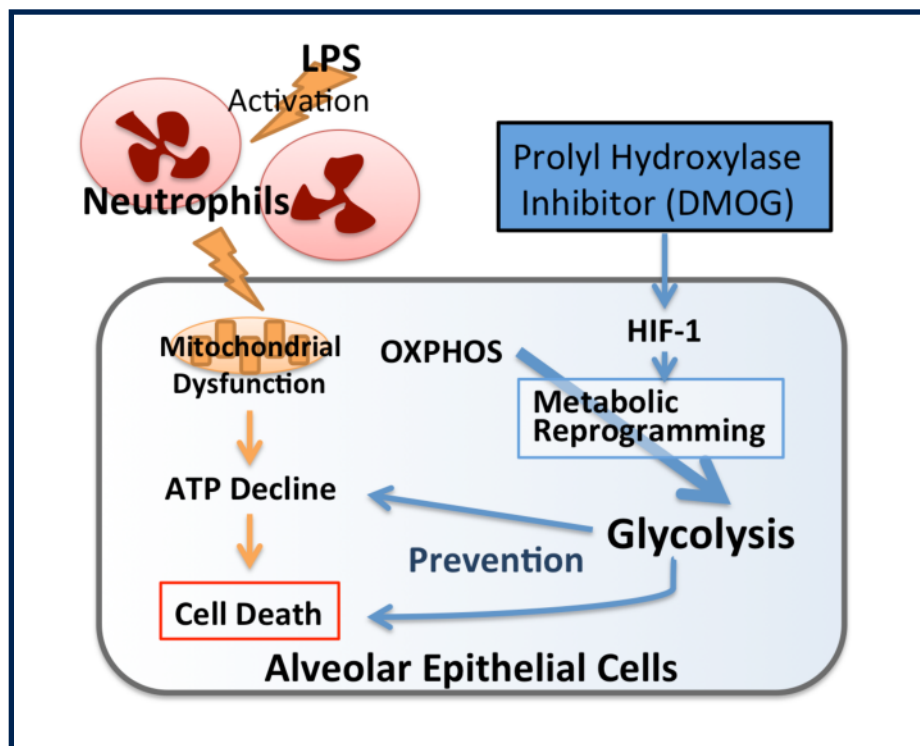


Metabolic reprogramming by inhibition of prolyl hydroxylases protects alveolar epithelial cells from LPS-neutrophil-induced energy derangements and cell death



Kentaro Tojo, Nao Tamada, Yusuke Nagamine, Shuhei Ota, Takahisa Goto
Yokohama City University Graduate School of Medicine, Dept of Anaesthesiology & Intensive Care, Yokohama, Japan



Summary

- LPS-activated neutrophils cause ATP decline and alveolar epithelial cell death.
- Pharmacological inhibition of a cellular oxygen sensor, prolyl hydroxylases (PHDs) causes HIF-1 mediated metabolic reprogramming from oxidative phosphorylation (OXPHOS) to glycolysis.
- PHD inhibition protected alveolar epithelial cells from neutrophil-LPS-induced ATP decline and cell death via HIF-1-mediated metabolic reprogramming.

Background

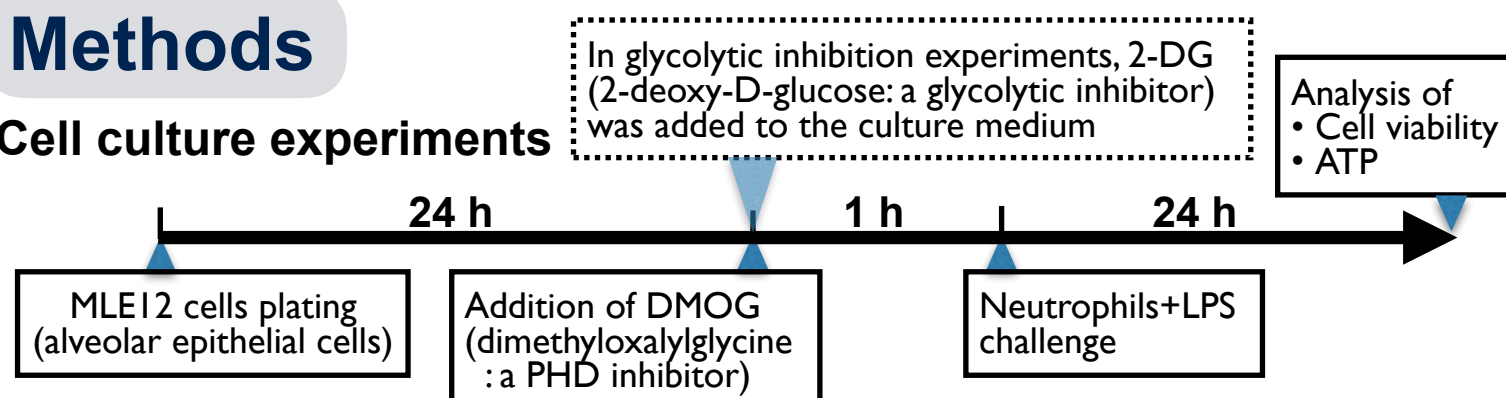
- * Neutrophil-mediated alveolar epithelial injury is a hallmark of acute respiratory distress syndrome (ARDS).
- * Cellular energy derangement due to mitochondrial dysfunction underlies the alveolar epithelial injury.
- * Therefore, metabolic reprogramming shifting bioenergetic activity from mitochondria-dependent OXPHOS to glycolysis may protect alveolar epithelial cells from ARDS.

Hypothesis

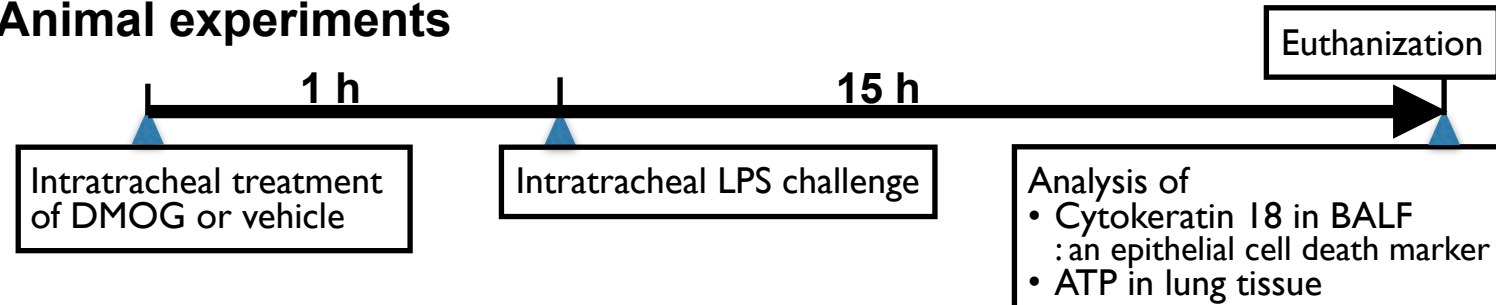
Metabolic reprogramming by pharmacological inhibition of a cellular oxygen sensor, prolyl hydroxylases (PHDs) may protect alveolar epithelial cells from lung injury.

Methods

Cell culture experiments

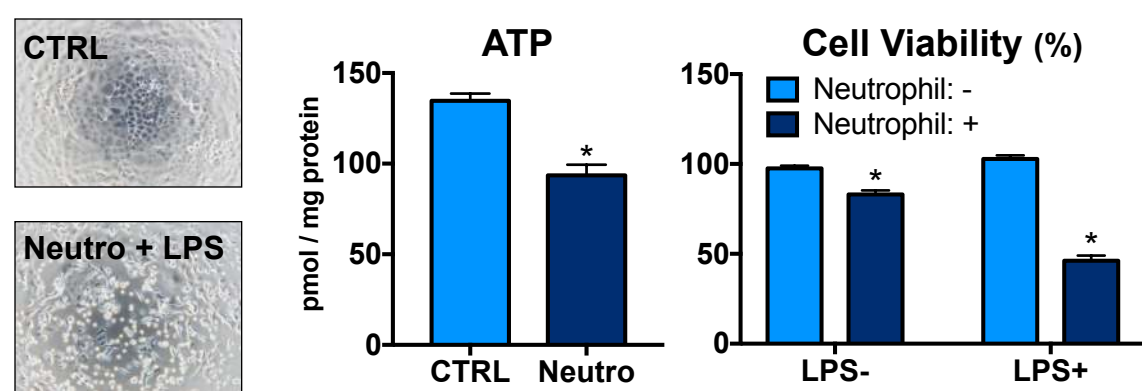


Animal experiments



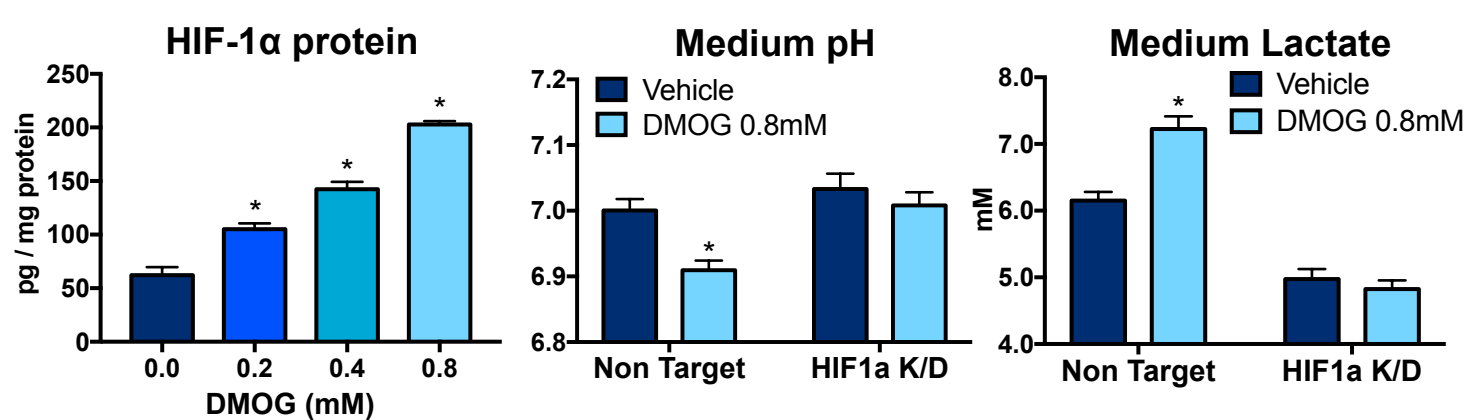
Results and Discussion

Neutrophils + LPS induces ATP-decline and alveolar epithelial cell death



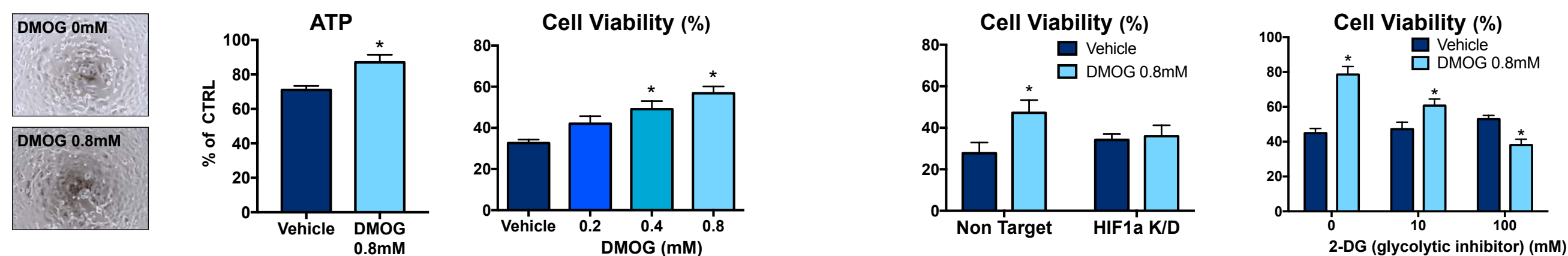
Neutrophil-LPS challenges induced ATP decline in MLE12 cells; an alveolar epithelial cell line. Concomitantly, cell viability was significantly decreased by neutrophil-LPS challenge. The cell death was not suppressed by caspase 3/7 inhibitor (data not shown). * p<0.05 vs. control.

Pharmacological inhibition of PHDs by DMOG causes HIF-1 mediated metabolic reprogramming



A PHD inhibitor, DMOG increased HIF-1α protein in MLE12 cells, however not HIF-2α (data not shown). Moreover, DMOG increased indicators of glycolytic activity; medium acidification and lactate production, which were abolished by HIF-1α knock-down. * p<0.05 vs. vehicle group.

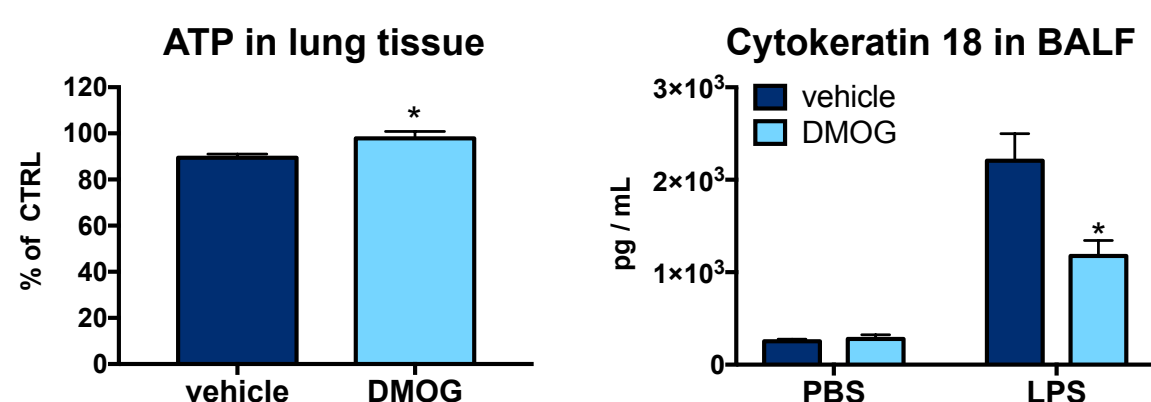
DMOG protects alveolar epithelial cell through HIF-1-mediated metabolic reprogramming from OXPHOS to glycolysis.



DMOG treatment attenuated the neutrophil-LPS-induced ATP decline and cell death in dose-dependent manner. * p<0.05 vs. vehicle group

HIF-1α knock-down abolished the protective effects of DMOG. Furthermore, glycolytic inhibition by 2-DG reversed the effects of DMOG. * p<0.05 vs. vehicle group

Intratracheal DMOG treatment attenuates alveolar epithelial cell death and ATP decline in LPS-induced lung injury mice



Intratracheal LPS-instillation-induced ATP decline in lung tissues and increased an epithelial cell death marker; cytokeatin 18 in BALF. Intratracheal DMOG treatment attenuated these changes. * p<0.05 vs. vehicle group.

Conclusion

- Pharmacological inhibition of PHDs protected alveolar epithelial cells from LPS-neutrophil-induced ATP decline and cell death via HIF-1-mediated metabolic reprogramming.
- Metabolic reprogramming from OXPHOS to glycolysis may be a novel approach to protect alveolar epithelial cells from ARDS.

