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Thiazolidinediones inhibit TNFα induction of PAI-1 independent of PPARγ activation

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Abstract

Increased plasminogen activator inhibitor type 1 (PAI-1) levels are observed in endothelial cells stimulated by tumour necrosis factor α (TNF α). Thiazolidinediones (TZDs) may inhibit elevated endothelial cell PAI-1 accounting, in part, for the putative atheroprotective effects of TZDs. In an endothelial cell line, Rosiglitazone (RG) and Pioglitazone (PG) inhibited induction of PAI-1 by TNF α . The specific peroxisome proliferator-activated receptor γ (PPAR γ) inhibitor, SR-202, failed to modulate this effect. RG also inhibited the effect of TNF α on a reporter gene construct harbouring the proximal PAI-1 promoter and PAI-1 mRNA in cells cotransfected with a dominant-negative PPAR γ construct. RG and PG attenuated TNF α -mediated induction of *trans*-acting factor(s) Nur77/Nurr1 and binding of nuclear proteins (NP) to the *cis*-acting element (NBRE). SR-202 failed to modulate these effects. The observations suggest TZDs inhibit TNF α -mediated PAI-1 induction independent of inducible PPAR γ activation and this may involve in the modulation of Nur77/Nurr1 expression and NP binding to the PAI-1 NBRE.

Keywords: Tumour necrosis factor α; Plasminogen activator inhibitor type-1; Thiazolidinedione; Peroxisome proliferator-activated receptor γ

Atherosclerosis is now recognized as a systemic disorder characterized by endothelial cell dysfunction and chronic inflammation within the arterial intima [1]. Increased plasminogen activator inhibitor type 1 (PAI-1) levels are regarded as a marker of endothelial cell dysfunction [2] and are present in patients with type 2 diabetes and those with the metabolic syndrome (MS), a cluster of cardiovascular risk factors including obesity, insulin resistance, hypertension, and dyslipidaemia [3,4]. Diabetes and the MS are characterized by elevated tumour necrosis factor α (TNF α) levels and are associated with accelerated atherosclerosis [3,4]. Mice with a targeted deletion of the PAI-1 gene are protected from the

development of biochemical abnormalities associated with the MS and atherosclerosis [5,6]. These observations suggest that TNF α -mediated induction of endothelial cell-derived PAI-1 may contribute significantly to the development and progression of the MS and atherosclerosis.

PAI-1 synthesis is regulated by multiple factors including insulin [7], $TNF\alpha$, interleukin (IL-1), and transforming growth factor β (TGF- β) [8]. $TNF\alpha$ is secreted by monocytes or macrophages in injured vessel walls and adipose tissue [9] and may contribute to the elevated endothelial cell PAI-1 levels.

Modulation of PAI-1 gene promoter activity involves a number of *cis*-acting elements for several *trans*-acting factors. CAGA elements have been identified in the PAI-1 gene promoter for the SMAD 3 and 4 proteins

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that are responsible for the induction of PAI-1 expression by TGF-β [10]. SP1 elements are thought to be responsible for mediating the response of PAI-1 to glucose [11] and angiotensin II [12]. An activator protein 1 (AP-1)-like binding site mediates the PAI-1 response to protein kinase C (PKC) and protein kinase A (PKA) signals [13,14]. A putative insulin response element has been postulated for position -98/-62 upstream of the transcription initiation site [15]. Recently, binding of the trans-acting factor Nur77 to a cis-acting element NIGF-B/NBRE has been identified as responsible for mediating induction of PAI-1 expression in response to TNF α stimulation [16]. Whilst the conventionally defined PAI-1 promoter does not contain a binding site for NFκB, a TNF α -responsive NFκB site has recently been identified 15 kb upstream of the transcription initiation site of the PAI-1 gene [17].

TZDs reduce insulin resistance, modify dyslipidaemia [18], improve endothelial function and may be protective against the development of atherosclerosis. TZDs are activating ligands for the peroxisome proliferator-activated receptor γ (PPAR γ) [19]. The effects of TZDs on endothelial cell PAI-1 expression in vitro remains inconclusive with reports of decreased [20–22] and increased [23,24] PAI-1 expression using different cell and culture systems.

In addition to the controversy surrounding the effects of TZDs on PAI-1 expression, the molecular mechanisms responsible for these effects remain unclear as no conventional peroxisome proliferator response element (PPRE) has been identified in the PAI-1 gene promoter. The in vitro trans-repression of PAI-1 by TZDs may result, in part, from PPAR γ antagonism of other *trans*-activating factors such as AP-1 and NF κ B, previously demonstrated in macrophages [25], or could perhaps reflect PPAR γ -independent activity similar to trans-repression of endothelial proinflammatory cytokines by TZDs [19]. Such PPAR γ -independent effects have also been documented in the setting of macrophage gene expression in lipid metabolism and inflammation [26].

Our study aims to clarify the current controversy surrounding TZD-mediated regulation of TNF α -induced PAI-1 expression in vascular endothelial cells and to identify the molecular mechanisms responsible for this effect.

Materials and methods

Materials. Rosiglitazone (RG) was kindly donated by Glaxo, Smith Kline (GSK), and Pioglitazone (PG) was kindly provided by Takeda Chemical Industries (Japan). The PPAR γ inhibitor SR-202, dimethyl-(dimethoxyphosphinyl)-p-chlorobenzyl phosphate, was kindly provided by Ilex Onc (Switzerland). TNF α was purchased from Promega (Australia).

Cell culture. The spontaneously transformed human vascular endothelial cell line, C11 STH [27], was cultured to confluence at 37 °C

in gelatin-coated Nunclon cell culture dishes in Media-199 supplemented with penicillin/streptomycin, 20% FCS, 20 μ g/ml endothelial cell growth factor, and 20 μ g/ml heparin. The glucose concentration in cell culture medium was 6.0 mM.

The cells were cultured with or without TNF α (10 ng/ml), with or without RG (10 μ M) or PG (10 μ M) or SR-202 (100 μ M) under serum free conditions for 16 h.

Determination of PAI-1 protein expression. Semiconfluent cultures of C11 STH cells were incubated under serum-free conditions, with or without treatment, for 16 h. The conditioned medium was collected and centrifuged at 10,000 rpm for 1 min, and the PAI-1 protein concentration in the supernatant was quantified using an ELISA assay (TintELIZE PAI-1; Biopool). Experiments were performed a minimum of three times.

Northern blot procedure. Total RNA was extracted by the method of Chomczynski and Sacchi [28]. Ten micrograms of RNA was loaded to each lane and electrophoresed through a 1% agarose gel containing 20% formaldehyde before being transferred to Hybond-N⁺ membrane (Amersham, Australia). Filters were hybridized overnight at 42 °C in 50% formamide hybridization buffer [29]. 32P-labelling of DNA was performed by the random priming procedure using the Prima-gene labelling kit (Promega, Australia) and hybridization using the Pst-1 fragments of PAI-1 [29]. After hybridization, the membranes were washed by standard techniques and exposed to Kodak BioMax film (Eastman Kodak, Rochester, NY, USA) at −70 °C with an intensifying screen. Stripping of membranes for rehybridization was performed by heating the membranes at 90 °C for 10 min in 2× SSC containing 0.1% SDS. Experiments were performed a minimum of three times and quantification of the 3.2 kb PAI-1 mRNA transcript (upper band) was performed.

Transient transfection and chloramphenicol acetyl transferase assay. C11 STH cells were transiently transfected with the PPRE-TK-CAT construct [30], the kind gift from Professor Donald Jump (Michigan State University, USA) or the dominant-negative mutant PPARy expression vector [31,32], the kind gift of Dr. John Wentworth (Royal Melbourne Hospital, Melbourne, Australia), or a PAI-1-CAT promoter construct containing the first 1.4 kb of the human PAI-1 gene promoter sequence [16], using the calcium phosphate precipitation method [33]. Cells were also co-transfected with plasmid pSV-β-galactosidase (Promega, Madison, WI, USA), and β-galactosidase activity was used as an internal control for transfection efficiency. Transfected cells were harvested 2 days later and cellular extracts were then prepared. Chloramphenicol acetyl transferase (CAT) activity assay was performed by incubating 40 µl of protein extracts (25 µg of protein), with 4 µl of 4.4 mm acetyl CoA and 1.0 µl of [14C]chloramphenicol at 37 °C for 4 h. Samples were extracted with 1 ml ethyl acetate, vacuum dried, and finally dissolved in 20 µl of ethyl acetate. The samples were spotted onto TLC plates and processed using standard techniques. Conversion of [14C]chloramphenicol into its acetylated product was assessed by autoradiography. B-Galactosidase activity in cell extracts was determined as previously described [34]. The degree of CAT activity was normalized by adjusting for changes in β-galactosidase activity in the same samples. Experiments were performed a minimum of three times.

Preparation of nuclear extracts. The preparation of nuclear extracts from C11 STH cells was performed as previously described [35]. Cells were added to 0.1 ml of NP40 lysis buffer [0.5% NP40, 10 mM NaCl, 10 mM Tris (pH 7.4), 3 mM MgCl₂, 5 mM DTT, and 1 mM PMSF]. After 10 min incubation on ice, samples were briefly centrifuged and washed with 0.2 ml NP40 buffer, and pellets were resuspended in 100 μl of buffer C [420 mM NaCl, 20 mM Hepes (pH 7.9), 1.5 mM MgCl₂, 0.2 mM EDTA, 25% glycerol, 5 mM DTT, and 5 mM PMSF]. After incubation on ice for 20 min and centrifugation at 13,000g at 4 °C for 20 min, the supernatants containing nuclear proteins (NPs) were collected and stored at -80 °C.

Electrophoretic mobility shift assay. Gel-purified oligonucleotides (100 ng) were labelled using T4 polynucleotide kinase and $[\gamma^{-32}P]ATP$.

Annealing was performed by adding a fourfold molar excess of the complementary strand and gel purified as previously described [35]. After elution from native acrylamide gel, samples were precipitated with ethanol and finally resuspended in NaCl/Tris/EDTA buffer [100 mm NaCl, 100 mm Tris (pH 7.4), and 10 mm EDTA (pH 7.4)] to approximately 100 cp/μl. To perform the electrophoretic mobility shift assays (EMSAs), 4–10 μg of NP extracts in 4 μl of Osborne buffer D [20 mM Hepes (pH 7.9), 2.0 mM MgCl₂, 0.2 mM EDTA, 20% glycerol, 5 mM DTT, 5 mM PMSF, and 50 mM KCl] [36] was incubated at 4 °C for 15 min with 1 μl poly[d(I–C)] (1 μg; used as a nonspecific competitor; Boehringer Mannheim, Germany) and 3 μl of SMK buffer (12 mM spermidine, 12 mM MgCl₂, and 200 mM KCl). Four microliters of ³²P-labelled probe (100 cp) diluted in Osborne buffer D was then added and the mixtures incubated on ice for a further 15 min before being applied to a native 5% polyacrylamide gel [36].

For competition titration experiments, extracts were incubated with 100 ng of unlabelled oligomers of either identical or unrelated sequence for 15 min prior to the addition of the probe. After electrophoresis, gels were fixed, dried, and autoradiographed overnight at $-70\,^{\circ}\text{C}$ with an intensifying screen. The sequence of the labelled NBRE oligomer is 5'-AGAGGGCAGAAAGGTCAAGGG-3' and the sequence of the unrelated competitor is 5'-TCAGCAAGGGA AATGGCTT-3'. Experiments were performed a minimum of three times.

Western blot procedure. Nuclear extracts from C11 STH cells (5.0 µg) were separated by SDS-PAGE under reducing conditions and transferred to nylon membranes. Membranes were hybridized with a polyclonal antibody directed against Nur77/Nurr1 (E20; Santa Cruz). A secondary antibody coupled to horseradish peroxidase was added and the immunocomplexes were assessed by enhanced chemiluminescence. Experiments were performed a minimum of two times.

Statistical methods. The effect of compounds on PAI-1 protein production, mRNA expression, and CAT activity were assessed by analysis of variance (ANOVA). Data were expressed as means \pm SEM and *P < 0.05 was considered statistically significant.

Results

Effect of PG and RG on constitutive and TNFa inducible PAI-1 mRNA expression and protein secretion

Both PG and RG at 10 µM had no effect on constitutive expression of PAI-1 mRNA and PAI-1 protein secretion (Figs. 1A–C). TNFα-induced PAI-1 mRNA and protein expression, whilst PG and RG, at 10 µM, attenuated TNFα-mediated induction of PAI-1 mRNA and protein expression (Figs. 1D-F). All results reached statistically significant levels and were of a magnitude similar to that previously reported in the literature [21,22,37]. Both the upper (3.2 kb) and lower (2.3 kb) PAI-1 mRNA transcripts were identified as previously described [38]. Modulation of both PAI-1 mRNA transcripts by treatment with TNFα and PG or RG was observed, consistent with previous reports [21–23,37]. Quantification of the upper (3.2 kb) PAI-1 mRNA transcript was performed in all Northern blot experiments to facilitate graphical data presentation.

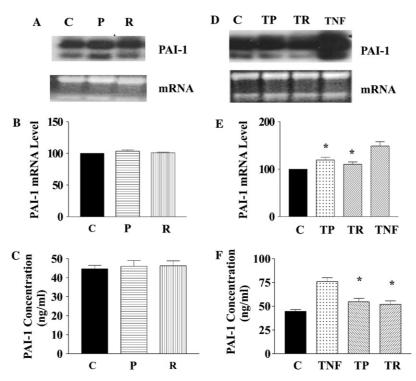


Fig. 1. (A,D) Northern blot of Pioglitazone and Rosiglitazone treatment on PAI-1 mRNA expression. 18S and 28S mRNA expression provides a loading control. (B,E) Quantitation of Pioglitazone and Rosiglitazone treatment on PAI-1 mRNA expression. (C,F) Effects of Pioglitazone and Rosiglitazone on PAI-1 protein secretion. C, control; P, Pioglitazone; R, Rosiglitazone; TNF, TNF α ; TP, TNF α + PG; TR, TNF α + RG. [n = 3; *P < 0.05; versus TNF].

PG and RG attenuation of TNF α -stimulated PAI-1 mRNA and protein expression is independent of inducible PPAR γ activation

SR-202, a potent and specific inhibitor of inducible PPAR γ activation, did not significantly modify the inhibitory effects of RG and PG on TNF α -stimulated PAI-1 mRNA expression and protein secretion (Figs. 2A–C).

Both PG and RG at 10 μ M increased expression of the PPRE-TK-CAT expression vector transiently transfected into C11 STH cells. These results indicate the presence of an inducible PPAR γ system in the C11 STH cell system (Fig. 2D). SR-202 treatment significantly reduced CAT-reporter gene expression induced by RG and PG in C11 STH cells to control levels demonstrating that SR-202 is an effective inhibitor and abolishes inducible PPAR γ activation (Fig. 2D).

A dominant-negative $PPAR\gamma$ construct identifies RGmediated inhibition of $TNF\alpha$ -induced PAI-1 expression as
independent of inducible $PPAR\gamma$ activation

In C11, STH cells co-transfected with the dominant-negative $PPAR\gamma$ and PPRE-TK-CAT constructs, no

significant RG (10 μ M)-inducible CAT activity was observed demonstrating successful inhibition of inducible PPAR γ activation in this cell system (Fig. 3A).

RG treatment at 10 μ M, continued to significantly attenuate TNF α -induced reporter gene activity in C11 STH cells, co-transfected with a 1.4 kb PAI-1 promoter construct [16] and the dominant-negative PPAR γ construct (Fig. 3B). As expected, RG treatment alone had no effect on CAT activity in cells co-transfected with the 1.4 kb PAI-1 promoter construct and the dominant-negative PPAR γ construct (Fig. 3B).

In addition, RG treatment at 10 μ M continued to significantly attenuate TNF α -induction of PAI-1 mRNA in cells transfected with the dominant-negative PPAR γ construct (Fig. 3C).

NP binding to the PAI-1 NBRE and Nur77/Nurr1 expression is inhibited by RG and PG in TNF α -stimulated C11 STH cells independent of inducible PPAR γ activity

NPs extracted from C11 STH cells specifically bound to a 32 P-labelled oligonucleotide harbouring the PAI-1 NBRE element as demonstrated by EMSA. Increased binding was observed upon TNF α stimulation and both PG and RG treatments attenuated the TNF α -mediated

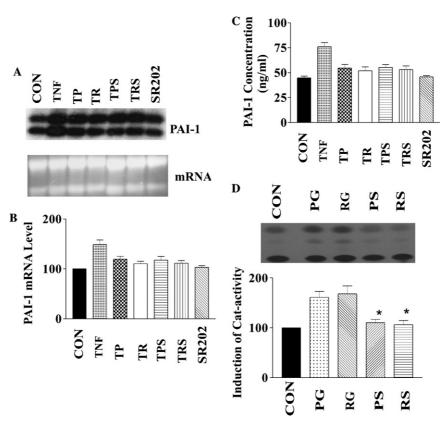


Fig. 2. (A) Northern blot of Pioglitazone, Rosiglitazone, and SR-202 treatment on TNF α -induced PAI-1 mRNA expression. 18S and 28S mRNA expression provides a loading control. (B) Quantitation of Pioglitazone, Rosiglitazone and SR-202 treatment on TNF α -induced PAI-1 mRNA expression. (C) Effects of Pioglitazone, Rosiglitazone, and SR-202 on PAI-1 protein secretion. (D) Effect of Pioglitazone, Rosiglitazone, and SR-202 treatment on PPRE-TK-CAT activity. Con, control; TNF, TNF α ; PG, Pioglitazone; RG, Rosiglitazone; TP, TNF α + PG; TR, TNF α + RG; PS, PG + SR-202; RS, RG + SR-202; TPS, TNF α + PG+SR-202; TRS, TNF α + RG + SR-202. [n = 3; *P < 0.05; versus PG or RG, respectively].

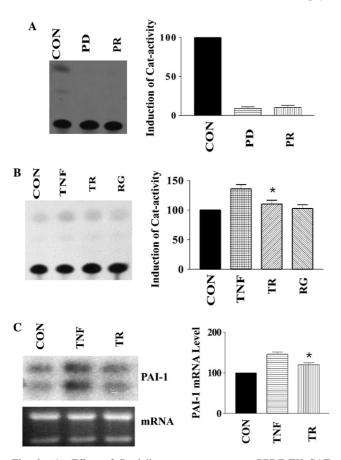


Fig. 3. (A) Effect of Rosiglitazone treatment on PPRE-TK-CAT activity in C11 STH cells co-transfected with the PPRE-TK-CAT, plasmid pSV- β -galactosidase, and dominant-negative PPAR γ mutant constructs. CON, C11 STH cells transfected with the PPRE-TK-CAT construct and plasmid pSV-\beta-galactosidase; PD, C11 STH cells cotransfected with the PPRE-TK-CAT, plasmid pSV-β-galactosidase, and dominant-negative PPAR γ mutant construct; PR, PD + RG. The panel on the right represents quantification of the observed effects over a minimum of three experiments. (B) Effect of Rosiglitazone and/or TNFα treatment on PAI-1-CAT activity in C11 STH cells cotransfected with the 1.4 kb PAI-1-TK-CAT, plasmid, pSV-β-galactosidase, and dominant-negative PPARγ mutant constructs. CON, C11 STH cells transfected with the 1.4 kb PAI-1-TK-CAT construct, plasmid pSV-β-galactosidase, and dominant-negative PPARγ mutant construct. TNF, TNFa-stimulated C11 STH cells co-transfected with the 1.4 kb PAI-1-TK-CAT, plasmid pSV-β-galactosidase, and dominant-negative PPARγ mutant construct; RG, Rosiglitazone + CON; TR, TNF α + RG. (C) Northern blot of Rosiglitazone treatment on TNFα-induced PAI-1 mRNA expression in C11 STH cells cotransfected with the plasmid pSV-\beta-galactosidase and dominantnegative PPARy mutant construct. 18S and 28S mRNA expression provides a loading control. The right panel shows the quantitation of PAI-1 mRNA expression. CON, C11 STH cells co-transfected with plasmid pSV-β-galactosidase and dominant-negative PPARγ mutant construct; TNF, TNFa stimulated C11 STH cells co-transfected with the plasmid pSV-β-galactosidase and dominant-negative PPARγ mutant construct; TR, TNF + RG [n = 3; *P < 0.05; versus TNF].

increase in binding of NPs while use of SR-202 had minimal effect on RG and PG attenuation of NP binding (Fig. 4). To determine if the effects of TNF α and PG and RG on NP binding correlated with expression of

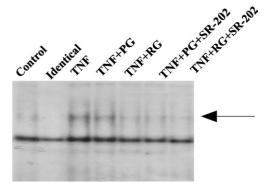


Fig. 4. C11 STH cells were untreated (control), treated with a 100-fold molar excess of unlabelled identical oligonucleotides (identical), TNF α (TNF), TNF α + PG, TNF α + RG, TNF α + PG + SR-202, and TNF α + RG + SR-202. Specific binding is indicated by black arrow.

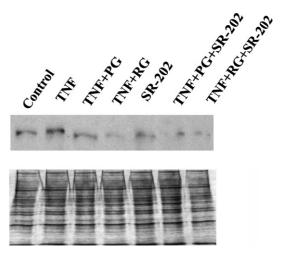


Fig. 5. Detection of Nur77/Nurr1 by Western blot was observed in unstimulated C11 STH (control) cells, and C11 STH cells treated with TNF α (TNF), TNF α + PG, TNF α + RG, TNF α + PG+ SR-202, TNF α + RG+ SR-202, and SR-202 alone. Coomassie stain of SDS-PAGE gel indicates balanced protein loading.

Nur77/Nurr1, Western blot analysis of NP extracts from C11 STH cells was performed. An increase in Nur77/Nurr1 expression in response to TNF α stimulation with minimal effect of SR-202 treatment on attenuation of TNF α -mediated induction of Nur77/Nurr1 expression by RG and PG (Fig. 5) was observed.

Discussion

Increased circulating levels of PAI-1 are thought to contribute to the risk of accelerated atherosclerosis [3,4]. As previous studies have demonstrated that TNF α can stimulate PAI-1 expression in endothelial cells [8], inhibition of TNF α -induced endothelial cell PAI-1 expression may be beneficial in the prevention and treatment of atherosclerosis in conditions associated with elevated TNF α including diabetes and the MS.

The TZDs are a recently introduced class of compounds identified as activators of the PPAR γ nuclear receptors. These agents are thought to exert their therapeutic effect, in part, by modifying transcriptional expression. The present study was undertaken to clarify current anomalies in the literature surrounding modulation of PAI-1 expression by the TZDs in endothelial cells and dissect out the molecular mechanisms responsible for these effects.

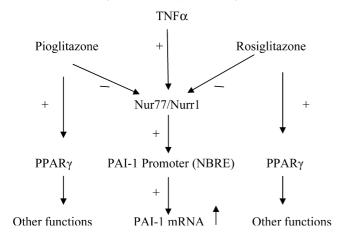
Previously, Kato et al. [21] suggested that TZDs inhibit TNF α-induced PAI-1 mRNA expression, possibly through a PPARγ-mediated mechanism, at low micromolar concentrations (10–20 μM). Studies by Hong et al. [22] supported these findings suggesting that PPARγ activation inhibits PAI-1 production in vascular endothelial cells via direct transcriptional repression, although no PAI-1 promoter cis-acting elements or molecular mechanism(s) for this effect are described. In contradistinction to these findings, other reports describe that PPARy activation in unstimulated or moderately stimulated endothelial cells results in the induction of PAI-1 expression at concentrations similar to those utilized by Kato et al. [21,23,24]. We have clearly demonstrated that PG and RG, widely used TZDs in clinical practice, suppress PAI-1 expression in endothelial cells stimulated by TNF α to levels, and at concentrations, previously reported in the literature [21,22,37].

Whilst PPARy activation has principally been associated with induction of gene expression in numerous cell systems, it has recently been demonstrated that PPARy agonists are also capable of inhibiting gene expression, in part, by antagonizing the activities of other activating transcription factors including AP-1, signal transducers and activators of transcription 1 (STAT-1), and NFkB [25]. TZD-mediated antagonism of NFkB activity has been postulated to contribute to the inhibition of TNFα-mediated induction of PAI-1 expression in endothelial cells [37]. In addition, it has also been demonstrated that endogenous ligands of PPARy may have actions independent of PPAR activation in endothelial cells [39]. Recent studies, utilizing a dominant-negative approach to assess the effects of PPAR γ in regulating glucose uptake into adipocytes in the presence of TZDs also suggest that these agents may act independent of PPARγ activation [31]. Although no classical PPRE response element has been identified in PAI-1 promoter, our results demonstrate that TZDs inhibit TNFα-mediated induction of PAI-1 expression in C11 STH cells, suggesting the possibility of TZDs acting independently of inducible PPARγ activation, perhaps via another cisacting element. In order to determine if these effects were mediated independent of inducible PPARγ activation, we utilized the recently described specific PPARγ inhibitor SR-202 [40] and transfection of a dominant-negative PPARγ construct [31,32]. SR-202 treatment had no significant effect on TZD-mediated modulation of TNFα

stimulation of PAI-1 secretion (Figs. 2A-C), suggesting that these effects are mediated independent of inducible PPARγ activation. In addition, RG treatment resulted in persistent inhibition of TNF α -mediated induction of a reporter gene construct harbouring 1.4 kb of the PAI-1 promoter, previously demonstrated to be TNF α responsive [16] and of PAI-1 mRNA in C11 STH cells co-transfected with a dominant-negative PPARy construct (Figs. 3B and C). This is further strong evidence supporting the hypothesis that TZDs modify TNFαstimulated secretion of PAI-1 independent of inducible PPAR γ activation. The presence of an active, inducible PPARγ system in the C11 STH cell system was confirmed with the activation of a PPRE-TK-CAT construct transfected into C11 STH cells and stimulated with RG (Fig. 2D). The efficacy of SR 202 as an inhibitor of inducible PPARy activation was also demonstrated using this system (Fig. 2D). Co-transfection of the PPRE-TK-CAT and PPARγ dominant-negative constructs demonstrated effective silencing of inducible PPARγ activation in the C11 STH cell system when treated with RG (Fig. 3A). Whilst addressing the need for inducible PPARγ activation, these experiments do not determine whether our current observations are entirely PPARy independent. Additional studies, currently being performed in the laboratory, utilizing PPAR γ -/- embryonic stem cells will enable the determination of the absolute requirement for PPARy in TZD-mediated inhibition of TNFα-induced PAI-1 expression. Interestingly, previous reports in the literature suggest that PPARγ receptor is required for the positive effects of its ligands (TZDs) on gene regulation, although the inhibitory effects on gene regulation by TZDs may not require the presence of receptor [26]. In addition, evidence suggests TZDs are also able to mediate regulation of other trans-acting factor (e.g., NFkB) binding and activity in the absence of PPARy [41].

To investigate alternative molecular mechanisms for TZD-mediated inhibition of TNFα-induced PAI-1 expression, in the light of evidence to suggest this effect was independent of inducible PPAR γ , we explored the effects of TZDs and TNF α on the binding of NPs to the PAI-1 (NBRE) cis-acting response element, previously identified to be important in TNFα-mediated regof PAI-1 expression [16]. Our results demonstrated increased binding of NPs to the cis-acting element NBRE upon TNFα stimulation. In addition, both PG and RG treatments attenuated the TNFα-mediated increase in the binding of NPs to this element (Fig. 4). The specific PPARγ inhibitor SR-202 failed to modulate this effect significantly. Whilst it has been previously demonstrated that several members of the orphan nuclear receptor subfamily, NGFI-B, including Nur77, Nurr1, and NOR-1, bind in a monomeric and specific manner to the NBRE consensus sequence [42] western blot analysis of NP extracts from C11 STH cells utilizing the E20 antibody (Santa Cruz), known to recognize the C-terminus of Nur77 or Nurr1, had a similar expression profile to that observed in EMSA studies in response to TNF α , RG, PG, and SR-202 treatment (Fig. 5), suggesting that either Nur77 or Nurr1 binds the PAI-1 NBRE in C11 STH cells. Taken together, these findings suggest that (a) PG- and/or RG-mediated inhibition of TNF α -induced PAI-1 production correlates with the inhibition of binding of NPs of the NGFI-B family to the PAI-1 NBRE-binding site and expression of either Nur77 or Nurr1. (b) These effects are likely to be independent of inducible PPAR γ activation. (c) This may represent a novel molecular mechanism to explain the inhibitory effects of TZDs on TNF α stimulated PAI-1 expression in the absence of inducible PPAR γ activation.

In conclusion, our findings demonstrate that the TZDs RG and PG inhibit TNF α -mediated induction of PAI-1 expression in C11 STH vascular endothelial cells and that inducible PPAR γ activation is unlikely to be required for this effect. Furthermore, we have identified the regulation of TNF α -mediated induction of Nur77/Nurr1 expression and NGFI-B family member NP binding to the PAI-1 gene promoter (NBRE) by TZDs as potentially involved in mediating these effects, also in the absence of inducible PPAR γ activation (see model).



References

- P. Libby, Inflammation in atherosclerosis, Nature 420 (2002) 868– 874.
- [2] S. Devaraj, D.Y. Xu, I. Jialal, C-reactive protein increases plasminogen activator inhibitor-1 expression and activity in human aortic endothelial cells: implications for the metabolic syndrome and atherothrombosis, Circulation 107 (2003) 398– 404.
- [3] M.R. Hayden, S.C. Tyagi, Intimal redox stress: accelerated atherosclerosis in metabolic syndrome and type 2 diabetes mellitus, Atheroscleropathy Cardiovasc. Diabetol. 1 (2002) 1–3.
- [4] I. Juhan-Vague, M.C. Alessi, P. Vague, Increased plasma plasminogen activator inhibitor 1 levels; a possible link between

- insulin resistance and atherothrombosis, Diabetologia 34 (1991) 457-462
- [5] L.-J. Mao, S.-L. Mao, K.L. Taylor, T. Kanjanabuch, Y. Guan, Y. Zhang, N. Brown, L.L. Swift, O.P. McGuinness, D.H. Wasserman, D.E. Vaughan, A.B. Fogo, Prevention of obesity and insulin resistance in mice lacking plasminogen activator inhibitor 1, Diabetes 53 (2004) 336–346.
- [6] D.T. Eitzman, R.J. Westrick, Z. Xu, J. Tyson, D. Ginsburg, Plasminogen activator inhibitor-1 deficiency protects against atherosclerosis progression in the mouse carotid artery, Blood 96 (2000) 4212–4215.
- [7] T. Nordt, D. Schneider, B. Sobel, Augmentation of the synthesis of plasminogen activator inhibitor type-1 by precursors of insulin. A potential risk factor for vascular disease, Circulation 89 (1994) 321–330.
- [8] R.R. Schleef, M.P. Bevilacqua, M. Sawdey, M.A. Gimbrone Jr., D.J. Loskutoff, Cytokine activation of vascular endothelium. Effects on tissue-type plasminogen activator and type 1 plasminogen activator inhibitor, J. Biol. Chem. 263 (1994) 5797–5803.
- [9] G.S. Hotamisligil, N.S. Shargill, B.M. Spiegelman, Adipose expression of tumor necrosis factor-: direct role in obesity-linked insulin resistance, Science 259 (1993) 87–91.
- [10] S. Dennler, S. Itoh, D. Vivien, P. ten Dijke, S. Huet, J.M. Gauthier, Direct binding of Smad3 and Smad4 to critical TGF beta-inducible elements in the promoter of human plasminogen activator inhibitor-type 1 gene, EMBO J. 17 (1993) 3091–3100
- [11] Y.Q. Chen, M. Su, R.R. Walia, Q. Hao, J.W. Covington, D.E. Vaughan, Sp1 sites mediate activation of the plasminogen activator inhibitor-1 promoter by glucose in vascular smooth muscle cells, J. Biol. Chem. 273 (1998) 8225–8231.
- [12] M. Motojima, T. Ando, T. Yoshioka, Sp1-like activity mediates angiotensin-II-induced plasminogen-activator inhibitor type-1 (PAI-1) gene expression in mesangial cells, Biochem. J. 349 (2000) 435–441.
- [13] J. Arts, J. Grimbergen, K. Toet, T. Kooistra, On the role of c-Jun in the induction of PAI-1 gene expression by phorbol ester, serum, and IL-1alpha in HepG2 cells, Arterioscler. Thromb. Vasc. Biol. 19 (1999) 39–46.
- [14] H. Knudsen, T. Olesen, A. Riccio, P. Ungaro, L. Christensen, P.A. Andreasen, A common response element mediates differential effects of phorbol esters and forskolin on type-1 plasminogen activator inhibitor gene expression in human breast carcinoma cells, Eur. J. Biochem. 220 (1994) 63–74.
- [15] C. Banfi, P. Eriksson, G. Giandomenico, L. Mussoni, L. Sironi, A. Hamsten, E. Tremoli, Transcriptional regulation of plasminogen activator inhibitor type 1 gene by insulin: insights into the signaling pathway, Diabetes 50 (2001) 1522–1530.
- [16] F. Gruber, P. Hufnagl, R. Hofer-Warbinek, J.A. Schmid, J.M. Breuss, R. Huber-Beckmann, M. Lucerna, N. Papac, H. Harant, I. Lindley, R. de Martin, B.R. Binder, Direct binding of Nur77/NAK-1 to the plasminogen activator inhibitor 1 (PAI-1) promoter regulates TNF alpha -induced PAI-1 expression, Blood 101 (2003) 3042–3048.
- [17] B. Hou, M. Eren, C.A. Painter, J.W. Covington, J.D. Dixon, J.A. Schoenhard, D.E. Vaughan, Tumor necrosis factor α activates the human plasminogen activator inhibitor-1 gene through a distal nuclear factor κB site, J. Biol. Chem. 279 (2004) 18127–18136.
- [18] K. Mimura, F. Umeda, S. Hisamatsu, S. Taniguchi, Y. Ono, N. Nakashima, K. Kobayashi, M. Masakado, Y. Sako, H. Nawata, Effects of a new oral hypoglycaemic agent (CS-045) on metabolic abnormalities and insulin resistance in type 2 diabetes, Diabet. Med. 11 (1994) 685–691.
- [19] J. Bar-Tana, Peroxisome proliferator-activated receptor gamma (PPAR) activation and its consequences in humans, Toxicol. Lett. 120 (2001) 9–19.

- [20] L. Nilsson, T. Takemura, P. Eriksson, A. Hamsten, Effects of fibrate compounds on expression plasminogen activator inhibitor-1 by cultured endothelial cells, Arterioscler. Thromb. Vasc. Biol. 19 (1999) 1577–1581.
- [21] K. Kato, H. Satoh, Y. Endo, D. Yamada, S. Midorikawa, W. Sato, K. Mizuno, T. Fujita, K. Tsukamoto, T. Watanabe, Thiazolidinediones down-regulate plasminogen activator inhibitor type 1 expression in human vascular endothelial cells: a possible role for PPAR gamma in endothelial function, Biochem. Biophys. Res. Commun. 258 (1999) 431–435.
- [22] H.K. Hong, Y.M. Cho, K.H. Park, C.T. Lee, H.K. Lee, K.S. Park, Peroxisome proliferator-activated receptor gamma mediated inhibition of plasminogen activator inhibitor type 1 production and proliferation of human umbilical vein endothelial cells, Diabetes Res. Clin. Pract. 62 (2003) 1–8.
- [23] N. Marx, T. Bourcier, G.K. Sukova, P. Libby, J. Plutzky, PPAR gamma activation in human endothelial cells increases plasminogen activator inhibitor type-1 expression: PPAR gamma as a potential mediator in vascular disease, Arterioscler. Thromb. Vasc. Biol. 19 (1999) 546–551.
- [24] X. Xin, S. Yang, J. Kowalski, M.E. Gerritsen, Peroxisome proliferator-activated receptor gamma ligands are potent inhibitors of angiogenesis in vitro and in vivo, J. Biol. Chem. 274 (1999) 9116–9121.
- [25] M. Ricote, A.C. Li, T.M. Willson, C.J. Kelly, C.K. Glass, The peroxisome proliferator-activated receptor- is a negative regulator of macrophage activation, Nature 391 (1998) 79–82.
- [26] A. Chawla, Y. Barak, L. Nagy, D. Liao, P. Tontonoz, R.M. Evans, PPAR-γ dependent and independent effects on macrophage-gene expression in lipid metabolism and inflammation, Nat. Med. 7 (2001) 48–52.
- [27] G.W. Cockerill, G. Meyer, L. Noack, M.A. Vadas, J.R. Gamble, Characterization of a spontaneously transformed human endothelial cell line, Lab. Invest. 71 (1994) 497–509.
- [28] P. Chomczynski, N. Sacchi, Single-step method of RNA isolation by acid guanidinium thiocyanate-phenol-chloroform extraction, Anal. Biochem. 162 (1987) 156–159.
- [29] R.L. Medcalf, M. Ruegg, W.D. Schleuning, A DNA motif related to the cAMP-responsive element and an exon-located activator protein-2 binding site in the human tissue-type plasminogen activator gene promoter cooperate in basal expression and convey activation by phorbol ester and cAMP, J. Biol. Chem. 265 (1990) 14618–14626.
- [30] N. Parameswaran, C.S. Hall, J.M. Bomberger, H.V. Sparks, D.B. Jump, W.S. Spielman, Negative growth effects of ciglitazone on kidney interstitial fibroblasts: role of PPAR-gamma, Kidney Blood Press. Res. 26 (2003) 2–9.
- [31] C. Nugent, J.B. Prins, J.P. Whitehead, D. Savage, J.M. Wentworth, K. Chatterjee, S. O'Rahilly, Potentiation of glucose uptake in 3T3-L1 adipocytes by PPARγ agonists is maintained in cells expressing a PPARγ dominant-negative mutant: evidence for selectivity in the downstream responses

- to PPARγ activation, Mol. Endocrinol. 15 (2001) 1729–1738
- [32] M. Gurnell, J.M. Wentworth, M. Agostini, M. Adams, T.N. Collingwood, C. Provenzano, P.O. Browne, O. Rajanayagam, T.P. Burris, J.W. Schwabe, M.A. Lazar, V.K. Chatterjee, A dominant-negative peroxisome proliferator-activated receptor gamma (PPARgamma) mutant is a constitutive repressor and inhibits PPARgamma-mediated adipogenesis, J. Biol. Chem. 275 (2000) 5754–5759.
- [33] M. Costa, Y. Shen, F. Maurer, R.L. Medcalf, Transcriptional regulation of the tissue-type plasminogen-activator gene in human endothelial cells: identification of nuclear factors that recognise functional elements in the tissue-type plasminogen-activator gene promoter, Eur. J. Biochem. 258 (1998) 123–131.
- [34] L.A. Kirshenbaum, W.R. MacLellan, W. Mazur, B.A. French, M.D. Schneider, Highly efficient gene transfer into adult ventricular myocytes by recombinant adenovirus, J. Clin. Invest. 92 (1993) 381–387.
- [35] M. Costa, R.L. Medcalf, Differential binding of cAMP-responsive-element (CRE)-binding protein-1 and activating transcription factor-2 to a CRE-like element in the human tissue-type plasminogen activator (t-PA) gene promoter correlates with opposite regulation of t-PA by phorbol ester in HT-1080 and HeLa cells, Eur. J. Biochem. 237 (1996) 532–538.
- [36] L. Osborne, S. Kunkel, G.J. Nabel, Tumor necrosis factor alpha and interleukin 1 stimulate the human immunodeficiency virus enhancer by activation of the nuclear factor kappa B, Proc. Natl. Acad. Sci. USA 86 (1989) 2336–2340.
- [37] E. Hamaguchi, T. Takamura, A. Shimizu, Y. Nagai, Tumour necrosis factor-α and troglitazone regulate plasminogen activator inhibitor type 1 production through extracellular signal-regulatedkinase- and Nuclear Factor-κB-dependent pathways in cultured human umbilical vein endothelial cells, J. Pharm. Exp. Ther. 307 (2003) 987–994.
- [38] D.J Loskutoff, M. Linders, J. Keijer, H. Veerman, H. Van Heerikhuizen, H. Pannekoek, Structure of the human plasminogen activator inhibitor 1 gene: nonrandom distribution of introns, Biochemistry 26 (1987) 3763–3768.
- [39] J. Zhang, M. Fu, L. Zhao, Y.E. Chen, 15-Deoxy-prostaglandin J (2) inhibits PDGF-A and -B chain expression in human vascular endothelial cells independent of PPAR gamma, Biochem. Biophys. Res. Commun. 298 (2002) 128–132.
- [40] J. Rieusset, F. Touri, L. Michalik, P. Escher, B. Desvergne, E. Niesor, W. Wahli, A new selective peroxisome proliferator-activated receptor gamma antagonist with antiobesity and anti-diabetic activity, Mol. Endocrinol. 16 (2002) 2628–2644.
- [41] Y. Hattori, S. Hattori, K. Kasai, Troglitazone upregulates nitric oxide synthesis in vascular smooth muscle cells, Hypertension 33 (1999) 943–948.
- [42] K. Maruyama, T. Tsukada, N. Ohkura, S. Bandoh, T. Hosono, K. Yamaguchi, The NGFI-B subfamily of the nuclear receptor superfamily (Review), Int. J. Oncol. 12 (1998) 1237–1243.