The normal cellular prion protein and its possible role in angiogenesis

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1. ABSTRACT

Cellular Prion Protein (PrPc) is a ubiquitous glycoprotein present on the surface of endothelial cells. Resting vascular endothelial cells show minimum expression of PrPc and can constitutively release PrPc. PrPc participes in cell survival, differentiation and angiogenesis. During development, neonatal brain endothelial cells transiently express PrPc. Our group recently reported upregulation of PrPc in microvessels from ischemic brain regions in stroke patients. Ischemia/hypoxia induces PrPc expression through the activation of extracellular signal-regulated kinase (ERK). All these data suggest that PrPc plays an important role in angiogenic responses. In addition, PrPc participates in cellular function in the central nervous system, since PrPc is also highly expressed in neurons. PrPc binds copper, suggesting a role in copper metabolism. PrPc also protects cells against oxidative stress and it seems to be involved in neuroprotection. Several studies have demonstrated that PrPc prevents cells from apoptosis and subsequent tissue damage. Moreover, PrPc plays an important role in the immune response. Here, we review the multiple functions of PrPc with a special attention to its recently reported role in angiogenesis.

2. STRUCTURE AND SYNTHESIS OF PRPC

The human cellular prion protein is a highly conserved 32-KDa protein located on chromosome 20 (1). PrPc is a membrane bound glycoprotein of 253 amino acid residues in length that is attached via its glycosylphosphatidylinositol (GPI) anchor to the cell surface (2, 3). It has a half-life of \sim 6 hours in the body (4) and it is generally found at the cell membrane associated with cholesterol-rich micro-domains called rafts in polarized cells (5). PrPc is also associated with detergent-resistant micro-domains (6). There are some exceptions to this plasma membrane localization such as the stomach, where PrPc was observed in secretion granules of epithelial cells (7). The caroboxyl terminus (C-terminus) is highly structured and possesses two sites for glycosylation at asparginine residues 181 and 197. Cysteine residues 179 and 214 act as sites for PrPc's disulfide bridge. This disulfide bridge connects two long α -helices (8) and it is important in structure maintenance and abnormal conformation change (9).

PrPc is present in three major subcellular sites when analyzed by immunoelectron microscopy: the Golgi apparatus, early and late endosomes, and the plasma membrane (10, 11). PrPc is synthesized in the rough endoplasmic reticulum (ER), transits through the Golgi, and is transported to the cell surface. During synthesis of PrPc the protein is subject to a number of post-translational modifications resulting in the mature protein. Direction of the protein to the ER by its 22 amino acid N-terminal signal peptide along with removal of a 23 amino acid C-terminal signal during which a GPI anchor is added. Asn-linked oligosacharides are also attached in the ER and these saccharides are further modified in the Golgi network to become endoglycosidase H resistant. The GPI anchor, which is modified by the addition of sialic acid in the Golgi compartments, facilitates the trafficking of PrPc to the cell surface where endocytosis can occur (12). Correct transport of PrPc is essential for correct processing of PrPc for maintenance of PrPc function. Many of the elements influencing PrPc trafficking are located in the C-terminus of PrPc and include its GPI anchor and the saccharides attached to PrPc in the ER. For PrPc its GPI anchor is fundamental in transportation of PrPc to the cell membrane and for correct glycosylation (13). The functions of GPI anchored proteins are quite diverse ranging from cell adhesion to signalling (14). Recently it was reported that PrPc could be transferred between cells in a GPI anchor dependent manner a process that requires cell to cell contact (15). Lack of anchorage of PrPc also reduces glycosylation of the protein (13), which can exist as an unglycosylated, monoglycosylated and/or diglycosylated molecule.

3. TISSUE LOCALIZATION AND EXPRESSION OF PRPC

PrPc is expressed predominantly in neurons (16) and to a lesser extent in some non-neuronal tissues (17, 18). In central nervous system (CNS), PrPc is concentrated at presynaptic membranes (19) and it seems also to be associated with synaptic vesicles, suggesting a special role of PrPc in synaptic transmition (20). Loss of PrPc in PrPc null mice affects the copper content in synaptosomes, indicating that PrPc is involved in synaptic copper homeostasis (19). Moreover, synaptic transmission disruption in PrPc null mice has been reported previously (21, 22). On this basis, with regard to synaptic transmission, it may be that PrPc is involved in neuronal survival by maintaining the integrity of synaptic function. Normal human lymphocytes and lymphoid cell lines express PrPc mRNA and protein and participate in cell activation (23). PrPc was also detected in circulating leukocytes, heart and skeletal muscle, lung, intestinal tract. spleen, testis, ovary, and some other organs such as peripheral lymphoid tissues (17, 24). PrPc is present in normal adult blood. The majority of blood PrPc is found within the plasma fraction and platelets, although leucocyte subpopulations also express PrPc. Endothelial cells of both macrovascular and microvascular origin seem to express high levels of PrPc which can be constitutively released and contribute to PrPc plasma levels (25). Other study showed that PrPc was expressed on endothelial cells, released during apoptosis on membrane microparticules found in human plasma (26). In contrast, polymorphonuclear leucocytes and red blood cells express little or no PrPc (27).

4 FUNCTIONS OF PRPC

Various studies have demonstrated the existence of many PrPc ligands including metal ligands, adhesion molecules, caveolin, laminin, synapsin Ib, growth factor receptor bound protein 2 (Grb2), Stress-induced protein 1, B-cell leukemia/lymphoma 2 (Bcl-2), glycosaminoglycans, apolipoprotein B, glial fibrillary acidic protein (GFAP), chaperones (Hp60, BiP and STT1) and lipids (28). The most relevant are commented on in the following sections.

4.1 PrPc as a copper ligand

PrPc binds divalent metal ions zinc (Zn) and copper (Cu) via the N-terminal region of the protein which contains octarepeat histidine residues (29, 30). This octarepeat region binds four Cu²⁺ ions cooperatively (31) and a fifth Cu²⁺ binding site centred at residues His-96 and His-111 has also been observed (32, 33). Binding of the first copper ions induces structural organization of the PrPc, which in turn facilities binding of additional copper ions, and results in cooperative binding (34), as well as inducing structural modifications in synthetic peptides of PrPc (35, 36). The observation that PrPc binds cooperatively to copper ions within their physiological range of concentration suggest that it might play a specialized function in the metabolism of copper and other metal ions (35, 37, 38) Binding of copper and Zinc also enhances endocytosis of PrPc, suggesting that PrPc transports copper into the cell (39). Copper binding to PrPc in vivo was also observed using PrPc-deficient cells. This study showed a diminished copper content and lower superoxide dismutase activity in these cells, suggesting that PrPc exhibits superoxide dismutase activity (29, 40). The role of PrPc in copper metabolism is controversial. Certain studies have lead to a re-evaluation of the link between PrPc and copper metabolism (41). One study demonstrated that PrPc had no influence on copper delivery at physiological concentrations (42). PrPc might play an indirect role by linking copper metabolism with other cellular functions, similar to the recently described function of X-linked inhibitor of apoptosis (XIAP). Binding of copper to XIAP was shown to induce structural changes in the protein and favour its degradation. This in turn rendered cells more susceptible to apoptosis, thus linking copper homeostasis to the regulation of cell death (43).

Moreover, PrPc has been proposed to act in copper or zinc homeostasis in central nervous tissue (44). Indeed, both copper and zinc, at high micromolar concentrations were found to induce endocytosis of PrPc to early endosomes and Golgi compartments of cultured neuroblastoma cells (39, 44, 45). More specifically, PrPc was proposed to regulate copper level at the synapse, for instance, by sequestering the copper and zinc ions in excess (46, 47). Notably, copper and zinc are concentrated at the presynaptic terminals of glutaminergic synapses, from which they are released after depolarization (48). Therefore, PrPc localized at the presynaptic membrane could re-uptake copper in the synaptic region of the neuron and recycle it through endocytosis (47). It has been proposed that PrPc could reduce captured copper (II) ions and transfer them to copper (I)-specific intracellular copper

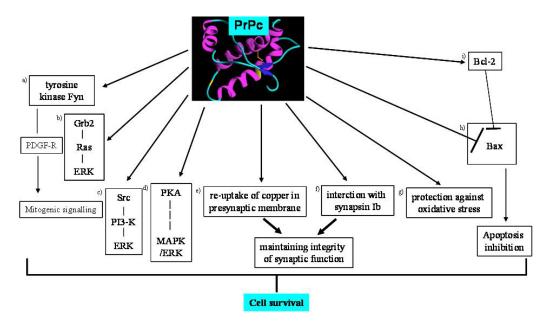


Figure 1. Cell survival and apoptotic pathways of PrPc. a) PrPc produces activation of Fyn kinase in murine differenciated neurons and it is thought to mediate cell survival and proliferation (62). b) PrPc interacts with Grb2 that plays an important role in neuronal survival (20). c, d) Several signal transduction pathways involved in survival are activated by PrPc in mouse primary cerebellar granule neurons, including PKA, Src, PI3K and MAPK/ERK kinases (66). e, f) Interactions between PrPc and synapsin Ib and re-uptake copper at the presynaptic membrane region of the neuron maintain the integrity of synaptic function and neuron survival (20,47). g) PrPc was observed to exhibit protection against oxidative stress (53, 54). h, i) PrPc protects human neurons in primary culture against Bax-mediated cell death (71). It has been demonstrated a strong anti-apoptotic effect of PrPc possibly via up-regulation of Bcl-2 and reduction in expression of Bax (74).

trafficking proteins (49). However, a recent study found no relation between PrPc and copper uptake in isolated mouse synaptosomes (50).

4.2 PrPc protects against oxidative stress

Copper and zinc are essential cofactors for many enzymatic activities, including cytochrome c oxidase, Cu/Zn superoxide dismutase 1 (SOD1), tyrosinase and numerous metalloproteinases (51, 52). Both recombinant and tissue-purified PrPc were observed to exhibit protection against oxidative stress and this was relative to the amount of bound copper (53, 54). The molecular mechanism through which PrPc protects against oxidative stress is still unclear, but it seems to be associated with the ability of PrPc to act as a copper-binding protein and therefore, may reduce copper-mediated oxidative stress (46). Alternatively, it has been proposed that PrPc might modulate the activity of SOD1, a key intracellular antioxidant enzyme (55). However, other studies failed to see variations of SOD1 activity under conditions where the levels of PrPc were varied (41). In addition PrPc-/- cell lines are more sensitive to copper toxicity produced by oxidative stress (40) and cerebellar cell cultures from PrPc null mice are more susceptible to oxidative stress than wild type ones (40, 55). Moreover, it was demonstrated that deletion of PrPc's octapeptide repeats eliminated the antioxidant function of PrPc (53). In fact, it has been demonstrated that PrPc null mice are more susceptible to acute seizures induced by different protocols (56). Considering that oxidative stress plays a role in the pathophysiology during and after cerebral injury, the

impairment of brain anti-oxidant defences of PrPc null mice could play an important role in determining their lower threshold to damage (57-59). Furthermore, protein and lipid oxidation is greatly increased in skeletal muscles, heart and liver of PrPc null mice, in association with a lower catalase activity (58). The above data suggest that PrPc may have a role in protecting against oxidative stress, the protection being mediated through reduction in free Cu/Zn, via SOD and also glutathione reductase, not only in the central nervous system, but also in other organs. Additionally, Sauer et al. demonstrated that elevation of ROS following treatment with ATP was completely inhibited in PrPc-over-expressing cells. This is in concordance with the hypothesis that PrPc plays a role as a free radical scavenger or a molecular sensor for oxidative stress (60).

4.3 PrPc promotes cellular survival through signal transduction

PrPc could be involved in signal transduction as is the case with other GPI-anchored proteins (61). Blocking PrPc with specific antibodies induced a marked decrease in the phosphorylation level of the tyrosine kinase Fyn in murine differentiated neurons (62). Activation of Fyn in these cells must regulate certain cellular functions modulated by PrPc. As Fyn is associated with cellular proliferation and cellular survival, this study indicates that cell surface PrPc may modulate neuronal survival. Figure 1 shows currently identified survival/anti-apoptotic signalling pathways associated with PrPc.

Consistent with the role of PrPc in modulating intracellular signal transduction activation is the finding that PrPc binds strongly to synapsin Ib, a protein involved in synapse formation, as well as the regulation of neurotransmitter release and therefore which may support neuronal survival (20). Several studies have suggested that PrPc has a synaptic distribution predominantly located at the plasma membrane of neurons (19, 10, 63, 64). Synaptic transmission disruption in PrPc null mice has been reported by some but also disputed by other authors (21, 22, 65). As suggested earlier, it is possible that PrPc is involved in promotion of neuronal survival by maintaining the integrity of synaptic function. Furthermore, PrPc interacts with Grb2, an adaptor protein that mediates growth factor receptor signals and also plays an important role in neuronal survival (20). Several signal transduction pathways involved in survival were activated in mouse primary cerebellar granule neurons grown in PrPc molecule-coated tissue culture plates, including protein kinase A (PKA), Src-related tyrosine kinases, phosphatidylinositol-3-kinase/Akt (PI3K), MAPK/ERK kinases (66). Among downstream targets, increased Bcl-2 levels and decreased Bax levels were observed, consistent with PrPc triggering survival signals. These studies clearly support a role for PrPc in cellular survival through signal transduction activation.

4.4 PrP and antiapoptotic function

Given the similarity between the PrPc octapeptide repeats and the BH2 domain of Bcl-2 family members, it was suggested that PrPc might function as a member of the Bcl-2 family of proteins playing a role in survival or cell death (67). The BH2 domain was shown to mediate the interaction between Bcl-2 and Bax protein and also to be responsible for Bcl-2 protection against Bax-mediated cell death (68). Bax is the major pro-apoptotic protein of neurons and, once activated, undergoes a conformational change, oligomerization, and translocation to the mitochondria, where it allows the release of apoptotic factors from the mitochondria (69). Therefore, it is possible that PrPc acts as member of the Bcl-2 family of proteins. Furthermore, transfection with Bcl-2 or PrPc constructs rescued PrPc null cells (70). Later, it was shown that PrPc protected human neurons in primary culture against Baxmediated cell death (71). Co-expression of PrPc with Bax completely abolished Bax-mediated cell death (71). In addition, a PrPc-null Hpl3-4 cell line from mice, was more sensitive to apoptosis induced by serum deprivation than its parental wild type (70, 72). Further characterization showed that PrPc specifically inhibits the mitochondriondependent apoptotic process (72). Overproduction of PrPc also prevents Bcl-2-associated protein X (Bax)-mediated cell death, which induces caspase-3 activation and cytochrome c release from the mitochondrion (71, 73). Moreover, Liang et al, demonstrated a strong anti-apoptotic effect of PrPc associated with up-regulation of Bcl-2 and reduction in expression of p53/Bax in poorly differentiated gastric adenocarcinoma cells (74). The inhibitory effect of PrPc on Bax-mediated apoptosis was specific as it did not prevent apoptosis induced by other pro-apoptotic inducing agents including Bax or staurosporine (STS) (73). In contrast, there are reports showing that over-expression of

PrPc sensitizes cells to apoptosis induced by pro-apoptotic agents such as STS (75, 76). Additionally, cells devoid of PrPc expression appeared to be resistant to STS-induced apoptosis, suggesting PrPc plays a synergic role in STS-mediated apoptosis. Other studies suggested that PrPc regulates neuronal cell death through a p53-dependent and caspese-3-mediated mechanism (76).

Interestingly, deletion of the octapeptide repeats eliminates PrPc neuroprotective function. However, the GPI anchor of PrPc is not required for the anti-Bax function, indicating that the presence of PrPc at the plasma membrane is not essential (71). Although cytosolic PrPc is toxic in neuroblastoma N2a cells and in mouse cerebellar granule neurons, in human neurons, cytosolic PrPc is not only non-toxic but also protects against Bax-mediated cell death, similar to the role full-length PrPc plays against Bax in human neurons (77, 71).

PrPc expression is also increased following brain ischemia. Mitsios et al. showed increased levels of PrPc both in the plasma and in peri-infarted brain tissue following acute stroke (Figure 2). It appears to have a protective role against cell death produced after stroke (78). Similarity, other groups demonstrated that cerebral PrPc is up-regulated early in response to focal cerebral ischemia. The extent of up-regulation seems to depend on the severity of ischemia and may therefore reflect the extent of ischemia-induce neuronal damage. Given the anti-apoptotic function of PrPc in vitro and in vivo, this up-regulation may be involved in the adaptive cellular response to ischemic brain injury (79). Furthermore, Andrew et al. demonstrated that PrPc plays an important role in neurogenesis and differentiation (80). This data suggests that PrPc has an important protective role against cellular stress leading to apoptotic cell death in ischemic disease.

4.5 Role of PrPc in immune response

Components of the immune system participate in chronic inflammation and also express PrPc (81). PrPc is expressed in haematopoietic stem cells (HSCs) (82). Human CD34+ HSCs express PrPc, but this is downregulated upon granulocytes differentiation (83). In contrast, maturation of monocytes and dendritic cells (DCs) leads to PrPc up-regulation (84-86), and PrPc expression also increases during human NK cells differentiation (84). Studies in mice show a trend towards down-regulation of PrPc with B and T cell maturation, and mature T lymphocyte expression during quiescence is low (87, 88). PrPc has been detected on human T and B lymphocytes, natural killer (NK) cells, platelets, monocytes, dendritic cells and follicular dendritic cells (23, 83-85, 89-92). Its expression may be somewhat higher in peripheral blood T cells than in B lymphocytes, while CD8+ cells express slightly more PrPc than CD4+ cell (84, 90). Hence, PrPc may be more important in certain types of functionally differentiated lymphocyte that operate in particular immune environments. PrPc is up-regulated within a few hours in T cells following mitogenic activation (23, 89, 93, 94). Under inflammatory conditions activated lymphocytes express lymphotoxins triggering PrPc up-regulation. Chronic inflammation can expand the expression of PrPc (95), and

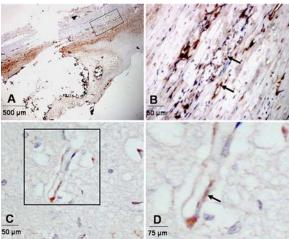


Figure 2. A, B) Representative immunostaining for PrPc in unstable carotid plaques. Positive PrPc immunostaining corresponded to a neovessel-rich and inflammatory cellrich area. C, D) Representative immunostaining for PrPc in in microvessels from ischemic brain regions in stroke patients (78).

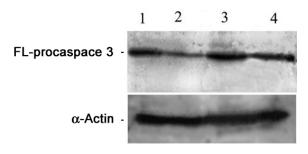


Figure 3. Western blot showing PrPc protection against apoptosis. 1) Control coronary artery endothelial cells, 2) Cells incubated with staurosporine (125 nM 12h), 3) Cells incubated with PrPc (5μ M 4h), 4) Cells incubated with staurosporine and PrPc. Pre-addition of PrPc resulted in a reduction in staurosporine-induced caspase-3 cleavage (band 4).

infection with H.Pylori leads to the up-regulaton of gastric PrPc expression (96). This is possibly a consequence of pro-inflammatory cytokine expression especially Il-1 and TNF which are known to up-regulate PrPc. Up-regulation of PrPc in vitro was shown in various cells stimulated with IL-1 or heat shock proteins (97-101). Signalling via elements of the T cell receptors (TCR) may be required to induce changes in PrPc up-regulation in activated T cells and treatment with lipopolysaccharide (LPS) does not increase PrPc expression on B cells (94). PrPc-/- mice have been reported to have normal MHC class I and II expression, dendritic cells maturation and numbers of haematopoietic stem cells, CD4+, CD8+ and B cells (86, 88, 102, 103), suggesting that they are not grossly immunodeficient. Other studies showed that macrophages from mice with deletion of the PrPc gene observed higher rates of phagocytosis than wild-type macrophages in vitro assays. They also showed that the elimination of GPIanchored proteins from the cell surface of macrophages from wild type mice rendered these cells as efficient as macrophages derived from knockout mice. The same study showed a raised phagocytic activity in PrPc minus mice. In addition, leukocyte recruitment was altered in knockout mice, as compared with wild type. This data demonstrated that PrPc modulates phagocytosis *in vitro* and *in vivo*. PrPc was also shown to down-regulate phagocytosis in macrophages (104). Furthermore, Starke *et al* showed that expression of PrPc increased in megakaryocyte differentiation and that PrPc was located within platelet α-granules (105). Taking together, PrPc seems to play a important role in regulation of the immune response.

4.6 Role of PrPc in angiogenesis: PrPc expression in endothelial cells

PrPc is expressed and present on the surface of endothelial cells (25). Resting vascular endothelial cells have minimal or no PrPc expression in vivo, i.e. normal resting endothelial cells of umbilical cord and adult blood vessels (aorta, saphenous vein and our normal transplant endothelial cells) did not appear to express demonstrable quantities of PrPc (106). Endothelial cells of the blood capillaries in the intestinal wall of the digestive tract and renal capillaries, however, expressed the PrPc reporter gene (107). Other studies showed an increased expression of PrPc in endothelial cells, astrocytes and neurons in penumbra regions in a rat model of cerebral ischemia (108). Furthermore, endothelial cells can constitutively release PrPc, both as a soluble protein and bound to microparticles, whilst vascular endothelium may be a source of plasma PrPc within the blood (25, 26, 109). PrPc has been identified as a constituent of caveolae, the flask-shaped membrane invaginations abundant in endothelial cells, which participate in signal transduction events connected to cell survival, differentiation and angiogenesis (110). Other evidence suggesting that caveolae plays a role in angiogenesis is indicated by the fact that the caveolae have been implicated in VEGF signalling machinery in endothelium (111). This work supports a central role for caveolae and possibly PrPc in modulation of angiogenic events (110). Furthermore, Satoh et al. observed that disruption of the PrPc gene resulted in an aberrant regulation of a battery of genes important for cell proliferation, differentiation and survival, including those located in the Ras and Rac signalling pathways associated with angiogenesis (112). During the development, neonatal brain endothelial cells transiently express PrPc transcripts suggesting a role in central nervous system angiogenesis and blood-brain barrier maturation (113, 114). PrPc expression maybe modulated by different growth factors via protein-protein interactions with normal protease sensitive PrPc (60, 115, 116).

In addition, our group recently published identification of the up-regulation of PrPc in microvessels from ischemic brain regions in stroke patients (78). Up-regulation of PrPc on endothelial cells within the areas of neovascularization might be the result of ischemic/hypoxic conditions within the damaged brain tissue after stroke (79). Several studies have demonstrated that ischemia/hypoxia induces the expression of PrPc through the activation of extracellular signal-regulated kinase

(ERK) (108, 117, 118). Shyun *et al* demonstrated that increased expression of PrPc occurs through a pathway involving ERK1/2, since enhanced expression of PrPc was inhibited by addition of an ERK1/2 inhibitor to the primary cortical culture medium (108). Interestingly, this might be the same pathway which up-regulates CD105, marker of angiogenic EC, expression during hypoxia (119) or atherogenesis (120). Shyu *et al.* proposed that HSTF-1, when phosphorylated by ERK1/2, could interact with HSE in the promoter of PrPc resulting in increased PrPc gene expression (108).

Krupinski et al observed an abnormal morphology of newly formed PrPc-positive microvessels demonstrating features characteristics of tumour-like microvessels which are prone to leak (78, 121). In our unpublished, recent studies we found PrPc expression in neovessels of carotid atherosclerotic plaques. PrPc expression on endothelial cells may be involved in modulation of apoptosis and in support of this, was mainly observed in advanced ulcerated complicated and noncomplicated atherosclerotic plaques with notable intraplaque haemorrhage (26). In our in vitro experiments apoptotic stimuli (STS) were able to up-regulate PrPc gene and protein expression in cultured bovine aortic endothelial cells and PrPc peptide also reduced caspase-3 cleavage following STS treatment, and therefore may be protective against apoptosis (Figure 3). These results are in concordance with results showed by Zhang et al which demonstrated down-regulation of PrPc sensitised neuro-2a cells to apoptosis induced by STS (122). Maintenance of a cellular population in atherosclerotic plaques through the pro-angiogenic and anti-apoptotic properties of PrPc could help to reduce the formation of unstable a cellular, haemorrhagic plaque regions.

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Abbreviations: PrPc: Cellular Prion Protein, ERK: extracellular signal-regulated kinase, GPI: glycosylphosphatidylinositol, ER: endoplasmic reticulum, Grb2: growth factor receptor bound protein, B-cell , Bcl-2: leukemia/lymphoma 2, GFAP: glial fibrillary acidic protein, Zn: zinc, Cu: copper, XIAP: X-linked inhibitor of apoptosis, SOD1: superoxide dismutase 1, PKA: protein kinase A, PI3K: phosphatidylinositol-3-kinase/Akt, STS: staurosporine, HSCs: haematopoietic stem cells, NK: natural killer, TCR: T cell receptors, LPS: lipopolysaccharide.

Key Words: Cellular Prion Protein, angiogenesis, Review

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