation. The 104 genetic background of WT and Prnp<sup>0/0</sup> mice is described in detail in 105 the section Transgenic mice. Briefly, brains from day 14 embryos were 106 107 removed and stripped of meninges. Afterwards, cortex tissue was isolated and mechanically dissociated by several pipetting passages after a 108 10910-min treatment with trypsin/EDTA (Biochrom, Berlin, Germany) at 37 °C. Cortical cells were then centrifuged, counted and finally plated 110 on poly-D-lysine (10 µM)-coated glass cover-slips in culture wells at a 111 density of  $1 \times 10^6$  cells/well (9.6 cm<sup>2</sup>). Cell cultures were first grown 112 in DMEM (Dulbecco's Modified Eagle's Medium, Sigma-Aldrich), sup-113 114 plemented with 10% FCS (Biochrom), 20 mM KCl, N-2 (1:100, Gibco/ 115Invitrogen, Karlsruhe, Germany), B-27 (1:50, Gibco/Invitrogen) supplemented with antioxidants, and 0.1% P/S (penicillin-streptomycin) 116(Gibco/Invitrogen). Four days after preparation, preexisting medium 117was replaced by fresh prepared DMEM, containing 10% FCS, B-27, N-2 118 119 and the antimitotics uridine (U) and 5-Fuoro-2'-deoxyuridine (FdU) (Sigma-Aldrich) in order to reduce astrocyte proliferation. 120

Hypoxia/re-oxygenation experiments were conducted after 7 days 121 in vitro. Cells were placed in a hypoxic chamber (Labotect, incubator 122C42, Goettingen, Germany) at 37 °C, 5% CO<sub>2</sub>, 95% humidity and 1% O<sub>2</sub> 123for various incubation periods (30, 60 and 90 min) followed by 12 h of 124re-oxygenation under standard conditions (37 °C, 5% CO<sub>2</sub> and 95% 125humidity). For Western blot analysis, cells were washed in phosphate-126buffered saline (PBS), scraped on ice in a cell lysis buffer, containing 127128 50 mM Tris-HCl pH 8.0, 150 mM NaCl, 1% Triton X-100 (Roth, Karlsruhe, Germany), protease and phosphatase inhibitor cocktail (Roche, Mann- 129 heim, Germany). 130

2.2. Transgenic mice 131

All experimental procedures were performed according to the 132 National Institutes of Health guidelines for the care and use of laborato-133 ry animals and approved by local authorities. Adult, male WT and  $Prnp^{0/0}$ 134 ° mice weighing 22–27 g were used in the study. Both WT and  $Prnp^{0/0}$ 135 mice were of mixed (129/Sv × C57BL/6) genetic background.  $Prnp^{0/0}$ 136 mice were generated as described earlier (Bueler et al., 1992). 137

After mice have been sacrificed, brains were taken either as a whole 138 or were dissociated on ice into four brain regions: hippocampus, cortex, 139 cerebellum and olfactory bulb. Subsequently, whole brains/brain re- 140 gions were cut, complemented with lysis buffer containing 50 mM 141 Tris–HCl (pH 7.5), 150 mM NaCl, 2 mM EDTA, 1% Triton X-100 (Roth) 142 and cocktail of protease inhibitors (Roche) and homogenized. Brain ly- 143 sate samples were rotated for 15 min and centrifuged at 4 °C at 144 13,000 × g. Supernatants were transferred in separate tubes and stored 145 at -80 °C.

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#### 2.3. Induction of transient focal cerebral ischemia

Animals were anaesthetised with 1%-1.5% isofluran (30% O<sub>2</sub>, re- 148 mainder N<sub>2</sub>O). Rectal temperature was maintained at 36.5-37 °C 149 employing a feedback controlled heating system. In order to assess cere- 150 bral blood flow, laser-Doppler flow (LDF) was recorded during all 151 experiments using a 0.5 mm fiberoptic probe (Perimed, Stockholm, 152 Sweden) attached to the skull overlying the core region of the middle 153 cerebral artery (MCA) territory (2 mm posterior, 6 mm lateral from 154 bregma). Focal cerebral ischemia was induced by transient occlusion 155 (60 min) of the MCA using the intraluminal filament technique 156 (Weise et al., 2004). Following a midline neck incision the left common 157 and external carotid artery were isolated and ligated. After placing a mi- 158 crovascular clip (Aesculap, Tuttlingen, Germany) on the internal carotid 159 artery, an 8-0 silicon resin (Xantopren, Deuker, Germany) coated nylon 160 monofilament (Ethilon; diameter 180 to 200 µm; Ethicon, Germany) 161 was introduced through an incision into the distal part of the com- 162 mon carotid artery and, after clip removal, advanced 9 mm distal 163 from the carotid bifurcation for MCA occlusion. The monofilament 164 was withdrawn after 60 min of ischemia to allow reperfusion of the 165 MCA. LDF recording continued for 15 min to monitor appropriate 166 reperfusion. 167

### 2.4. Visualization of infarcted tissue in WT as compared to Prnp<sup>0/0</sup> mice 168

Twenty-four hours after induction of transient ischemia WT and169Prnp<sup>0/0</sup> mice were euthanized by an overdose of isofluran and their170brains removed. Five coronal equidistant slices were cut (thickness:1712 mm) and immersed in 2% 2,3,5-triphenyl-tetrazolium chloride solu-172tion for 15 min in order to visualize the infarcted tissue.173

### 2.5. Two-dimensional gel electrophoresis (2-DE)

For 2-DE mouse brain homogenates were concentrated and desalinated, using a Microcon<sup>TM</sup>YM-3 centrifugal filter (Millipore, Eschborn, 176 Germany), according to supplier's recommendations. Protein samples 177 were diluted with rehydration buffer (7 M urea, 2 M thiourea, 15 mM 178 dithiothreitol (DTT), 4% CHAPS, 2% ampholytes) for first-dimension isolectric focusing (IEF). IEF on a 7 cm immobilized pH gradient (IPG) 180 strip (pH 3–10, linear) was performed by applying 40  $\mu$ g of proteins 181 per strip. Focusing of the proteins was initiated at 200 V for 2 h, followed 182 by ramping at 500 V for 2 h, and final focusing at 4000 V for 5 h for a total 183 of 20,000 Vh. After IEF separation, proteins immobilized on the IPG strip 184 were reduced in the buffer containing 6 M urea, 2% sodium dodecyl 185 sulphate (SDS), 30% glycerol, 2% DTT, and 0.375 M Tris-HCl (pH 8.8) 186

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