

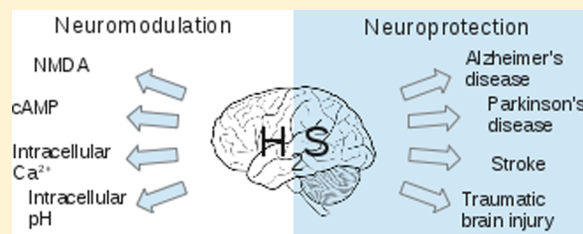
Hydrogen Sulfide: A Neuromodulator and Neuroprotectant in the Central Nervous System

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ABSTRACT: Hydrogen sulfide (H_2S) used to be known as a toxic gas. However, in the last two decades, accumulating evidence has revealed its role as a bioactive molecule in the biological systems. H_2S has relatively high expression in the brain, exerting multiple functions in both health and diseases. It modulates neurotransmission by influencing behaviors of NMDA receptors and second messenger systems including intracellular Ca^{2+} concentration and intracellular cAMP levels and so forth. H_2S shows potential therapeutic value in several CNS diseases including Alzheimer's disease, Parkinson's disease, ischemic stroke, and traumatic brain injury. As a neuroprotectant, H_2S produces antioxidant, anti-inflammatory, and antiapoptotic effects in pathological situations. Sulfhydrylation of target proteins is an important mechanism underlying these effects. This Review summarizes the current understanding of H_2S in the central nervous system, with emphasis on its role as a neuromodulator and a neuroprotectant.

KEYWORDS: *Hydrogen sulfide, neuromodulation, neuroprotectant, neurodegeneration, Alzheimer's disease, Parkinson's disease, stroke*



1. INTRODUCTION

Hydrogen sulfide (H_2S) was known as a toxic gas. However, as increasing knowledge about the biological functions of H_2S has been unfolding in the last two decades, it has now been recognized as another gaseous signal molecule after nitric oxide and carbon monoxide. Extensive functions of H_2S have been revealed in the cardiovascular, central nervous, and other biological systems under both physiological and pathological conditions. H_2S is expressed at a relatively high concentration in the brain. It facilitates hippocampal long-term potentiation (LTP) by enhancing NMDA receptor-mediated responses.¹ It also modulates intracellular Ca^{2+} and pH homeostasis in neurons, microglial cells, and astrocytes.^{2–5} Impaired metabolism of H_2S was found in several CNS disorders such as Alzheimer's disease and Parkinson's disease. The plasma H_2S level was reported to be correlated with long-term clinical outcome in stroke patients.⁶ These findings suggest that H_2S may be involved in the initiation or progression of these diseases. More importantly, extensive studies have demonstrated the potential therapeutic value of H_2S in several CNS diseases such as Alzheimer's disease (AD), Parkinson's disease (PD), traumatic brain injury, and perhaps ischemic stroke as well. In these diseases, H_2S may act as a neuroprotectant via its antioxidant, anti-inflammatory, and antiapoptotic effects. Although it is still not clear how H_2S exerts these functions at the molecular level, a series of studies suggest that H_2S modifies specific Cys residues in proteins through the formation of a persulfide ($-SSH$) bond, and this modification has been termed as protein sulfhydrylation. Sulfhydrylation may change the conformation and consequently the activities of target proteins, although it is still uncertain how much this mechanism can explain the multiple biological effects of H_2S . In

this Review, we will try to summarize the current knowledge about H_2S in the central nervous system, with an emphasis on its roles in neuromodulation and neuroprotection.

2. CHEMICAL PROPERTIES

H_2S is a colorless and poisonous gas with an odor of rotten eggs. It is slightly soluble in water and acts as a weak acid, dissociating into H^+ and the hydrosulfide ion HS^- . At body temperature and neutral pH, less than 20% of H_2S exists as undissociated form in solution.⁷

Due to the inconvenience to use the gas in laboratories, H_2S salts, sodium hydrosulfide ($NaHS$) and sodium sulfide (Na_2S), are often used as donors in research. H_2S is produced rapidly in their aqueous solutions. To further mimic the real synthesis and release process of H_2S in vivo, slow-releasing H_2S compounds (such as GYY4137, ACS compounds, AP39, etc.) are synthesized.^{8–10}

3. METABOLISM

Three sources of H_2S biosynthesis have been identified. H_2S is synthesized by cystathionine β -synthase (CBS), cystathionine γ -lyase (CSE) or cooperation of 3-mercaptopyruvate sulfurtransferase (3-MST) together with cysteine aminotransferase (CAT). CBS catalyzes the β -replacement reaction where Cys reacts with Hcy and produces cystathionine and H_2S . CSE catalyzes the reaction of Cys, producing H_2S and serine as a byproduct. 3-MST and CAT mediate the catabolism of Cys and produce sulfane sulfur, which releases H_2S when reduced by

Received: August 15, 2014

Revised: August 29, 2014

Published: August 30, 2014

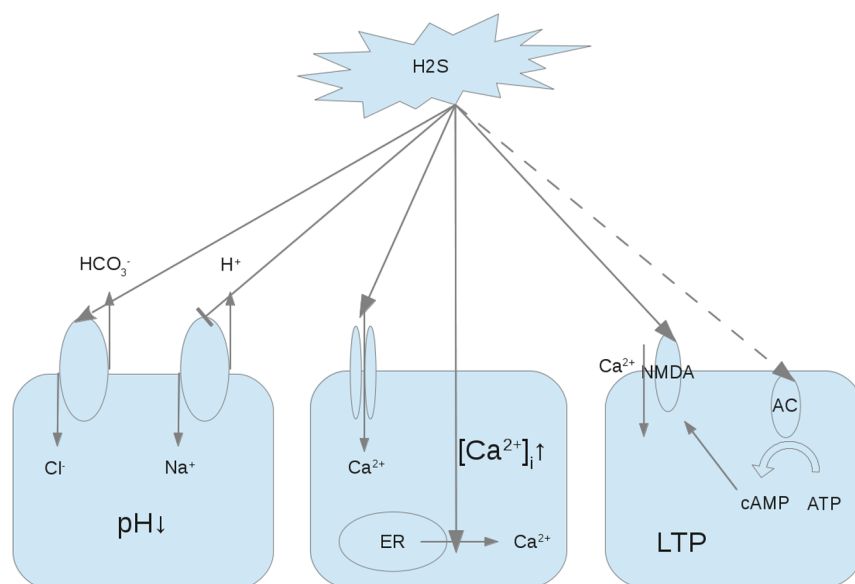


Figure 1. Schematic diagram showing the neuromodulatory roles of H₂S by regulation of second messenger systems. H₂S decreases intracellular pH in primary cultured rat microglia and astrocytes, possibly via enhancing the activity of Cl⁻/HCO₃⁻ exchanger and inhibiting that of Na⁺/H⁺ exchanger.⁵ H₂S increases intracellular Ca²⁺ in various cell types such as neurons,⁴ astrocytes,³ and microglial cells,² which is likely mediated by both extracellular Ca²⁺ influx and Ca²⁺ release from intracellular store. H₂S facilitates hippocampal long-term potentiation by enhancing NMDA receptor-mediated responses, which is possibly mediated by the cAMP/PKA pathway and sulphydration of NMDA.^{1,16}

physiological reducing reagents like thioredoxin. In the central nervous system, the CBS pathway is considered to be the predominant source of endogenous H₂S.⁷ However, in CBS knockout mice, a similar level of H₂S was still found in the brain tissue even in the absence of pyridoxal-5'-phosphate (PLP). These data suggest that 3-MST is also an important PLP-independent pathway to produce endogenous H₂S in brain.

The metabolic fate of H₂S in cells is not fully understood yet. It is proposed that H₂S's catabolism may involve chemical reactions such as oxidation to sulfate,¹¹ methylation to methanethiol and dimethyl sulfide, and reactions with metallo- or cysteine-containing proteins.⁷ H₂S can also be stored in tissues as bound sulfane sulfur, including polysulfides and persulfides, and released in response to physiological/pathological stimulations.^{12,13}

4. H₂S AS A NEUROMODULATOR

With increasing knowledge about its role in the central nervous system in the last decades, H₂S has been recognized as a neuromodulator (Figure 1). In 1996, Kimura's group first reported that H₂S facilitated hippocampal long-term potentiation by enhancing NMDA receptor-mediated responses.¹ Later, they reported that this effect was possibly mediated by the cAMP/PKA pathway.¹⁴ According to these results, the NMDA receptor was activated when its subunits were directly phosphorylated by protein kinase A (PKA) at specific sites, which mediated excitatory postsynaptic currents. H₂S activated adenylyl cyclase and increased cAMP production, which may boost the activity of PKA and consequently NMDA phosphorylation. Another hypothesis was also described by Kimura. Since the activity of NMDA receptors was enhanced when its cysteine disulfide bonds were reduced,¹⁵ H₂S may contribute to NMDA activation via reducing the cysteine disulfide and sulphydrating the cysteine residues.¹⁶ However, further investigation is needed to confirm this hypothesis.

H₂S also regulated intracellular Ca²⁺ level in various cell types in the brain. Kimura's group showed that H₂S increased

intracellular Ca²⁺ and induced Ca²⁺ waves in primary cultured astrocytes and hippocampal slices.³ H₂S increased Ca²⁺ concentration by inducing Ca²⁺ influx from extracellular space and, to a lesser extent, releasing Ca²⁺ from its intracellular stores. Similarly, our group also found that H₂S induced elevation of intracellular Ca²⁺ concentration in microglial cells² and neuronal SH-SY5Y cells.⁴ It seems that both cAMP/PKA and PLC/PKC pathways contributed to the calcium regulatory effect of H₂S in neuronal cells.^{2,4} As intracellular calcium acts as a universal second messenger in cells, H₂S's effects on Ca²⁺ may exert deep and extensive influence on a variety of intracellular processes. However, the biological significance and detailed mechanisms are still open to further investigation.

H₂S was reported to modulate adenylyl cyclase activity and influence cAMP level in cells. Kimura showed that H₂S increased the production of cAMP in the primary cultured brain cells, neuronal and glial cell lines, and *Xenopus* oocytes.¹⁴ This effect was proposed as the mechanism for the effect of H₂S on NMDA receptors and the induction of hippocampal LTP. Interestingly, our group found that H₂S treatment significantly reversed forskolin-induced cAMP elevation in cardiac myocytes,¹⁷ vascular smooth muscle cells,¹⁸ As4.1 cells,¹⁹ and SH-SY5Y cells,²⁰ and opioid withdrawal-induced cAMP rebound in SH-SY5Y cells.²¹ These data suggest that H₂S may produce dual effects on cAMP production in brain cells. On the one hand, H₂S may stimulate AC at its resting status by modification of AC structure directly or secondary to other signaling pathways. On the other hand, H₂S may also block the association between forskolin and AC and therefore inhibit the effect of forskolin. This is probably mediated by sulphydration of cysteine residues in the forskolin binding site in AC. More experiments are warranted to confirm this hypothesis and to study the underlying molecular mechanisms.

H₂S also regulates intracellular pH in primary cultures of rat microglia and astrocytes. NaHS in the range from 10 to 200 μM decreased intracellular pH in a concentration-dependent manner. NaHS significantly increased the activity of Cl⁻/

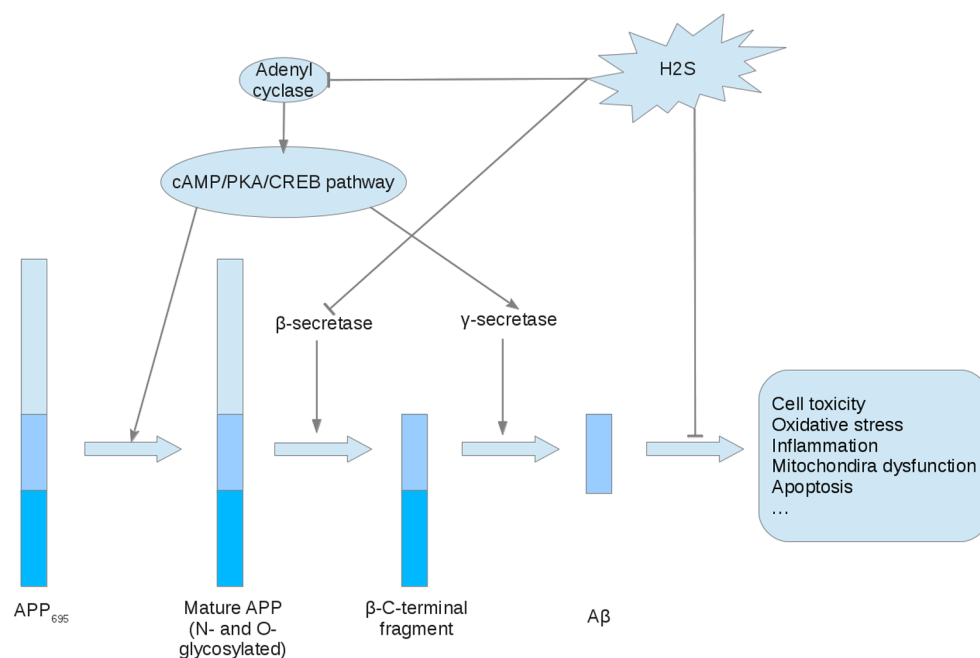


Figure 2. Schematic illustration showing the effect of H₂S on Aβ formation and toxicity. H₂S suppresses Aβ production and prevents its cytotoxicity. H₂S decreases Aβ production by reducing the expression of β-secretase 1 (BACE1),⁴⁰ and APP maturation and γ-secretase activity. This is mediated by inhibition of adenyl cyclase/cAMP/PKA/CREB pathway.²⁰

HCO₃⁻ exchanger but inhibited that of Na⁺/H⁺ exchanger. As intracellular pH homeostasis is an important basis for the normal physiological functions of cells and a critical factor in pathological conditions such as hypoxia and ischemia, it is reasonable to speculate that the regulatory effects of H₂S on intracellular pH may have significant roles in both health and diseases.

5. H₂S AS A NEUROPROTECTANT

5.1. Therapeutic Effects of H₂S in CNS Diseases.

5.1.1. AD. AD is the most prevalent neurodegenerative disease and the leading cause of senile dementia.²² The prevalence of AD is as high as almost 50% among those with age above 85 years.²³ It is not only a threat to human health, but also a source of many economic, political, and social problems. It is a progressive age-dependent neurodegenerative disease which ultimately leads to cognitive dysfunction. Neurofibrillary tangles and β-amyloid (Aβ) plaques in the cortex and hippocampus are the hallmarks of AD.²⁴ Regardless of intensive investigations about this disease, its cause and progression are still not well understood.

H₂S has been speculated to be involved in AD for a long time. In as early as 1996, Morrison et al. showed that the endogenous H₂S synthesis was permutated in AD patients, as indicated by the fact that the brain levels of S-adenosylmethionine, a CBS activator, were severely decreased in AD patients.²⁵ What is more, the total serum Hcy (a precursor of Cys when acted on by CBS followed by CSE) was found to be accumulated in AD patients, which was proposed to be a risk factor of AD.²⁶ It is reasonable to speculate that Hcy accumulation is caused by decreased CBS activity. On the other hand, it was also reported that neurotoxicity of elevated Hcy contributed to the down-regulation of both expression and activity of CBS in PC12 cells.²⁷ Regardless of the interplay between high plasma Hcy and CBS dysfunction in AD, it is clear that the CBS mediated Hcy transsulfuration pathway is

involved in AD. Not surprisingly, H₂S generation is hampered due to the disturbance of the CBS mediated Hcy transsulfuration pathway in AD patients.²⁸ Actually, Liu et al. reported that levels of H₂S were decreased in AD patients and the change in H₂S level may be related to the severity of AD.²⁹ Although it remains a question of how much of a role H₂S plays in the pathogenesis of AD, intensive investigations have been inspired by these findings.

Both in vitro and in vivo experiments have shown that H₂S plays a protective role in AD. Oxidative stress is considered as an important player in AD pathogenesis and progression. A series of investigations showed that H₂S had a strong antioxidant capacity to resist AD-related oxidative stress factors such as HOCl, Aβ, MDA, and 4-HNE.^{30–33} Whiteman et al. reported that NaHS significantly inhibited HOCl-induced cytotoxicity, intracellular protein oxidation, and lipid peroxidation in SH-SY5Y cells, which were increased in the temporal and frontal cortex of AD brains.³⁰ It was also reported that NaHS ameliorated Aβ-induced damage in PC12 cells, possibly by attenuating mitochondrial membrane potential (ΔΨ_m) loss and inhibiting the intracellular reactive oxygen species (ROS) increase.³¹ It has been demonstrated that H₂S reduced MDA levels in human umbilical vein endothelial cells exposed to hydrogen peroxide and destroyed lipid hydroperoxides in oxidized low-density lipoprotein.^{32,33} Schreier et al. demonstrated that H₂S protected neuronal cells (SH-SY5Y) from the cytotoxic lipid oxidation product 4-hydroxynonenal (HNE),³² which was markedly elevated in the brains of severe AD patients.

A number of in vivo studies also confirmed the protective role of H₂S in AD. Xuan et al. reported that NaHS pretreatment ameliorated learning and memory deficits in a rat AD model induced by Aβ_{1–40}.³⁴ Giuliani et al. found that both short-term and long-term administration of NaHS significantly improved learning and memory in several AD models, including rat models induced by Aβ_{1–40} or

streptozotocin, and a mouse model harboring human transgenes APPSwe, PS1M146 V, and tauP301L (3xTg-AD mice).³⁵ It is also shown that both H₂S³⁶ and S-propargyl-cysteine,³⁷ a novel H₂S-modulated agent, attenuated lipopolysaccharide-induced cognitive deficits in rats by modulating neuroinflammation.

Taken together, the findings from both in vivo and in vitro studies show that H₂S acts as a potential therapeutic compound for AD in several models, possibly by interfering with multiple targets. Among these, amyloid β ($A\beta$) is an important target for H₂S. $A\beta$ peptide is the major component of senile plaques in the brains of AD patients.³⁸ It is generated through sequential cleavage of APP by β - and γ -secretases.³⁹ A series of studies showed that H₂S influenced $A\beta$ formation^{20,40} and toxicity³¹ in multiple ways. Zhang et al. reported that H₂S decreased $A\beta$ 42 production in rat PC12 cells, via down-regulating the expression of β -site amyloid precursor protein-cleaving enzyme 1 (BACE-1) expression,⁴⁰ which is the rate limiting enzyme of APP proteolytic cleavage. We recently found that H₂S suppressed HENECA (a selective A2A receptor agonist)-induced $A\beta$ 42 formation in SH-SY5Y cells via inhibiting APP glycosylation and γ -secretase.²⁰ These data suggest that H₂S may suppress $A\beta$ formation by inhibition of different catalyzing steps (Figure 2). In addition to inhibition of $A\beta$ formation, H₂S may also protect cells against $A\beta$ -induced cell injury.³¹ This effect is mediated by the inhibitory effect of H₂S on $A\beta$ -induced cell cycle re-entry, inflammation, and mitochondrial membrane potential ($\Delta\Psi_m$) loss.

5.1.2. PD. The endogenous H₂S level was found to be markedly decreased in the substantia nigra (SN) in a 6-hydroxydopamine (6-OHDA)-induced PD rat model.⁴¹ How the decreased endogenous H₂S production contributes to PD pathogenesis still remains elusive. Evidence for the therapeutic effects of H₂S was collected from exogenous application of H₂S releasing compounds. Our group first reported that NaHS dramatically reversed PD progression and alleviated Parkinsonian symptoms and dopaminergic neuron degeneration in the SN using rat PD models induced by 6-OHDA or rotenone.⁴¹ Consistently, Ichinose and his colleagues showed that H₂S prevented the movement disorder, the degeneration and apoptosis of tyrosine hydroxylase (TH)-containing neurons, and gliosis in nigrostriatal region in an MPTP-induced mouse model.⁴² Furthermore, we also confirmed that H₂S protected dopaminergic neurons against MPTP-induced degeneration in mice.⁴³ What is more, the therapeutic effect of H₂S was also confirmed with ACS84, an H₂S-releasing L-Dopa derivative, in the 6-OHDA-induced PD rat model.⁴⁴

The belief in the therapeutic effect of H₂S on PD is further reinforced by a series of in vitro study using several toxins widely used to create PD models. Tang et al. showed that NaHS protected PC12 cells against MPP(+)-induced cytotoxicity and apoptosis by attenuating the loss of mitochondrial membrane potential and intracellular ROS increase.⁴⁵ Our group reported that H₂S inhibited rotenone-induced apoptosis via preserving mitochondrial function in SH-SY5Y cells,⁴⁶ and protected SH-SY5Y cells against 6-OHDA-induced cell injury⁴⁷ as well as endoplasmic reticulum stress.⁴⁸

Multiple mechanisms about H₂S's therapeutic role in PD have been speculated. Parkin protein is known to protect neurons and facilitate protein degradation. Loss of its function leads to dopaminergic cell death. And mutations in this gene may cause a familial form of PD. Snyder's group reported that sulphydration of parkin was associated with its activity and

function in PD. Precisely, parkin sulphydration was markedly depleted in the brains of PD patients, while H₂S could restore its sulphydration and enhance its catalytic activity, thus exerting neuroprotective effects in PD.⁴⁹ Apart from the direct sulphydration of parkin, other mechanisms are reported. We found that H₂S specifically inhibited 6-OHDA-induced NADPH oxidase activation in rats.⁴¹ On the other hand, Ichinose F showed that H₂S upregulated expression of genes encoding antioxidant proteins, including heme oxygenase-1 and glutamate-cysteine ligase in mice after MPTP administration.⁴² Similarly, our recent work revealed that H₂S enhanced UCP2-mediated antioxidation and subsequently suppressed ROS-triggered endoplasmic reticulum stress in a mouse model using MPTP.⁴³ It can be inferred from these studies that the neuroprotective effect of H₂S in PD is probably also mediated by its antioxidant effect. Additionally, it was also found that microglial activation in the SN and proinflammatory factors (e.g., TNF-alpha and nitric oxide) in the striatum were inhibited by H₂S in a rat model using rotenone,⁴¹ suggesting the involvement of the anti-inflammatory functions of H₂S.

5.1.3. Ischemic Stroke. Conflicting results have been reported about the role of H₂S in the ischemic stroke. Chen and his colleagues showed in a clinical study that early high plasma cyst(e)ine level (within 24 h of stroke onset) may predict poor clinical outcome in patients with acute stroke.⁶ Precisely, early plasma cyst(e)ine levels were significantly correlated with long-term clinical outcome (assessed at 3 months) as well as early stroke deterioration. They confirmed this relation in a rat stroke model, showing that administration of cysteine increased the infarct volume in a dose-dependent manner. This effect of cysteine was abolished by a CBS inhibitor, aminooxyacetic acid, indicating that H₂S may be involved in ischemic brain damage. In another study, Wong's group showed that H₂S production by 3-mercaptopyruvate sulfurtransferase (3MST) was downregulated after stroke in astrocytes, suggesting that the elevated H₂S level was mainly mediated by CBS.⁵⁰ The detrimental effect of H₂S was further confirmed by Wong's group using a permanent occlusion of the middle cerebral artery model (pMCAO),⁵¹ which is a classical in vivo model for ischemic stroke. According to their discovery, MCAO increased H₂S level and H₂S synthesizing activity in the cortex. And MCAO-induced infarct volume was reduced dose dependently by four different inhibitors of H₂S synthesis enzymes, but significantly increased by administration of NaHS.

However, these findings have been challenged by more recent discoveries. Our group found that H₂S could protect neurons against hypoxic injury.⁵² It was also shown that H₂S-induced long-term (2 days) hypothermia reduced infarct volume in aged rats after focal ischemia caused by reversible occlusion of the right middle cerebral artery.⁵³ Similarly, Gheibi et al. reported that treatment with H₂S reduced brain injuries and postischemic cerebral edema in a dose-dependent manner in a transient model of focal cerebral ischemia likely via blocking programmed cell death.⁵⁴ Additionally, Wang et al. reported that H₂S protected blood-brain barrier integrity after focal cerebral ischemia followed by reperfusion.⁵⁵ The beneficial effects of H₂S in global cerebral ischemia were also reported. For example, Yin and his colleagues showed that exogenous H₂S protected against global cerebral ischemia/reperfusion injury in rats via multiple mechanisms, including its antioxidative, anti-inflammatory, and antiapoptotic effects.⁵⁶ H₂S was also found to attenuate cognitive deficits by improving the survival rate of hippocampal neurons in a four-vessel

occlusion model in rats.⁵⁷ In addition to these discoveries focusing on the neuroprotective effects of H₂S during or shortly after cerebral ischemia/reperfusion, it was also reported that treatment with H₂S augmented angiogenesis in the peri-infarct area, and significantly improved functional outcomes after 2 weeks in a rat MCAO model,⁵⁸ suggesting its potential value in regenerative recovery after stroke.

Different hypotheses have been proposed to resolve the seemingly conflict results. In a review paper,⁷ we pointed out a few unresolved issues about the early work done by Wong and Chen, which supported the detrimental effects of H₂S in stroke, including that (i) sublethal dose of NaHS was employed; (ii) nonspecific CBS inhibitors were used; and (iii) the causality between stroke and endogenous H₂S level elevation remains to be assessed in the future. It seems that the first issue has been answered by Li and his colleagues, who reported dual effects of H₂S on focal cerebral ischemic injury, where low-dose (2.8 mg/kg) NaHS ameliorated MCAO-induced injury while high-dose (11.2 mg/kg) aggravated it.⁵⁹ These concentrations seem to be in line with the different concentrations used in experiments giving rise to conflicting results, though it is still uncertain whether the conflicts can be fully answered by this discovery. Since stroke is a complex disease where several lines of pathological processes occur and interact with each other in a complex way, it is possible that H₂S may play different roles in this dynamic process, and more investigations are required to gain a better understanding of it.

5.1.4. Trauma Injury. Traumatic brain injury (TBI) occurs when the brain is injured by an external force traumatically. It is a serious public health problem worldwide, especially in children, young adults, and elderly people.⁶⁰ TBI can cause a series of physical, cognitive, social, emotional, and behavioral effects, and outcome can range from complete recovery to permanent disability or death. In addition to the damage caused at the moment of injury, brain trauma causes secondary injury, which consists of a series of events including blood-brain barrier damage, proinflammatory factors release, free radical overload, excitotoxicity, influx of cations into neurons, mitochondria dysfunction, changes in the blood flow to the brain, raised intracranial pressure, and so on.⁶¹ Secondary injury takes place in minutes and days following the initial injury, and contributes substantially to the damage from the primary injury, thus becoming an important target for therapeutic intervention.

H₂S is proposed to be involved in and play beneficial effects in TBI. Both CBS expression and H₂S levels experienced dynamic changes in plasma, brain cortex, and hippocampus after experimental TBI in mice.⁶⁰ This was reflected by a slow decrease, reaching the lowest level at 1 day after TBI, followed by a gradual elevation. Treatment with NaHS reduced surgical trauma-induced inflammatory response and cognitive deficits in mice.^{62,63} H₂S may ameliorate TBI-induced increase of blood-brain barrier permeability, brain edema, and lesion volume, as well as neurologic dysfunction. This effect was mediated by activation of ATP sensitive mitochondrial K⁺ channels, reduction of oxidative stress,⁶⁴ mitigating apoptosis, and autophagy.⁶³ Thus, these discoveries suggest the potential therapeutic value of H₂S in trauma injury.

5.2. Mechanisms of H₂S-Induced Neuroprotection. Although the roles of H₂S in different CNS disorders may vary, some common mechanisms of action are shared. A wide range of H₂S's beneficial effects are mediated by its anti-inflammatory, antioxidant, anti-ER stress, and antiapoptosis effects. With increasingly deeper insights into these effects, it seems that

many of them can be explained by the sulfhydration of target proteins by H₂S.

5.2.1. Antioxidation. H₂S has been found to protect cells from oxidative injury induced by different agents such as glutamate,^{65,66} hydrogen peroxide,^{67,68} and hypochlorous acid.³⁰ H₂S is a reductive substance and can act as an antioxidative agent in vivo. However, its physiological concentration is low compared to more abundant antioxidants such as glutathione (1–10 mM). Additionally, H₂S is also a poor reductant with a redox potential of +0.17 V compared to −0.25 V of GSH.⁶⁹ Thus, H₂S is not likely to play the antioxidant effect by itself. Kimura and colleagues showed that H₂S increased GSH levels in neurons.^{65,66} For this reason, H₂S probably upregulates GSH production by increasing cysteine availability. Cystine (cysteine) is the rate-limiting substrate of glutathione synthesis. H₂S elevated glutathione level by enhancing the activity of γ -glutamylcysteine synthetase (the first enzyme of the cellular GSH biosynthesis) and upregulating cystine and cysteine transport. What is more, high extracellular glutamate concentration inhibits cystine transport and consequently exacerbates GSH depletion, while our group found that H₂S promoted glutamate uptake by astrocytes via enhancing glial glutamate transporter GLT-1 function,⁶⁷ thus contributing to elevation of the antioxidant GSH level in cells.

In addition to enriching physiological antioxidants, H₂S also protects against oxidative stress via reducing production of reactive oxygen species (ROS) (Figure 3). NADPH oxidase

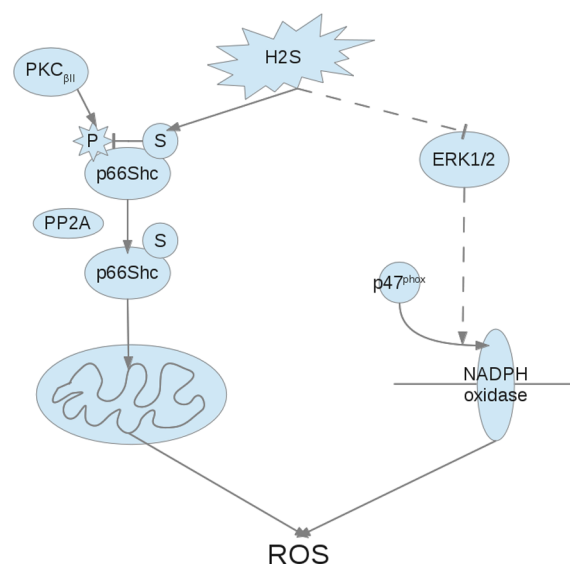


Figure 3. Schematic diagram showing the inhibitory effect of H₂S on ROS production. Via sulfhydration of p66Shc, H₂S inhibits phosphorylation of p66Shc by PKC β II and thus suppresses its translocation to mitochondria and consequent ROS production.⁶⁸ On the other hand, H₂S may also inhibit NADPH oxidase activation by preventing its cytosolic subunit p47^{phox} from translocating to the plasma membrane, which perhaps involved the ERK1/2 pathway.⁴¹

and mitochondrial respiration chain are the two major sources of intracellular ROS. H₂S decreased 6-OHDA-induced ROS production in rats, possibly by suppressing NADPH oxidase activation in an ERK1/2-dependent manner.⁴¹ On the other hand, we recently reported that H₂S exerted antioxidant effect by decreasing mitochondrial ROS production.⁶⁸ The protein p66Shc acts as an activator of mitochondrial redox signaling. We found that H₂S decreased mitochondrial ROS production

under stress by sulfhydrylation of p66Shc. Precisely, application of exogenous H₂S with NaHS or overexpression of CBS induced sulfhydrylation and inhibited phosphorylation of p66Shc caused by H₂O₂/D-galactose in SH-SY5Y cells or in the mice cortex. Site-directed mutation showed that cysteine-59 of p66Shc was involved in its phosphorylation, possibly by influencing its interaction with PP2A. Actually, C59S mutant attenuated the effects of H₂S on p66Shc phosphorylation and mitochondrial ROS production, suggesting that these effects were dependent on p66Shc sulfhydrylation. Thus, H₂S may play its antioxidant role in multiple ways, by regulating endogenous antioxidants as well as by decreasing ROS production.

5.2.2. Anti-Inflammation. H₂S has also been found to play both pro- and anti-inflammatory effects. The proinflammatory effects were reported in some pathological situations such as pancreatitis and septic/endotoxic and hemorrhagic shock.^{70–72} The anti-inflammatory effect of H₂S was first reported by our group.⁷³ We found that both endogenous and exogenous H₂S could attenuate lipopolysaccharides-induced NO release and TNF- α production in primary cultured microglia as well as immortalized BV-2 microglial cells. This effect was mimicked by SB 203580, a specific p38 mitogen-activated protein kinase (MAPK) inhibitor, suggesting that H₂S may regulate neuroinflammation via the MAPK pathway.⁷⁵ Lee et al. also reported similar anti-inflammatory effect of both H₂S and three H₂S-releasing NSAIDs (anethole trithione hydroxide, S-diclofenac, and S-aspirin).⁷⁴ In addition to TNF- α and NO, H₂S also decreased the release of the proinflammatory cytokine interleukin-1 β , and upregulated the anti-inflammatory cytokines such as interleukin-4/10. The anti-inflammatory effect of H₂S was suggested to be mediated by modulating NF- κ B pathways in activated B cells. However, more comprehensive investigation is needed.⁷

5.2.3. Anti-ER Stress. The endoplasmic reticulum (ER) plays an important role in the regulation of the post-translational folding and modification of proteins. The folding capacity of ER is fine-tuned in response to both the external and internal environmental status of cells. However, when it is exceeded, excessive unfolded proteins can result in a condition termed as ER stress, and triggers a series of cellular and molecular processes known as ER stress response.⁷⁵ If cells fail to respond to ER stress properly, which can be caused by aging, environmental factors, or genetic mutations, pathological conditions may occur and lead to diseases such as diabetes, AD, and PD.⁷⁶

H₂S may modulate ER stress response via sulfhydrylation of the phosphatase PTP1B.⁷⁵ Specifically, the phosphatase PTP1B could be reversibly sulfhydrylated by endogenous H₂S in response to ER stress. Sulfhydrylation of PTP1B resulted in inhibition of its phosphatase activity, and protected pTyr 619 of its substrate PERK [protein kinase-like endoplasmic reticulum (ER) kinase] from dephosphorylation by PTP1B, leaving PERK in the phosphorylated active status. As PERK could phosphorylate the eukaryotic translational initiation factor 2 (eIF2 α) and lead to attenuation of protein translation, its activation contributes to amelioration of ER stress. This study provides a good explanation about the effect of H₂S on ER stress at the molecular level. On the other hand, we also showed that H₂S was able to protect SH-SY5Y cells against 6-OHDA-induced ER stress, suggesting a potential mechanism by which it modulates PD.⁴⁸ However, more investigations are needed to fully establish the relationship between H₂S-induced anti-ER stress effect and CNS diseases.

5.2.4. Antiapoptosis. Accumulating evidence shows that H₂S plays antiapoptotic effect on neuronal cells at relatively low concentrations. Several groups have independently reported that H₂S protected PC12 and SH-SY5Y cells from apoptosis induced by a variety of toxins, such as 1-methyl-4-phenylpyridine, rotenone, and β amyloid.^{45,46,77} Similar antiapoptotic effects are also found in animal models of PD, AD, and vascular dementia.^{34,41,44,78} Most of these studies suggest that the antiapoptotic effect of H₂S is probably mediated by inhibiting the mitochondrial apoptotic pathway, that is, by preserving mitochondrial integrity, preventing cytochrome *c* release, and the consequent activation of caspase cascades.

6. OUTLOOK AND CONCLUSIONS

The last two decades have seen a rapid increase in the knowledge on the biological functions of H₂S. The neuro-modulatory effects of H₂S have almost reached a consensus. The potential therapeutic value of H₂S in several CNS diseases have been widely accepted. These discoveries have inspired interests in the unresolved problems about H₂S. Currently, considerable efforts are still devoted to uncovering the molecular mechanisms of H₂S. Increasing numbers of sulfhydrylation targets are identified, shedding new light upon known effects of H₂S by providing deeper insights into its biological functions.

To exploit the therapeutic effects of H₂S, several groups are working on H₂S slow releasing compounds, with the hope of finding better “druglike” compounds. These attempts include GYY4137,⁸ ACS14,⁷⁹ and so on. Their therapeutic value have been demonstrated in vitro or in animal models.^{21,80} However, more investigation is still needed to study the potential toxic effects after long-term treatment with these H₂S-releasing compounds.

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Funding

This work was supported by NUHS B2B research grant (NUHSRO/2011/012/STB/B2B-08) and NKF grant (NKFRC/2011/01/04).

Notes

The authors declare no competing financial interest.

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