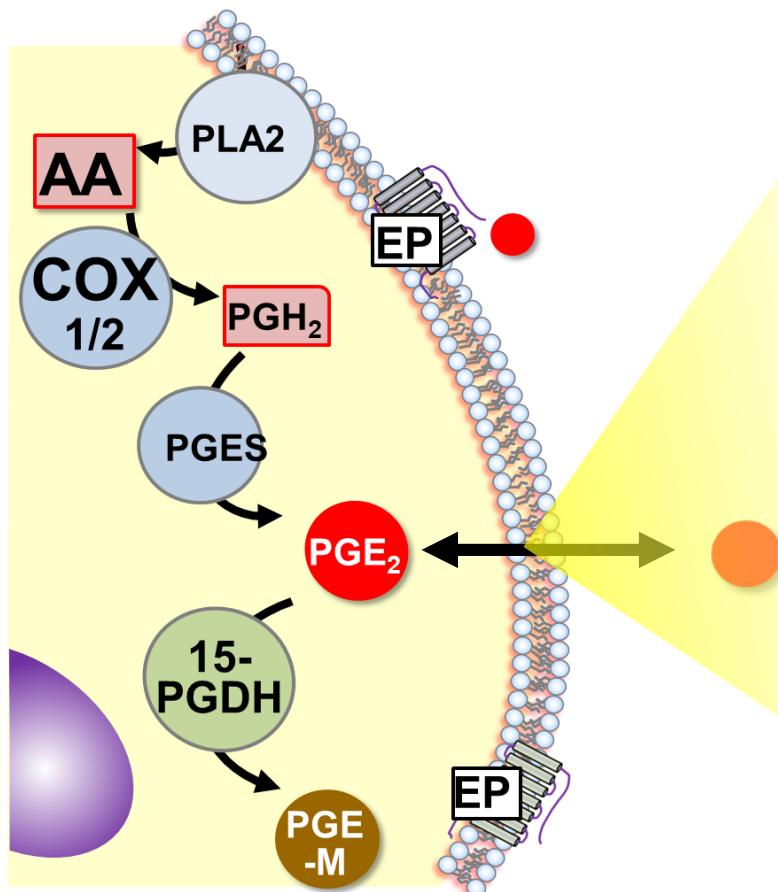


# OATP2A1/SLCO2A1 Determines Prostaglandins' Action by Distributing Them to the Required Place at the Right Time

Takeo Nakanishi, Takasaki University of Health and Welfare



Diffusion  
or  
Transporter-mediated

- SLCO2A1
- Other SLCOs
- OAT1
- OCT1/2
- MRP4
- .....

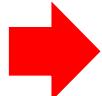
# Contents

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- Introduction
- Pulmonary Fibrosis in *Slco2a1<sup>-/-</sup>* Mice
  - Its role in Transcellular Transport of PGE<sub>2</sub>
- Fever Generation in *Slco2a1<sup>-/-</sup>* Mice
  - Its role in PGE<sub>2</sub> Secretion from Macrophages
- Conclusion

# Background and Research Goal

- Non-steroidal anti-inflammatory drugs (NSAIDs) are widely used in all over the world as a pain killer; however, **long term use may cause severe side effects** (i.e. GI-complications)
- Approximately **16,500 patients** die from GI-complication by NSAIDs every year.
- There is a demand for **a new pharmacological target** for NSAID, instead of cyclooxygenase (COX).
- **PGE<sub>2</sub> receptor (EP) agonists and antagonist** are being developed; most of them are failed in the middle of the course.

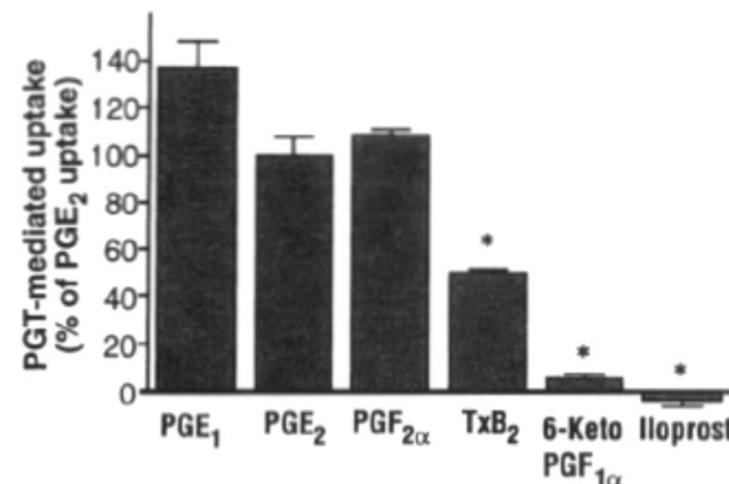
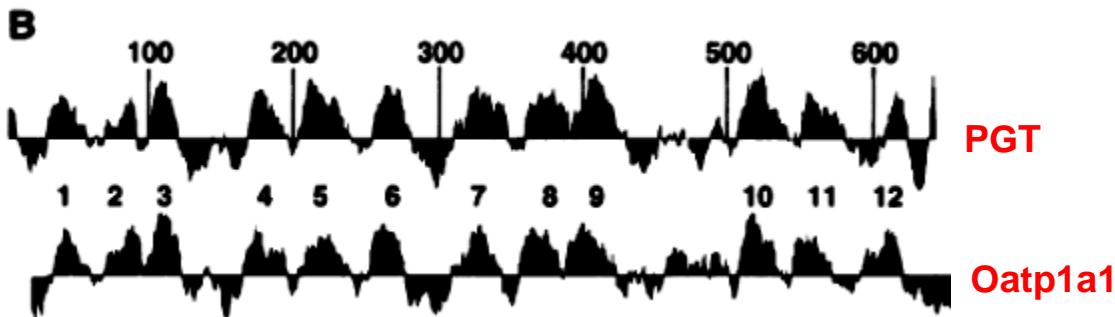
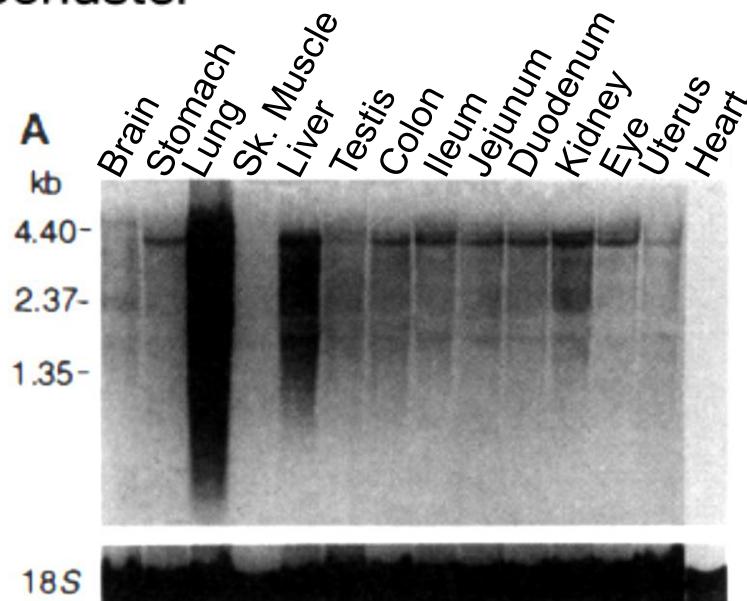
 **To explore a new target to manage inflammation and develop a new class of NSAID**, we focus on membrane transport of PGE<sub>2</sub>, since several carriers were identified to mediate the process (e.g. **SLCO2A1**, MRP4, OATs and OCT).

# Identification and Characterization of a Prostaglandin Transporter(Rat PGT)

Naoaki Kanai, Run Lu, Joseph A. Satriano, Yi Bao,  
Allan W. Wolkoff, Victor L. Schuster\*

## Rat PGT (Oatp2a1/SIco2a1)

CCGGAAAGCCCAGAACCGGAGTCCCCAGAAACCT 50  
 AGGCTAGGGACGTCGCCTCGGTCACT ATGGGCTCCTGCTCAAGCCTGGAGCGCGCCAG 120  
 MetGlyLeuLeuLysProGlyAlaArgGln 11  
 GGCAGCGGCACCTCCTCGGTCCCAGACAGACGTTGTCCCCGCTCCGTCTTCAGAACATT 180  
 GlySerGlyThrSerSerValProAspArgArgCysProArgSerValPheSerAsnIle 31  
 AAGGTATTTGTTCTTGCCATGGCCTGCTACAGCTCTGCCAGCTGCTCTACAGCGCTAC 240  
 LysValPheValLeuCysHisGlyLeuLeuGlnLeuCysGlnLeuLeuTyrSerAlaTyr 51  
 TTCAAGAGCAGTCTCACCAATCGAGAAGCGCTTGGGCTCTCCAGCTTCCCTCTGGT 300  
 PheLysSerSerLeuThrThrIleGluLysArgPheGlyLeuSerSerSerSerGly 71  
 CTCATCTCCAGTTGAATGAGATCAGCAACGCTACCCTCATCATCTTAGCTACTTC 360  
 LeuIleSerSerLeuAsnGluIleSerAsnAlaThrLeuIleIlePheIleSerTyrPhe 91  
 GGCAGCCGGGTCAACCGCCACGG ATG 387      Martin F/G (Unknown  
 GlySerArgValAsnArgProArgMet 100      Transcription Factor)



# The Characteristics of OATP2A1/SLCO2A1

- Exhibits a high affinity for 2-series PG (e.g. PGE<sub>2</sub>, PGF<sub>2α</sub>, and PGD<sub>2</sub>) with Km (100 -300 nM).

Annu. Rev. Physiol 60:221, 1998.

- Driven by an outward lactate gradient.

Am J Physiol Renal Physiol 282:F1097, 2002

- Recognizes 3-series PG (PGE<sub>3</sub>) as well.

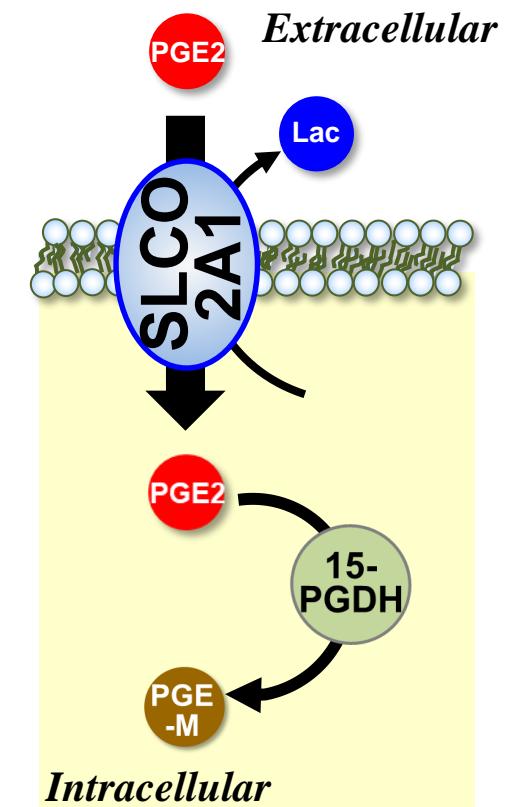
Prostaglandins Other Lipid Mediat 122:10, 2016

- Facilitates PGE<sub>2</sub> metabolism by cellular uptake of PGs, contributing to termination of PG signaling.

Am J Physiol Renal Physiol 282:F1097, 2002

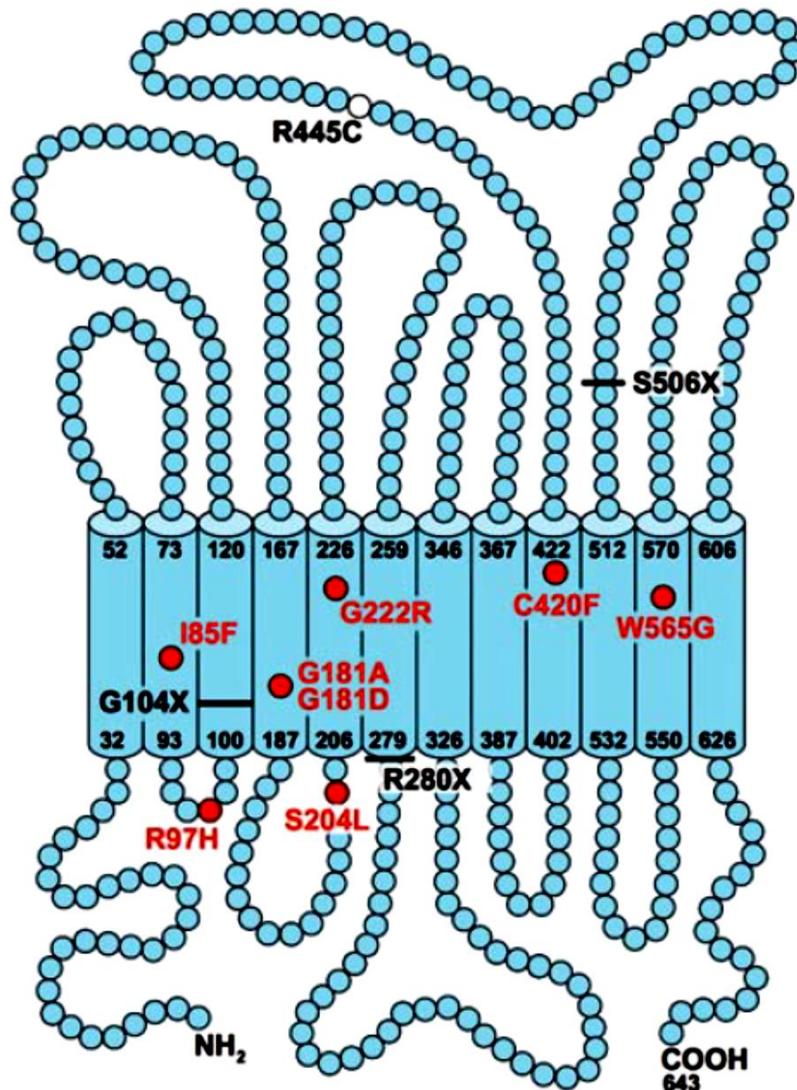
- *Slco2a1<sup>-/-</sup>* mice showed high plasma and urinary PGE<sub>2</sub>.

Circulation 121:529, 2010

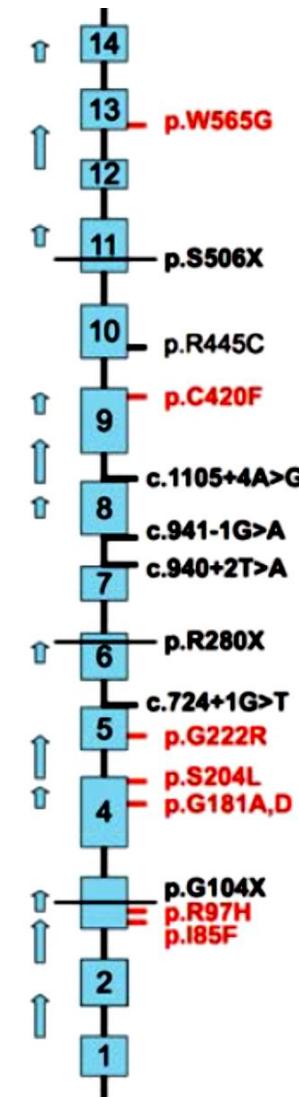


# Mutations in Human SLC02A1

## Predicted topology of the transporter



## Within gene structure

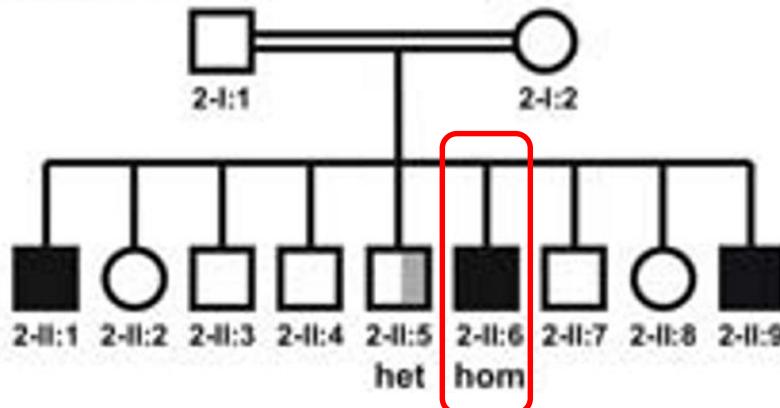


# Mutations in the Prostaglandin Transporter Encoding Gene *SLCO2A1* Cause Primary Hypertrophic Osteoarthropathy (PHO) and Isolated Digital Clubbing

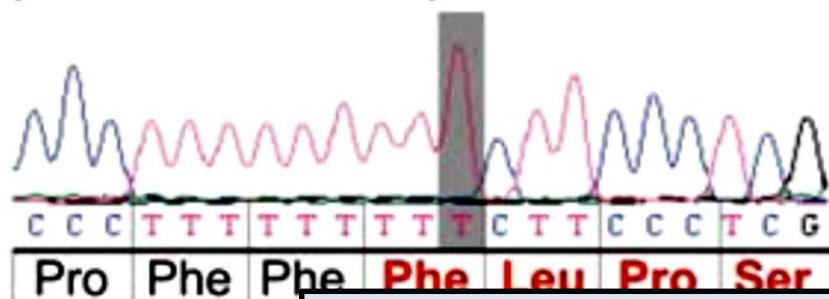
Wenke Seifert,<sup>1†</sup> Jirko Kühnisch,<sup>2,3†</sup> Beyhan Tüysüz,<sup>4</sup> Christof Specker,<sup>5</sup> Ad Brouwers,<sup>6</sup> and Denise Horn<sup>2\*</sup>

Received 10 November 2011; accepted revised manuscript 19 January 2012.

family 2



**SLCO2A1 exon 06**  
 patient 1-V:2: c.830dupT hom; Phe276LeufsX18



Due to duplication of T, frame



What mechanism for this disease?

Patient



Facial skin with cutis gyrata

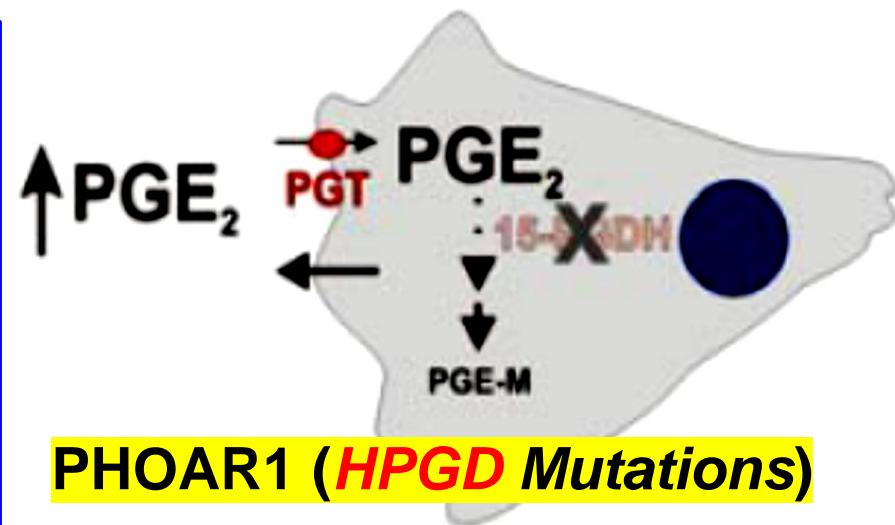
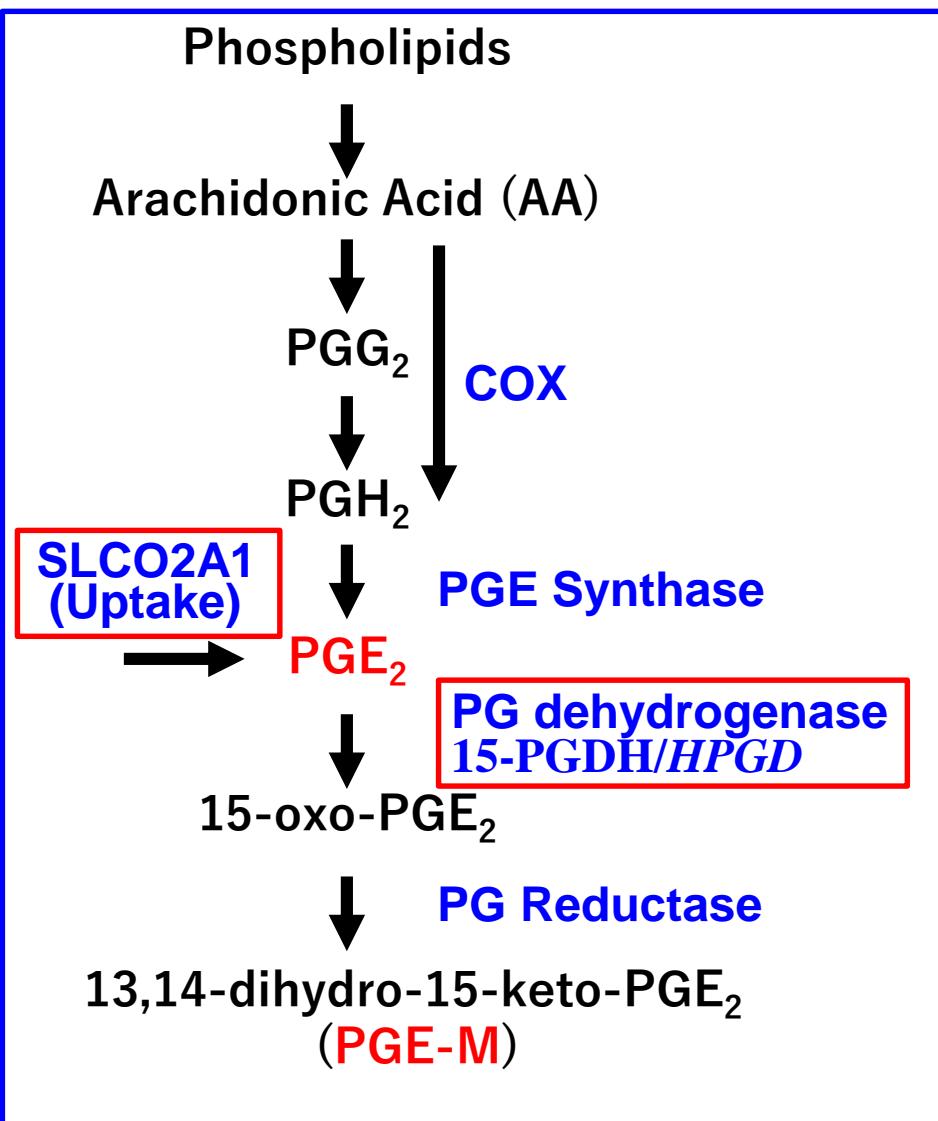


Hypertrophic Periostosis

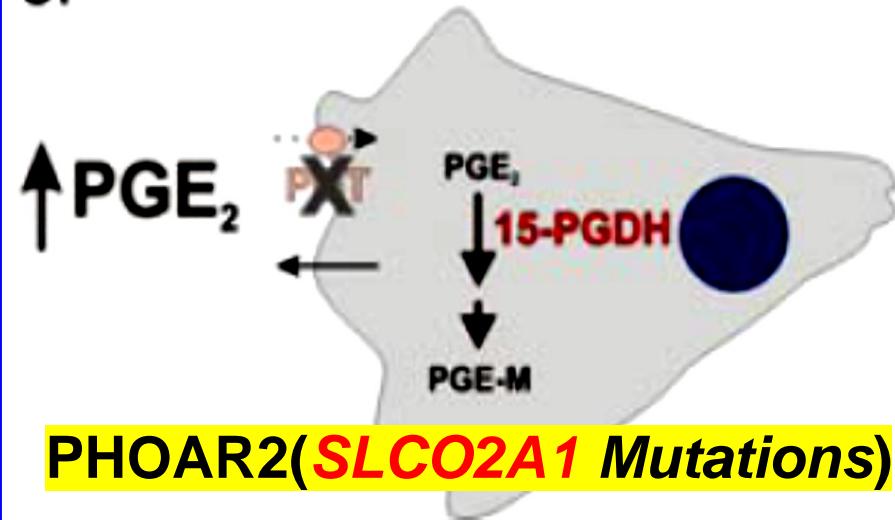


# Pathology of PHO (aka. Pachydermoperiostosis, PDP)

## PGE<sub>2</sub> Metabolism



or

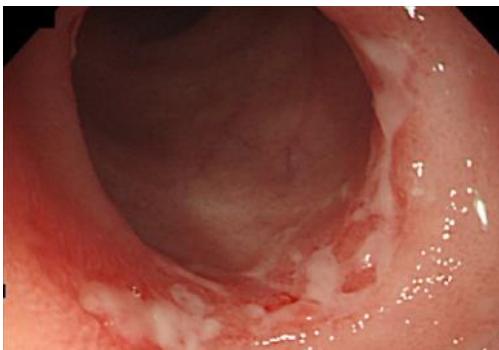
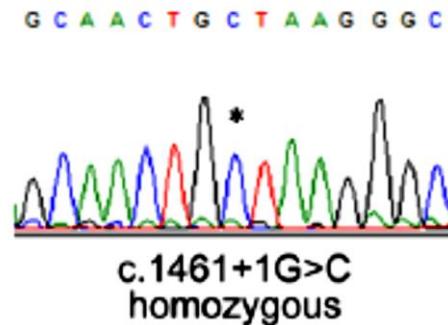


## RESEARCH ARTICLE

Chronic enteropathy  
associated with  
**SLCO2A1 (CEAS)**

## A Hereditary Enteropathy Caused by Mutations in the *SLCO2A1* Gene, Encoding a Prostaglandin Transporter

- Homozygous splice-site mutation (c.1461+1G>C), which terminates *SLCO2A1* gene by frame shift.
- Active circular and oblique multiple ulcer with bleeding.
- **No symptoms in patients with *HPGD* mutations**
- No symptoms in bones and skins in female patients



Any difference in role of *SLCO2A1* between PHO and CEAS?

# Clinical, Biochemical, and Genetic Features of 41 Han Chinese Families With Primary Hypertrophic Osteoarthropathy, and Their Therapeutic Response to Etoricoxib: Results From a Six-Month Prospective Clinical

Li et al, J Bone Miner Res, 32:1659, 2017

## Urinary Levels of PGE<sub>2</sub> and PGE-M in Affected Individuals

	PHOAR1 ( <i>HPGD</i> ) (n=7)	PHOAR2 ( <i>SLCO2A1</i> ) (n=36)	Healthy Subjects (n = 20)
Urinary PGE <sub>2</sub>	<b>271</b> (161, 397)*	<b>651</b> (340, 1033)*, \$	<b>61.5</b> (41.7, 99.1)
Urinary PGE-M	<b>28.2</b> (25.6, 99.5)	<b>468</b> (260, 757) *	<b>49.7</b> (28.6, 82.9)
PGE <sub>2</sub> /PGE-M ratio	<b>7.97</b> (4.69, 12.7)*	<b>1.30</b> (0.97, 1.67) \$	<b>1.16</b> (0.59, 2.02)

(ng/mmol creatinine) \*; p < 0.05 vs. Healthy Subjects, \$; < 0.05 vs PHOAR1

- PGE-M decreased in PHOAR1, whilst it significantly increased in PHOAR2, suggesting that SLCO2A1 doesn't necessarily contribute to PGE<sub>2</sub> metabolism.

→ Need to clarify a role of SLCO2A1 in human disease animal models

# Our Research Projects on OATP2A1 are going...

## *Use of Established Slco2a1<sup>-/-</sup> Mice as Human Disease Models*

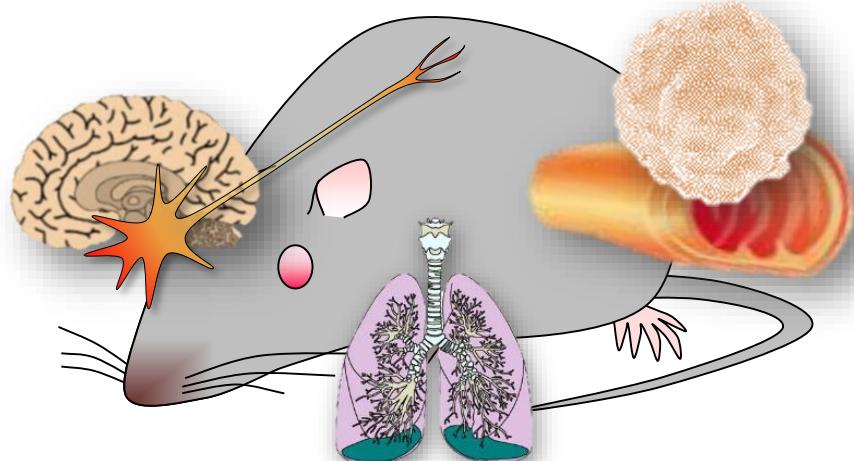
### ■ Functional Characterization

*J Endocrinol*, 2013

*Biochem Pharmacol*, 2015

*Prostaglandins Other Lipid Mediat*, 2016

*J Pharm Sci*, 2017



### ■ Lung/Fibrosis (IPF)

*Pros ONE*, 2015

*JPET*, 2019

### ■ Intestines/Colon Cancers

*Exp Cell Res*, 2016

*Sci Rep*, 2017

### ■ Brain and CNS/Fever

*J Neurosci*, 2018

### ■ Liver (Hepatic Inflammation)

### ■ Placenta

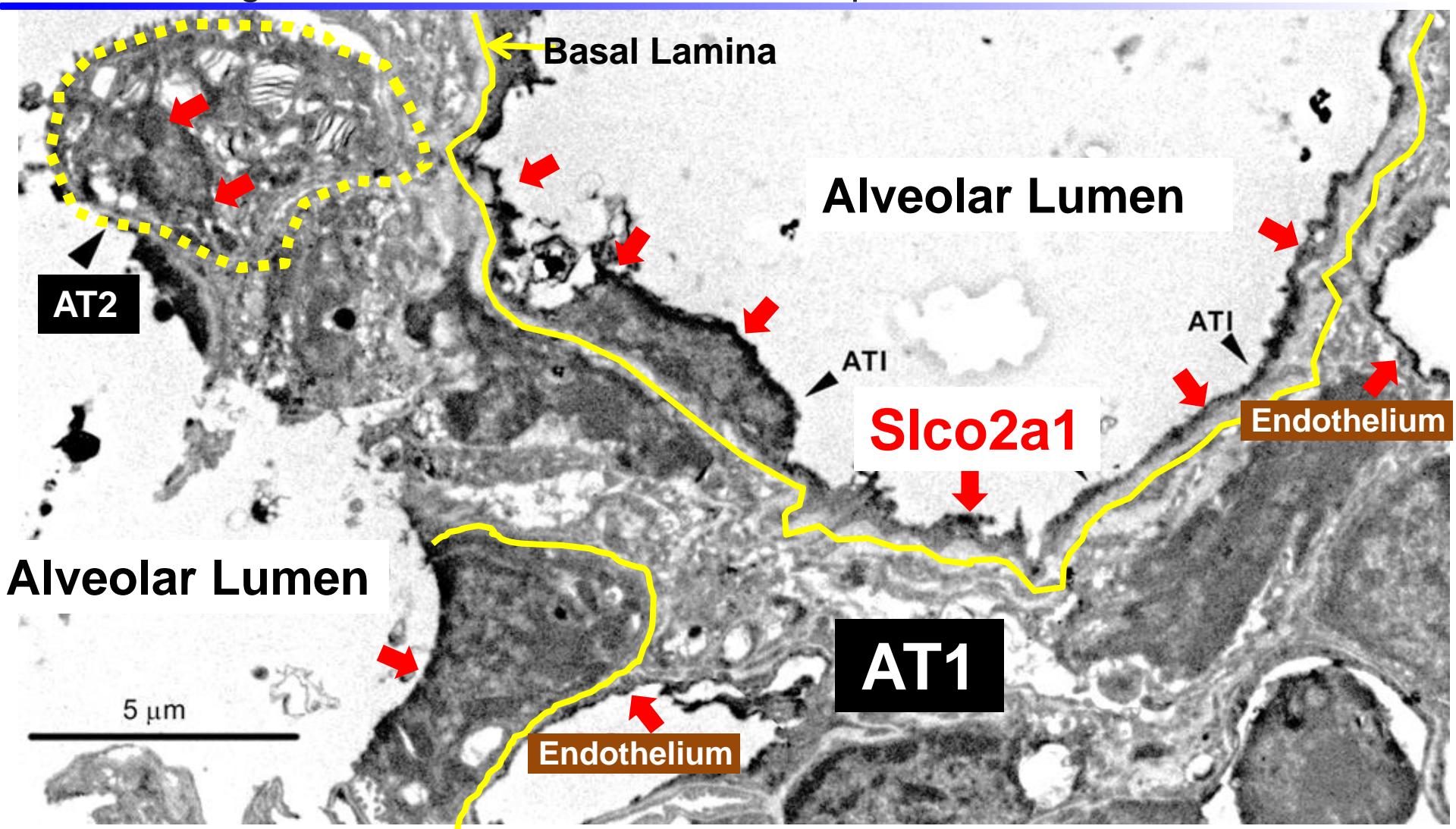
# Contents

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- **Introduction**
- **Pulmonary Fibrosis in *Slco2a1*<sup>-/-</sup> Mice**
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- **Conclusion**

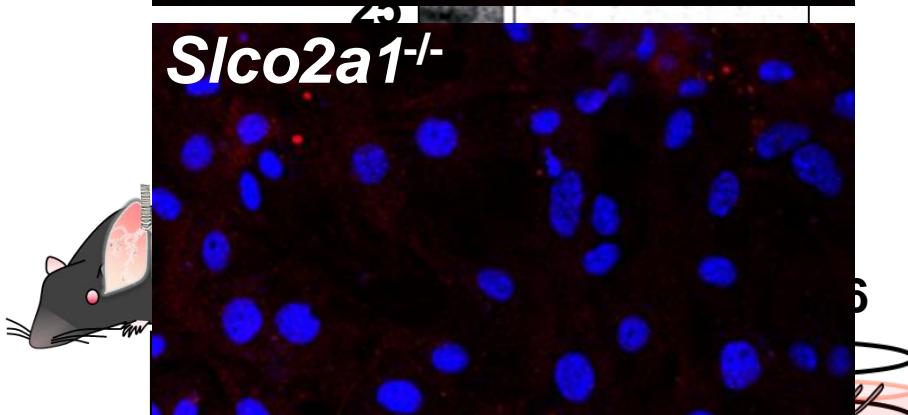
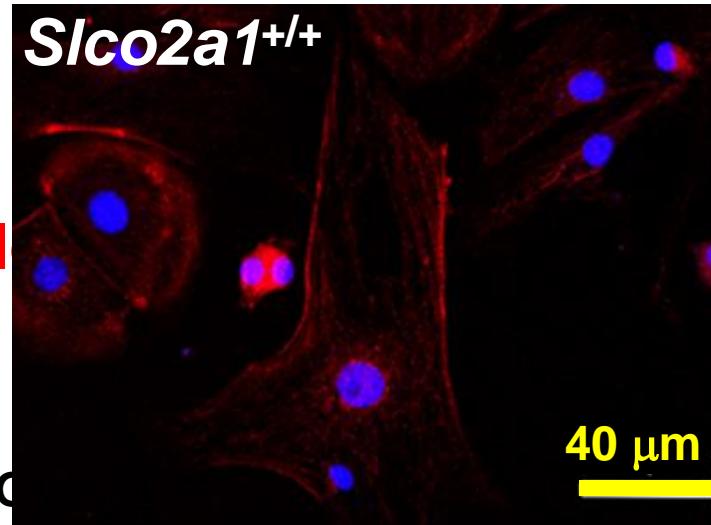
# Expression of Slco2a1 in Type 1 Alveolar Epithelial (AT1) Cells in Mouse Lung

DAB Staining under Immunoelectron Microscope

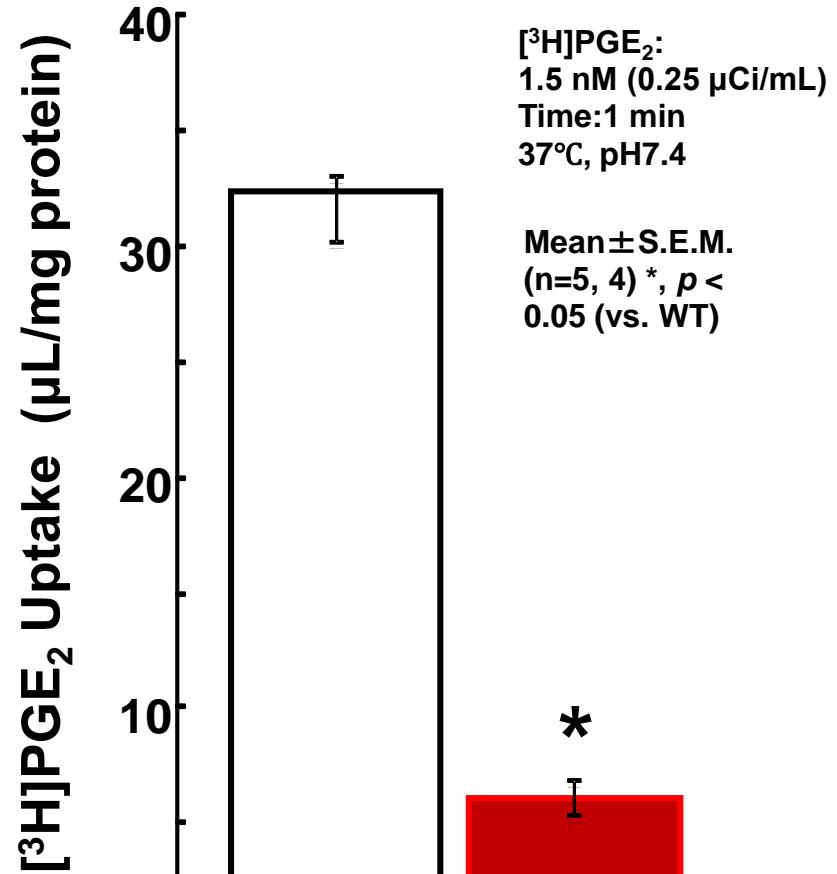


# Predominant Contribution of PGE<sub>2</sub> Uptake by Mouse Primary Cultured AT1-like (AT1-L) Cells

Slc20a1<sup>+/+</sup> Western Blot (hepatocytes)



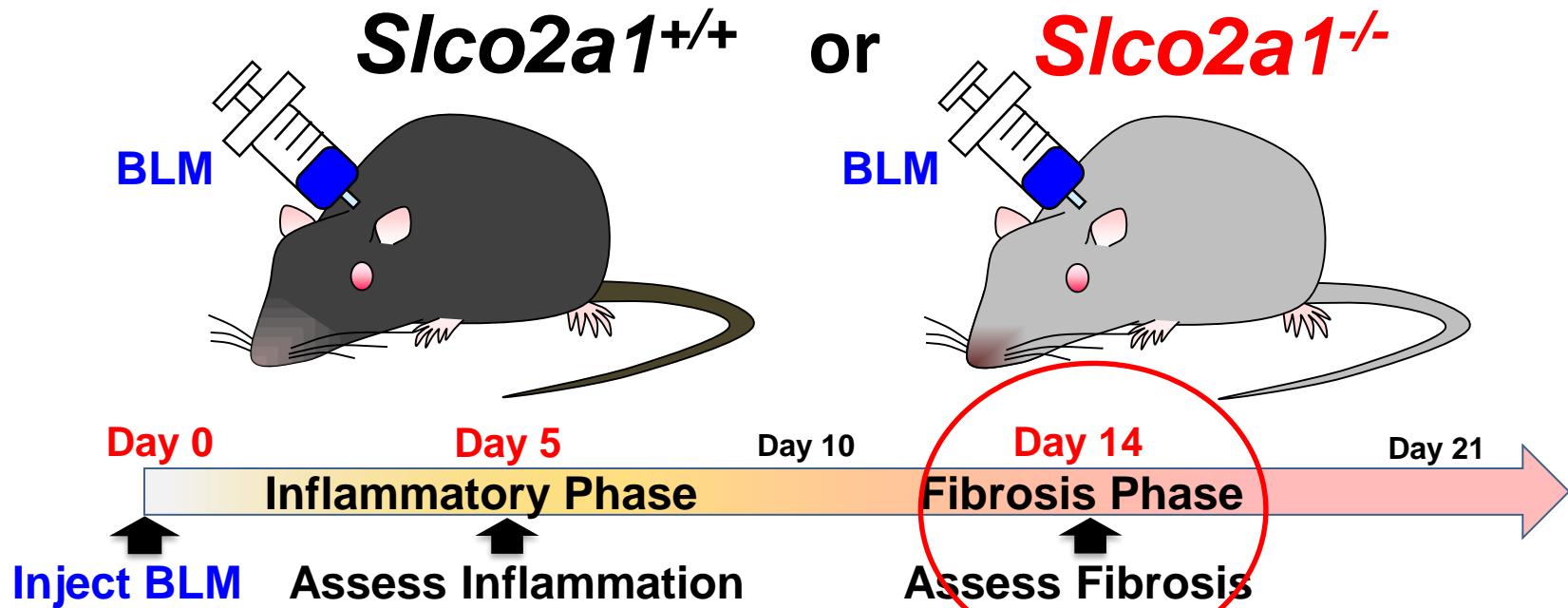
## PGE<sub>2</sub> Uptake



What is the pathophysiological relevance of SLCO2A1 under inflammatory condition?

# Bleomycin (BLM)-induced Lung Fibrosis

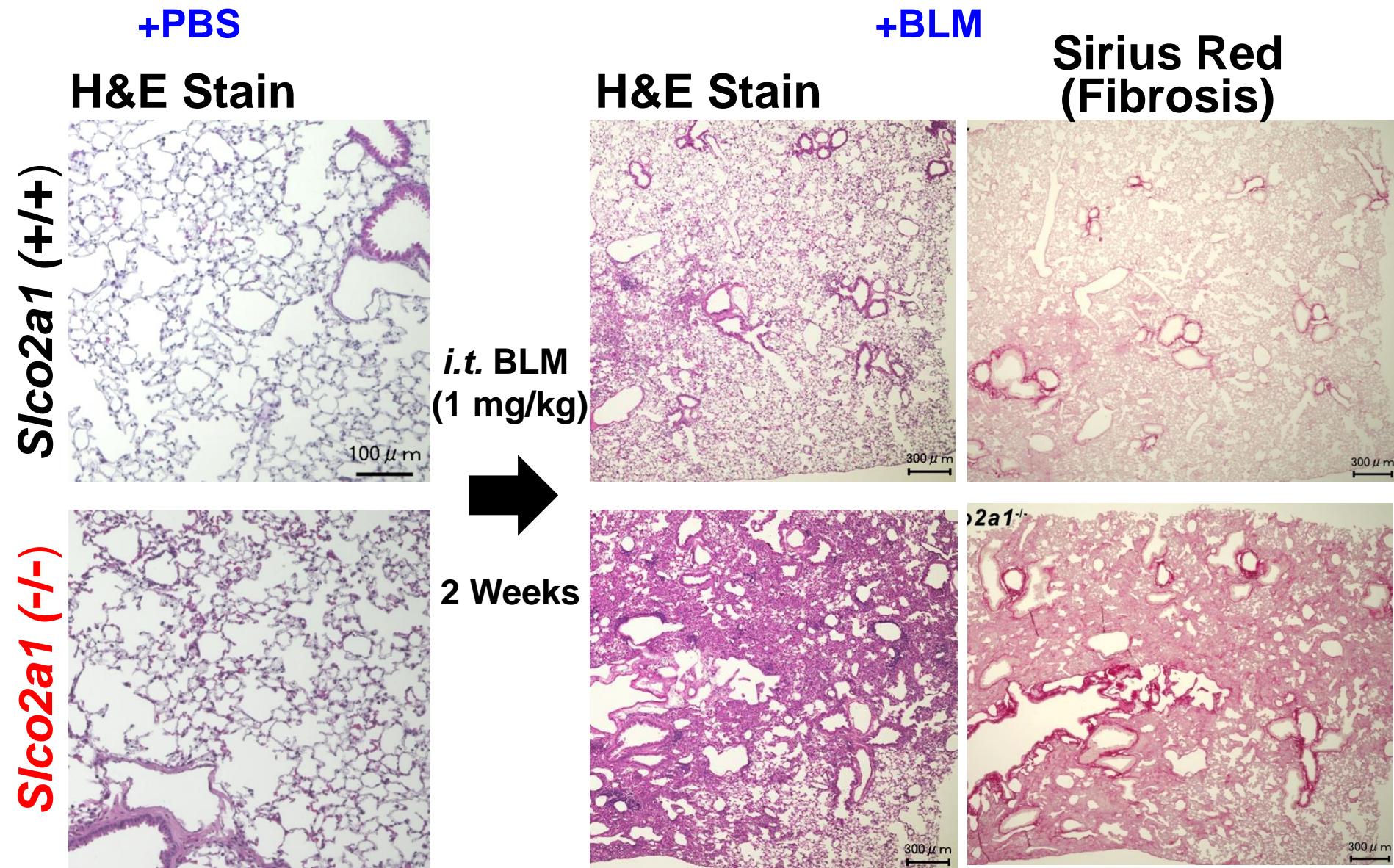
BLM was intratracheally injected at 1 mg/kg in PBS to;



Progression of BLM-induced fibrosis was examined by;

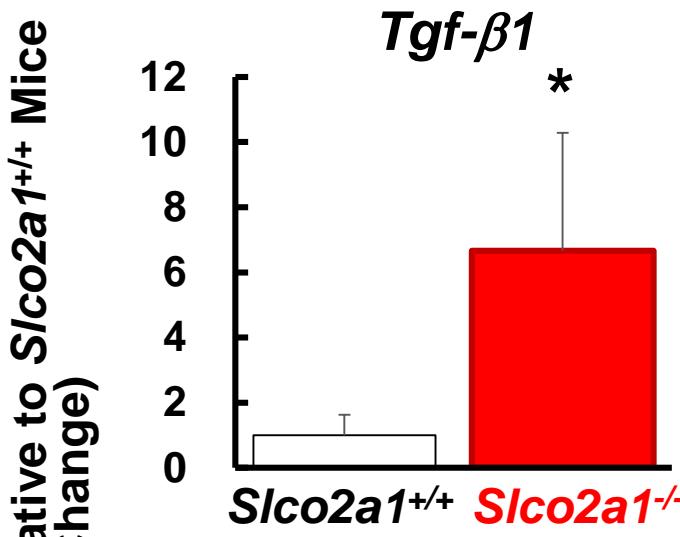
- Weight loss
- Lung structure and collagen disposition
- PGE<sub>2</sub> distribution in the lungs
- Interstitial pneumonia and pulmonary fibrosis

# More Severe Disruption of Lung Structure and Fibrosis in BLM-injected *Slco2a1*<sup>-/-</sup> Mice

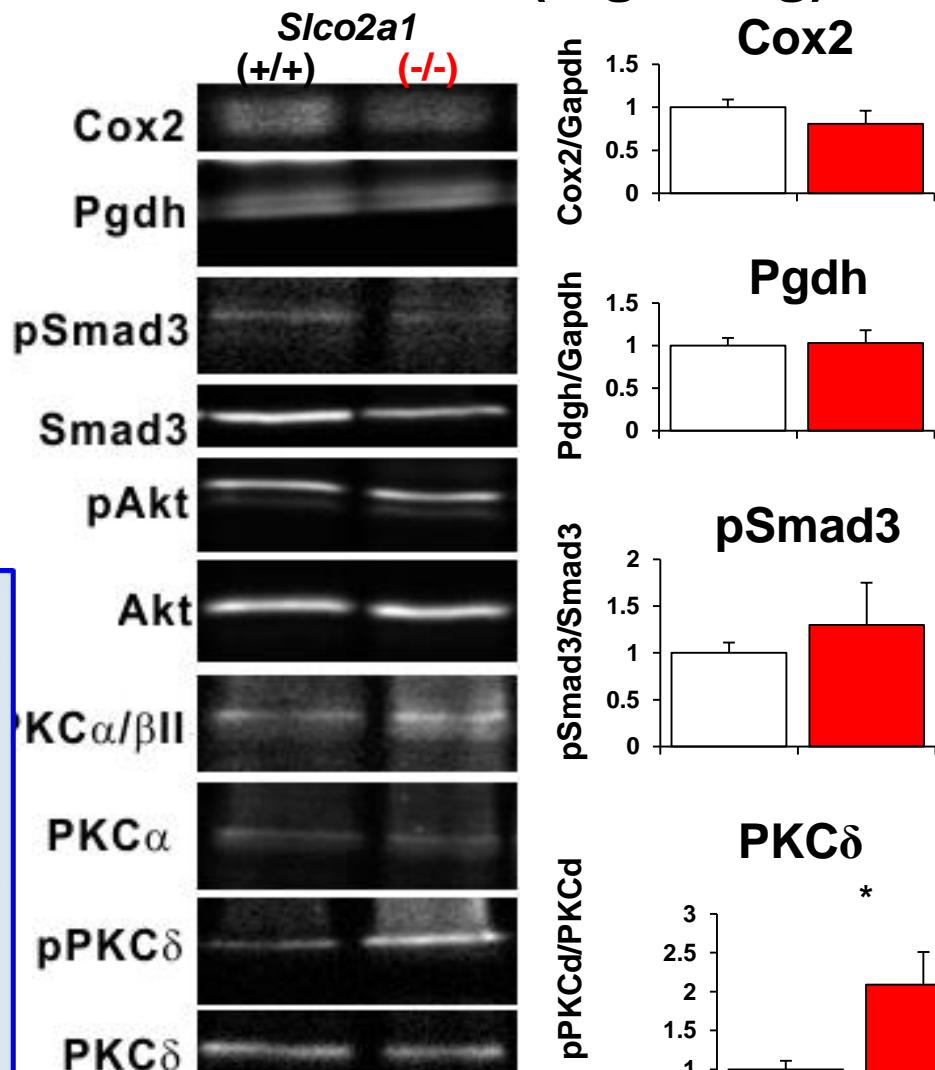


# Alterations in Gene Expression Associated with Fibrosis in Mouse Lung

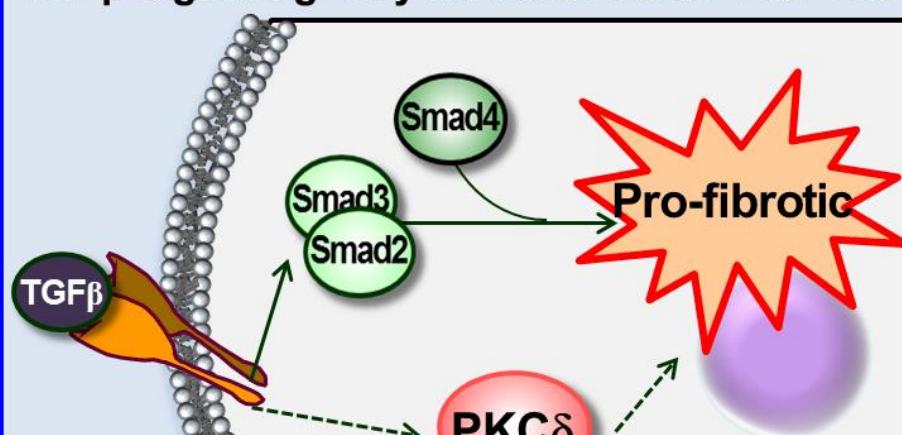
## mRNA



## Protein (Signaling)



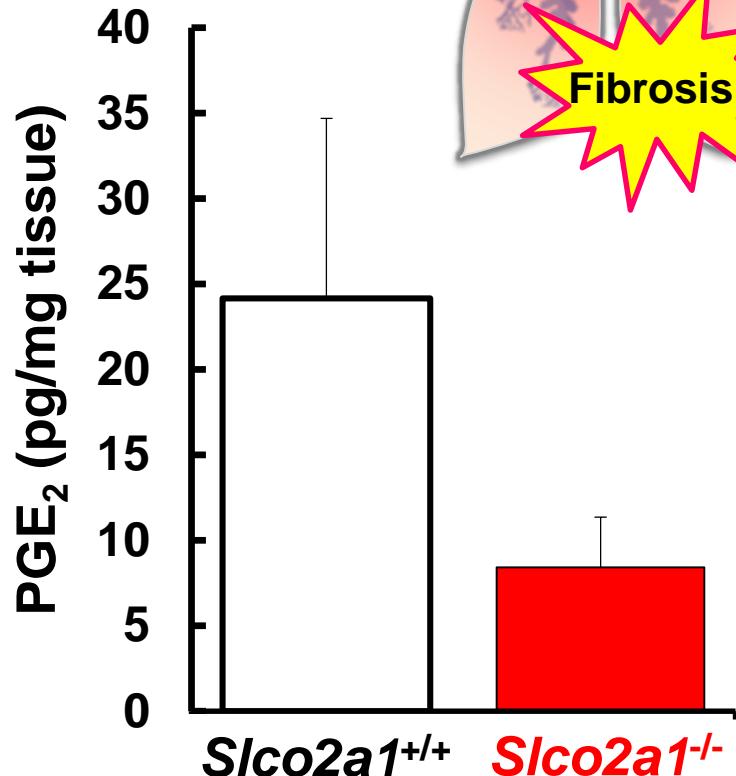
TGF $\beta$  signaling may be transmitted via PKC $\delta$



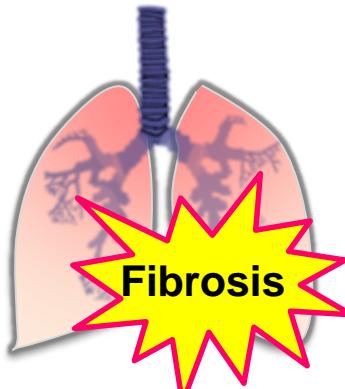
What is going on PGE<sub>2</sub> distribution in the lungs?

# PGE<sub>2</sub> in the Lung and Bronchoalveolar Lavage (BAL) Fluid of BLM-injected Mice

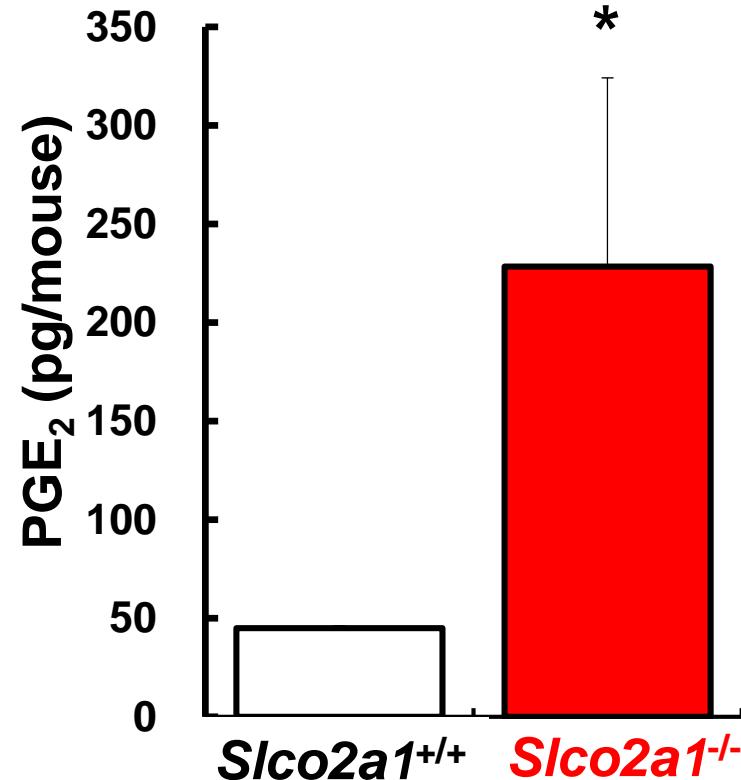
## Lung Tissue



## BLM-injected Mice Lungs



## BAL Fluid



# Analysis of 48-Eicosanoids in BAL Fluid

Compounds	Eicosanoids Amount in BAL Fluid (pg/mouse)				
	<i>Slco2a1(+/+)</i>			<i>Slco2a1(-/-)</i>	
	No. 1	No. 2	No. 3	No. 4	No. 5
<u>PGE<sub>2</sub></u>	<u>81</u>	<u>52</u>	<u>34</u>	<u>341</u>	<u>264</u>
LTD <sub>4</sub>	9	3	3	5	8
LTE <sub>4</sub>	52	N.D.	74	85	242
14,15-DHET	29	44	21	N.D.	29
11,12-DHET	17	23	16	N.D.	N.D.
11-HETE	8	12	7	16	21
12-HETE	87	77	107	81	135

N.D. = not detected

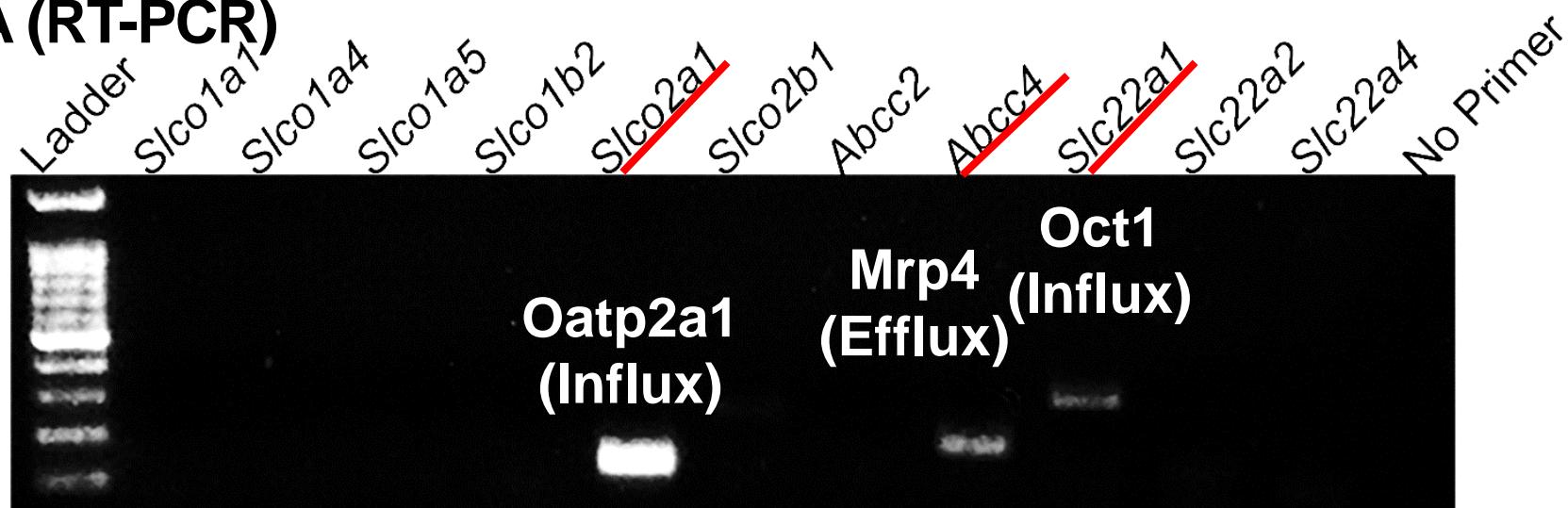
Analysis by CERI



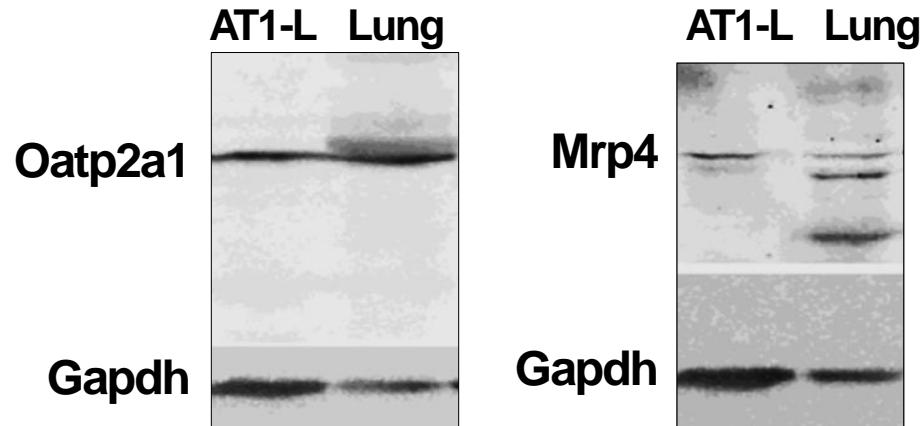
How does *Slco2a1* regulate PGE<sub>2</sub> distribution in the lungs?

# Expression of PG-related Genes in Rat AT1-L

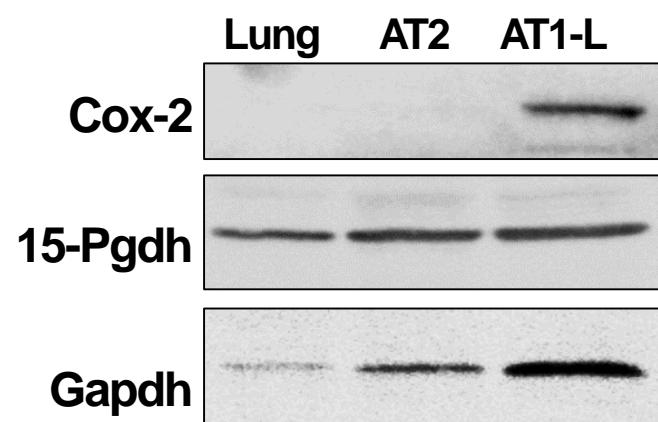
## mRNA (RT-PCR)



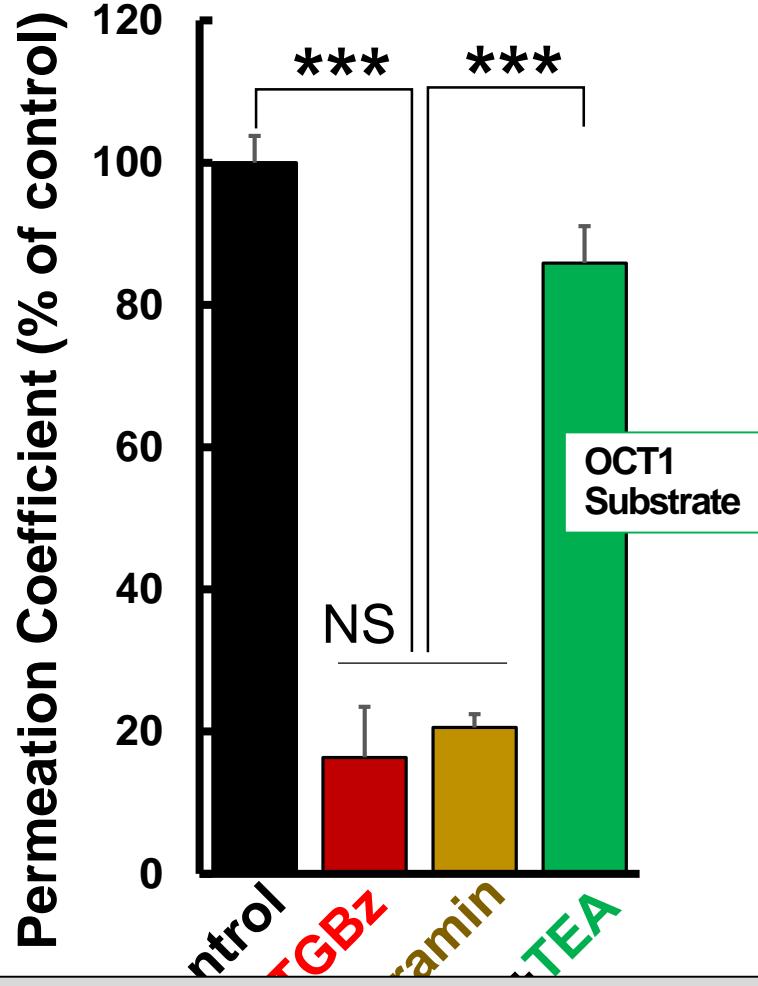
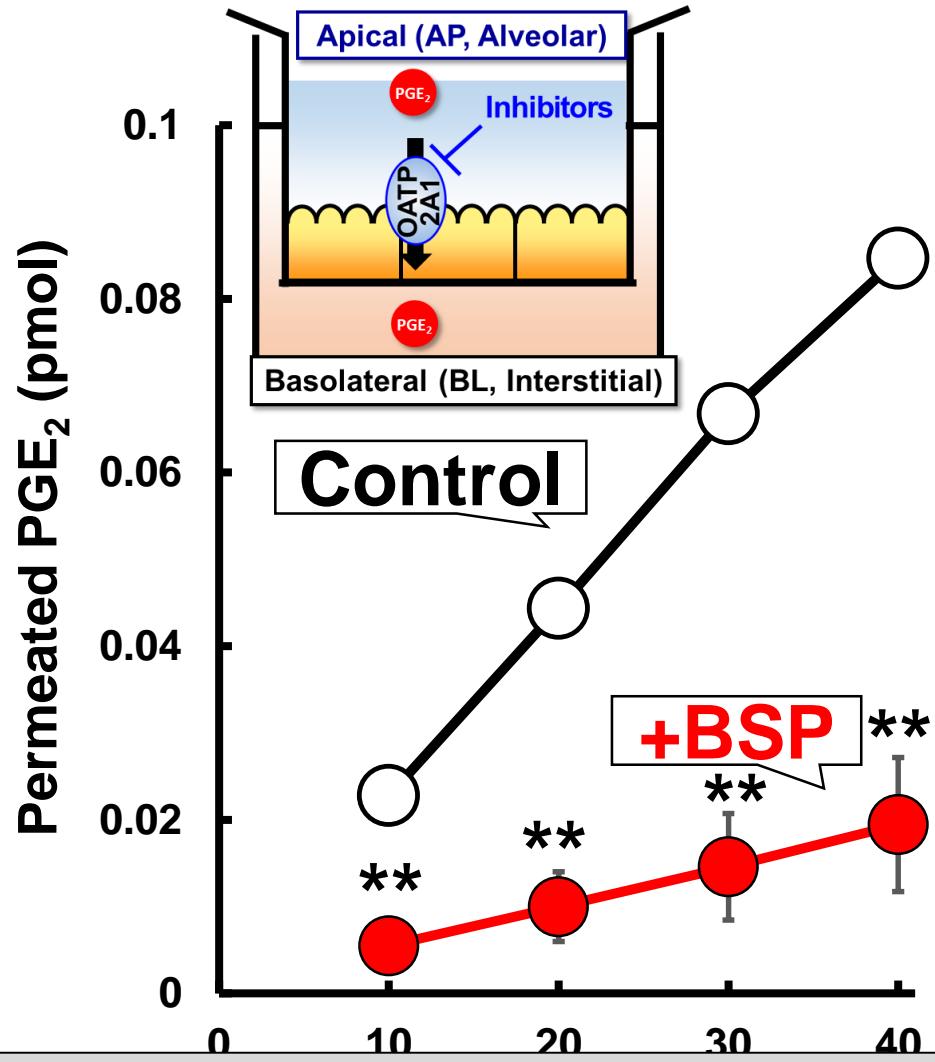
## Protein (Western Blot) Transporters



## Enzymes

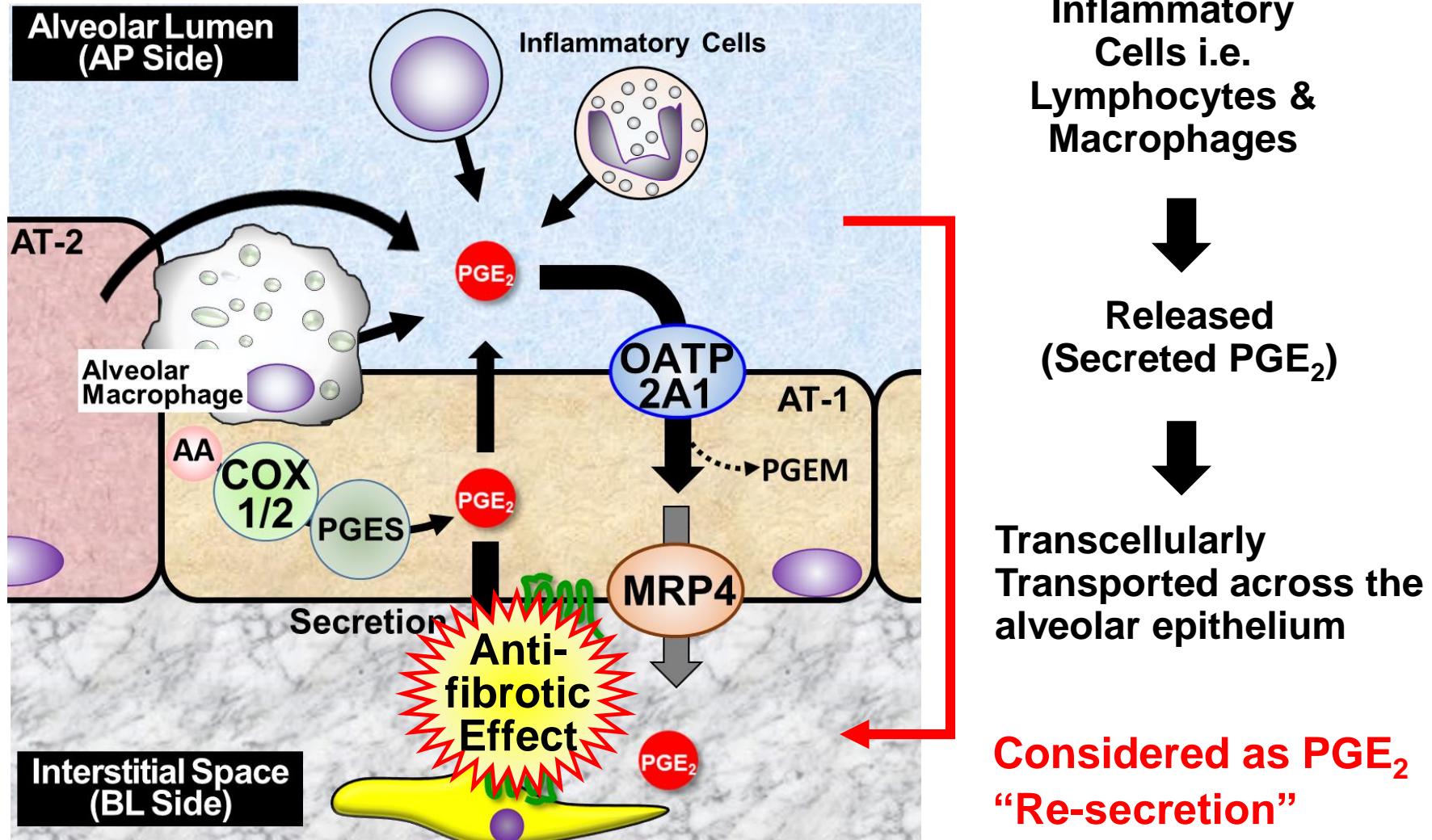


# Impact of SLCO Inhibitors on Transcellular Transport of PGE<sub>2</sub> across the monolayer of AT1-L



- Mrp4 inhibitor, Cefourin, partially inhibited the transcellular transport.
- No metabolites of PGE<sub>2</sub> was found during 4 hours instead of 15-PGDH expression

# SLCO2A1 Mediates “Re-secretion” of Anti-fibrotic PGE<sub>2</sub> from Alveolar Lumen into Interstitial Tissues

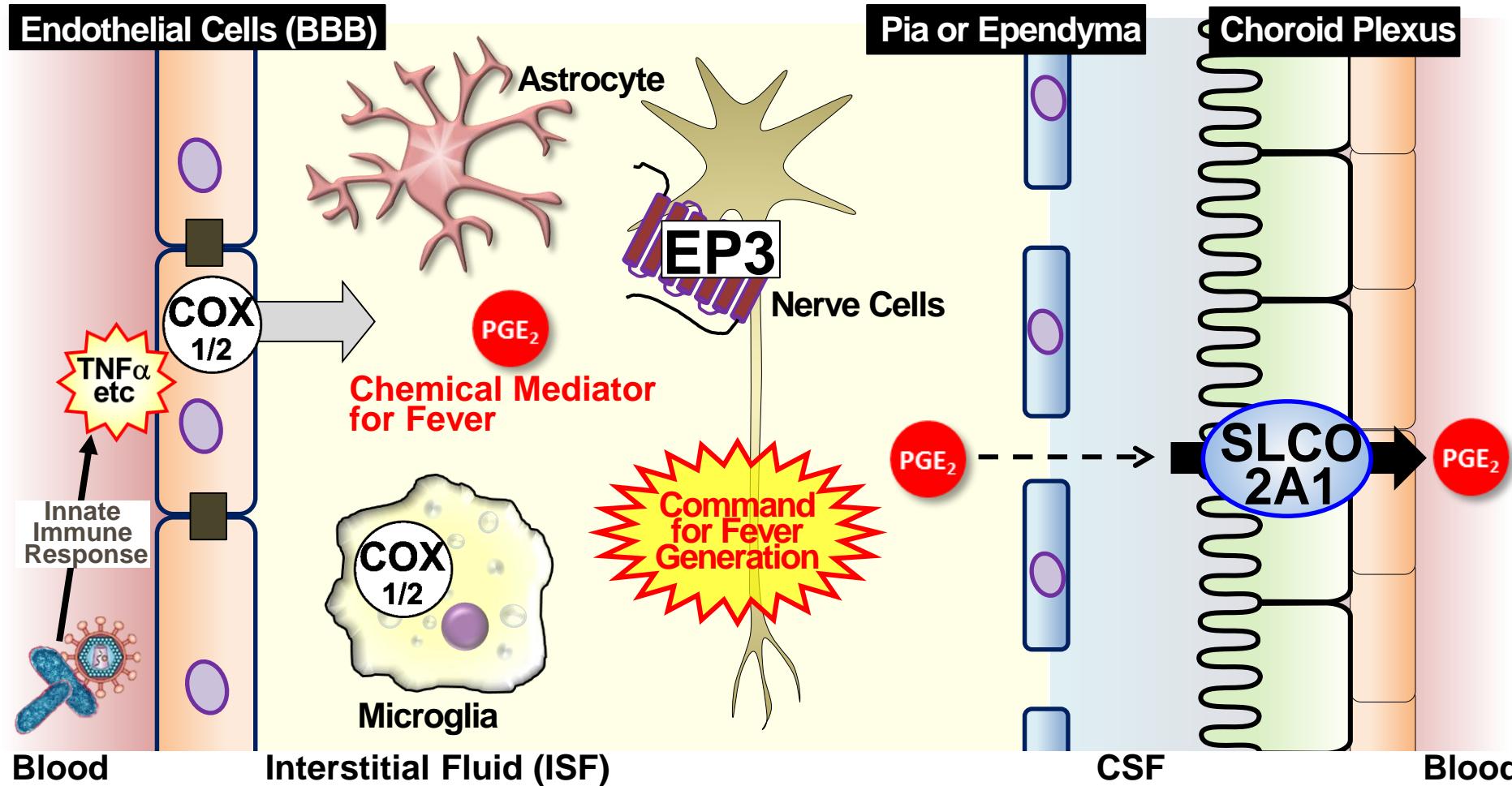


# Contents

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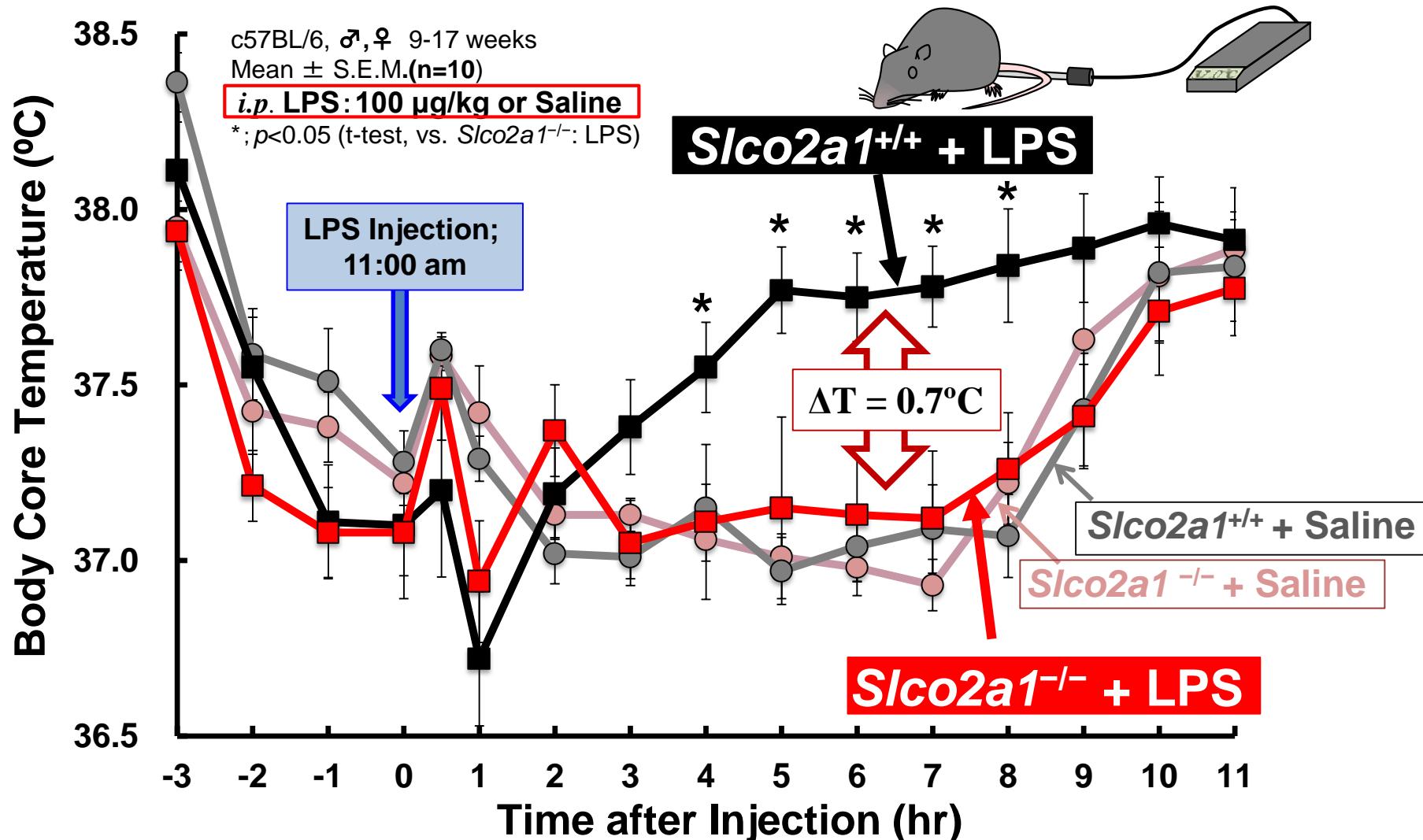
- Introduction
- Pulmonary Fibrosis in *Slco2a1<sup>-/-</sup>* Mice
  - A role in Transcellular Transport of PGE<sub>2</sub>
- Fever Generation in *Slco2a1<sup>-/-</sup>* Mice
  - A role in PGE<sub>2</sub> Secretion from Macrophages
- Conclusion

# Introduction - PGE<sub>2</sub> Disposition in CNS and Fever



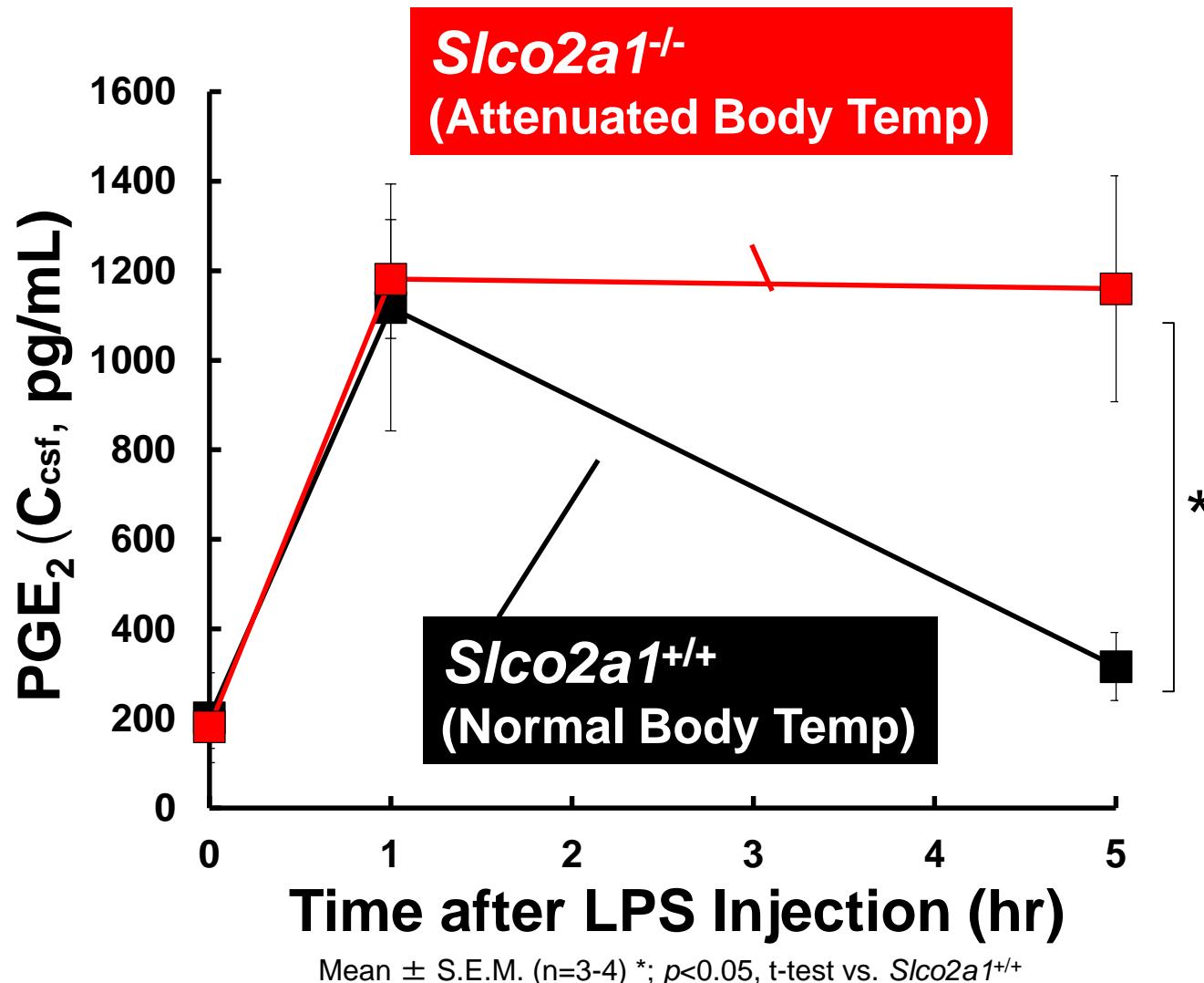
- SLCO2A1 expressed at the choroid plexus may contribute to elimination of PGE<sub>2</sub> from CSF, therefore, *S/loc2a1* deficiency may have an impact on PGE<sub>2</sub> distribution in the brain during fever generation. To test this hypothesis, we studied a relationship between body temperature and PGE<sub>2</sub> in the brain.

# LPS-induced Generation of Fever is Attenuated in *Slco2a1*<sup>-/-</sup> Mice



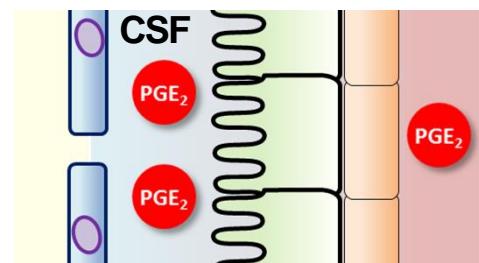
Mice were injected with i.p. PS (physiological saline) or LPS (100 µg/kg); n = 10 (the mean ± S.E.M.)

# PGE<sub>2</sub> Conc. in Cerebral Spinal Fluid (C<sub>csf</sub>) in Mice

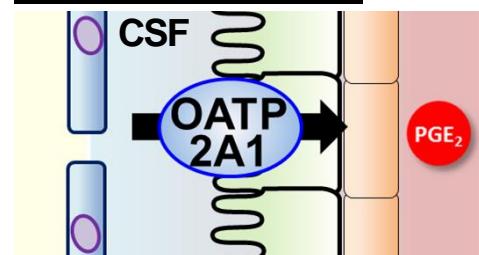


At the B-CSFB

***Slco2a1*<sup>-/-</sup>**



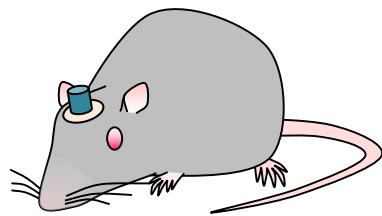
***Slco2a1*<sup>+/-</sup>**



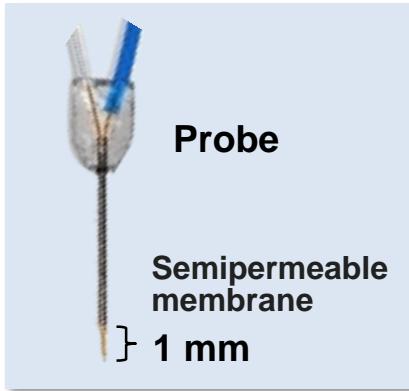
Choroid Plexus

# Measurement of PGE<sub>2</sub> Conc. in Interstitial Fluid (C<sub>isf</sub>) at the Hypothalamus of Mice

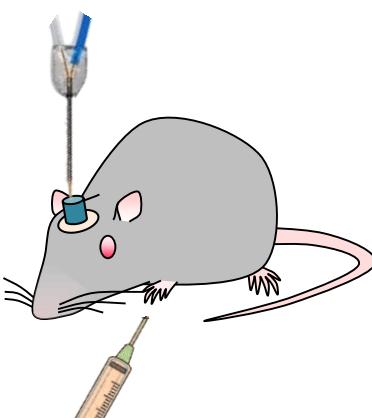
## Preparing Animals (Fever Generation)



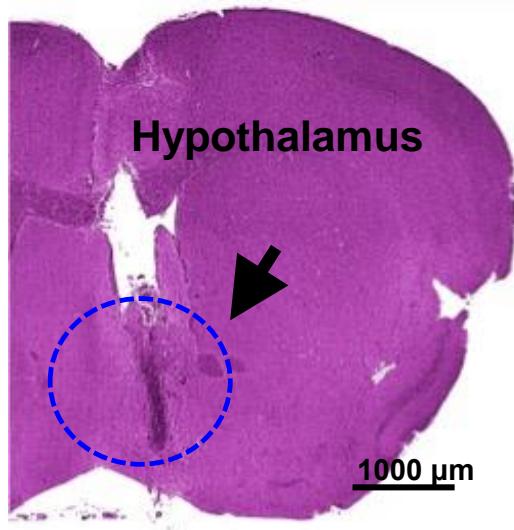
5 days



## Placement of Probe at the Hypothalamus (H&E Stain)



LPS 100 µg/kg, i.p.



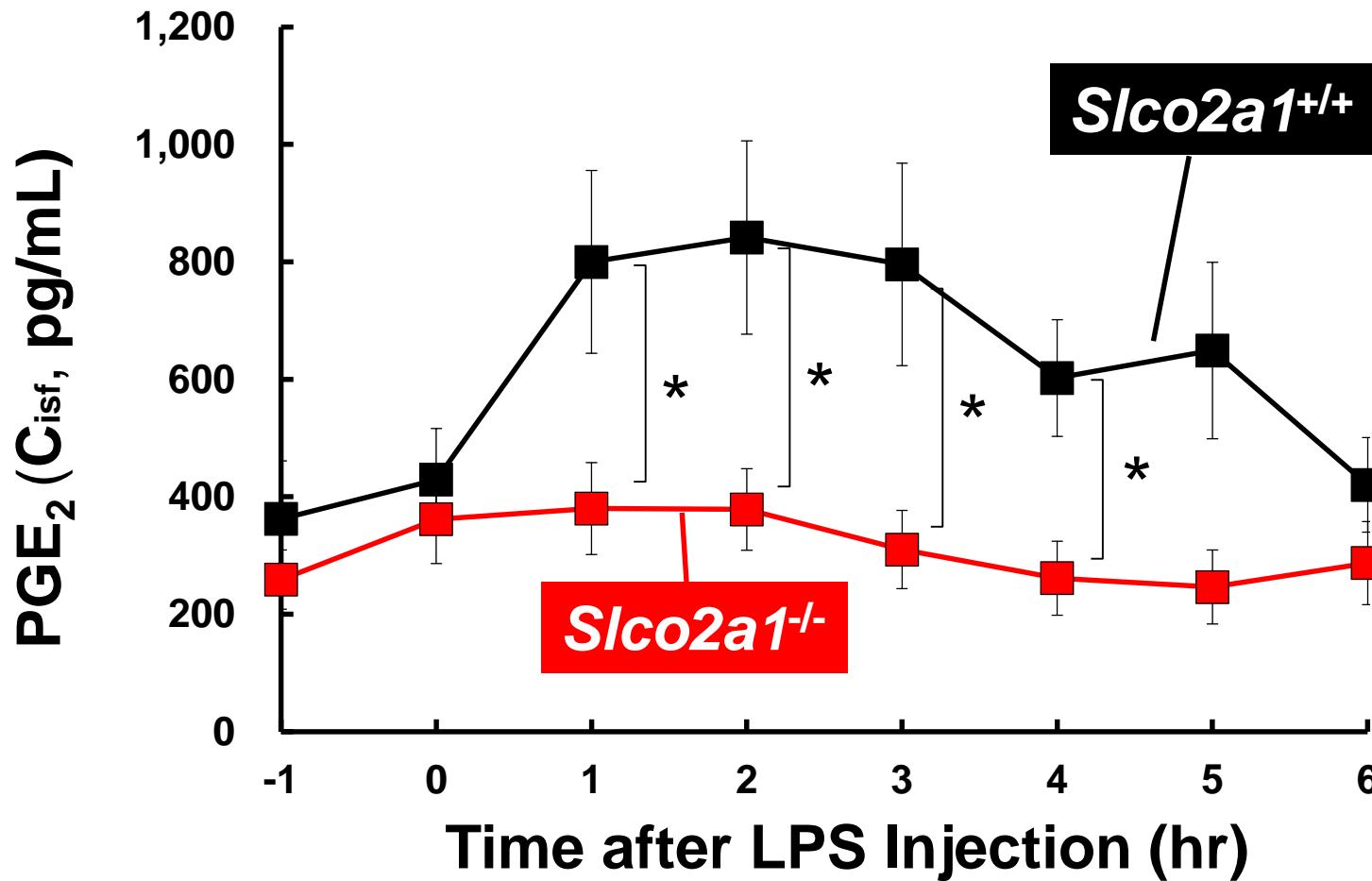
## Free Moving



Measure PGE<sub>2</sub> conc. in **ISF (C<sub>isf</sub>)** to compare with that in **CSF (C<sub>csf</sub>)**, **hypothalamus tissue (C<sub>hyp</sub>)**, and **plasma (C<sub>p</sub>)**

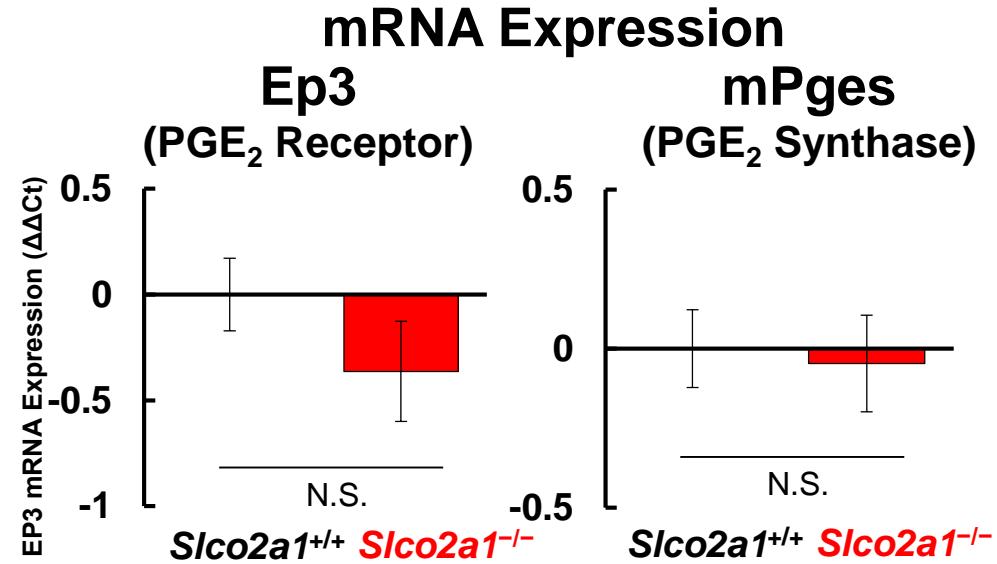
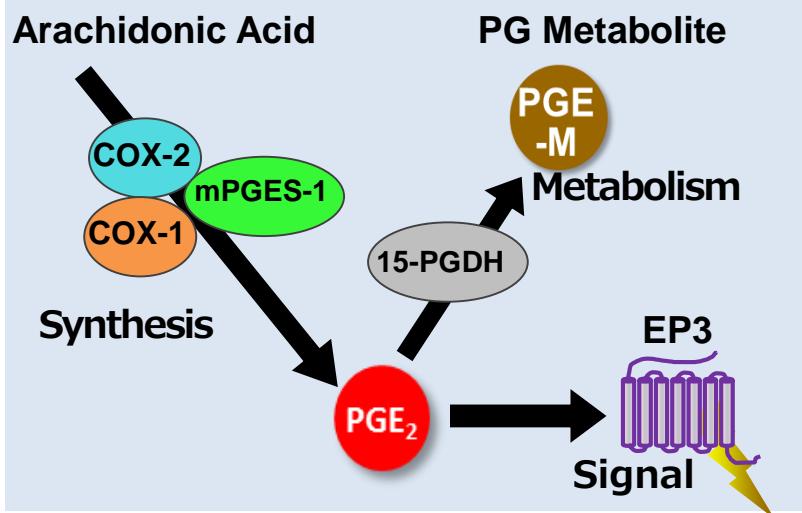
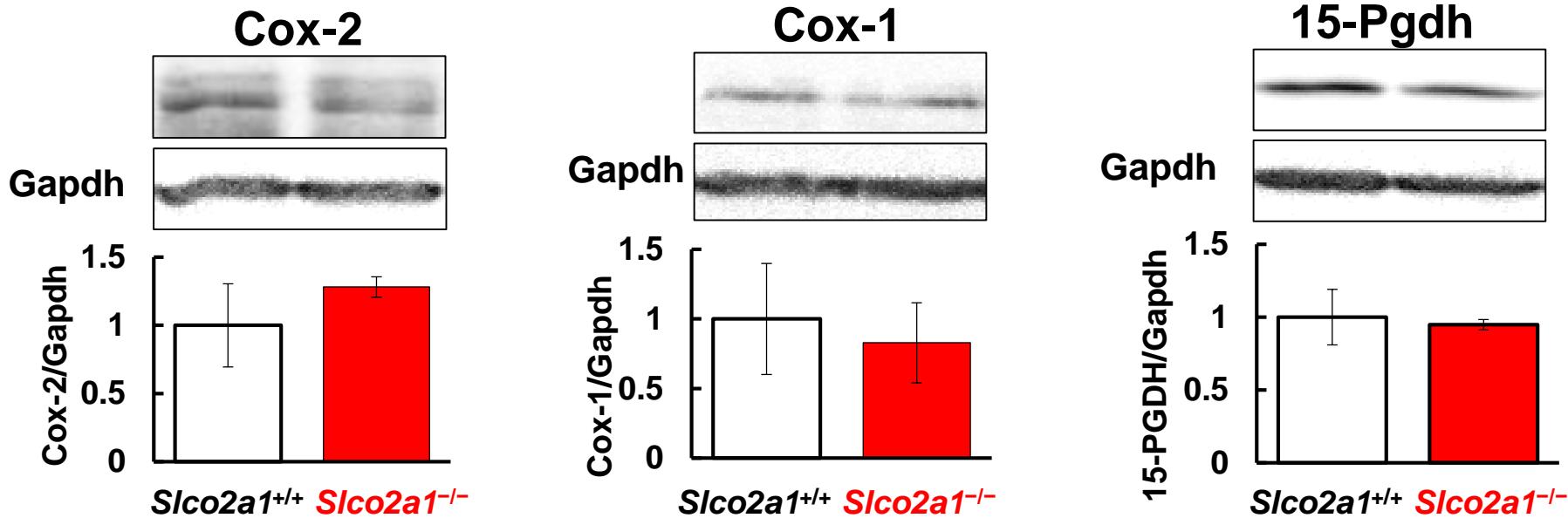
Nakamura et al, Bio-protocol 9:e3324, 2019

# Impact of *S/ico2a1* Deficiency on C<sub>isf</sub> near the Hypothalamus of LPS-injected Mice



Mean ± S.E.M. (n=6-7). \*; p<0.05, t-test vs. *S/ico2a1*<sup>-/-</sup>

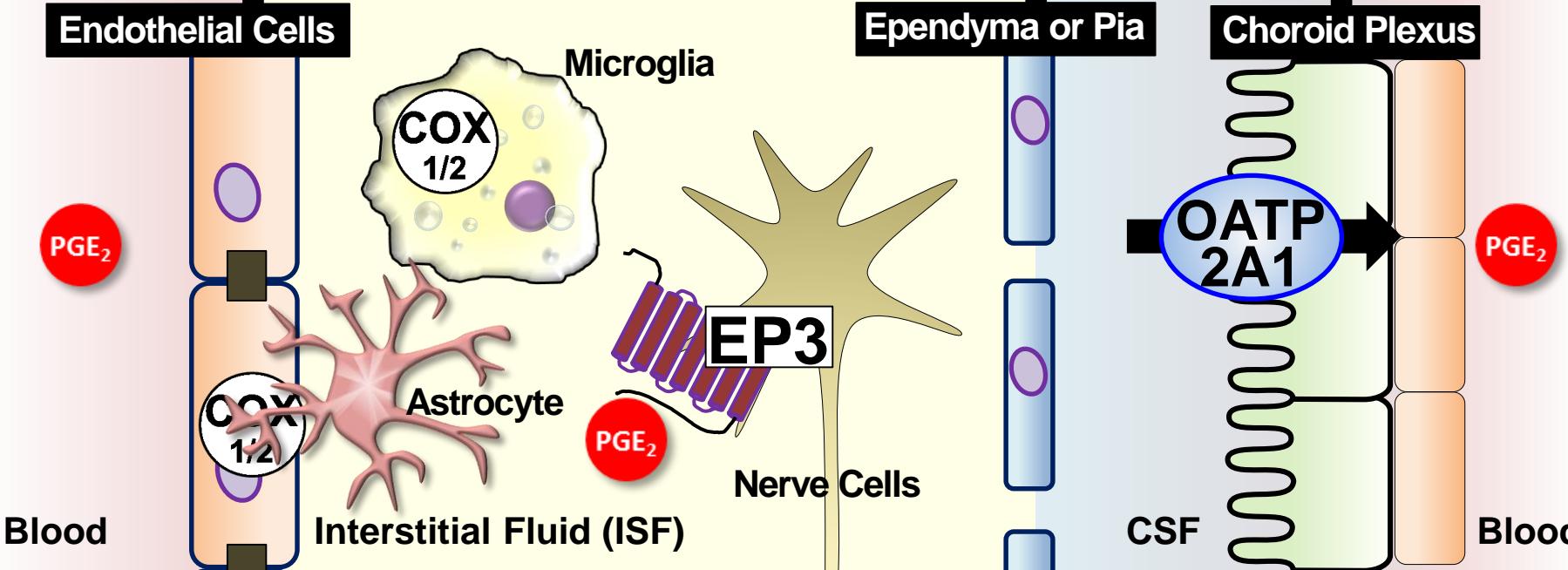
# Comparable Expression of PGE<sub>2</sub> Signaling-related Genes in the Hypothalamus



# PGE<sub>2</sub> Distribution in CNS in *Slco2a1*<sup>-/-</sup> Mice

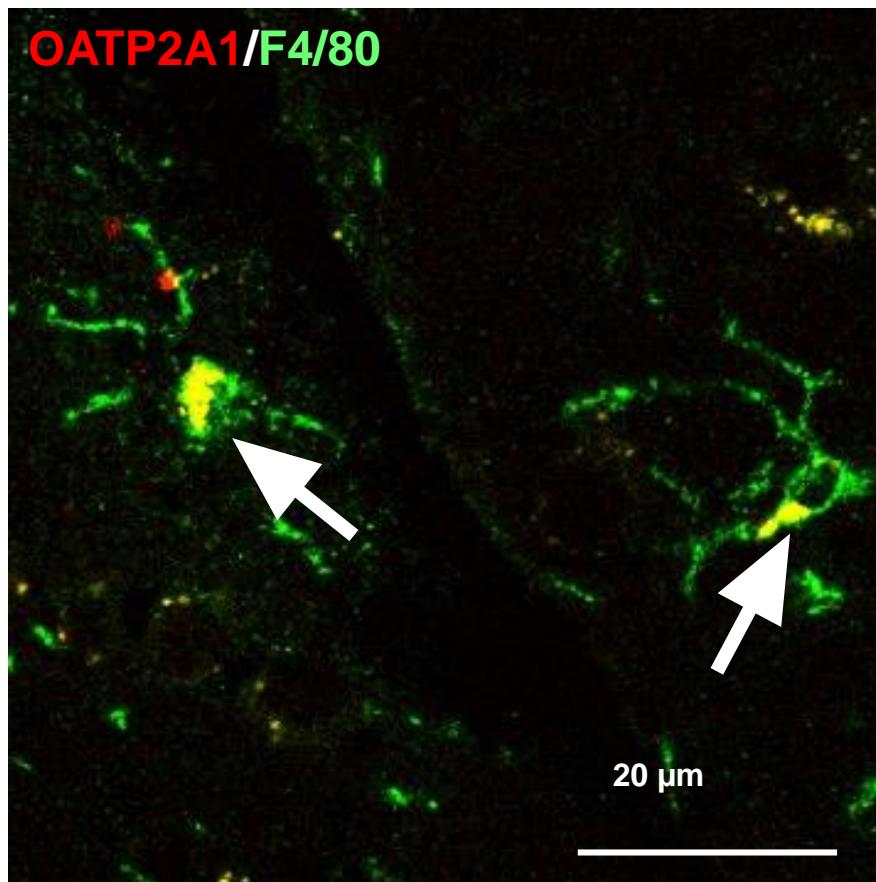
Range of PGE<sub>2</sub> Conc. (pg/mL)

	BBB	Pia Mater	BCSFB
$C_p$	$C_{hyp}$ (tissue)	$C_{isf}$	$C_{csf}$
+/- ~50	10000~12000	350~900	200
-/- ~200	6000~12000	250~380	1200

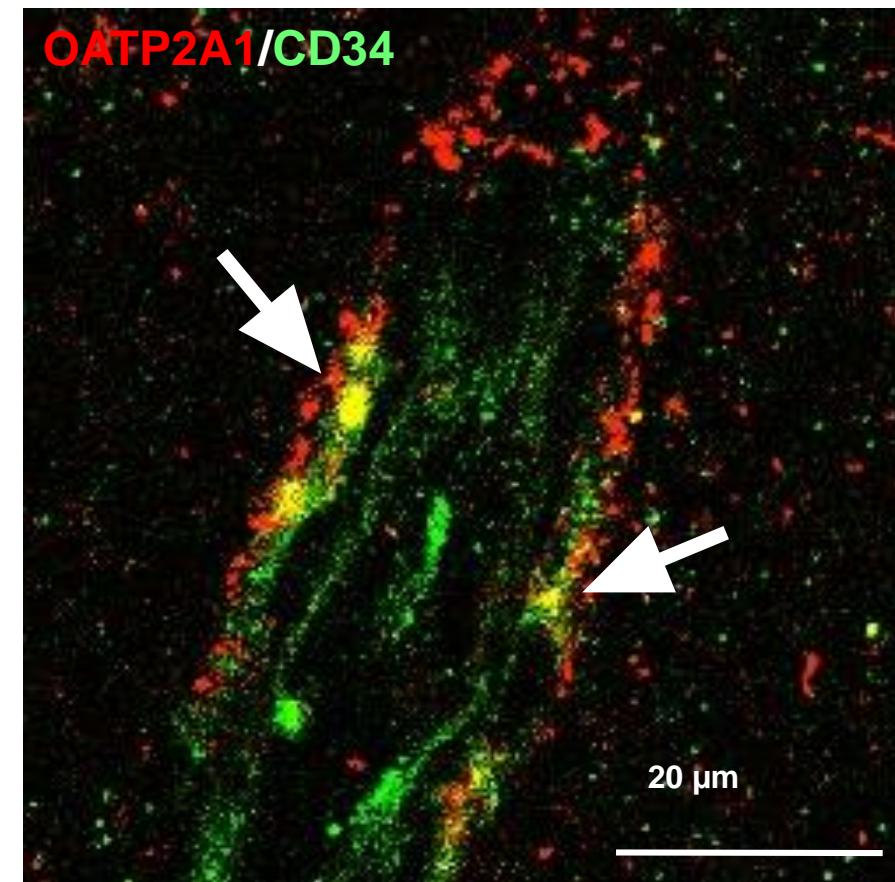


# Fluorescence Immunohistochemistry for Slco2a1 in Mouse Brain (in the Hypothalamus)

F4/80 Positive Glial Cells  
(e.g. Microglia)

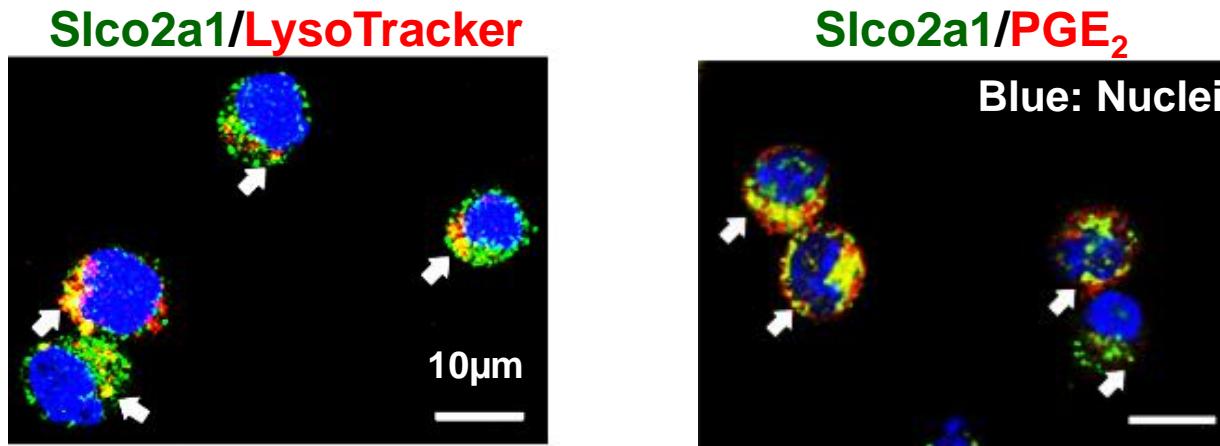


CD34 Positive Endothelial Cells

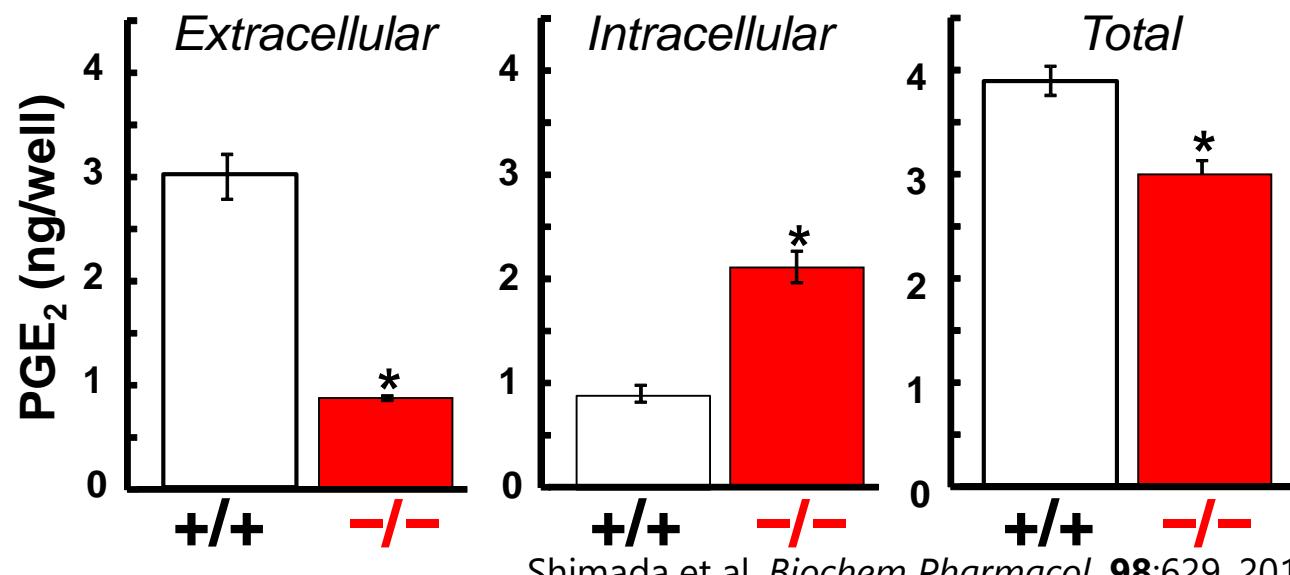
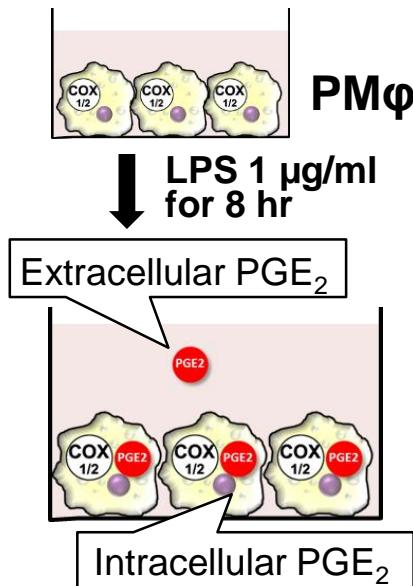


# Characterization of Slco2a1 in Murine Peritoneal Macrophages (PMφ)

- Subcellular Localization of Slco2a1 in PMφ



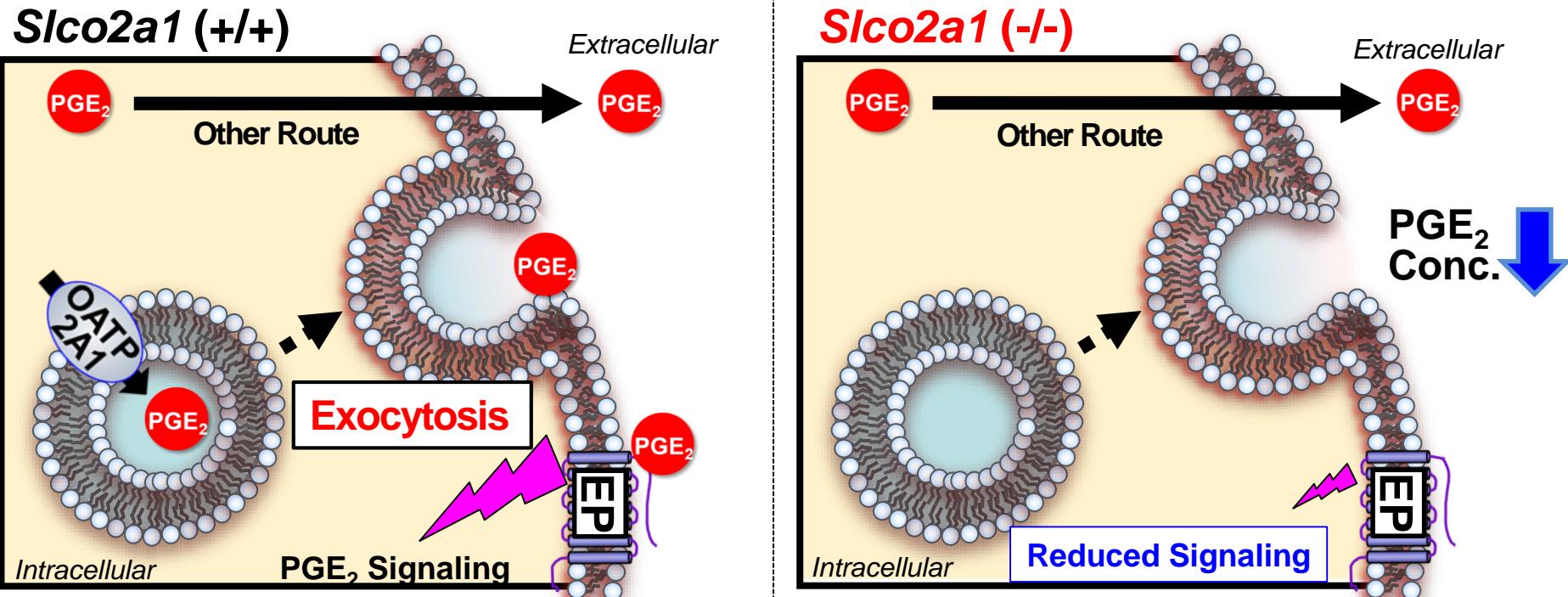
- Cellular Distribution of PGE<sub>2</sub>



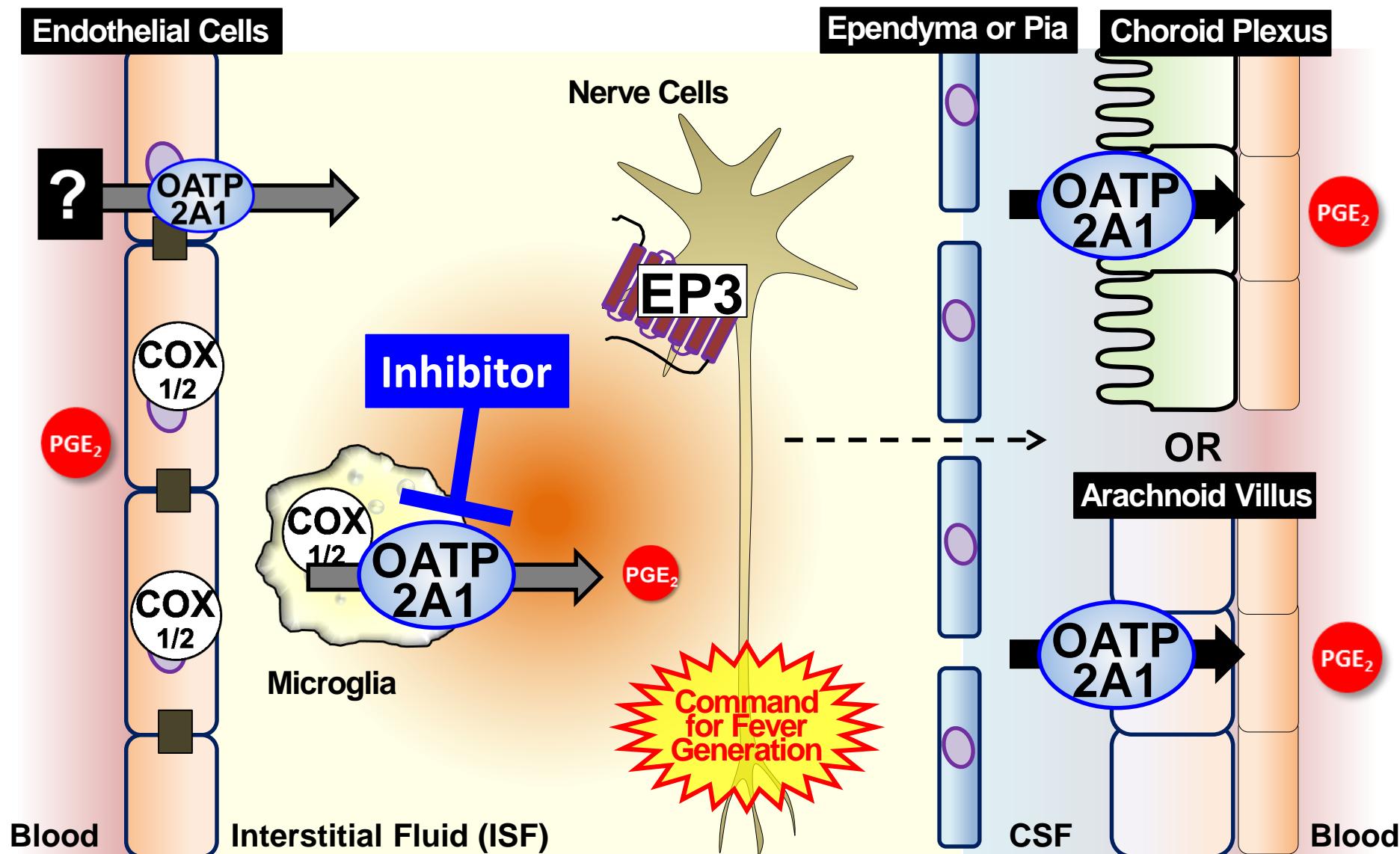
# A Hypothesized Mechanism for SLCO2A1-mediated PGE<sub>2</sub> Secretion from Macrophages

## In case of Murine Peritoneal Macrophages

- No difference in PGE<sub>2</sub> uptake was observed between Slco2a1<sup>+/+</sup> and Slco2a1<sup>-/-</sup>.
- Slco2a1 co-existed with PGE<sub>2</sub> in the cytoplasmic domains (e.g. Lysosomes).
- PGE<sub>2</sub> uptake in lysosomal fraction was inhibited in the presence of BSP
- PGE<sub>2</sub> release was accompanied with a lysosomal enzyme ( $\beta$ -N-acetylglucosaminidase)



# A Putative Mechanism for Slco2a1-mediated PGE<sub>2</sub> Conc. Regulation at the Hypothalamus



# Overall Summary (Result Parts)

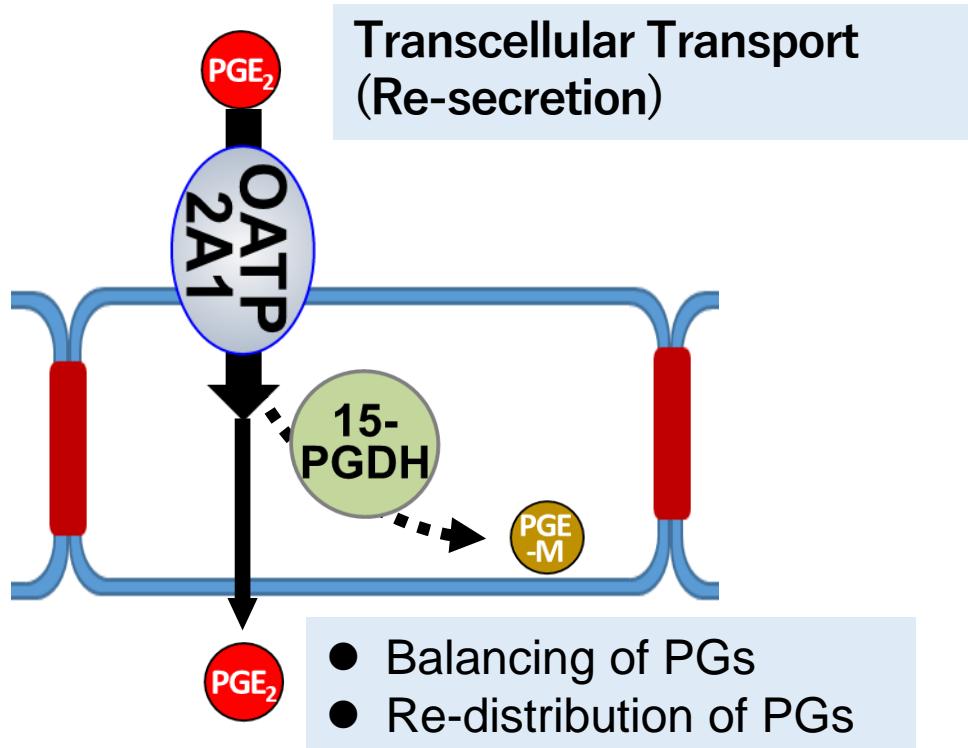
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**Our study so far suggests that SLCO2A1**

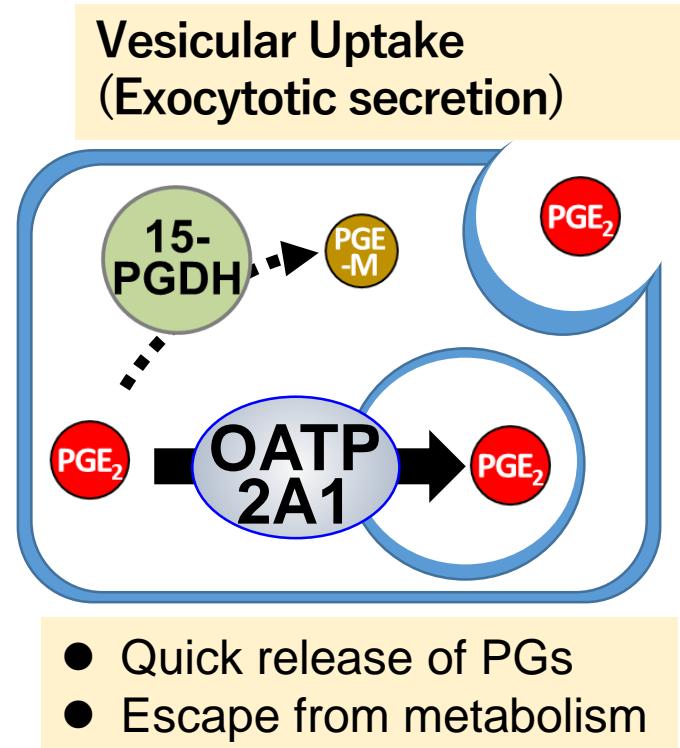
- Mediated an influx/transcellular transport of PGE<sub>2</sub> in the alveolar epithelial cells, balancing it between alveolar lumen and interstitial space.
- Mediated an uptake of PGE<sub>2</sub> by choroid plexus, contributing to its elimination from CSF.
- Regulated secretion (e.g. exocytosis) of PGE<sub>2</sub> from macrophage and microglia to maintain PGE<sub>2</sub> concentration to induce fever generation.

# Conclusion – SLCO2A1 Delivers PGs at the Required Place at the Right Time

In the Lung/Choroid Plexus  
(at TISSUE Level)



In Macrophages/Microglia  
(at CELL Level)



Alteration in PGE<sub>2</sub> distribution in a tissue or a cell may have a significant impact on its physiological action in a given environment.

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