function in skeletal development, we characterized the expression and function of Panx3 in cartilage. In situ hybridization of the embryonic day (E) 16.5 growth plates revealed that *Panx3* mRNA was strongly expressed in the prehypertrophic zone (Fig. 1A, a). A control sense probe for *Panx3* showed no signal (Fig. 1A, b). Indian hedgehog (*Ihh*) mRNA was expressed in prehypertrophic and hypertrophic chondrocytes at this stage (Fig. 1A, c). mRNA for type II collagen (*Col2a1*), a major collagen in cartilage, was expressed in the resting, proliferative, and prehypertrophic zones (Fig. 1A, d). Type X collagen (*Col10a1*) mRNA was expressed in the prehypertrophic and hypertrophic chondrocyte chondrocytes (Fig. 1A, e). Histone H4 (*Hist1h4c*), a marker for cell proliferation, was expressed in proliferating chondrocytes (Fig. 1A, f). Immunostaining with a Panx3 antibody showed that Panx3 protein was expressed in prehypertrophic and hypertrophic chondrocytes and was localized on the surface of these cells (Fig. 1B). Panx3 was also expressed in perichondrial cells and osteoblasts.

Expression of Panx3 in differentiating chondrogenic cells— The expression of *Panx3* mRNA in a transitional stage between proliferative and hypertrophic chondrocytes suggests that Panx3 regulates chondrocyte proliferation and differentiation. To assess the role of Panx3 in chondrocyte differentiation, we used the murine chondrogenic cell lines ATDC5 and N1511, which are used to study multistep processes of chondrocyte differentiation (21),(22). ATDC5 cells proliferate until confluency, and then differentiate into chondrocytic phenotypes in a prolonged culture in the presence of insulin (21). Factors such as BMP-2, GDF-5, and TGFβ accelerate the chondrogenic differentiation of ATDC5 cells (24-26). We first examined the expression of *Panx3* mRNA during differentiation of the ATDC5 cells in the presence of insulin using real-time RT-PCR (Fig. 2A). *Panx3* mRNA expression was induced during ATDC5 cell differentiation, and reached its highest level after 20 days of culture (Fig. 2A). The expression of *Col2a1* mRNA was increased in a similar manner to that of *Panx3* mRNA; *Col10a1* mRNA was induced at later stages of differentiation. Without insulin, the induction of *Panx3*, *Col2a1*, and *Col10a1* was low even in a prolonged culture, indicating that *Panx3* expression was clearly linked to the differentiation of ATDC5 cells. We observed similar expression patterns in those genes during BMP-2-induced ATDC5 differentiation, except that BMP-2 promoted differentiation much faster than insulin (data not shown). In another chondrogenic cell line N1511, BMP-2- and insulin-induced expression of *Panx3*, *Col2a1*, and *Col10a1* were seen (Fig. 2B). Western blot analysis demonstrated that Panx3 protein with a molecular weight of 45-kDa was induced in differentiated ATDC5 cells (Fig. 2C). These results indicate that Panx3 was induced during chondrogenic differentiation of ATDC5 and N1511 cells.

Membrane localization of Panx3 in ATDC5 cells— To examine cellular localizations of Panx3, we immunostained differentiated ATDC5 cells using anti-Panx3 antibody (Fig. 2D). Panx3 was expressed in the plasma membrane, cell extensions, and in organelles most likely found in the endoplasmic reticulum (ER) and the Golgi of ATDC5 cells 8 days after differentiation induction. Panx3 was co-localized with Calnexin, an endoplasmic reticulum (ER) marker, indicating that the localization of Panx3 was most likely in the ER (Fig. 2D, d, e). There was no staining signal for Panx3 in undifferentiated ATDC5 cells (Fig. 2D, a). We also examined the expression and localization of Panx3 in pooled stable Panx3-transfected ATDC5 cells (Fig. 3A, B). In these cells, Panx3 mRNA and protein were strongly expressed in an undifferentiated condition. Both anti-Panx3 and anti-V5 antibodies detected the recombinant protein as a single band of about 49 kDa, corresponding to the predicted molecular weight of the Panx3-V5-His fusion protein (Fig. 3A). The immunohistochemistry of Panx3-transfected ATDC5 cells showed that both anti-Panx3 and anti-V5 antibodies strongly stained the plasma membranes (Fig. 3B). Some Panx3 signals were also observed in the endoplasmic reticulum (ER) since ER-

Tracker Red, which had been transiently transfected with the Panx3 expression vector containing a GFP tag, revealed that Panx3 was co-localized with an endoplasmic reticulum (ER) marker. This indicates that the localization of Panx3 was most likely in the ER (Fig. 3C).

Panx3 promotes ATDC5 and N1511 cell differentiation— We next examined whether the overexpression of Panx3 affects ATDC5 cell differentiation. Panx3-transfected ATDC5 cells were cultured under the differentiation condition in the presence of insulin. The expression of chondrocyte marker genes for *Col2a1*, aggrecan (*Agc1*), and *Col10a1* increased by 2.8-, 2.2-, and 5.1-fold, respectively, compared with control pEF1-transfected cells 8 days after induction (Fig. 4A, left panel). The *Panx3* mRNA levels in the Panx3-transfected cells were ~100-fold higher than those in the control pEF1-ATDC5 cells at day 8-induction. At day 16, after induction, the expression of both *Agc1* and *Col10a1* in Panx3-transfected cells was still higher than that of the control cells (Fig. 4A). *Panx3* mRNA in the transfected cells at day 16 was increased by about 2-fold, when its level was normalized with the level of control pEF1-transfected cells. The large decrease in the relative ratio of *Panx3* mRNA levels at day 16 compared to day 8 is due to the endogenous *Panx3* mRNA levels increasing substantially from day 8 to day 16 as shown in Fig. 2A. The actual *Panx3* mRNA levels did not decrease in Panx3-transfected ATDC5 cells during differentiation. Alcian blue staining, often used to stain proteoglycans in cartilage, was also increased in nodules of Panx3-transfected cells compared to the control cells (Fig. 4B). We also examined the expression of chondrogenic marker genes in transiently Panx3-transfected N1511 cells with during differentiation in the presence of insulin and BMP-2 (Fig. 4C). At day 3, the expression of *Col2a1* and *Agc1* mRNA was stimulated in the transfected cells compared to the control pEF1-transfected cells, whereas *Col10a1* mRNA levels was very low in both control pEF1- and Panx3-transfected cells. In day 4, *Col10a1* mRNA was induced in control cells and its expression levels were promoted in Panx3-transfected cells. The total *Panx3* mRNA levels, including exogenous and endogenous *Panx3* mRNA, did not change at day 3 or day 4. Taken together, these results indicate that Panx3 expression promoted chondrogenic cell differentiation.

Suppression of endogenous Panx3 expression inhibits cell differentiation— To analyze the endogenous Panx3 function in ATDC5 cell differentiation, we knocked down Panx3 expression using Panx3 shRNA. We transfected the Panx3 shRNA expression vector into ATDC5 cells. The resulting stably transfected cells were pooled and induced to differentiate in the presence of insulin. After 8 days in culture, the expression of Panx3 was substantially reduced at both the RNA and protein levels, compared with empty vector-transfected cells (Fig. 5A). *Panx3* mRNA was found to be downregulated by ~70% in Panx3 shRNA-transfected cells compared with the controls. In addition, the expression of mRNA for *Col2a1*, *Agc1*, and *Col10a1* in the shRNA-transfected cells was reduced by 50%, 64%, and 15%, respectively (Fig. 5B). Similarly, Alcian blue staining was reduced to 40% of the control cell level at 16 days in culture (Fig. 5C). Similarly, N1511 cell differentiation was inhibited by Panx3 shRNA transfection (data not shown).

To eliminate the possibility of off-target inhibitory effects of shPanx3 on cell differentiation, we used two different types of siRNA for Panx3. Both Panx3 siRNA-1 and -2 inhibited the expression of *Col2a1* and *Col10a1* in ATDC5 cells (Fig. 5D). We also tested these siRNA in primary chondrocytes prepared from cartilage of neonatal mice. Panx3 siRNA-1 and -2 inhibited the expression of *Col10a1*, but not *Col2a1* (Fig. 5E). This may be because primary chondrocytes are a mixture of different chondrocytes in varying stages of differentiation. The suppression of endogenous Panx3 did not affect *Col2a* – expressing chondrocytes, but inhibited differentiation to hypertrophic *Col10a1*-expressing chondrocytes. These results indicate that the suppression of endogenous Panx3 expression inhibited chondrocyte differentiation.

Panx3 inhibits PTH-induced cell proliferation— It has been reported that the expression of connexins such as Cx43, Cx32, and Cx26 inhibits tumor cell growth (27,28). Panx3 may have similar cell growth inhibitory activity, thereby promoting ATDC5 cell differentiation. Because PTH/PTHrP promotes chondrocyte proliferation, we examined Panx3 activity in PTH-mediated ATDC5 cell proliferation. Three days after the addition of PTH, we found that the number of control ATDC5 cells had increased in a dose-responsive manner and that the maximum cell number was reached at 10 nM PTH (Fig. 6). However, the number of Panx3-transfected ATDC5 cells was reduced in response to increasing amounts of PTH compared with the control cells (Fig. 6A). The endogenous PTHrP mRNA levels remained the same in Panx3- and control pEF1-transfected ATDC5 cells, under either proliferation or differentiation conditions (supplemental Fig. 1). PTH/PTHrP receptor (PPR) was induced during differentiation but its expression levels were similar in pEF- and Panx3-transfected cells (supplemental Fig. 1). These results suggest that endogenous PPR and PTHrP did not affect the proliferation and differentiation results. This reduced proliferation activity in Panx3-transfected cells with PTH was blocked by anti-Panx3 antibody, but not control IgG (Fig. 6B). These results suggest that Panx3 inhibits PTH-mediated cell proliferation.

Panx3 reduces intracellular cAMP and ATP levels— Because PTH/PTHrP stimulates the proliferation of chondrocytes through activation of the cAMP pathway (2), we examined the intracellular level of cAMP in Panx3-transfected ATDC5 cells under proliferation conditions (Fig. 7A). In the absence of PTH, the intracellular cAMP level was approximately 10% less in Panx3-transfected cells than in control pEF1-transfected cells. The addition of PTH increased the cAMP level within 10 min by 1.7-fold in pEF1-transfected cells. In contrast, Panx3-transfected cells demonstrated only a 1.2-fold induction by PTH. This reduced induction of the cAMP levels in Panx3-transfected cells was reversed to normal levels by addition of anti-Panx3 antibody, but not by control IgG (Fig. 7A). These data suggest that Panx3 inhibited PTH-mediated proliferation of ATDC5 cells by reducing intracellular cAMP levels.

This result may be due to Panx3 functioning as a hemichannel, releasing ATP to the extracellular space, and thus decreasing the intracellular cAMP level. To examine the hemichannel activity of Panx3, pEF1- and Panx3-transfected ATDC5 cells were treated with PTH, then the release of ATP into the culture medium was measured (Fig. 7B). Panx3-transfected cells exhibited an elevated ATP release that reached a maximum level at 2 min, and then gradually decreased with time. A similar release was not observed in control pEF1-transfected cells. In the presence of a high concentration of potassium glutamate (KGlu), which depolarizes the cell membrane, ATP was released from Panx3-transfected ATDC5 cells (Fig. 7B). A function-blocking antibody specific to the extracellular domain of Panx3 inhibited this ATP efflux (Fig. 7C). This antibody inhibition was blocked by the Panx3 peptide, which was used to raise the Panx3 antibody as an antigen in a dose-dependent manner, whereas its scrambled peptide and control IgG did not affect the antibody inhibition. These results suggest that the Panx3 hemichannel is one of the major ATP release channels.

Panx3 inhibits PTH-induced CREB phosphorylation— We next examined the activation of CREB, which is a downstream molecule of the PTH/PTHrP-cAMP-PKA pathway in chondrocytes (10,29). CREB reached its maximum phosphorylation level at 30 min after PTH treatment in the control pEF1-transfected ATDC5 cells. In Panx3-transfected cells, CREB phosphorylation was significantly reduced (Fig. 8A). The reduced CREB phosphorylation in Panx3-transfected cells was blocked by anti-Panx3 antibody, but not by IgG (Fig. 8B). Taken together, these results suggest that Panx3

inhibits PTH/PTHrP-cAMP-PKA signaling in ATDC5 cells.

DISCUSSION

In this study, we utilized a bioinformatics approach to search for a gap junction protein involved in cartilage development. We found that *Panx3* mRNA was preferentially expressed in a transitional stage between proliferative chondrocytes and terminally differentiated hypertrophic chondrocytes in developing growth plates. This suggests that Panx3 plays a role in the switch from proliferation to differentiation in these chondrocytes. To assess Panx3 action in chondrocyte differentiation, we used a chondrogenic cell lines ATDC5 and N1511, which can be induced to differentiate into chondrocyte phenotypes. *Panx3* mRNA expression was induced during differentiation ATDC5 and N1511 cells (Fig. 2). We demonstrated that the expression of Panx3 promoted differentiation of ATDC5 and N1511 cells (Fig. 4). In contrast, the inhibition of endogenous Panx3 expression through Panx3 shRNA and siRNA reduced differentiation of these cells and primary chondrocytes (Fig. 5 and data not shown) These results suggest that Panx3 regulates chondrogenic cell differentiation.

PTH/PTHrP functions to keep chondrocytes proliferating and to delay hypertrophic chondrocyte differentiation. Both PTHrP-deficient mice and PTH/PTHrP receptor-deficient mice have similar growth plate abnormalities—reduced numbers of chondrocytes and premature hypertrophic differentiation—indicating that PTHrP signals primarily through the PTH/PTHrP receptor in the growth plate (3,5). We found that PTH increased proliferation of ATDC5 cells in culture, but this PTH activity was reduced in Panx3-transfected ATDC5 cells (Fig. 6). There was no significant difference in cell proliferation activity between untransfected and Panx3-transfected ATDC5 cells in the absence of PTH, indicating that the inhibitory activity of Panx3 for cell proliferation is dependent on PTH. The interaction of PTH/PTHrP with the PTH/PTHrP receptor (PPR) promotes the activation of multiple heteromeric G proteins, including G_s, which can activate adenylyl cyclase (AC), and G_q, which can activate phospholipase C/protein kinase C (PLC/PKC), and G_q, whose action occurs opposite the G_s pathway (30,31). The PTH-induced activation of G_s leads to the cascade activation of downstream molecules, specifically the activation of AC, an increase in cAMP levels, the activation of PKA, and the phosphorylation of CREB. The activation of CREB induces the expression of genes required for cell proliferation (Fig. 9).

We found that Panx3 expression in ATDC5 cells promoted ATP release from the cytoplasm to the extracellular space, and this ATP release was inhibited by a function-blocking anti-Panx3 antibody, suggesting that Panx3 plays a specific role in the release of ATP (Fig. 7B, C). The activity of Panx3 as a hemichannel for ATP release would explain the reduced intracellular cAMP levels in Panx3-expressing ATDC5 cells treated with PTH, since ATP is converted to cAMP by AC (32). Thus it is conceivable that Panx3-promoted ATP release to the extracellular space results in the reduction of intracellular cAMP, leading to the inhibition of PTH-induced cell proliferation. Panx3 activity in ATDC5 cells as an ATP-release channel is consistent with recent reports that Panx1 can form a hemichannel for stress-sensitive ATP permeability in oocytes and erythrocytes (19,33).

ATP secreted into the pericellular environment affects a variety of cellular processes. Recently, upregulation of Panx1 has been reported in macrophages stimulated by endotoxin lipopolysaccharide. This treatment mediates large-pore formation of the ATP-gated $P2X_7Rs$ receptor, which leads to interleukin-1 release from the activated macrophage (34). The interaction of ATP with P2 receptors reportedly increases the concentration of intracellular Ca^{2+} in chondrocytes through G_q (35). ATP released into the extracellular space through Panx3 hemichannels at the early differentiation stage may re-enter the cytoplasm through purinergic receptors such as P2Y and P2X and promote differentiation. It is also possible that Panx3 may function as a Ca^{2+} channel in the ER and increase intracellular Ca^{2+} levels for chondrocyte

maturation.

Although Panx3 mRNA is expressed strongly by prehypertrophic chondrocytes, the Panx3 protein is found in both prehypertrophic and hypertrophic chondrocytes (Fig. 1). We did not detect Panx1 or Panx2 in developing growth plates with in situ hybridization (data not shown). Panx1, but not Panx2, was expressed very weakly in ATDC5 cells, but was not induced during ATDC5 cell differentiation (data not shown). Connexin 43 is expressed in condensing mesenchymal cells in the primordial cartilage, and also in articular chondrocytes and osteoblasts. Connexin 43 has been shown to form functional gap junctions capable of sustaining the propagation of intercellular Ca^{2+} waves in articular chondrocyte culture (36) and to regulate BMP-2-mediated chondrogenic differentiation in chick mesenchyme micromass culture (37). Many mutations in the connexin 43 gene have been identified in association with oculodentodigital dysplasia (38,39), which is characterized by syndactyly of the hands and feet, hypoplasia of the middle phalanges, and abnormal craniofacial elements. However, connexin-deficient mice do not exhibit any of the gross abnormalities of chondrocyte differentiation, but they do have mineralization defects (40). Immunostaining of developing growth plates revealed that connexin 43 was not expressed in prehypertrophic and hypertrophic chondrocytes, but it was expressed in osteoblasts (data not shown). These connexin 43 expression patterns are consistent with the skeletal phenotype of connexin43-deficient mice. Thus, Panx3 is likely the major gap junction protein in cartilage.

In conclusion, we demonstrated that Panx3 is uniquely expressed in prehypertrophic and hypertrophic chondrocytes and that it promotes the chondrogenic differentiation of ATDC5 cells, at least in part through its hemichannel activity. Panx3 inhibits PTH-induced ATDC5 cell proliferation and mediates intracellular ATP release into the extracellular space, which in turn leads to a reduction in cAMP/PKA signaling, resulting in decreased proliferation and increased differentiation. Our findings suggest that Panx3 is a regulator of the switching mechanism behind the transition of chondrocytes from a proliferative state to a postmitotic state and that it is required for chondrocyte differentiation.

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FOOTNOTES

This work was supported by the Intramural Research Program of the National Institute of Dental and Craniofacial Research, NIH (Y.Y.), a grant-in-aid (20791583 to T.I.) for Research Fellows from the Japan Society for the Promotion of Science and a grant-in-aid (20679006 for S.F) from the Ministry of Education, Science, and Culture of Japan.

ACKNOWLEDGEMENT

We thank Dr. Masahiro Iwamoto for plasmid Hist1h4c, and Dr. Motomi Iwamoto and Dr. Hideto Watanabe for N1511 cells.

FIGURE LEGENDS

Figure 1. Expression of Panx3 in E16.5 growth plates. (A) *In situ* hybridization. Panx3 mRNA was expressed in prehypertrophic chondrocytes, perichondrium, and osteoblasts. Antisense *Panx3* (a); Sense *Panx3* (b); *Ihh* (c); *Col2a1* (d); Col10a1 (e); *Hist1h4c* (f). (B) Immunostaining with anti-Panx3 antibody (red) and Hoechst nuclear staining (blue). Magnified view of the areas (a) marked by the square in (b).

Figure 2. Expression of Panx3 in differentiating ATDC5 and N1511 cells. (A) mRNA expression in differentiating ATDC5 cells. ATDC5 cells were cultured with 10 μg/ml of insulin. Total RNA was extracted from cells on the indicated days after insulin treatment and analyzed with Real-time RT-PCR. In differentiating ATDC5 cells, *Panx3, Col2a1*, and *Col10a1* were strongly induced. *GAPDH*, glyceraldehyde-3-phosphate dehydrogenase, was used as a control. (B) mRNA expression in differentiating N1511 cells. N1511 cells were cultured with 1μM insulin, 100 ng/ml rhBMP-2 and 50μg/ml ascorbic acid for differentiation. Panx3 was also progressively induced in differentiating N1511 cells. HPRT, hypoxanthine phophoribosyltransferase, was used as a control. (C) Expression of Panx3 protein in undifferentiated (lane 1) and differentiated ATDC5 cells (lane 2). ATDC5 cells were treated with or without insulin for 20 days and cell extracts were analyzed by Western blotting using Panx3 antibody. Panx3 protein was induced in differentiated ATDC5 cells. (D) Immunostaining with anti-Panx3 antibody (red), endoplasmic reticulum (ER) maker (green), Calnexin, and Hoechst nuclear staining (blue). In differentiating ATDC5 cells, endogenous Panx3 was observed in the cell membrane, cell processes and ER (d, e, and f), but not in undifferentiated cells (a and c).

Figure 3. Panx3 expression in Panx3-transfected ATDC5 cells. ATDC5 cells were stably transfected with the control empty vector (pEF1) or the Panx3 expression vector (pEF1/Panx3). (A) Expression of Panx3 mRNA and protein. Pooled transfectants were analyzed by (a) RT-PCR and (b) Western blotting using anti-Panx3 and -V5 antibodies. (B) Immunostaining of Panx3-transfected ATDC5 cells using anti-Panx3 (red) and -V5 (blue) antibodies. Fluorescent confocal images showed that the staining signals of Panx3 and V5 antibodies were co-localized in the cell membrane, cell-cell junction, and organelles. No staining of either Panx3 or V5 antibodies was observed in control pEF1-transfected ATDC5 cells. (C) Co-localization of Panx3-GFP and ER-Tracker Red. ATDC5 cells were transiently transfected with Panx3-pcDNA-GFP or pcDNA3.1-GFP-TOPO (control) for 2 days. Panx3-GFP was co-localized with ER-Tracker Red, indicating the presence of Panx3 in ER.

Figure 4. Panx3 promotes chondrogenic differentiation of ATDC5 and N1511 cells. (A) Differentiation of ATDC 5 cells. Pooled ATDC5 cells stably transfected with either control pEF1 or pEF1/Panx3 were cultured with 10 μg/ml of insulin. Total RNA was extracted at 8 days and 16 days after insulin treatment and analyzed by real-time RT-PCR. The expression of chondrogenic marker genes for Col2a1, Agc1, and Col10a1 was stimulated in Panx3-transfected ATDC5 cells

compared with that in control cells. The expression level of an individual gene in control pEF1-transfected cells was set as 1.0 and compared it with the level of each gene in Panx3-transfected cells for each day 8 and day 18. The exogenous Panx3 levels were the same but endogenous Panx3 levels were strongly increased from day 8 to day 16. As results, the ratio at day 16 was less than that in day 8. (B) Alcian blue staining of ATDC5 cells. After 16 days of culture, Alcian blue staining was performed. Alcian blue staining was increased in Panx3-transfected ATDC5 cells compared to that in pEF1-transfected ATDC5 cells. Scale bar, 200 μm. (C) Differentiation of N1511 cells. N1511 cells were transfected with either control pEF1 or pEF1/Panx3, were cultured with 1μM insulin, 100 ng/ml rhBMP-2 and 50μg/ml ascorbic acid for 3 days and 4 days. Similar to the results of ATDC5 cells, chondrogenic maker genes expression was stimulated by Panx3. Statistical analysis was performed using analysis of variance (*P<0.01).

Figure 5. Inhibition of ATDC5 cell differentiation by Panx3 shRNA. Pooled ATDC5 cells stably transfected with either control vector (Mock) or Panx3 shRNA vector were cultured with 10 μg/ml insulin. (A) Reduced expression of endogenous Panx3. Total RNA and protein were prepared from cells after 8 days of culture and analyzed through (a) RT-PCR and (b) Western blotting using anti-Panx3 antibody. Panx3 expression was reduced in Panx3 shRNA-transfected ATDC5 cells. (B) Reduced expression of chondrogenic marker genes. Total RNA was prepared from cells after 8 days of culture and analyzed by real-time RT-PCR. Expression of *Col2a1, Agc1*, and *Col10a1* was reduced in Panx3 shRNA-transfected ATDC5 cells. (C) Alcian blue staining. After 16 days of culture, Alcian blue staining was performed. Alcian blue staining was reduced in Panx3 shRNA-transfected cells. Scale bar, 200 μm. Statistical analysis was performed using analysis of variance (*P<0.01). (D) Reduced expression of Col2a1 and Col10a1 by Panx3 siRNA in ATDC5 cells. ATDC5 cells transfected with control siRNA, Panx3 siRNA-1 or Panx3 siRNA-2, were cultured with 100 ng/ml BMP-2 for 8 days. Expressions of Panx3, Col2a1 and Col10a1 were analyzed by real time PCR methods. Expression of Col2a1 and Col10a1 was reduced in Panx3 siRNA-transfected ATDC5 cells. (E) Reduced expression of Col10a1 but not Col2a1 by Panx3 siRNA in primary chondrocytes. Primary chondrocytes transfected with control siRNA, Panx3 siRNA-1 or Panx3 siRNA-2, were cultured with 100 ng/ml BMP-2 for 2 days. Expression of Panx3, Col2a1 and Col10a1, were analyzed by real time PCR methods. Expression of Panx3 and Col10a1, but not Col2a1, was reduced in Panx3 siRNA-transfected primary chondrocytes. Statistical analysis was performed using analysis of variance (*P<0.01).

Figure 6. Inhibition of PTH-promoted cell proliferation by Panx3. (A) The Panx3- and pEF1-transfected cells were incubated in the presence of various amounts of PTH. Cell numbers were counted after 3 days of culture. The number of Panx3-transfected cells was reduced compared with the control cells. (B) Panx3 antibody, but not IgG, restored PTH-promoted cell proliferation in Panx3-transfected cells. Statistical analysis was performed using analysis of variance (**P<0.02, *P<0.01).

Figure 7. Reduced cAMP levels and increased ATP efflux in Panx3-transfected ATDC5 cells. (A) Intracellular cAMP level. Panx3- and pEF1-transfected ATDC5 cells were cultured with 10 μg/ml of insulin for 1 week. The cells were incubated with anti-Panx3, IgG or without them for 30 min, and then exposed to PTH at 100 nM for 10 min and analyzed the intracellular cAMP levels. PTH promoted the intracellular cAMP level in control pEF1-transfected cells, whereas this PTH effect was reduced in Panx3-transfected cells. This reduction was blocked by anti-Panx3 antibody but not IgG. (B) Release of ATP. Cells were plated at ~50% confluency in the absence or presence of potassium (KGlu), and ATP levels in the media were measured. ATP release to the extracellular space was increased in Panx3-transfected cells. Left panel: time-course of ATP release after addition of KGlu. Right panel: data at 2 min after addition of KGlu in the right panel were shown in bar graphs. Statistical analysis was performed using analysis of variance (*P<0.01). (C) Inhibition of ATP release by Panx3 antibody. Cells were incubated with anti-Panx3 antibody, Panx3 peptide or IgG for 30 min, and ATP release was measured. The Panx3

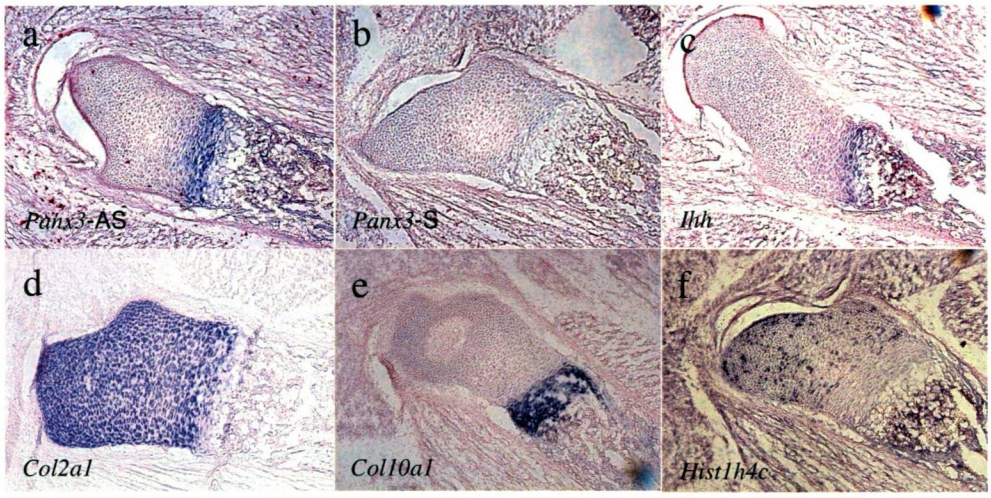
antibody inhibited ATP release in Panx3-transfected cells. This inhibition was blocked by various concentrations (0.5 to 5.0 ng/mL) of the Panx3 peptide, but not its scrambled peptide (5.0 ng/mL).

Figure 8. Decrease in phosphorylation of CREB by Panx3. (A) Time-course of CREB phosphorylation. ATDC5 cells were cultured with 10 μg/ml of insulin for 1 week and then treated with PTH (100 nM) for the time indicated. Protein extracts were analyzed by Western blotting using anti-phospho-CREB and anti-CREB antibodies. In control pEF1-transfected cells, the phosphorylation of CREB was strongly induced, whereas in Panx3-transfected cells the phosphorylation levels of CREB were reduced. (B) Restoration of the CREB phosphorylation levels by Panx3 antibody. Cells were preincubated with Panx3 antibody or IgG for 30 min before the stimulation with 100 nM PTH, and then Western blotting using anti-phospho-CREB and anti-CREB antibodies were performed. Panx3 antibody inhibited the reduction of the phosphorylation of CREB in Panx3-transfected cells. *Image J* 1.33u was used to quantify the protein bands.

Figure 9. Role of Panx3 in chondrogenic differentiation. The PTH/PTHrP receptor activates multimeric G proteins. The activation of the Gs subunit leads to the activation of adenylyl cyclase (AC) for cAMP generation from ATP and the subsequent activation of PKA. PKA phosphorylates CREB, which promotes the expression of genes for cell proliferation. Panx3 is expressed in prehypertrophic chondrocytes and it promotes the release of ATP into the extracellular space, which results in a reduction of the intracellular cAMP level and subsequent inhibition of PKA/CREB signaling for cell proliferation. The PTH/PTHrP receptor also activates the G_q subunit and subsequent downstream signaling, such as PKC, to promote differentiation.

Fig. 1

A



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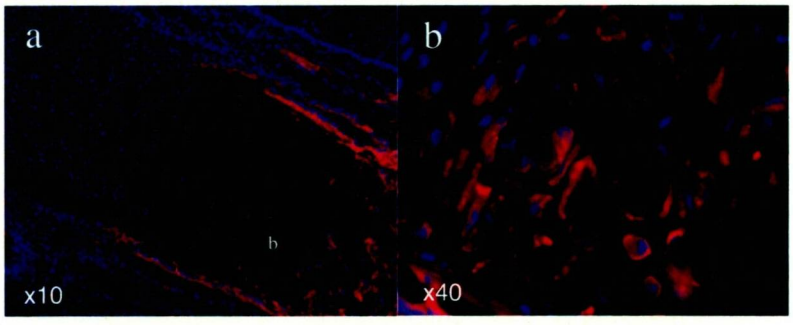


Fig. 2

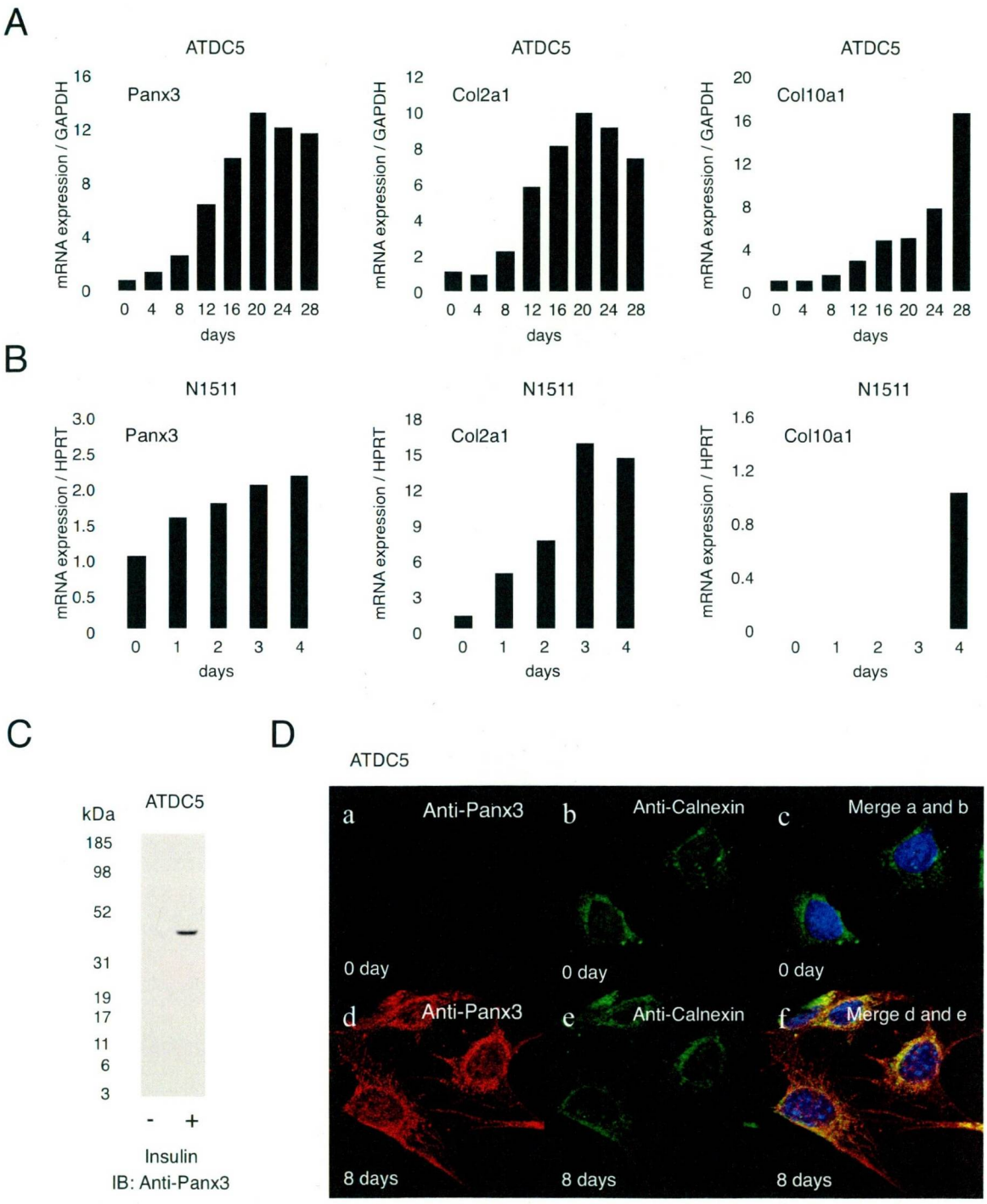


Fig. 3

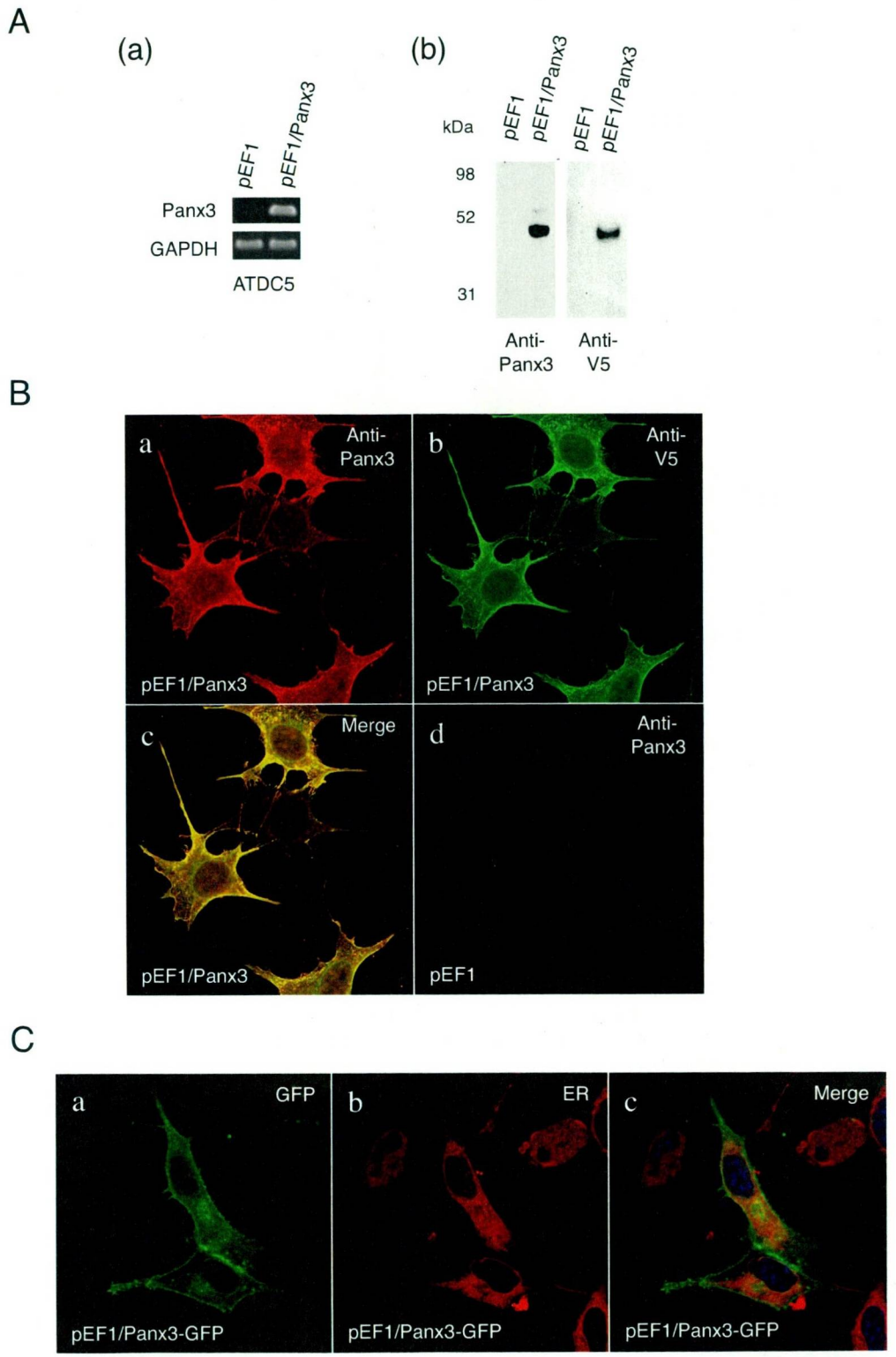


Fig. 4

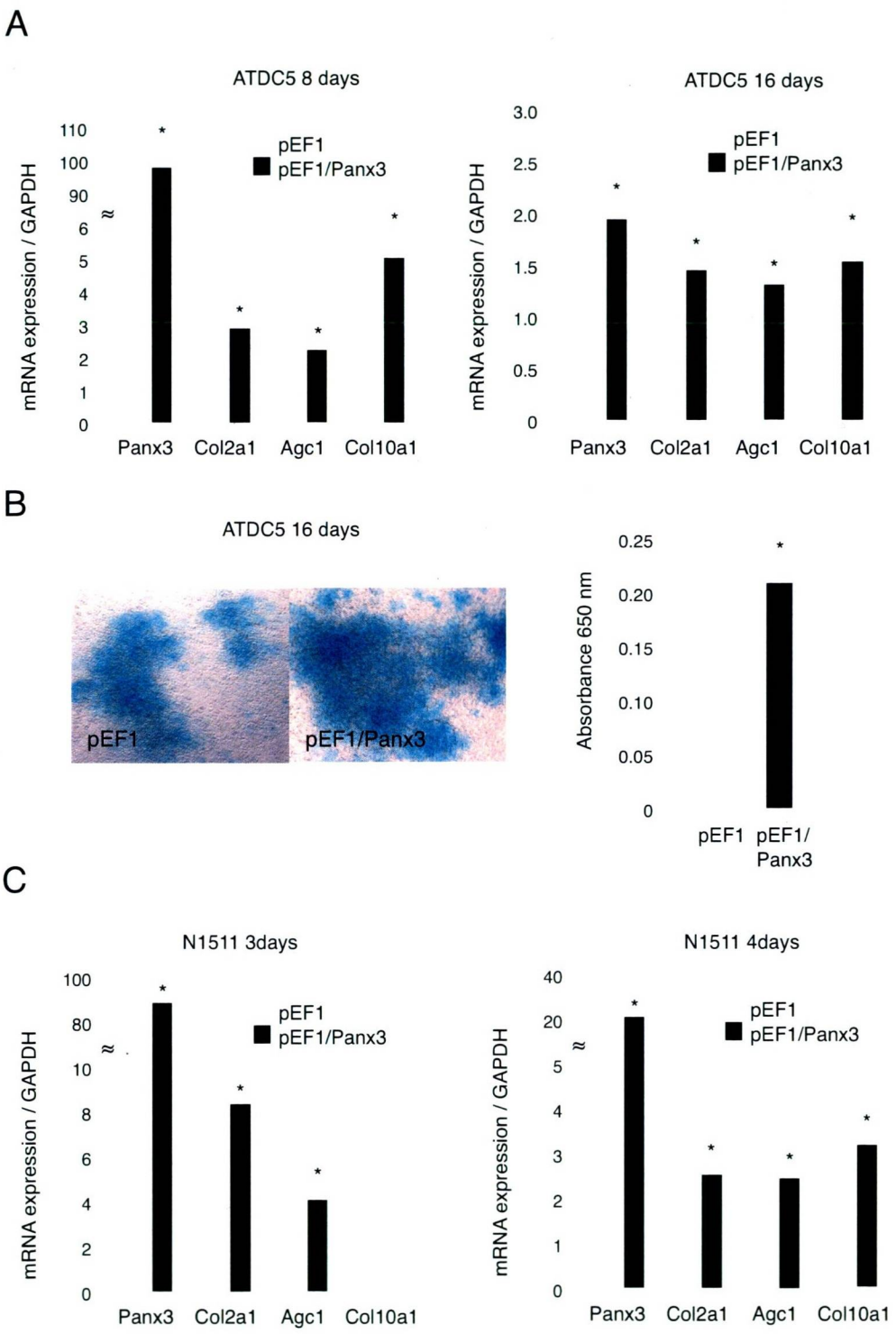


Fig. 5

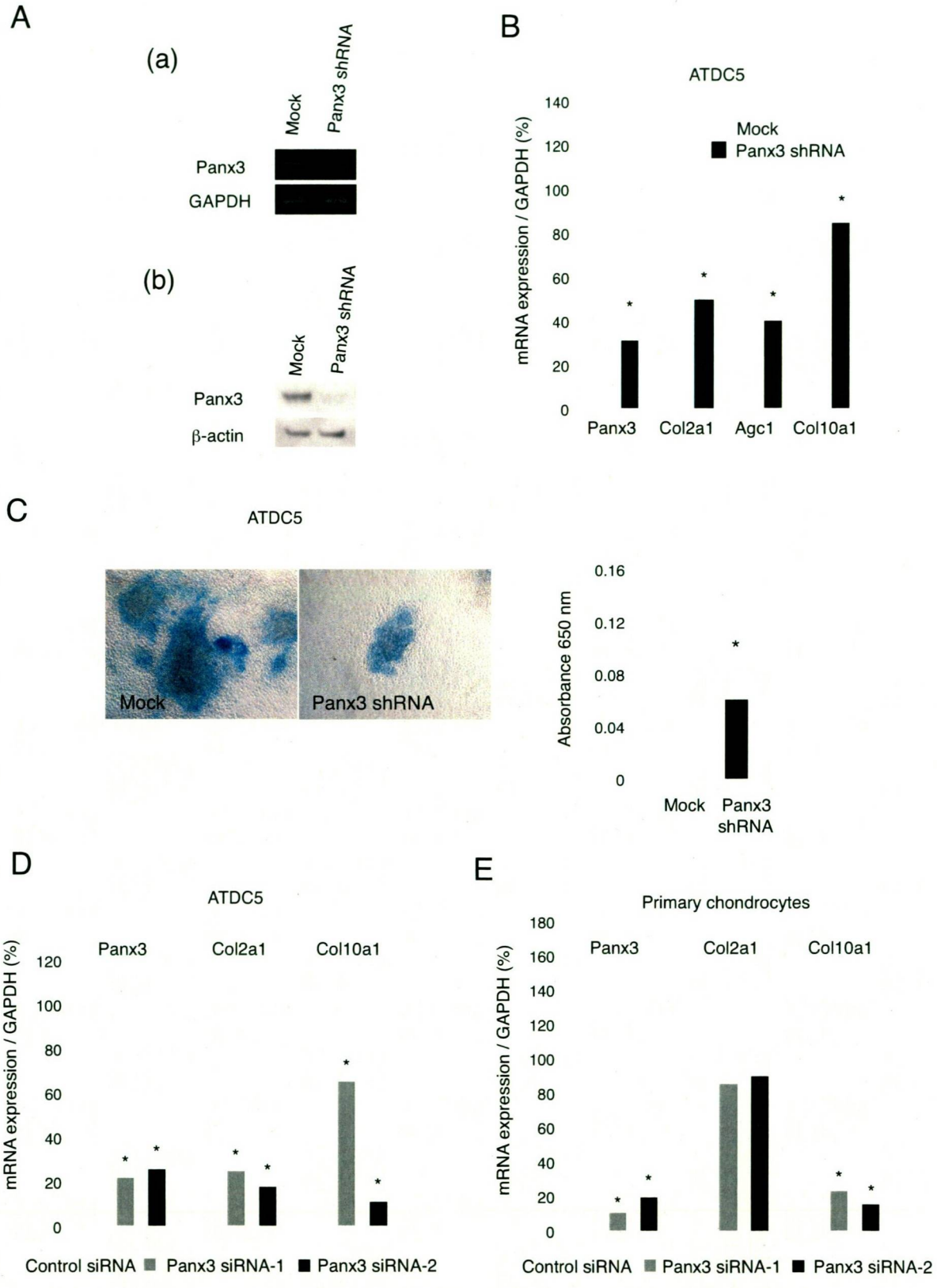


Fig. 6

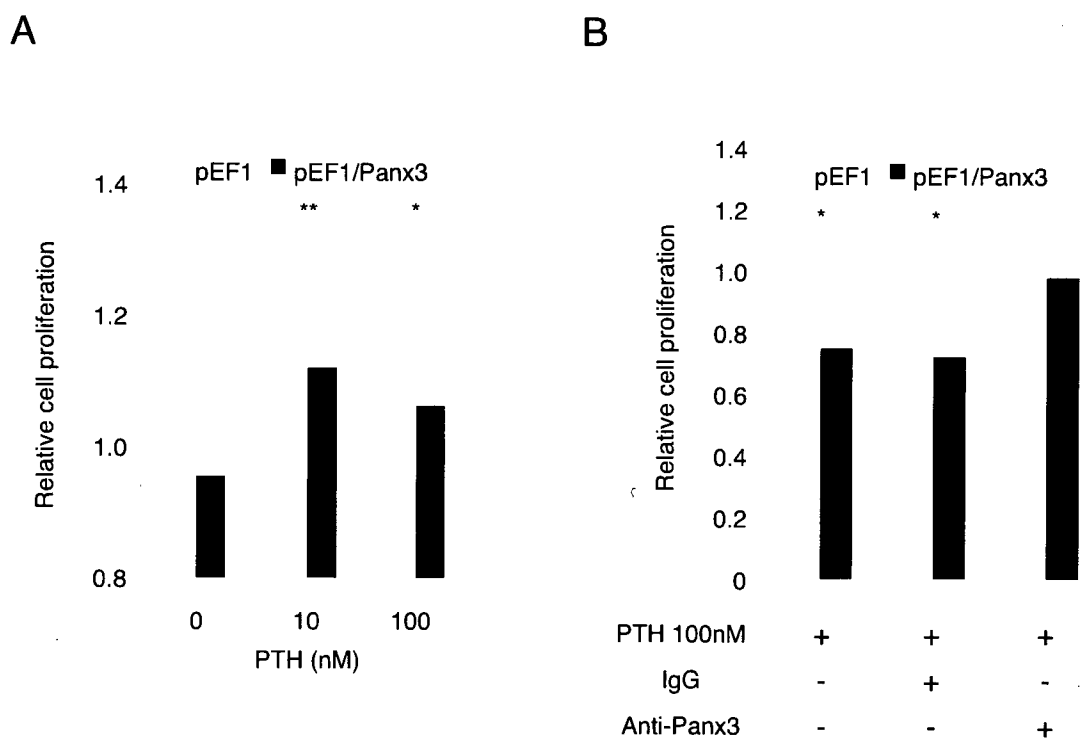


Fig. 7

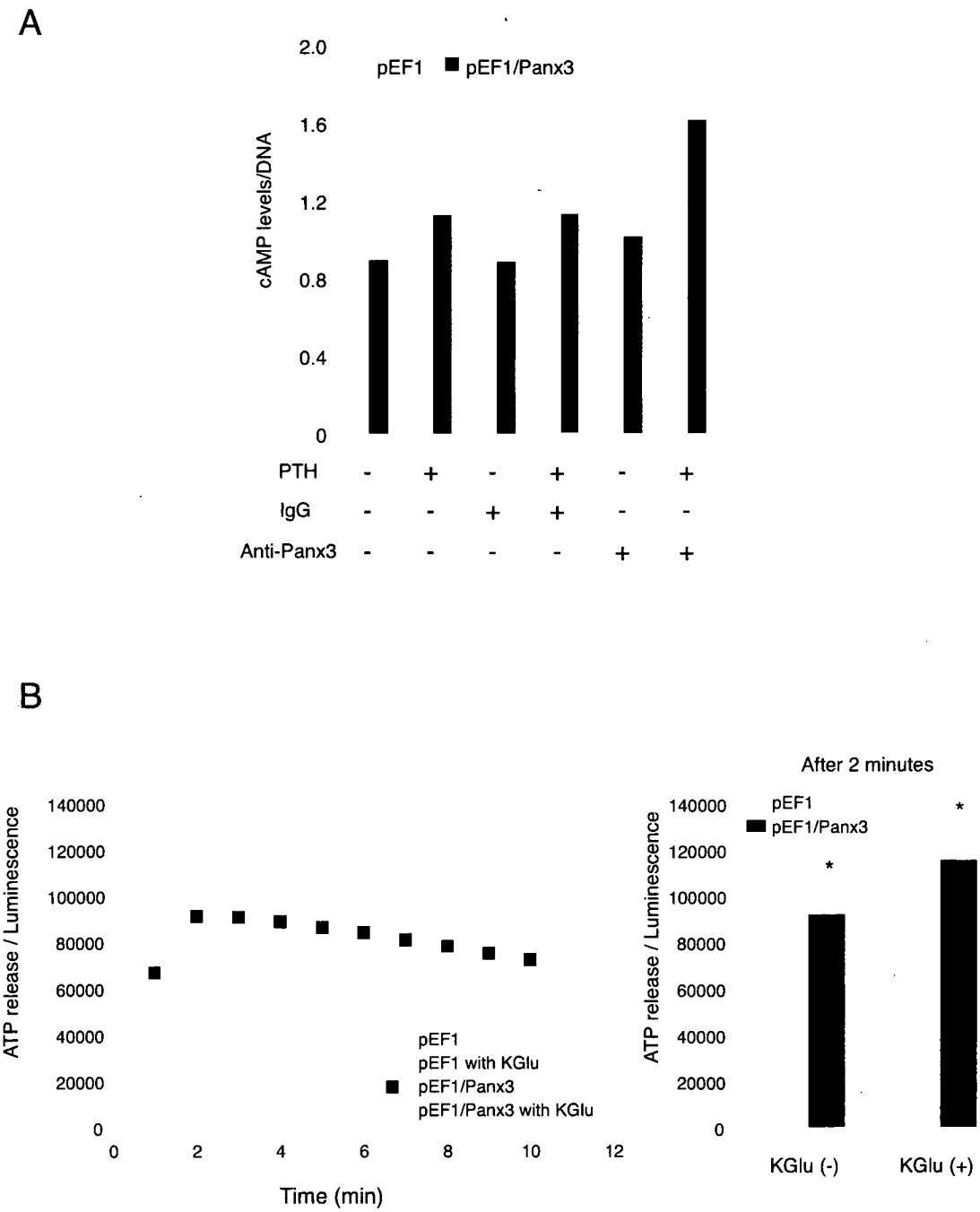
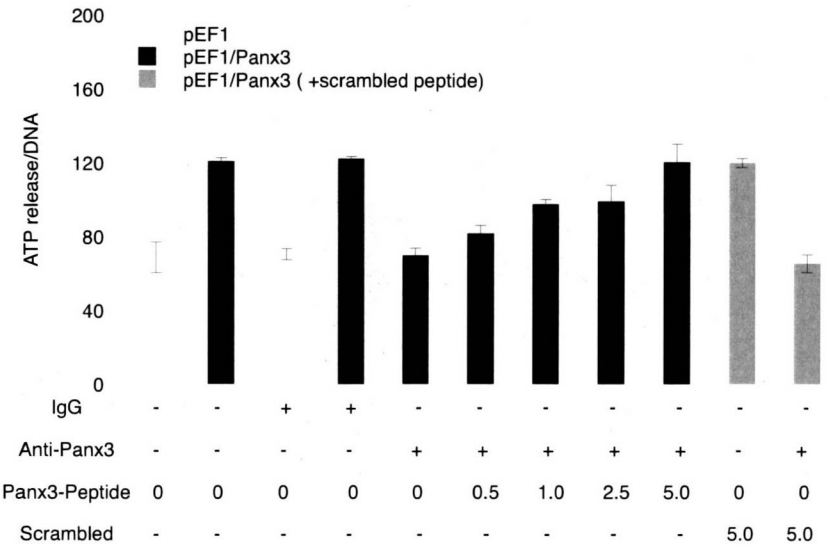


Fig. 7

C



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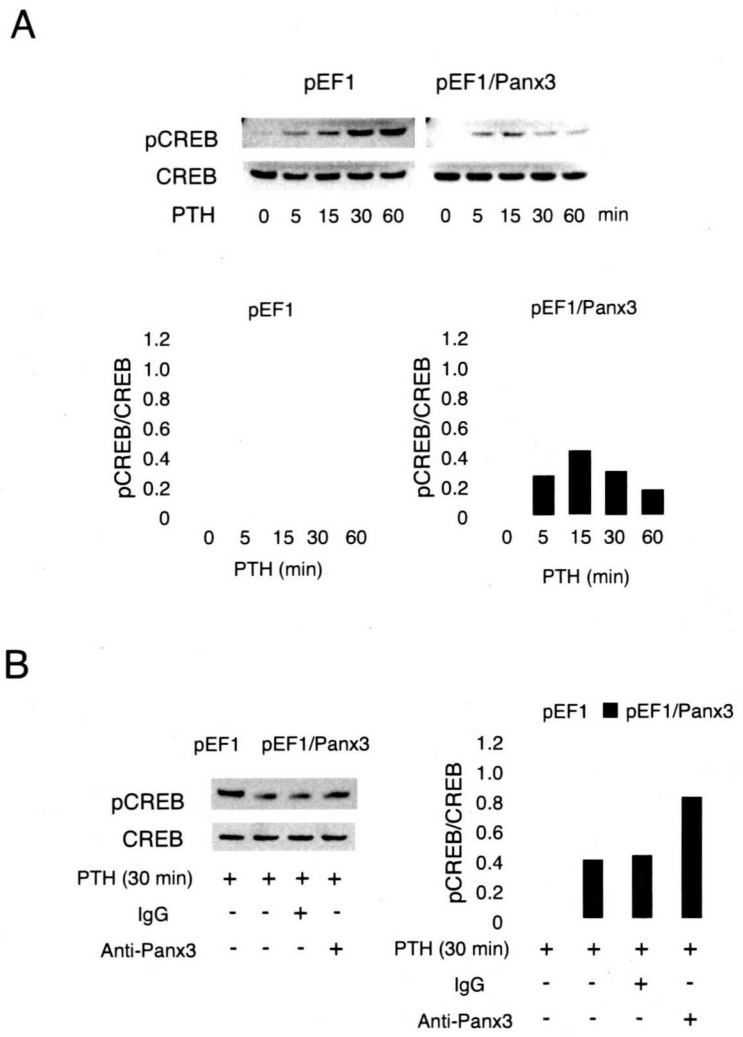
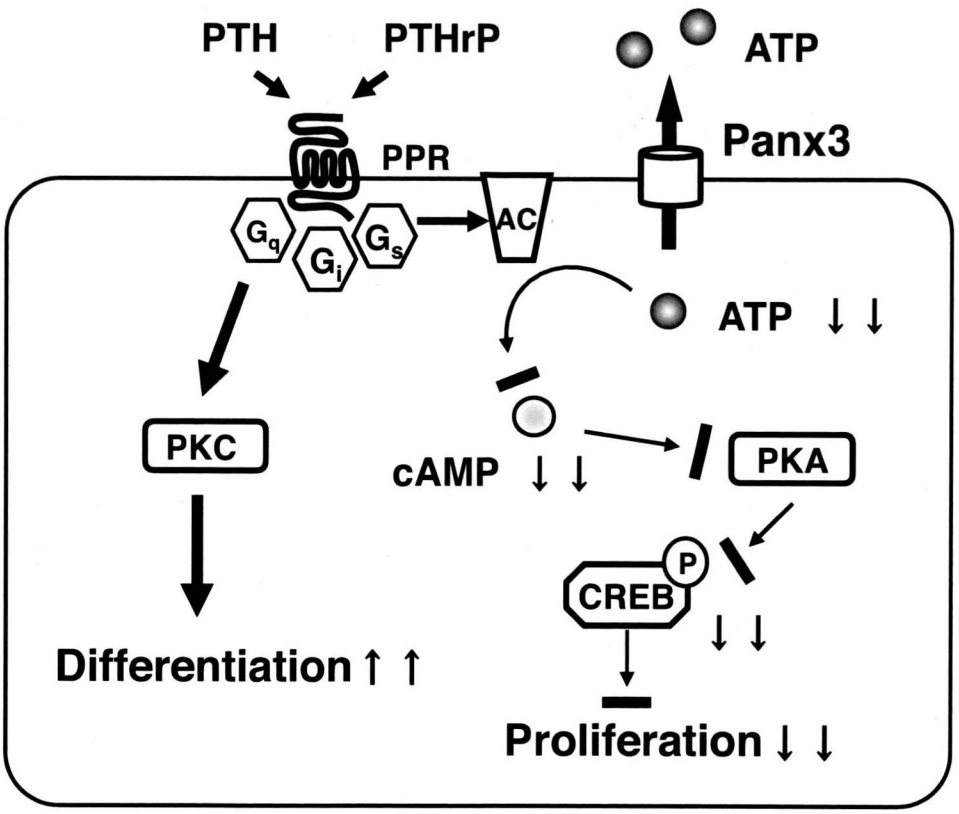


Fig. 9


PTH
PTHrP
PPR
ATP
Panx3
AC
G_q
G_i
G_s
ATP ↓ ↓
PKC
cAMP ↓ ↓
PKA
P
CREB
↓ ↓
Differentiation ↑ ↑
Proliferation ↓ ↓

ARCHIVES OF ORAL BIOLOGY 54 (2009) 963–969

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Influences of interferon-gamma on cell proliferation and interleukin-6 production in Down syndrome derived fibroblasts

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ARTICLE INFO

Article history:
Accepted 24 July 2009

Keywords:
Down syndrome
IFN-γ
Hypersensitivity
IL-6

ABSTRACT

Objective: Down syndrome, a frequently encountered genetic disorder, is usually associated with medical problems related to infectious disease, such as periodontal diseases and prolonged wound healing. Although affected individuals are considered to have clinical problems related to high interferon (IFN) sensitivity, the molecular mechanisms of IFN activities are not completely understood.

Design: Down syndrome derived fibroblasts, Detroit 539 (D1) and Hs 52.Sk (D2) cells, were used. To analyse the expressions of interferon (IFN) receptors and downstream of IFN-γ, western blotting was performed. Cell proliferation was determined by counting cells following trypan blue staining. Media levels of IL-1β, TNF-α, and IL-6 were quantified using ELISA.

Results: IFN-γ receptor 2 and IFN-α receptor 1, but not IFN-γ receptor 1, were highly expressed in D1 and D2 cells, as compared to the control fibroblast cells. Cell proliferation by D1 and D2 cells was lower than that by the control fibroblasts, further, IFN-γ had a greater effect to inhibit cell proliferation by D1 and D2 cells. In addition, IFN-γ treatment increased the phosphorylation of STAT1 and MAPK in D1 cells as compared to normal fibroblasts. Also, the presence of exogenous IFN-γ in the growth medium significantly induced IL-6, but not IL-1β or TNF-α, in D1 and D2 cells.

Conclusion: Taken together, our results are consistent with hypersensitive reactions to IFN-γ seen in patients with Down syndrome and may provide useful information to elucidate the mechanisms of IFN-γ activities in those individuals.

1. Introduction

Down syndrome, or trisomy 21, is a very frequent autosomal chromosomal disorder that is characterized by the presence of all or part of an extra chromosome 21. The disorder was named after John Langdon Down, who initially reported characteristics of patients with the syndrome in 1866.[1] Down syndrome affects more than 1 of every 700 newborns in the world, with incidence heavily influenced by the age of the mother.[2] Affected patients show a number of typical phenotypes, such as mental retardation, characteristic facial features, congenital heart disease, and immune haematologic anomalies, and are also associated with

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0003–9969/$ – see front matter
doi:10.1016/j.archoralbio.2009.07.009