瀬崎ひとみ (芥田)	C型慢性肝炎に対するペグインターフェロンとリバビリン併用療法におけるNS3-4Aプロテアーゼ阻害剤(Telaprevir)併用 12 週間治療のウイルス学的効果の検討	肝臓	51(7)	394-396	2010
八辻寛美 (芥田)	核酸アナログ未使用のB型慢性肝炎症例へのエンテカビル治療中にrtA181Tウイルスが増殖した一症例	肝臓	51(4)	196-198	2010
小林万利子 (芥田)	IL28B と HCV Core aa70 置換との関連	肝臓	51(6)	322-323	2010
Akuta N (芥田)	Amino acid substitutions in hepatitis C virus core region and genetic variation near the interleukin 28B gene predict viral response to Telaprevir with peginterferon and ribavirin	Hepatology	52(2)	421-429	2010
Kobayashi M (芥田)	Influence of amino-acid polymorphism in the core protein on progression of liver disease in patients infected with hepatitis C virus genotype 1b.	J Med Virol	82	41-48	2010
Suzuki F (芥田)	Sustained virological response in a patient with chronic hepatitis C treated by monotherapy with the NS3-4A protease inhibitor telaprevir.	J Clin Virol	47(1)	76-78	2010
Arase Y (芥田)	Virus cearance reduces bone fracture in postmenopausal women with osteoporosis and chronic liver diseasecoused by hepatitis C virus.	J Med Virol	82	390-395	2010
Kobayashi M (芥田)	Correlation of YMDD mutation and breakthrough hepatitis with hepatitis B virus DNA and serum ALT during lamivudine treatment.	Hepatol Res	40 (2)	125-134	2010
Hosaka T (芥田)	Development of HCC in patients receiving adefovir dipivoxil for lamivudine-resistant hepatitis B virus mutants.	Hepatol Res	40(2)	145-152	2010
Akuta N (芥田)	Amino acid substitutions in the hepatits C virus core region of genotype 1b affect very early viral dynamics during treatment with telaprevir, peginterferon, and ribavirin.	J Med Virol	82	575-582	2010
Akuta N (芥田)	Extending combination therapy with peginterferon plus ribavirin for genotype 2 chronic hepatitis C virological responders: a pilot study of 7 cases.	Intervirology	53	188-192	2010

Arase Y (芥田)	Efficacy and safety of combination therapy of natural human interferon beta and ribavirin in chronic hepatitis C patients with genotype 2 and high virus load.	Intern Med	49	965-970	2010
Suzuki F (芥田)	Efficacy of switching to entecavir monotherapy in Japanese lamivudine- pretreated patients.	Hepatol Res	25	892-898	2010
Hosaka T (芥田)	HBcrAg is predictor of post-treatment recurrence of hepatocellular carcinoma during antiviral therapy.	Liver Int	93(3-4)	109-112	2010
Ikeda K (芥田)	Administration of interferon for two or more years decreases early stage hepatocellular carcinoma recurrence rate after radical ablation: A retrospective study of hepatitis C virus-related liver cancer.	Hepatol Res	40(12)	1168-1175	2010
Akuta N (芥田)	A matched case-controlled study of 48 and 72 weeks of peginterferon plus ribavirin combination therapy in patients infected with HCV genotype 1b in Japan: Amino acid substitutions in HCV core region as predictor of sustained virological response	J Med Virol	81	452-458	2009
Akuta N (芥田)	Virological response and hepatocarcinogenesis in lamivudine-resistant hepatitis B virus genotype C patients treated with lamivudine plus adefovir dipivoxil	Intervirology	51	385-393	2009
Akuta N (芥田)	Amino acid substitutions in the hepatitis C virus core region of genotype 1b are the important predictor of severe insulin resisitance inpatients without cirrhosis and diabetes mellitus.	J Med Virol	81	1032-1039	2009
Arase Y (芥田)	Sustained virological response reduces incidence of onset of type 2 diabetes in chronic hepatitis C.	Hepatology	49	739-744	2009
Arase Y (芥田)	Combination Therapy of Peginterferon and Ribavirin for Hepatitis C Patients with Genotype 1b and Low-virus Load.	Int Med	48	253-258	2009
Ikeda K (芥田)	Neccesities of interferon therapy in elderly patients with hepatitis C.	Am J Med	122	479-486	2009

Ikeda K (芥田)	Occult hepatitis B virus infection inceases hepatocellular carcinogenesis by eight times in patients with non-B, non-C liver cirrhosis: a cohort study.	J Viral Hepatitis	16	437-443	2009
Kawamura Y (芥田)	Efficacy of platinum analogue for advanced hepatocellular carcinoma unresponsive to transcatheter arterial chemoembolization with epirubicin.	Hepatol Res	39	346-354	2009
Kobayashi M (芥田)	High serum Alpha Fetoprotein and Des-gamma-Carboxy Prothrombin Level Predict Poor Prognosis after Radiofrequency Ablation of Hepatocellular carcinoma.	Cancer	115	571-580	2009
Sezaki H (芥田)	An open pilot study exploring the efficacy of fluvastatin, pegylated interferon and ribavirin in patients with C virus genotype 1b in high viral loads.	Intervirology	52	43-48	2009
Sezaki H (芥田)	Poor Response to Pegylated Interferon and Ribavirin in Aged Women Infected with Hepatitis C Virus of Genotype 1b in High Viral Loads.	Dig Dis Sci	54	1317-1324	2009
Hosaka T (芥田)	Predictive factors of advanced recurrence after curative resection of small hepatocellular carcinoma.	Liver Int	29	736-742	2009
Morihara D (芥田)	Effectiveness of combination therapy of splenectomy and long-term interferon in patients with hepatitis C virus related cirrhosis and thrombocytopenia.	Hepatol Res	39	439-447	2009
Suzuki Y (芥田)	Efficacy of entecavir treatment for lamivudine-resistant hepatitis B over 3 years: Histological improvement or entecavir resistance?	J Gastroenterol Hepatol	24	429-435	2009
Okanoue T (芥田)	Predictive value of amino acid sequences of the core and NS 5A regions in antiviral therapy for hepatitis C: a Japanese multi-center study.	J Gastoroenterol	44	952-963	2009
Akuta N (芥田)	Association of amino acid substation pattern in core protein of hepatitis C virus Genotype 2a high viral load and virological response to interferon-ribavirin combination therapy.	Intervirology	52	301-309	2009

Arase Y (芥田)	The efficacy of interferon-β monotherapy for elderly patients with type C hepatitis of genotype 2.	Intern Med	48	1337-1342	2009
Arase Y (芥田)	Losartan reduces the onset of type2 diabetes in hypertensive Japanese patients with chronic hepatitis C.	J Med Virol	81	1584-1590	2009
Ogura S (芥田)	Virological and Biochemical Features in Elderly HCV Patients with Hepatocellular Carcinoma: Amino acid substitutions in HCV Core region as Predictors of Mortality after First Treatment	Intervirology	52	179-188	2009
Suzuki F (芥田)	Rapid loss hepatitis C virus genotype 1b from serum in patients receiving a triple treatment with telaprevir (MP-424), pegylated interferon and ribavirin for 12 weeks.	Hepatol Res	39	1056-1063	2009
Kobayashi M (芥田)	Development of hepatocellular carcinoma in elderly patients with chronic hepatitis C with or without elevated aspartate and alanine aminotransferase levels.	Scan J Gastroenterol	44	975-983	2009
保坂哲也 (芥田)	核酸ｱﾅﾛｸﾞ療法中のB型関連肝癌に対する肝癌再発予測ﾏｰｶｰとしてHBｺｱ関連抗原の有用性	肝臓	50(10)	588-589	2009
Nomura H (野村)	Occurrence of clinical depression during combination therapy with pegylated interferon alpha or natural human interferon beta plus ribavirin	Hepatol Res			in press
Matsuura K (野村)	Recommendation of lamivudine-to-entecavir switching treatment in chronic hepatitis B responders: Randomized controlled trial.	Hepatol Res	41	505-511	2011
Ito K (野村)	The rs8099917 polymorphism, when determined by a suitable genotyping method, is a better predictor for response to pegylated alpha interferon/ribavirin therapy in Japanese patients than other single nucleotide polymorphisms associated with interleukin-28B.	J Clin Microbiol.	49	1853-1860	2011
Chayama K (野村)	Factors predictive of sustained virological response following 72 weeks of combination therapy for genotype 1b hepatitis C.	J Gastroenterol.	46	545-555	2011

Kainuma M (野村)	Pegylated interferon α-2b plus ribavirin for Japanese chronic hepatitis C patients with normal alanine aminotransferase.	Hepatol Res.	42	33-41	2011
Ogawa E (野村)	An evaluation of the adverse effect of premature discontinuation of pegylated interferon alpha-2b and ribavirin treatment for chronic hepatitis C virus infection: Results from Kyushu University Liver Disease Study (KULDS).	J Gastroenterol Hepatol.			in press
Tsuda M (野村)	Fine phenotypic and functional characterization of effector cluster of differentiation 8 positive T cells in human patients with primary biliary cirrhosis.	Hepatology.	54	1293-302	2011
Hashimoto N (野村)	Modulation of $CD4^+$ T cell responses following splenectomy in hepatitis C virus-related liver cirrhosis.	Clin Exp Immunol.	165	243-50	2011
Shimoda S (野村)	Interaction between Toll-like receptors and natural killer cells in the destruction of bile ducts in primary biliary cirrhosis.	Hepatology	53	1270-81	2011
Ishibashi H (野村)	Risk factors and prediction of long-term outcome in primary biliary cirrhosis.	Intern Med.	50	1-10	2011
Chen Y (野村)	Intracellular B7-H4 suppresses bile duct epithelial cell apoptosis in human primary biliary cirrhosis.	Inflammation	34	688-97	2011
Harada K (野村)	Significance of periductal Langerhans cells and biliary epithelial cell-derived macrophage inflammatory protein-3α in the pathogenesis of primary biliary cirrhosis.	Liver Int.	31	245-53	2011
Shimoda S (野村)	Primary biliary cirrhosis and autoimmune hepatitis: apotopes and epitopes.	Lleo A, J Gastroenterol.	46 Suppl 1	29-38	2011
Hiramatsu N (林)	Efficacy of pegylated interferon plus ribavirin combination therapy for hepatitis C patients with normal ALT levels: a matched case-control study.	J Gastroenterol	46(11)	1335-43	2011
Kodama T (林)	Increases in p53 expression induce CTGF synthesis by mouse and human hepatocytes and result in liver fibrosis in mice.	J Clin Invest.	121(8)	3343-56	2011

Miyagi T (林)	Differential alteration of CD56(bright) and CD56 (dim) natural killer cells in frequency, phenotype, and cytokine response in chronic hepatitis C virus infection.	J Gastroenterol	46(8)	1020-30	2011
Oze T (林)	The efficacy of extended treatment with pegylated interferon plus ribavirin in patients with HCV genotype 1 and slow virologic response in Japan.	J Gastroenterol.	46(7)	944-52	2011
Oze T (林)	Efficacy of re-treatment with pegylated interferon plus ribavirin combination therapy for patients with chronic hepatitis C in Japan.	J Gastroenterol	46(8)	1031-7	2011
Hikita H (林)	Delayed-onset caspase-dependent massive hepatocyte apoptosis upon Fas activation in Bak/Bax-deficient mice.	Hepatology	54(1)	240-51	2011
Oze T (林)	Indications and limitations for aged patients with chronic hepatitis C in pegylated interferon alfa-2b plus ribavirin combination therapy.	J Hepatol	54(4)	604-11	2011
Inoue Y, (林)	Factors affecting efficacy in patients with genotype 2 chronic hepatitis C treated by pegylated interferon alpha-2b and ribavirin: reducing drug doses has no impact on rapid and sustained virological responses.	J Viral Hepat	17	336-344	2010
Imai Y (林)	Reduced risk of hepatocellular carcinoma after interferon therapy in aged patients with chronic hepatitis C is limited to sustained virological responders.	J Viral Hepat	17	185-191	2010
Kohga K (林)	Sorafenib inhibits the shedding of MICA on hepatocellular carcinoma cells by downregulating ADAM9.	Hepatology	51	1264-1273	2010
Miyagi T (林)	Altered interferon-alpha-signaling in NK cells from patients with chronic hepatitis C virus infection.	J Hepatol	53	424-430	2010
Kurokawa M (林)	Effect of interferon alpha-2b plus ribavirin therapy on incidence of hepatocellular carcinoma in patients with chronic hepatitis.	Hepatol Res.	39(5)	432-8.	2009

Oze T (林)	Peginterferon alfa-2b affects early virologic response dose-dependently in patients with chronic hepatitis C genotype 1 during treatment with pegylated interferon alfa-2b plus ribavirin.	J Viral Hepat.	16(8)	578-85.	2009
Hiramatsu N (林)	Ribavirin dose reduction raises relapse rate dose-dependently in genotype 1 patients with hepatitis C responding to pegylated interferon alfa-2b plus ribavirin.	J Viral Hepat.	16(8)	586-94	2009
Kurashige N (林)	Factors contributing to antiviral effect of adefovir dipivoxil therapy added to ongoing lamivudine treatment in patients with lamivudine-resistant chronic hepatitis B.	J Gastroenterol.	44(6)	601-7	2009
Kurashige N (林)	Lamivudine-to-entecavir switching treatment in type B chronic hepatitis patients without evidence of lamivudine resistance.	J Gastroenterol.	44(8)	864-70	2009
Kurashige N (林)	Two types of drug-resistant hepatitis B viral strains emerging alternately and their susceptibility to combination therapy with entecavir and adefovir.	Antivir Ther.	14(6)	873-7	2009
Kohga K (林)	Anticancer chemotherapy inhibits MHC class I-related chain a ectodomain shedding by downregulating ADAM10 expression in hepatocellular carcinoma.	Cancer Res.	69(20)	8050-57	2009
林紀夫 (林)	C 型肝炎に対するインターフェロン治療と抗ウイルス剤	日本医師会雑誌	138(6)	1089-1094	2009
Sakakibara M (平松)	Comprehensive immunological analyses of colorectal cancer patients in the phase I/II study of quickly matured dendritic cell vaccine pulsed with carcinoembryonic antigen peptide.	Cancer Immunol Immunother	60(11)	1565-75	2011
Oze T (平松)	Indications and limitations for aged patients with chronic hepatitis C in pegylated interferon alfa-2b plus ribavirin combination therapy.	J Hepatol	54(4)	604-11	2011
Inoue Y (平松)	Factors affecting efficacy in patients with genotype 2 chronic hepatitis C treated by pegylated interferon alpha-2b and ribavirin: reducing drug doses has no impact on rapid and sustained virological responses.	J Viral Hepat	17	*336-344*	2010

Miyagi T (平松)	Altered interferon-alpha-signaling in natural killer cells from patients with chronic hepatitis C virus infection.	J Hepatol.	53(3)	424-430	2010
Sakamori R (平松)	STAT3 signaling within hepatocytes is required for anemia of inflammation in vivo.	J Gastroenterol	45(2)	244-8	2010
平松直樹 (平松)	C型肝炎に対するPeg-IFN/RBV 治療と新規抗ウイルス治療薬の開発状況	Annual review 2009 消化器 中外医学社		117-128	2009
Hiramatsu N (平松)	Ribavirin dose reduction raises relapse rate dose-dependently in genotype 1 patients with hepatitis C responding to pegylated interferon alfa-2b plus ribavirin	J Viral Hepat	16(8)	586-94	2009
Oze T (平松)	Peginterferon alfa-2b affects early virologic response dose-dependently in patients with chronic hepatitis C genotype 1 during treatment with pegylated interferon alfa-2b plus ribavirin	J Viral Hepat	16(8)	578-85	2009
Kurokawa M (平松)	Effect of interferon alpha-2b plus ribavirin therapy on incidence of hepatocellular carcinoma in patients with chronic hepatitis C.	Hepatol Res	39(5)	432-8.	2009
Oze T (三田)	Reducing Peg-IFN doses causes later virologic response or no response in HCV genotype 1 patients treated with Peg-IFN alfa-2b plus ribavirin.	J Gastroenterol.	Nov 23. [Epub ahead of print]		2011
Kanto T (三田)	Dynamics of regulatory T cells and plasmacytoid dendritic cells as immune markers for virological response in pegylated interferon-α and ribavirin therapy for chronic hepatitis C patients.	J Gastroenterol.	Sep 27. [Epub ahead of print]		2011
Hiramatsu N (三田)	Efficacy of pegylated interferon plus ribavirin combination therapy for hepatitis C patients with normal ALT levels: a matched case-control study.	J Gastroenterol.	46	1335-43	2011
Oze T (三田)	Efficacy of re-treatment with pegylated interferon plus ribavirin combination therapy for patients with chronic hepatitis C in Japan.	J Gastroenterol.	46	1031-7	2011

Inoue Y （三田）	Factors affecting efficacy in patients with genotype 2 chronic hepatitis C treated by pegylated interferon alpha-2b and ribavirin: reducing drug doses has no impact on rapid and sustained virological responses.	J Viral Hepat.	17(5)	336-44	2010
Oze T （三田）	Indications and limitations for aged patients with chronic hepatitis C in pegylated interferon alfa-2b plus ribavirin combination therapy.	J Hepatol.	54	604-11	2011
Inoue Y （三田）	Amino acid substitution in the core protein has no impact on relapse in hepatitis C genotype 1 patients treated with peginterferon and ribavirin.	J Med Virol.	83	419-27	2011
三田英治 （三田）	C 型肝炎 Hepatitis C among HIV-infected patients.	HIV 感染症と AIDS の治療	2	37-42	2011
Ikura Y （三田）	Hepatocellular carcinomas can develop in simple fatty livers in the setting of oxidative stress.	Pathology.	43(2)	167-8	2011
Tatsumi T （三田）	Hepatitis C virus-specific $CD8^+$ T cell frequencies are associated with the responses of pegylated interferon-α and ribavirin combination therapy in patients with chronic hepatitis C virus infection.	Hepatol Res.	41(1)	30-8	2011
Tanaka Y （三田）	Genome-wide association of IL28B with response to pegylated interferon-alpha and ribavirin therapy for chronic hepatitis C.	Nat Genet.	41(10)	1105-9	2009
Hiramatsu N （三田）	Ribavirin dose reduction raises relapse rate dose-dependently in genotype 1 patients with hepatitis C responding to pegylated interferon alpha-2b plus ribavirin.	J Viral Hepat.	16(8)	586-94	2009
Oze T （三田）	Pegylated interferon alpha-2b (Peg-IFN alpha-2b) affects early virologic response dose-dependently in patients with chronic hepatitis C genotype 1 during treatment with Peg-IFN alpha-2b plus ribavirin.	J Viral Hepat.	16(8)	578-85	2009
Kurokawa M （三田）	Effect of interferon alpha-2b plus ribavirin therapy on incidence of hepatocellular carcinoma in patients with chronic hepatitis.	Hepatol Res.	39(5)	432-8	2009

Ⅴ．研究成果の刊行物・別刷

Supplemental Material can be found at:
http://www.jbc.org/content/suppl/2011/03/02/M110.195370.DC1.html

THE JOURNAL OF BIOLOGICAL CHEMISTRY VOL. 286, NO. 16, pp. 13905–13913, April 22, 2011
© 2011 by The American Society for Biochemistry and Molecular Biology, Inc. Printed in the U.S.A.

BH3-only Activator Proteins Bid and Bim Are Dispensable for Bak/Bax-dependent Thrombocyte Apoptosis Induced by Bcl-xL Deficiency

MOLECULAR REQUISITES FOR THE MITOCHONDRIAL PATHWAY TO APOPTOSIS IN PLATELETS[S]

Received for publication, October 21, 2010, and in revised form, February 17, 2011 Published, JBC Papers in Press, March 2, 2011, DOI 10.1074/jbc.M110.195370

Takahiro Kodama[‡1], Tetsuo Takehara[‡1,2], Hayato Hikita[‡], Satoshi Shimizu[‡], Minoru Shigekawa[‡], Wei Li[‡], Takuya Miyagi[‡], Atsushi Hosui[‡], Tomohide Tatsumi[‡], Hisashi Ishida[‡], Tatsuya Kanto[‡], Naoki Hiramatsu[‡], Xiao-Ming Yin[§], and Norio Hayashi[¶]

From the [‡]Department of Gastroenterology and Hepatology, Osaka University Graduate School of Medicine, Suita, Osaka 565-0871, Japan, [§]Department of Pathology and Laboratory Medicine, Indiana University School of Medicine, Indianapolis, Indiana 46202, and [¶]Kansai-Rosai Hospital, Amagasaki, Hyogo 660-8511, Japan

A pivotal step in the mitochondrial pathway of apoptosis is activation of Bak and Bax, although the molecular mechanism remains controversial. To examine whether mitochondrial apoptosis can be induced by just a lack of antiapoptotic Bcl-2-like proteins or requires direct activators of the BH3-only proteins including Bid and Bim, we studied the molecular requisites for platelet apoptosis induced by Bcl-xL deficiency. Severe thrombocytopenia induced by thrombocyte-specific Bcl-xL knock-out was fully rescued in a Bak and Bax double knock-out background but not with single knock-out of either one. In sharp contrast, deficiency of either Bid, Bim, or both did not alleviate thrombocytopenia in Bcl-xL knock-out mice. An *in vitro* study revealed that ABT-737, a Bad mimetic, induced platelet apoptosis in association with a conformational change of the amino terminus, translocation from the cytosol to mitochondria, and homo-oligomerization of Bax. ABT-737-induced Bax activation and apoptosis were also observed in Bid/Bim-deficient platelets. Human platelets, upon storage, underwent spontaneous apoptosis with a gradual decline of Bcl-xL expression despite a decrease in Bid and Bim expression. Apoptosis was attenuated in Bak/Bax-deficient or Bcl-xL-overexpressing platelets but not in Bid/Bim-deficient platelets upon storage. In conclusion, platelet lifespan is regulated by a fine balance between anti- and proapoptotic multidomain Bcl-2 family proteins. Despite residing in platelets, BH3-only activator proteins Bid and Bim are dispensable for Bax activation and mitochondrial apoptosis.

Platelets are unique blood cells that do not have a nucleus but contain mitochondria and have the daily job of handling hemostasis and thrombosis (1). They are produced from megakaryocytes and once released into circulation can function for about 10 days in humans and 4–5 days in mice (2). They are then thought to be destroyed by the reticuloendothelial system. Regarding the mechanism that controls their lifespan, several studies have observed a decrease in mitochondrial membrane potential, caspase activation, and phosphatidylserine exposure in platelets, leading to the conclusion that platelets undergo apoptotic cell death (3–5). It has been demonstrated that platelets contain several apoptosis-related proteins such as Bcl-2 family proteins and a variety of caspase family proteins (3–7). Recently, Mason *et al.* (8) reported that knock-out of a single allele of the *bcl-x* gene results in mild thrombocytopenia, which is ameliorated in a Bak knock-out background. We have also reported previously that thrombocyte-specific homozygous Bcl-xL knock-out mice show marked thrombocytopenia (9). These findings established the critical role of Bcl-2 family proteins in regulating platelet apoptosis and lifespan. Platelets may be the simplest model for the study of Bcl-2 biology with physiological relevance because they neither perform *de novo* protein synthesis nor undergo proliferation.

The proapoptotic multidomain Bcl-2 family proteins Bak and Bax serve as effector molecules for the mitochondrial pathway of apoptosis. Upon activation, they form pores by homo-oligomerization at the mitochondrial outer membrane through which apoptogenic factors such as cytochrome *c* are released into the cytosol (10). Currently, three models for regulation of Bak/Bax-dependent mitochondrial apoptosis by Bcl-2 family proteins have been proposed (11–15). One, referred to as the indirect model or displacement model, argues that Bak and Bax are constitutively active and are neutralized by binding to at least one or more antiapoptotic members of the multidomain Bcl-2 family proteins including Bcl-2, Bcl-xL, Mcl-1, Bcl-w, and Bfl-1/A1. BH3[3]-only proteins such as Bad, Bid, Bim, Noxa, and Puma bind to the antiapoptotic Bcl-2 proteins to unleash Bak and Bax (15). The second model, referred to as the direct model, argues that Bak and Bax are inactive by default and require activator proteins to function. Among BH3-only proteins, Bid and Bim are classified as activator proteins with the others

[S] The on-line version of this article (available at http://www.jbc.org) contains supplemental Fig. 1.

[1] Both authors contributed equally to this work and share first authorship.

[2] To whom correspondence should be addressed: Dept. of Gastroenterology and Hepatology, Osaka University Graduate School of Medicine, 2-2 Yamadaoka, Suita, Osaka 565-0871, Japan. Tel.: 81-6-6879-3621; Fax: 81-6-6879-3629; E-mail: takehara@gh.med.osaka-u.ac.jp.

[3] The abbreviations used are: BH3, Bcl-2 homology domain 3; Pf4, platelet factor 4; MTS, 3-(4,5-dimethylthiazol-2-yl)-5-(3-carboxymethoxyphenyl)-2-(4-sulfophenyl)-2*H*-tetrazolium.

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

classified as sensitizer proteins because only Bid and Bim have been demonstrated to directly activate Bak and Bax (16, 17). In this model, Bid and Bim are sequestered by the antiapoptotic Bcl-2 family proteins, and the sensitizer BH3-only proteins bind to the antiapoptotic Bcl-2 proteins to liberate Bid and Bim so they can directly engage Bak and Bax (14). The third model, referred to as the embedded together model, argues that BH3-only activator proteins can recruit not only Bax but also antiapoptotic Bcl-2 proteins to mitochondrial membranes. Although membrane-bound Bax can form oligomers, membrane-bound antiapoptotic Bcl-2 proteins function as a dominant-negative Bax by competitively binding to Bax (12, 18).

In the physiological setting, genetic studies have revealed a functional relationship between BH3-only activator proteins and multidomain Bcl-2 family proteins. For instance, fatal polycystic kidney disease and lymphopenia caused by loss of Bcl-2 are ameliorated in a Bim knock-out background (19). Similarly, we reported previously that spontaneous hepatocyte apoptosis caused by hepatocyte-specific deficiency of Bcl-xL or Mcl-1 is alleviated by Bid deficiency (20, 21). These studies indicated that Bid or Bim is apparently involved in apoptotic phenotypes induced by lack of an antiapoptotic Bcl-2 family protein. However, it had not been established whether or not these direct activators are required for Bak/Bax activation, leading to mitochondrial apoptosis.

In the present study, we explored the molecular requisites for platelet apoptosis induced by Bcl-xL deficiency. We observed complete recovery from severe thrombocytopenia in Bcl-xL knock-out mice with a Bak and Bax double knock-out background, confirming that Bcl-xL deficiency causes apoptotic cell death through a Bak/Bax-dependent mitochondrial apoptosis machinery. Deficiency of either Bid, Bim, or both did not alleviate thrombocytopenia in Bcl-xL knock-out mice. An *in vitro* study revealed that pharmacological inhibition of antiapoptotic Bcl-2 family proteins sufficiently activated Bax protein to cause apoptosis even in Bid/Bim-deficient platelets. Our current study indicates that Bak/Bax can be activated by neutralization of antiapoptotic Bcl-2 family proteins for the execution of apoptotic cell death without involvement of the BH3-only direct activator proteins Bid and Bim in specific cellular contexts.

EXPERIMENTAL PROCEDURES

Mice—Mice carrying a *bcl-x* gene with two *lox*P sequences at the promoter region and a second intron ($bcl\text{-}x^{flox/flox}$) (22) and heterozygous *pf4-Cre* transgenic mice expressing the Cre recombinase gene under the regulation of the promoter of the platelet factor 4 gene (23) have been described previously. Thrombocyte-specific Bcl-xL knock-out mice ($bcl\text{-}x^{flox/flox}$ *pf4-Cre*) (9) and systemic Bid knock-out mice (24) also have been described previously. We purchased C57BL/6J mice from Charles River (Osaka, Japan) and systemic Bim knock-out mice, systemic Bak knock-out mice, systemic Bax knock-out mice, and conditional Bak/Bax double knock-out mice ($bak^{-/-}bax^{flox/flox}$) from The Jackson Laboratory (Bar Harbor, ME). We generated thrombocyte-specific Bcl-xL/Bid double knock-out mice ($bid^{-/-}bcl\text{-}x^{flox/flox}$ *pf4-Cre*), Bcl-xL/Bim double knock-out mice ($bim^{-/-}bcl\text{-}x^{flox/flox}$ *pf4-Cre*), Bcl-xL/Bid/Bim triple knock-out mice ($bid^{-/-}bim^{-/-}bcl\text{-}x^{flox/flox}$ *pf4-Cre*), Bcl-xL/Bak double knock-out mice ($bak^{-/-}bcl\text{-}x^{flox/flox}$ *pf4-Cre*), Bcl-xL/Bax double knock-out mice ($bax^{-/-}bcl\text{-}x^{flox/flox}$ *pf4-Cre*), Bcl-xL/Bak/Bax triple knock-out mice ($bak^{-/-}bax^{flox/flox}$ $bcl\text{-}x^{flox/flox}$ *pf4-Cre*), and Bak/Bax double knock-out mice ($bak^{-/-}bax^{flox/flox}$ *pf4-Cre*) by mating the strains. We also generated systemic Bid/Bim double knock-out mice ($bid^{-/-}bim^{-/-}$) by mating the strains. Heterozygous *HA-hBcl-xL* transgenic mice expressing human Bcl-xL gene under the regulation of the CAG promoter were generated according to a procedure described previously (25) using a hemagglutinin-tagged human bcl-xL expression plasmid, $pcDNA_3HAbcl\text{-}xL$ (26). Mice were maintained in a specific pathogen-free facility and treated with humane care under approval from the Animal Care and Use Committee of Osaka University Medical School.

Hematological Analyses—Blood was collected from the inferior vena cava of mice. Complete blood cell counts were determined using an automated cell counter (Sysmex, Kobe, Japan).

Platelet Isolation, Storage, and Preparation of Lysates—Platelets were isolated as described previously (9). Briefly, whole blood collected from mice or healthy donors was mixed with ¼ volume of citrate-phosphate-dextrose (Sigma-Aldrich). Platelet-rich plasma was obtained by centrifugation at $100 \times g$ for 15 min at room temperature without braking. To avoid mechanical aggregation of platelets by centrifugation, platelet-rich plasma was incubated with 1 μM prostaglandin E_1 (Sigma-Aldrich) and 1 unit/ml apyrase (Sigma-Aldrich) (27). Next, platelets were isolated by centrifugation at $200 \times g$ at room temperature for 15 min. Washed platelets were resuspended in modified Tyrode's buffer (5 mM HEPES, 137 mM NaCl, 2.7 mM KCl, 0.4 mM $NaH_2PO_4 \cdot 2H_2O$, 2.8 mM dextrose, pH 7.4) and left standing for 30 min before use. In some experiments, platelet-rich plasma or platelet suspension was stored under continuous gentle agitation in an incubator at 25 °C for the indicated time. For preparation of cell lysates, the platelet pellet was obtained by centrifugation at $200 \times g$ at room temperature for 10 min after incubation with 1 μM prostaglandin E_1 (Sigma-Aldrich) for 10 min and lysed in lysis buffer (1% Nonidet P-40, 0.5% sodium deoxycholate, 0.1% sodium dodecyl sulfate, 1× protease inhibitor mixture (Nacalai Tesque, Kyoto, Japan), 1× phosphatase inhibitor mixture (Nacalai Tesque), phosphate-buffered saline, pH 7.4) unless otherwise indicated. The platelet lysates were cleared by centrifugation at $10,000 \times g$ at 4 °C for 15 min. Protein concentrations were determined using a bicinchoninic acid protein assay kit (Pierce). We confirmed that incubation with prostaglandin E_1 did not affect the caspase-3/7 activity of isolated platelet supernatant (data not shown).

In Vitro ABT-737 Experiment—ABT-737, provided by Abbott Laboratories (Abbott Park, IL), was dissolved with DMSO. Platelets were treated with 10 μM ABT-737 or DMSO for the indicated times.

3-(4,5-Dimethylthiazol-2-yl)-5-(3-carboxymethoxyphenyl)-2-(4-sulfophenyl)-2H-tetrazolium (MTS) Assay—The MTS assay is a colorimetric assay for measuring the ability of living cells to reduce the uncolored MTS substrate to purple formazan. In platelets, this activity is directly related to cellular viability (4, 5). The MTS assay was performed with a cell proliferation kit (CellTiter 96 AQ_{ueous}, Promega, Tokyo, Japan) according to the manufacturer's protocol. Upon addition of

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

MTS solution, the reaction plate was incubated at 37 °C for 4 h, and then the absorbance was read at 490 nm with a plate reader (Bio-Rad).

Caspase-3/7 Activity—Serum or platelet supernatant caspase-3/7 activity was measured with a luminescent substrate assay for caspase-3 and caspase-7 (Caspase-Glo assay, Promega) according to the manufacturer's protocol.

Western Blot Analysis—Equal amounts of protein lysates were electrophoretically separated using SDS-PAGE and transferred onto PVDF membrane unless otherwise indicated. For immunodetection, the following antibodies were used: rabbit polyclonal antibody to Bcl-xL (Santa Cruz Biotechnology, Santa Cruz, CA), rabbit polyclonal antibody to Bid, rabbit polyclonal antibody to Bax, rabbit polyclonal antibody to cleaved caspase-3, rabbit polyclonal antibody to Bim, rabbit polyclonal antibody to Puma, rabbit polyclonal antibody to Bcl-2, rabbit polyclonal antibody to Bcl-w, rabbit polyclonal antibody to cytochrome c oxidase IV (Cell Signaling Technology, Beverly, MA), rabbit polyclonal antibody to Bak, rabbit polyclonal antibody to Bax (Millipore, Billerica, MA), rabbit polyclonal antibody to GAPDH (Trevigen, Gaithersburg, MD), rabbit polyclonal antibody to Bim (Assay Designs, Ann Arbor, MI), and mouse monoclonal antibody to β-actin (Sigma-Aldrich).

Isolation of Mitochondria-rich and Cytosolic Fractions—Platelet homogenates were prepared by repeated freeze-and-thaw methods (28). Briefly, platelets in isolation buffer (225 mM mannitol, 75 mM sucrose, 0.1 mM EGTA, 1 mg/ml fatty acid-free BSA, 10 mM HEPES-KOH, 1× proteinase inhibitor mixture, 1× phosphatase inhibitor mixture, pH 7.4) were frozen in liquid nitrogen for 1 min and then thawed at 37 °C for 3 min. This freeze-and-thaw sequence was repeated for two more cycles, and then the samples were centrifuged at 700 × *g* for 10 min at 4 °C. The supernatant was further centrifuged at 15,000 × *g* for 10 min at 4 °C. The pellet was regarded as the mitochondria-rich fraction, and the supernatant was the cytosolic fraction.

Immunoprecipitation—Platelets (1.0×10^8) were lysed in HNC buffer (25 mM HEPES/Na, 300 mM NaCl, 2% CHAPS, 1× protease inhibitor mixture, 1× phosphatase inhibitor mixture, pH 7.5) and immunoprecipitated using mouse monoclonal antibody to Bax (clone 6A7) (Abcam, Cambridge, MA) with an immunoprecipitation kit (Dynabeads Protein G, Invitrogen). Control immunoprecipitations were performed using mouse control IgG (Abcam).

Detection of Bax Oligomerization—Bax oligomerization was detected as described previously (29). Briefly, 5.0×10^7 platelets were lysed with HNC buffer. Next, ~50 mg of platelet lysates was incubated with 5 mM bismaleimidohexane (Pierce) and 5 mM bis(sulfosuccinimidyl) suberate (Pierce) for 30 min at room temperature. To quench cross-linkers, the lysates were incubated with 100 mM Tris-HCl, pH 7.5 for 15 min at room temperature. Bax oligomers were detected by Western blot using rabbit polyclonal antibody to Bax (Cell Signaling Technology).

Statistical Analysis—All data are expressed as mean ± S.D. Statistical analyses were performed by unpaired Student's *t* test or by one-way analysis of variance. When analyses of variance were applied, differences in the mean values among the groups were examined by Scheffe post hoc correction. $p < 0.01$ was considered statistically significant.

RESULTS

Thrombocytopenia Induced by Bcl-xL Deficiency Is Dependent on Proapoptotic Effector Proteins Bax and Bak—Previous research has reported that the mild thrombocytopenia caused by heterozygous Bcl-xL knock-out is prevented in a Bak knock-out background (8). We therefore first examined whether the severe thrombocytopenia seen in the thrombocyte-specific homozygous Bcl-xL knock-out mice (9) could also be prevented by loss of Bak. Bcl-xL and Bak double knock-out mice were generated by mating thrombocyte-specific Bcl-xL knock-out mice and systemic Bak knock-out mice. Bcl-xL and Bak double knock-out mice were born at the expected Mendelian frequency, but unexpectedly, their platelet count did not show any difference from that of the thrombocyte-specific Bcl-xL knock-out mice (Fig. 1*A*). Among Bcl-2 family proteins, not only Bak but Bax is also a well recognized proapoptotic effector protein. Therefore, we next generated Bcl-xL and Bax double knock-out mice by mating thrombocyte-specific Bcl-xL knock-out mice and systemic Bax knock-out mice. Bcl-xL and Bax double knock-out mice were also born at the expected Mendelian frequency, and their platelet count also was not different from that of the thrombocyte-specific Bcl-xL knock-out mice (Fig. 1*B*). To investigate whether the Bak/Bax-dependent mitochondrial apoptotic pathway is actually involved in thrombocytopenia caused by Bcl-xL deficiency, we generated Bcl-xL, Bak, and Bax triple knock-out mice by mating Bcl-xL and Bak double knock-out mice with thrombocyte-specific Bax knock-out mice because systemic Bak and Bax double knock-out mice usually die as neonates (30). Triple knock-out mice were born at the expected Mendelian frequency and did not show any protein expression of Bcl-xL, Bak, and Bax in their platelets on examination by Western blotting (Fig. 1*C*). The platelet count of the triple knock-out mice was almost normal and not significantly different from that of systemic Bak knock-out mice, which served as a control for this mating (Fig. 1*D*). These findings clearly demonstrated that the severe thrombocytopenia induced by thrombocyte-specific Bcl-xL knock-out was fully dependent on Bak/Bax. Serum caspase-3/7 activity, monitored by specific cleavage of the Ac-DEVD-*p*-nitroanilide substrate, was significantly higher in thrombocyte-specific Bcl-xL knock-out mice than control littermates (Fig. 1*E*), suggesting platelet apoptosis in the knock-out mice. Caspase activation in the Bcl-xL knock-out mice was not alleviated in a Bak knock-out background (Fig. 1*E*) but was diminished with a Bak and Bax double knock-out background (Fig. 1*F*), suggesting that Bcl-xL deficiency caused platelet apoptosis through a Bak/Bax-dependent mitochondrial pathway. These results also implied that either Bak or Bax was sufficient to induce apoptosis in Bcl-xL-deficient platelets.

ABT-737 Treatment Provokes Bak/Bax-dependent Apoptosis in Platelets—To investigate the molecular mechanisms of Bak/Bax-dependent platelet apoptosis provoked by a lack of antiapoptotic Bcl-2 proteins, we conducted an *in vitro* study using ABT-737, a Bad mimetic, which antagonizes the antiapoptotic function of Bcl-xL, Bcl-2, and Bcl-w by binding to the hydro-

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

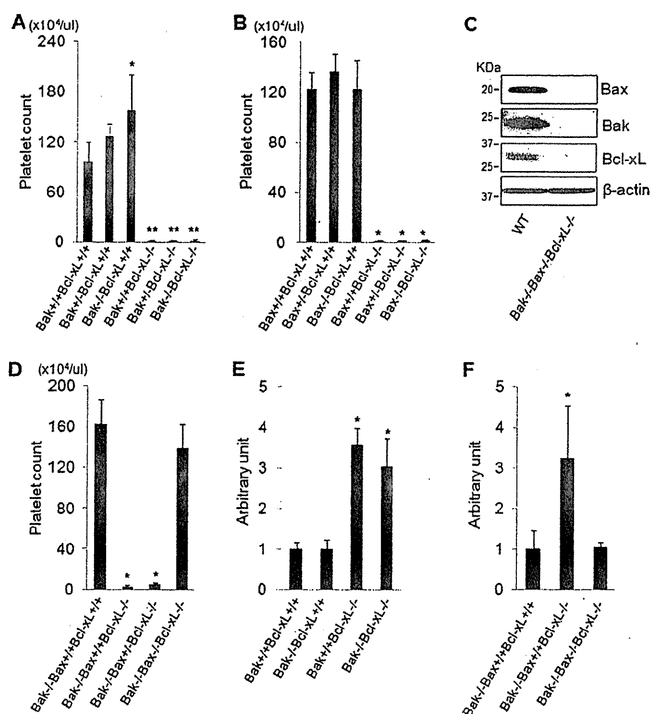


FIGURE 1. **Thrombocytopenia induced by Bcl-xL deficiency is dependent on Bcl-2 effector proteins Bak and Bax.** *Bcl-xL+/+* and *Bcl-xL−/−* stand for *bcl-x$^{flox/flox}$* without *pf4-Cre* and *bcl-x$^{flox/flox}$* with *pf4-Cre*, respectively. *Bak+/+*, *Bak+/−*, and *Bak−/−* stand for *bak$^{+/+}$*, *bak$^{+/-}$*, and *bak$^{-/-}$*, respectively. *WT* stands for wild type. *A*, platelet counts of the offspring from mating of *bak$^{+/-}$bcl-x$^{flox/flox}$pf4-Cre* mice and *bak$^{+/-}$bcl-x$^{flox/flox}$* mice (more than four mice per group; *, $p < 0.01$ *versus* all other groups; **, $p < 0.01$ *versus* Bcl-xL+/+ groups). *B*, platelet counts of the offspring from mating of *bax$^{+/-}$bcl-x$^{flox/flox}$pf4-Cre* mice and *bax$^{+/-}$bcl-x$^{flox/flox}$* mice (more than five mice per group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups). *Bax+/+*, *Bax+/−*, and *Bax−/−* stand for *bax$^{+/+}$*, *bax$^{+/-}$*, and *bax$^{-/-}$*, respectively. *C*, Western blot of platelet lysates for the expression of Bcl-xL, Bak, and Bax. *D*, platelet counts of the offspring from mating of *bak$^{-/-}$bax$^{flox/+}$bcl-x$^{flox/flox}$pf4-Cre* mice and *bak$^{-/-}$bax$^{flox/+}$bcl-x$^{flox/flox}$* mice (more than eight mice per group; *, $p < 0.01$ *versus* Bak−/−Bax+/+Bcl-xL+/+ group and Bak−/−Bax−/−Bcl-xL−/− group. *Bax+/+*, *Bax+/−*, and *Bax−/−* stand for *bax$^{+/+}$*, *bax$^{flox/+}$* with *pf4-Cre*, and *bax$^{flox/flox}$* with *pf4-Cre*, respectively. *E*, serum caspase-3/7 activity of the offspring from mating of *bak$^{+/-}$bcl-x$^{flox/flox}$ pf4-Cre* mice and *bak$^{+/-}$bcl-x$^{flox/flox}$* mice (n = 5 or 6/group; *, $p < 0.01$ *versus* Bcl-xL+/+ group). *F*, serum caspase-3/7 activity of the offspring from mating of *bak$^{-/-}$bax$^{flox/+}$bcl-x$^{flox/flox}$pf4-Cre* mice and *bak$^{-/-}$bax$^{flox/+}$bcl-x$^{flox/flox}$* mice (n = 8/group; *, $p < 0.01$ *versus* all). *Bax+/+*, *Bax+/−*, and *Bax−/−* stand for *bax$^{+/+}$*, *bax$^{flox/+}$* with *pf4-Cre*, and *bax$^{flox/flox}$* with *pf4-Cre*, respectively.

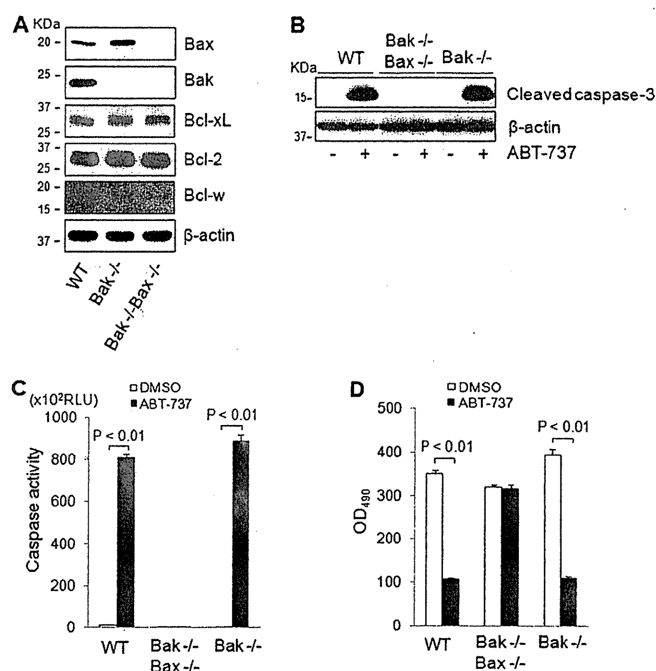


FIGURE 2. **ABT-737 treatment provokes Bak/Bax-dependent apoptosis in platelets.** *WT*, *Bak−/−Bax−/−*, and *Bak−/−* stand for wild type, *bak−/−bax$^{flox/flox}$* with *pf4-Cre*, and *bak−/−*, respectively. *A*, Western blot of platelet lysates for the expression of Bak, Bax, Bcl-xL, Bcl-2, and Bcl-w. *B*, platelets (3.0×10^7) were incubated with 10 μM ABT-737 or vehicle for 2 h at room temperature. A Western blot of platelet lysates for the expression of cleaved caspase-3 is shown. *C* and *D*, platelets (2.0×10^6) were incubated with 10 μM ABT-737 or vehicle for 2 h at room temperature. *C*, caspase-3/7 activity of platelet supernatant (n = 4/group). *D*, MTS assay (n = 5/group). *RLU*, relative light units.

phobic groove of these proteins (31). Western blot revealed that these antiapoptotic Bcl-2 proteins existed in platelets (Fig. 2*A*), and ABT-737 has already been reported to cause apoptosis in platelets in both *in vivo* and *in vitro* settings (7, 8). We first examined whether ABT-737-induced platelet apoptosis was executed via the Bak/Bax-dependent mitochondrial pathway. In platelets isolated from wild-type mice, administration of ABT-737 caused cleavage of caspase-3 (Fig. 2*B*). Supernatants of ABT-737-treated platelets showed marked elevation of caspase-3/7 activity (Fig. 2*C*). In addition, platelet cellular viability, which can be assessed by MTS assay (3, 4), decreased upon ABT-737 treatment (Fig. 2*D*). On the other hand, although expression of targeted antiapoptotic Bcl-2 proteins was not different between platelets from wild-type mice and Bak/Bax double knock-out mice (Fig. 2*A*), ABT-737 treatment neither caused caspase activation nor impaired cellular integrity in Bak/Bax-deficient platelets (Fig. 2, *B*–*D*). These findings demonstrated that ABT-737 caused platelet apoptosis via the Bak/Bax-dependent mitochondrial pathway. Interestingly, unlike what was reported previously (8), Bak deficiency could alleviate neither caspase activation nor loss of cellular viability in ABT-737-treated platelets (Fig. 2, *B*–*D*), offering evidence of the redundancy of Bak and Bax proteins in executing apoptosis in platelets under inhibition of these antiapoptotic Bcl-2 proteins.

ABT-737 Treatment Causes Bax Activation in Platelets—After ABT-737 treatment of the platelets, we next examined the activation status of the Bax protein in these platelets. In general, Bax activation is divided into sequential steps. When subjected to a variety of apoptotic stimuli, the Bax protein first undergoes a conformational change such as exposure of the amino terminus. This active form is translocated from the cytosol to the mitochondria. Finally, mitochondrial Bax undergoes self-oligomerization, leading to permeabilization of the outer mitochondrial membrane (32). We found that upon addition of ABT-737 to platelets the Bax protein underwent a conformational change as demonstrated by Western blotting upon immunoprecipitation with an antibody that specifically recognizes the amino terminus of the Bax protein (33) (Fig. 3*A*). In addition, upon ABT-737 treatment, the Bax protein was translocated from the cytosol to the mitochondria (Fig. 3*B*) and then underwent homo-oligomerization (Fig. 3*C*). These findings indicated that inhibition of antiapoptotic Bcl-2 proteins in

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

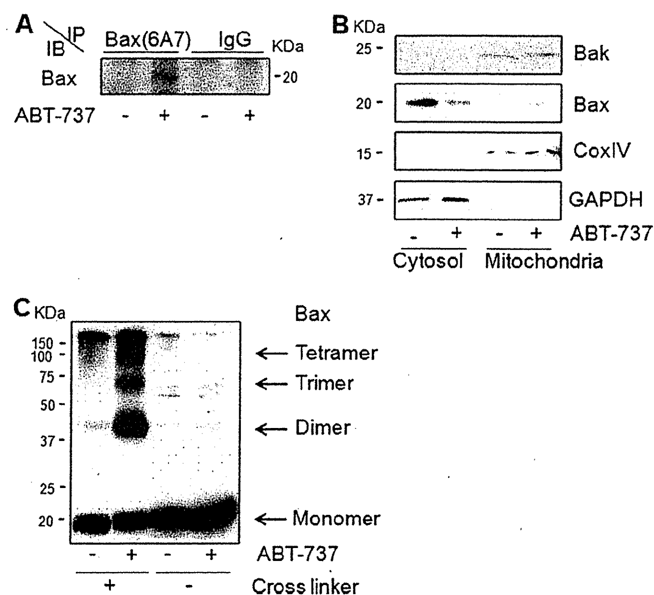


FIGURE 3. **ABT-737 treatment causes Bax activation in platelets.** *A–C*, platelets (1.0 × 10^{8}) isolated from C57BL/6J mice were incubated with 10 μM ABT-737 or vehicle for 2 h at room temperature. *A*, Western blot of platelet lysates for the expression of Bax after immunoprecipitation (*IP*) using mouse antibody that specifically recognizes activated Bax (6A7) or mouse control IgG (active Bax exposes an amino-terminal epitope (amino acids 12–24) that is recognized by 6A7). *B*, Western blot for the expression of Bak, Bax, *CoxIV* (cytochrome c oxidase IV), and GAPDH after cellular fractionation of the platelet lysates. *C*, Western blot for the expression of Bax after incubation of the platelet lysates with or without protein cross-linkers (5 mM bismaleimidohexane and 5 mM bis(sulfosuccinimidyl) suberate). *IB*, immunoblot.

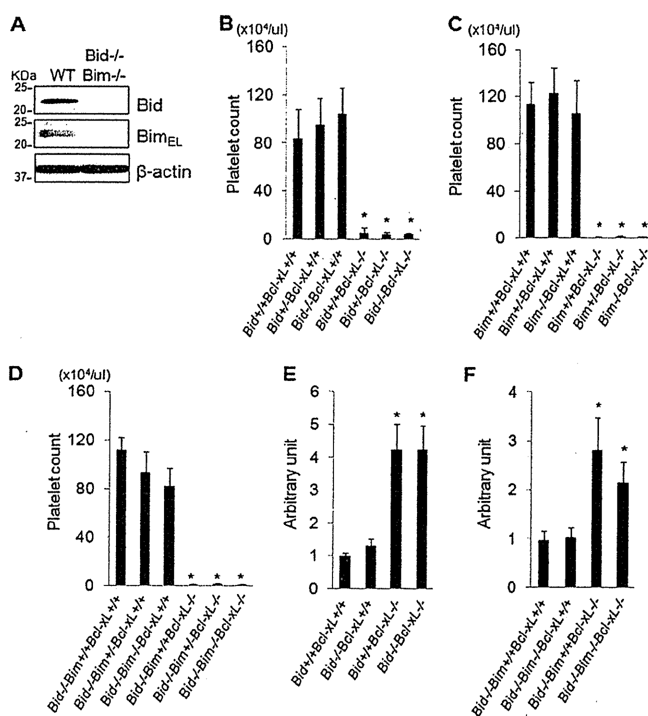


FIGURE 4. **Thrombocytopenia induced by Bcl-xL deficiency does not require BH3-only activator proteins Bid and Bim.** *Bcl-xL+/+* and *Bcl-xL−/−* stand for *bcl-x$^{flox/flox}$* without *pf4-Cre* and *bcl-x$^{flox/flox}$* with *pf4-Cre*, respectively. *Bid+/+*, *Bid+/−*, and *Bid−/−* stand for *bid$^{+/+}$*, *bid$^{+/-}$*, and *bid$^{-/-}$*, respectively. *Bim+/+*, *Bim+/−*, and *Bim−/−* stand for *bim$^{+/+}$*, *bim$^{+/-}$*, and *bim$^{-/-}$*, respectively. *WT* and *Bid−/−Bim−/−* stand for wild type and *bid$^{-/-}$bim$^{-/-}$*, respectively. *A*, Western blot of platelet lysates for the expression of Bid and Bim$_{EL}$. *B*, platelet counts of the offspring from mating of *bid$^{+/-}$bcl-x$^{flox/flox}$ pf4-Cre* mice and *bid$^{+/-}$bcl-x$^{flox/flox}$* mice (more than five mice per group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups). *C*, platelet counts of the offspring from mating of *bim$^{+/-}$bcl-x$^{flox/flox}$ pf4-Cre* mice and *bim$^{+/-}$bcl-x$^{flox/flox}$* mice (more than seven mice per group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups). *D*, platelet counts of the offspring from mating of *bid$^{-/-}$bim$^{+/-}$bcl-x$^{flox/flox}$ pf4-Cre* mice and *bid$^{-/-}$bim$^{+/-}$bcl-x$^{flox/flox}$* mice (more than five mice per group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups). *E*, serum caspase-3/7 activity of the offspring from mating of *bid$^{+/-}$bcl-x$^{flox/flox}$pf4-Cre* mice and *bid$^{+/-}$bcl-x$^{flox/flox}$* mice (n = 4–6/group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups). *F*, serum caspase-3/7 activity of the offspring from mating of *bid$^{-/-}$bim$^{+/-}$bcl-x$^{flox/flox}$ pf4-Cre* mice and *bid$^{-/-}$bim$^{+/-}$bcl-x$^{flox/flox}$* mice (n = 4–6/group; *, $p < 0.01$ *versus* Bcl-xL+/+ groups).

platelets caused Bax activation, promoting Bak/Bax-dependent mitochondrial apoptosis followed by caspase activation.

Thrombocytopenia Induced by Bcl-xL Deficiency Does Not Require BH3-only Activator Proteins Bid and Bim—We explored whether Bak/Bax-dependent platelet apoptosis induced by Bcl-xL deficiency requires the direct activator proteins Bid and Bim. Western blot revealed that Bid and Bim were both present in platelets (Fig. 4*A*). We generated Bcl-xL/Bid double knock-out mice and Bcl-xL/Bim double knock-out mice by mating thrombocyte-specific Bcl-xL knock-out mice with systemic Bid knock-out mice or Bim knock-out mice, respectively. These double knock-out mice showed massive thrombocytopenia that was not alleviated at all compared with that of thrombocyte-specific Bcl-xL knock-out mice (Fig. 4, *B* and *C*). It was possible that, in Bcl-xL-deficient platelets, the existence of either Bid or Bim was sufficient to activate Bak/Bax directly, leading to platelet apoptosis in these double knock-out mice. We then generated Bcl-xL, Bid, and Bim triple knock-out mice by mating Bcl-xL/Bid double knock-out mice with Bcl-xL/Bim double knock-out mice. These triple knock-out mice still showed massive thrombocytopenia without any difference of platelet count compared with that of Bcl-xL/Bid double knock-out mice (Fig. 4*D*). These findings clearly demonstrated that BH3-only activator proteins Bid and Bim were dispensable for the severe thrombocytopenia induced by thrombocyte-specific Bcl-xL deletion *in vivo*. In addition, caspase activation in thrombocyte-specific Bcl-xL knock-out mice was not alleviated even in the Bid and Bim double knock-out background (Fig. 4, *E* and *F*), suggesting that the lack of Bcl-xL required neither Bid nor Bim to trigger Bak/Bax-dependent platelet apoptosis.

Bax Activation and Subsequent Apoptotic Cell Death Provoked by ABT-737 Can Proceed in Absence of Bid and Bim—To investigate whether Bax can be activated by inhibition of antiapoptotic Bcl-2 proteins even in the absence of Bid and Bim, we isolated platelets from Bid and Bim double knock-out mice. A Western blot study confirmed that neither Bid nor Bim existed in platelets of the double knock-out mice (Fig. 4*A*) and showed that Puma protein, another putative direct activator (13), was not detected in platelets of either wild-type mice or Bid/Bim double knock-out mice (Fig. 5*A*). The expression of antiapoptotic Bcl-2 proteins including Bcl-xL, Bcl-2, and Bcl-w was unchanged between these mice (Fig. 5*A*). Upon ABT-737 treatment, the Bax protein in Bid/Bim-deficient platelets could undergo conformational change (Fig. 5*B*), translocation from the cytosol to the mitochondria (Fig. 5*C*), and homo-oligomerization (Fig. 5*D*). These results clearly demonstrated that ABT-

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

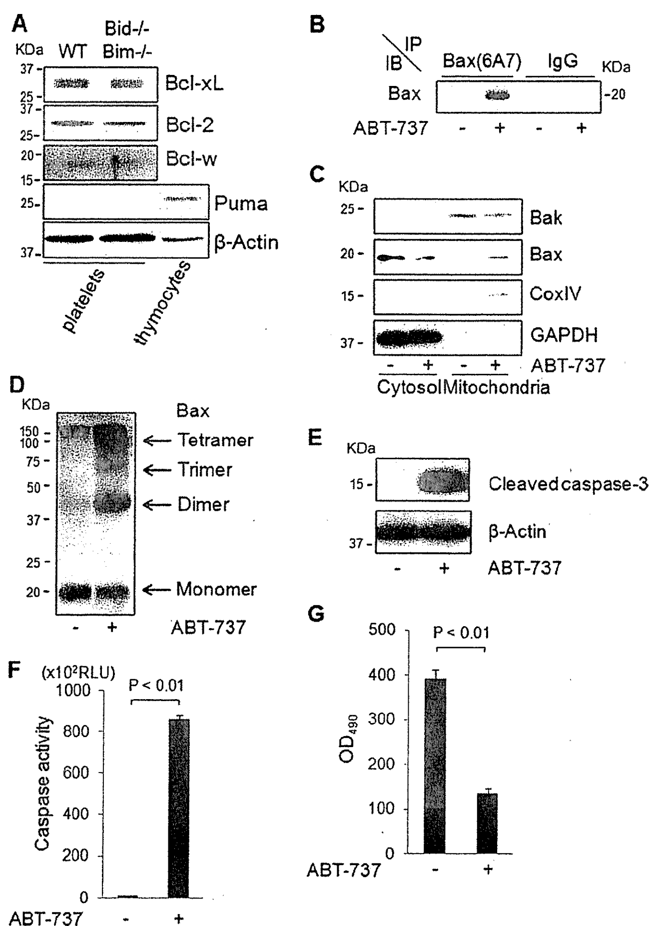


FIGURE 5. **Bax activation and subsequent apoptotic cell death provoked by Bcl-xL deficiency can proceed in absence of Bid and Bim.** *A*, Western blot of platelet lysates for the expression of Puma, Bcl-2, Bcl-w, and Bcl-xL. *WT* and *Bid−/−Bim−/−* stand for wild type and $bid^{-/-}bim^{-/-}$, respectively. *B–E*, platelets (1.0 × 10^8) isolated from Bid/Bim double knock-out mice were incubated with 10 μM ABT-737 or vehicle for 2 h at room temperature. *B*, Western blot for the expression of Bax after immunoprecipitation (*IP*) using mouse antibody that specifically recognizes activated Bax (6A7) or mouse control IgG. *C*, Western blot for the expression of Bak, Bax, *CoxIV* (cytochrome c oxidase IV), and GAPDH after cellular fractionation of the platelet lysates. *D*, Western blot for the expression of Bax after incubation of the platelet lysates with protein cross-linkers (5 mM bismaleimidohexane and 5 mM bis(sulfosuccinimidyl) suberate). *E*, Western blot of platelet lysates for the expression of cleaved caspase-3. *F* and *G*, platelets (2.0 × 10^6) isolated from Bid/Bim double knock-out mice were incubated with 10 μM ABT-737 or vehicle for 2 h at room temperature. *F*, caspase-3/7 activity of platelet supernatant (n = 4/group). *G*, MTS assay (n = 5/group). *IB*, immunoblot; *RLU*, relative light units.

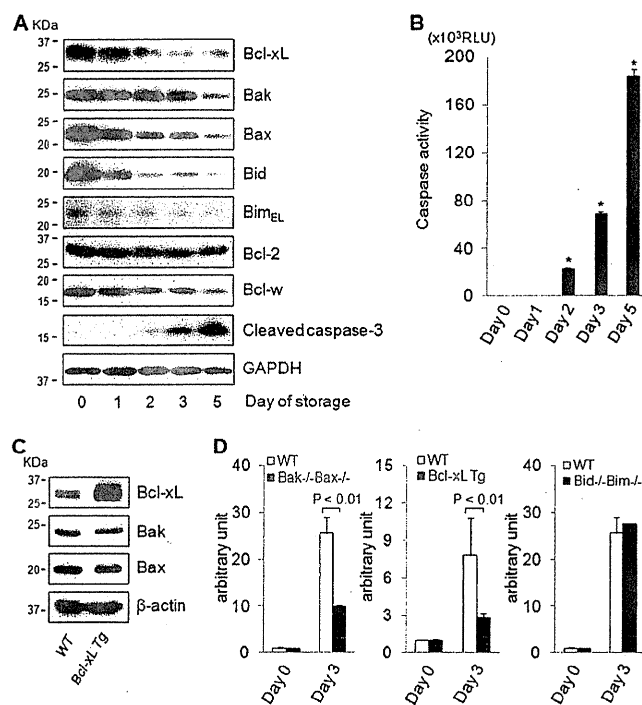


FIGURE 6. **Spontaneous apoptotic cell death in stored platelets occurs with decline of Bcl-xL despite decrease in Bid and Bim.** *A* and *B*, platelet-rich plasma derived from a healthy volunteer was stored for the indicated time course. *A*, Western blot of stored platelet lysates for the expression of Bcl-xL, Bak, Bax, Bid, Bim_{EL}, Bcl-w, Bcl-2, cleaved caspase-3, and GAPDH. Equal numbers of platelets were loaded per sample. *B*, caspase-3/7 activity of supernatant derived from platelet-rich plasma (n = 4/group; *, $p < 0.01$ *versus* all other groups). *C*, Western blot of platelet lysates derived from Bcl-xL transgenic mice for the expression of Bcl-xL, Bak, and Bax. *WT* and *Bcl-xL Tg* stand for wild-type mice and Bcl-xL transgenic mice, respectively. *D*, platelets derived from C57BL/6J mice, Bak/Bax double knock-out mice, Bcl-xL transgenic mice, and Bid/Bim double knock-out mice were stored for the indicated time course. Caspase-3/7 activity of stored platelet supernatant was assessed and is presented as the -fold induction compared with freshly isolated platelet supernatant (n = 4/group). *WT*, *Bak−/−Bax−/−*, and *Bid−/−Bim−/−* stand for wild-type, $bak^{-/-}bax^{flox/flox}$ with *pf4-Cre*, and $bid^{-/-}bim^{-/-}$ mice, respectively. *Bcl-xL Tg* stands for Bcl-xL transgenic mice. *RLU*, relative light units.

737-induced Bax activation did not require the direct activator proteins Bid and Bim. Upon ABT-737 treatment of Bid/Bim-deficient platelets, cleavage of caspase-3 and elevation of caspase-3/7 activity were both observed (Fig. 5, *E* and *F*), and the MTS assay demonstrated that platelet cellular viability was also impaired (Fig. 5*G*). These findings indicated that Bid and Bim were dispensable for Bak/Bax-dependent platelet apoptosis provoked by inhibition of antiapoptotic Bcl-2 proteins.

Spontaneous Apoptotic Cell Death in Stored Human Platelets Occurs with Decline of Bcl-xL Despite Decrease in Bid and Bim—In stored human platelets, phosphatidylserine exposure increases with caspase-3 activation (4, 5), which leads to spontaneous platelet apoptosis, but the exact molecular mechanism of this process remains elusive. This led us to examine the profile of Bcl-2 family proteins in human platelets during the course of storage. In stored platelets, cleaved caspase-3 gradually increased (Fig. 6*A*) and caspase-3/7 activity rose simultaneously (Fig. 6*B*), indicating that the platelets steadily underwent apoptotic cell death with storage time. Regarding the Bcl-2 family protein profile, although expression of Bcl-xL and Bax proteins gradually decreased with time, the decrease in Bak expression occurred at a later time point (Fig. 6*A*). As for BH3-only direct activator proteins, Bid and Bim expression also decreased with time (Fig. 6*A*). To examine the involvement of Bcl-2 family proteins in spontaneous apoptosis in stored platelets, caspase-3/7 activity was measured in platelets from wild-type mice, Bak/Bax double knock-out mice, Bcl-xL transgenic mice, and Bid/Bim double knock-out mice upon storage. A Western blot revealed that Bcl-xL protein increased in platelets isolated from Bcl-xL transgenic mice compared with wild-type mice, whereas expression of effector proteins Bak and Bax did not differ between them (Fig. 6*C*). Although wild-type platelets showed elevation of the caspase-3/7 activity upon storage, it was significantly lower in Bak/Bax-deficient platelets than in

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

wild-type platelets (Fig. 6*D*). These findings indicated that Bak/Bax-dependent mitochondrial apoptosis played an important role in the execution of spontaneous apoptosis in stored platelets. Furthermore, caspase activation was alleviated in Bcl-xL-overexpressing platelets compared with wild-type platelets upon storage (Fig. 6*D*), suggesting an antiapoptotic function of Bcl-xL in stored platelets. On the other hand, caspase-3/7 activity increased in Bid/Bim-deficient platelets and was not different from that in wild-type platelets (Fig. 6*D*), suggesting that direct activator proteins Bid and Bim are dispensable for the spontaneous platelet apoptosis upon storage.

DISCUSSION

In the mitochondrial pathway, apoptotic cell death is dependent on activation of the proapoptotic effector proteins Bak and Bax. Cells lacking both Bak and Bax are resistant to multiple apoptotic stimuli (34). Genetic studies have revealed that Bax or Bak single knock-out mice have less pronounced phenotypes compared with Bak/Bax double knock-out mice, which display various severe defects during development, indicating the redundancy of their involvement in apoptosis (30, 35). With regard to the mitochondrial apoptosis machinery in platelets, the involvement of Bax seemed to be less critical because platelet numbers in Bax knock-out mice were normal in contrast to the thrombocytosis displayed in Bak knock-out mice (30, 35). However, our *in vitro* study revealed that ABT-737 could provoke apoptosis even in Bak-deficient platelets. Moreover, our *in vivo* studies have clearly demonstrated that either Bax or Bak was sufficient to cause platelet apoptosis in the absence of Bcl-xL, indicating that Bax and Bak are redundant and equivalently important for the mitochondrial apoptosis in platelets.

In support of the displacement model, co-immunoprecipitation studies revealed complexes of Bak with a variety of antiapoptotic proteins (36). However, the major concern with this model is that Bax is presumed to exist mainly in a cytosolic fraction as a monomer (37). Thus, Bax activation might not be controlled by displacement (38). Unlike Bak activation, sequential steps are necessary for Bax activation such as a conformational change, mitochondrial translocation, and homo-oligomerization. Recent reports have revealed the mechanism of how activator proteins Bid and Bim are directly involved in these steps and initiate Bax activation (39, 40). In the present study, we showed that all the serial steps of Bax activation can adequately proceed without the involvement of the activator proteins Bid and Bim *in vitro*. Moreover, Bak/Bax-dependent mitochondrial apoptosis could be fully executed by inhibition of antiapoptotic Bcl-2-like proteins even if the direct activator proteins Bid and Bim did not exist. Similar results have been presented by Willis *et al.* (15), who showed that embryonic fibroblasts from Bid and Bim double knock-out, when infected with retrovirus expressing BH3 sensitizer proteins, could undergo apoptosis *in vitro*. Based on their results, they claimed that the Bax protein may be constitutively active and inhibited through binding to antiapoptotic Bcl-2-like proteins for cells to survive. However, in our *in vitro* study, we could not detect physiological interaction between Bax and Bcl-xL in platelets. Therefore, it is difficult to evaluate whether Bak and/or Bax is active or inactive at the default state in platelets. On the other hand, genetically modified mice clearly showed that retrieval of direct activator proteins could not prevent caspase activation and thrombocytopenia induced by the lack of Bcl-xL. These findings demonstrated, for the first time, *in vivo* evidence that direct activator proteins Bid and Bim were dispensable for apoptosis execution provoked by the loss of antiapoptotic Bcl-2-family proteins.

Because ABT-737 can bind to and neutralize Bcl-2, Bcl-w, and Bcl-xL, all of which are present in platelets (Figs. 2*A* and 6*A*), it is difficult to directly conclude that the *in vitro* results from our ABT-737 study exactly reflect our *in vivo* results obtained from Bcl-xL deletion. However, in addition to reports that neither systemic Bcl-w knock-out nor Bcl-2 knock-out mice exhibit any phenotypes with respect to platelet counts (41–43), our *in vivo* results of massive thrombocytopenia seen in thrombocyte-specific Bcl-xL knock-out mice indicated that the antiapoptotic role of Bcl-2 and Bcl-w in platelets was apparently less important than that of Bcl-xL. Even if Bcl-2 and Bcl-w were involved in our *in vitro* results, our present results clearly demonstrated that neither Bid nor Bim is required for Bax activation and following mitochondrial apoptosis by inhibition of antiapoptotic Bcl-2 family proteins. Regarding the other antiapoptotic members of the Bcl-2 family, systemic A1a knock-out mice were not reported with any phenotype with respect to platelet counts (44). Mcl-1 is a rapid turnover protein and could not be detected in platelets (**supplemental Fig. 1**). Therefore, Bcl-xL may be the main antiapoptotic Bcl-2 family protein with functional significance in platelets. This simplicity may explain why Bid and Bim deficiency failed to ameliorate the phenotype of Bcl-xL knock-out in platelets in contrast to other scenarios in which Bid or Bim is apparently indispensable (19–21). Fatal polycystic kidney disease and lymphopenia observed in Bcl-2 knock-out mice are ameliorated in a Bim knock-out background (19). In this case, lymphocytes and other cell lineages may possess Bcl-2 and other antiapoptotic Bcl-2 proteins such as Mcl-1 (45). Hepatocyte apoptosis observed in hepatocyte-specific knock-out of Mcl-1 or Bcl-xL is ameliorated in a Bid knock-out background (20, 21). In this case, hepatocytes clearly have two critical antiapoptotic Bcl-2 family proteins, Bcl-xL and Mcl-1, and Bid may switch binding partners from one to the other in the case of deficiency of either protein. Bid and Bim could regulate the rheostat balance between antiapoptotic and proapoptotic Bcl-2 family proteins, which may become irrelevant if none of the antiapoptotic Bcl-2 family proteins are present.

Although among the BH3-only proteins Bid and Bim are recognized as the putative direct activators, Puma, one of the other BH3-only proteins, has been reported to have the ability to interact directly with effector proteins (13). However, a recent report has pointed out that Puma is a sensitizer protein, which indirectly activates Bak or Bax (46). Hence, its actual mechanism of action in apoptosis remains obscure and disputed. Importantly, in contrast to thymocyte tissue, a Western blot did not show a detectable amount of Puma protein in platelets (Fig. 5*A*), indicating that it might not be involved in the platelet apoptosis machinery. However, we could not exclude the possibility that other proteins may function as alternative direct acti-

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

vators in the absence of Bid and Bim, leading to Bax activation and mitochondrial apoptosis in platelets upon inactivation of antiapoptotic Bcl-2 family proteins.

In stored platelets, because of the lack of *de novo* protein synthesis, each protein may gradually decrease in relation to its half-life. Our current results showed that the decline of Bcl-xL and Bax protein was much faster than that of Bak protein, and the disruption of the balance between anti- and proapoptotic multidomain Bcl-2 proteins seemed to be associated with apoptosis in stored human platelets. In fact, upon storage, caspase activation was weakened in Bak/Bax-deficient or Bcl-xL-overexpressing platelets compared with wild-type platelets. Taken together with these findings, the balance between anti- and proapoptotic multidomain Bcl-2 family proteins seems to dictate the cellular fate of the life and death of stored platelets. Similar degradation of the Bcl-2 family proteins should occur in circulation, which may explain why Bak knock-out mice displayed mild thrombocytosis *in vivo* (Fig. 1*A*). On the other hand, spontaneous apoptosis occurred in stored platelets despite the absence of activator proteins Bid and Bim. Although in most physiological contexts cellular death is an active decision made by regulating BH3-only proteins, our present findings suggest that activator proteins Bid and Bim were dispensable for Bak/Bax-dependent spontaneous apoptosis in stored platelets.

How anti- and proapoptotic Bcl-2 family proteins interact to maintain cellular integrity and to command cellular survival and death is one of the most important issues that remain to be clearly determined. Although their networks seem to vary depending on the cellular context, our present findings provide an *in vivo* example indicating that the absence of antiapoptotic Bcl-2-like proteins can induce activation of the effector protein Bax, leading to apoptosis without the involvement of the activator proteins Bid and Bim.

Acknowledgments—We sincerely thank Radek Skoda (University Hospital Basel) and Lothar Hennighausen (National Institutes of Health) for providing the pf4-Cre mice and floxed bcl-x mice, respectively. We also thank Abbott Laboratories for providing ABT-737.

REFERENCES

1. Holmsen, H. (1989) *Ann. Med.* **21,** 23–30
2. Ault, K. A., and Knowles, C. (1995) *Exp. Hematol.* **23,** 996–1001
3. Bertino, A. M., Qi, X. Q., Li, J., Xia, Y., and Kuter, D. J. (2003) *Transfusion* **43,** 857–866
4. Li, J., Xia, Y., Bertino, A. M., Coburn, J. P., and Kuter, D. J. (2000) *Transfusion* **40,** 1320–1329
5. Perrotta, P. L., Perrotta, C. L., and Snyder, E. L. (2003) *Transfusion* **43,** 526–535
6. Vanags, D. M., Orrenius, S., and Aguilar-Santelises, M. (1997) *Br. J. Haematol.* **99,** 824–831
7. Zhang, H., Nimmer, P. M., Tahir, S. K., Chen, J., Fryer, R. M., Hahn, K. R., Iciek, L. A., Morgan, S. J., Nasarre, M. C., Nelson, R., Preusser, L. C., Reinhart, G. A., Smith, M. L., Rosenberg, S. H., Elmore, S. W., and Tse, C. (2007) *Cell Death Differ.* **14,** 943–951
8. Mason, K. D., Carpinelli, M. R., Fletcher, J. I., Collinge, J. E., Hilton, A. A., Ellis, S., Kelly, P. N., Ekert, P. G., Metcalf, D., Roberts, A. W., Huang, D. C., and Kile, B. T. (2007) *Cell* **128,** 1173–1186
9. Kodama, T., Takehara, T., Hikita, H., Shimizu, S., Li, W., Miyagi, T., Hosui, A., Tatsumi, T., Ishida, H., Tadokoro, S., Ido, A., Tsubouchi, H., and Hayashi, N. (2010) *Gastroenterology* **138,** 2487–2498
10. Chipuk, J. E., and Green, D. R. (2008) *Trends Cell Biol.* **18,** 157–164
11. Adams, J. M., and Cory, S. (2007) *Curr. Opin. Immunol.* **19,** 488–496
12. Leber, B., Lin, J., and Andrews, D. W. (2010) *Oncogene* **29,** 5221–5230
13. Kim, H., Rafiuddin-Shah, M., Tu, H. C., Jeffers, J. R., Zambetti, G. P., Hsieh, J. J., and Cheng, E. H. (2006) *Nat. Cell Biol.* **8,** 1348–1358
14. Willis, S. N., and Adams, J. M. (2005) *Curr. Opin. Cell Biol.* **17,** 617–625
15. Willis, S. N., Fletcher, J. I., Kaufmann, T., van Delft, M. F., Chen, L., Czabotar, P. E., Ierino, H., Lee, E. F., Fairlie, W. D., Bouillet, P., Strasser, A., Kluck, R. M., Adams, J. M., and Huang, D. C. (2007) *Science* **315,** 856–859
16. Kuwana, T., Bouchier-Hayes, L., Chipuk, J. E., Bonzon, C., Sullivan, B. A., Green, D. R., and Newmeyer, D. D. (2005) *Mol. Cell* **17,** 525–535
17. Letai, A., Bassik, M. C., Walensky, L. D., Sorcinelli, M. D., Weiler, S., and Korsmeyer, S. J. (2002) *Cancer Cell* **2,** 183–192
18. Billen, L. P., Kokoski, C. L., Lovell, J. F., Leber, B., and Andrews, D. W. (2008) *PLoS Biol.* **6,** e147
19. Bouillet, P., Cory, S., Zhang, L. C., Strasser, A., and Adams, J. M. (2001) *Dev. Cell* **1,** 645–653
20. Hikita, H., Takehara, T., Kodama, T., Shimizu, S., Hosui, A., Miyagi, T., Tatsumi, T., Ishida, H., Ohkawa, K., Li, W., Kanto, T., Hiramatsu, N., Hennighausen, L., Yin, X. M., and Hayashi, N. (2009) *Hepatology* **50,** 1972–1980
21. Hikita, H., Takehara, T., Shimizu, S., Kodama, T., Li, W., Miyagi, T., Hosui, A., Ishida, H., Ohkawa, K., Kanto, T., Hiramatsu, N., Yin, X. M., Hennighausen, L., Tatsumi, T., and Hayashi, N. (2009) *Hepatology* **50,** 1217–1226
22. Takehara, T., Tatsumi, T., Suzuki, T., Rucker, E. B., 3rd, Hennighausen, L., Jinushi, M., Miyagi, T., Kanazawa, Y., and Hayashi, N. (2004) *Gastroenterology* **127,** 1189–1197
23. Tiedt, R., Schomber, T., Hao-Shen, H., and Skoda, R. C. (2007) *Blood* **109,** 1503–1506
24. Yin, X. M., Wang, K., Gross, A., Zhao, Y., Zinkel, S., Klocke, B., Roth, K. A., and Korsmeyer, S. J. (1999) *Nature* **400,** 886–891
25. Gordon, J. W., Scangos, G. A., Plotkin, D. J., Barbosa, J. A., and Ruddle, F. H. (1980) *Proc. Natl. Acad. Sci. U.S.A.* **77,** 7380–7384
26. Takehara, T., and Takahashi, H. (2003) *Cancer Res.* **63,** 3054–3057
27. Feinstein, M. B., and Fraser, C. (1975) *J. Gen. Physiol.* **66,** 561–581
28. Chaiyarit, S., and Thongboonkerd, V. (2009) *Anal. Biochem.* **394,** 249–258
29. Yamagata, H., Shimizu, S., Nishida, Y., Watanabe, Y., Craigen, W. J., and Tsujimoto, Y. (2009) *Oncogene* **28,** 3563–3572
30. Lindsten, T., Ross, A. J., King, A., Zong, W. X., Rathmell, J. C., Shiels, H. A., Ulrich, E., Waymire, K. G., Mahar, P., Frauwirth, K., Chen, Y., Wei, M., Eng, V. M., Adelman, D. M., Simon, M. C., Ma, A., Golden, J. A., Evan, G., Korsmeyer, S. J., MacGregor, G. R., and Thompson, C. B. (2000) *Mol. Cell* **6,** 1389–1399
31. Oltersdorf, T., Elmore, S. W., Shoemaker, A. R., Armstrong, R. C., Augeri, D. J., Belli, B. A., Bruncko, M., Deckwerth, T. L., Dinges, J., Hajduk, P. J., Joseph, M. K., Kitada, S., Korsmeyer, S. J., Kunzer, A. R., Letai, A., Li, C., Mitten, M. J., Nettesheim, D. G., Ng, S., Nimmer, P. M., O'Connor, J. M., Oleksijew, A., Petros, A. M., Reed, J. C., Shen, W., Tahir, S. K., Thompson, C. B., Tomaselli, K. J., Wang, B., Wendt, M. D., Zhang, H., Fesik, S. W., and Rosenberg, S. H. (2005) *Nature* **435,** 677–681
32. Chipuk, J. E., Moldoveanu, T., Llambi, F., Parsons, M. J., and Green, D. R. (2010) *Mol. Cell* **37,** 299–310
33. Hsu, Y. T., and Youle, R. J. (1997) *J. Biol. Chem.* **272,** 13829–13834
34. Wei, M. C., Zong, W. X., Cheng, E. H., Lindsten, T., Panoutsakopoulou, V., Ross, A. J., Roth, K. A., MacGregor, G. R., Thompson, C. B., and Korsmeyer, S. J. (2001) *Science* **292,** 727–730
35. Knudson, C. M., Tung, K. S., Tourtellotte, W. G., Brown, G. A., and Korsmeyer, S. J. (1995) *Science* **270,** 96–99
36. Willis, S. N., Chen, L., Dewson, G., Wei, A., Naik, E., Fletcher, J. I., Adams, J. M., and Huang, D. C. (2005) *Genes Dev.* **19,** 1294–1305
37. Antonsson, B., Montessuit, S., Sanchez, B., and Martinou, J. C. (2001) *J. Biol. Chem.* **276,** 11615–11623
38. Leber, B., Lin, J., and Andrews, D. W. (2007) *Apoptosis* **12,** 897–911
39. Gavathiotis, E., Suzuki, M., Davis, M. L., Pitter, K., Bird, G. H., Katz, S. G., Tu, H. C., Kim, H., Cheng, E. H., Tjandra, N., and Walensky, L. D. (2008)

Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

Nature **455,** 1076–1081
40. Lovell, J. F., Billen, L. P., Bindner, S., Shamas-Din, A., Fradin, C., Leber, B., and Andrews, D. W. (2008) *Cell* **135,** 1074–1084
41. Print, C. G., Loveland, K. L., Gibson, L., Meehan, T., Stylianou, A., Wreford, N., de Kretser, D., Metcalf, D., Köntgen, F., Adams, J. M., and Cory, S. (1998) *Proc. Natl. Acad. Sci. U.S.A.* **95,** 12424–12431
42. Ross, A. J., Waymire, K. G., Moss, J. E., Parlow, A. F., Skinner, M. K., Russell, L. D., and MacGregor, G. R. (1998) *Nat. Genet.* **18,** 251–256
43. Veis, D. J., Sorenson, C. M., Shutter, J. R., and Korsmeyer, S. J. (1993) *Cell* **75,** 229–240
44. Hamasaki, A., Sendo, F., Nakayama, K., Ishida, N., Negishi, I., Nakayama, K., and Hatakeyama, S. (1998) *J. Exp. Med.* **188,** 1985–1992
45. Dzhagalov, I., Dunkle, A., and He, Y. W. (2008) *J. Immunol.* **181,** 521–528
46. Jabbour, A. M., Heraud, J. E., Daunt, C. P., Kaufmann, T., Sandow, J., O'Reilly, L. A., Callus, B. A., Lopez, A., Strasser, A., Vaux, D. L., and Ekert, P. G. (2009) *Cell Death Differ.* **16,** 555–563

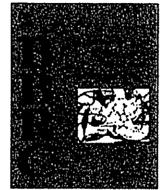
Downloaded from www.jbc.org at OSAKA UNIVERSITY, on February 13, 2012

Biochemical and Biophysical Research Communications 412 (2011) 92–97

Contents lists available at ScienceDirect

Biochemical and Biophysical Research Communications

journal homepage: www.elsevier.com/locate/ybbrc



Alterations in microRNA expression profile in HCV-infected hepatoma cells: Involvement of miR-491 in regulation of HCV replication via the PI3 kinase/Akt pathway

Hisashi Ishida [a], Tomohide Tatsumi [a], Atsushi Hosui [a], Takatoshi Nawa [a], Takahiro Kodama [a], Satoshi Shimizu [a], Hayato Hikita [a], Naoki Hiramatsu [a], Tatsuya Kanto [a], Norio Hayashi [b], Tetsuo Takehara [a,*]

[a] Department of Gastroenterology and Hepatology, Osaka University Graduate School of Medicine, 2-2, Yamadaoka, Suita 565-0871, Japan
[b] Kansai Rosai Hospital, 3-1-69, Inabaso, Amagasaki 660-8511, Japan

ARTICLE INFO

Article history:
Received 5 July 2011
Available online 23 July 2011

Keywords:
MicroRNA
Hepatitis C virus
PI3 kinase/Akt pathway

ABSTRACT

The aim of this study was to investigate the role of microRNA (miRNA) on hepatitis C virus (HCV) replication in hepatoma cells. Using miRNA array analysis, miR-192/miR-215, miR-194, miR-320, and miR-491 were identified as miRNAs whose expression levels were altered by HCV infection. Among them, miR-192/miR-215 and miR-491 were capable of enhancing replication of the HCV replicon as well as HCV itself. HCV IRES activity or cell proliferation was not increased by forced expression of miR-192/miR-215 or miR-491. Investigation of signaling pathways revealed that miR-491 specifically suppressed the phosphoinositol-3 (PI3) kinase/Akt pathway. Under inhibition of PI3 kinase by LY294002, the suppressive effect of miR-491 on HCV replication was abolished, indicating that suppression of HCV replication by miR-491 was dependent on the PI3 kinase/Akt pathway. miRNAs altered by HCV infection would then affect HCV replication, which implies a complicated mechanism for regulating HCV replication. HCV-induced miRNA may be involved in changes in cellular properties including hepatocarcinogenesis.

© 2011 Elsevier Inc. All rights reserved.

1. Introduction

Hepatitis C virus (HCV) is a major causative agent of liver diseases worldwide. Elimination of HCV fails in about 80% of infected patients, which leads to chronic hepatitis, liver cirrhosis, and subsequent development of hepatocellular carcinoma [1]. Combination therapy of pegylated-interferon-α and ribavirin results in sustained clearance of serum HCV-RNA in only ~50% of patients [2,3]. To improve therapeutic efficacy of the virologic response rate, drugs inhibiting the functions of HCV proteins such as NS3, NS5A, and NS5B, are currently under development. Although a number of studies have clarified the mechanisms of the effect of HCV on infected cells or the role of host factors on regulation of HCV replication, there remains much to be investigated.

MicroRNAs (miRNAs) were identified as a population of small RNAs, modulating translation by binding to sites of antisense complementarity in 3′ untranslated regions of target mRNA [4]. With respect to regulation of HCV replication, the relevance of several miRNAs has been recently reported. miR-122, a hepatocyte-specific miRNA, was identified as a positive regulatory factor for HCV replication by binding to two sites in the HCV genome [5]. Each of the interferon-β-induced miRNAs, miR-196, miR-296, miR-351, miR-431, and miR-448, has a partially complementary sequence to HCV, resulting in suppression of HCV replication [6]. Thus, a miRNA with homology to the HCV sequence is likely to have the ability to regulate HCV. Another possible mechanism of miRNA regulation of HCV replication is the targeting of some cellular gene involved in HCV replication. miR-141 was shown to suppress DLC-1 leading to efficient HCV replication [7]. Although some miRNAs were shown to be capable of regulating HCV replication, details of the relationship between miRNAs and HCV replication are still largely unknown.

In the present study, we performed miRNA array analysis to identify miRNA(s) altered by HCV infection in Huh7, a hepatoma cell line. We further investigated whether HCV-regulated miRNA could, in turn, affect HCV replication. As a result, we were able to identify five miRNAs: miR-192 and its homolog miR-215 and miR-194 as upregulated miRNAs and miR-320 and miR-491 as downregulated miRNAs. Among them, miR192/miR-215 and miR-491 enhanced HCV replication in HCV replicon cells as well as in cell culture-infectious HCV (HCVcc)-infected cells. miR-192/miR215 and miR-491 did not increase cell proliferation or HCV internal ribosome entry site (IRES) activity, suggesting that these were not the reasons for increased HCV replication. Further investigation revealed that miR-491 suppressed the PI3 kinase/Akt

* Corresponding author. Fax: +81 6 6879 3629.
E-mail address: takehara@gh.med.osaka-u.ac.jp (T. Takehara).

0006-291X/$ - see front matter © 2011 Elsevier Inc. All rights reserved.
doi:10.1016/j.bbrc.2011.07.049