

RESEARCH PAPER

Impaired neoangiogenesis in β_2 -adrenoceptor gene-deficient mice: restoration by intravascular human β_2 -adrenoceptor gene transfer and role of NF κ B and CREB transcription factors

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BACKGROUND AND PURPOSE

There is much evidence supporting the role of β_2 -adrenoceptors (β_2 AR) in angiogenesis but the mechanisms underlying their effects have not been elucidated. Hence, we studied post-ischaemic angiogenesis in the hindlimb (HL) of β_2 AR knock-out mice (β_2 AR^{-/-}) *in vivo* and explored possible molecular mechanisms *in vitro*.

EXPERIMENTAL APPROACH

Femoral artery resection (FAR) was performed in wild-type and β_2 AR^{-/-} mice and adaptive responses to chronic HL ischaemia were explored; blood flow was measured by ultrasound and perfusion of dyed beads, bone rarefaction, muscle fibrosis and skin thickness were evaluated by immunofluorescence and morphometric analysis. Intrafemoral delivery of an adenovirus encoding the human β_2 AR (AD β_2 AR) was used to reinstate β_2 ARs in β_2 AR^{-/-} mice. Molecular mechanisms were investigated in mouse-derived aortic endothelial cells (EC) *in vitro*, focusing on NF κ B activation and transcriptional activity.

RESULTS

Angiogenesis was severely impaired in β_2 AR^{-/-} mice subjected to FAR, but was restored by gene therapy with AD β_2 AR. The proangiogenic responses to a variety of stimuli were impaired in β_2 AR^{-/-} EC *in vitro*. Moreover, removal of β_2 ARs impaired the activation of NF κ B, a transcription factor that promotes angiogenesis; neither isoprenaline (stimulates β ARs) nor TNF α induced NF κ B activation in β_2 AR^{-/-} EC. Interestingly, cAMP response element binding protein (CREB), a transcription factor that counter regulates NF κ B, was constitutively increased in β_2 AR^{-/-} ECs. AD β_2 AR administration restored β_2 AR membrane density, reduced CREB activity and reinstated the NF κ B response to isoprenaline and TNF α .

CONCLUSIONS AND IMPLICATIONS

Our results suggest that β_2 ARs control angiogenesis through the tight regulation of nuclear transcriptional activity.

Abbreviations

AD β_2 AR, gene therapy with adenovirus encoding the human β_2 AR; ADU, arbitrary densitometry units; β_2 AR, β_2 adrenoceptor; β_2 AR^{-/-}, β_2 AR knock-out mice; BF, blood flow; CREB, cAMP response element binding protein; EC, endothelial cell; US, ultrasound; VEGF, vascular endothelial growth factor

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Introduction

Little is known about the role of the β_2 -adrenoceptor (β_2 AR) in the vasculature. Recently, our group and others have begun to elucidate the mechanisms of β_2 AR control of vascular functions (Lembo *et al.*, 1997; Ferro *et al.*, 1999) and showed that this receptor can activate eNOS in an Akt-dependent manner and induce release of nitric oxide (NO) at the endothelium (Iaccarino *et al.*, 2002; 2004). We have also shown that the adenoviral-mediated endothelial overexpression of the β_2 AR regulates post-ischaemic angiogenesis (Iaccarino *et al.*, 2005), to the extent that β_2 ARs can correct impaired angiogenesis in animal models of cardiovascular disease such as the spontaneously hypertensive rat (Iaccarino *et al.*, 2002; 2005). The mechanisms underlying β_2 AR-regulated angiogenesis have still not been elucidated. One possible explanation is that receptors such as the β_2 AR are able to regulate the transcriptional activity of the cell, in order to promote the release of proangiogenic cytokines such as vascular endothelial growth factor (VEGF). Indeed, β_2 AR overexpression results in VEGF accumulation in the culture medium of endothelial cells. VEGF has a transcriptional regulation that is controlled by the hypoxia responsive transcription factor-1 (HIF-1), and also by NF κ B, which is known to be activated downstream by tumour necrosis factor receptors (TNF-R) superfamily-members and some G protein-coupled, seven transmembrane (7TM) receptors (GPCRs) (Ye, 2001).

The role of NF κ B in angiogenesis is well established, and is linked to its ability to regulate inflammatory cytokine production in many cellular types; these include the endothelium, infiltrating macrophages, vascular smooth muscle cells and pericytes, and skeletal muscle cells. In this context, receptor and transcription factors are major players, allowing the finely tuned response of different cell types. Therefore, NF κ B represents a particularly apt subject for our investigation on the signal transduction mechanisms underlying the proangiogenic effects of β_2 ARs.

The β_2 AR knock-out (β_2 AR $^{-/-}$) mouse model has already proved useful to unveil specific molecular features of the β_2 AR (Chruscinski *et al.*, 1999; Shenoy *et al.*, 2006). We therefore exploited such a model to investigate the adaptive responses to chronic hindlimb (HL) ischaemia in a β_2 AR-negative (β_2 AR $^{-/-}$) situation. Furthermore, using adenoviral-mediated gene transfer, we reconstituted membrane β_2 AR expression in the ischaemic HL. *In vitro*, we explored the possible mechanisms accounting for β_2 AR's beneficial effects on angiogenesis, focusing particularly on NF κ B activation and transcriptional activity.

Methods

Mouse strain and surgical procedures

Previously described β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ mice (age 14–18 weeks) were used in this study (Chruscinski *et al.*, 1999). Founders were provided by courtesy of Brian Kobilka, Stanford University, CA. Mice were bred in heterozygosity and homozygous β_2 AR $^{-/-}$ or β_2 AR $^{+/+}$ male littermates were used as the study and control population. All procedures were approved by the Thomas Jefferson University Institutional

Animal Care and Use Committee and the Federico II University Ethical Committee for Animal Research. Mice were anaesthetized with a mixture of ketamine (100 mg·kg $^{-1}$) and xylazine (3 mg·kg $^{-1}$) and the right common femoral artery was isolated and removed. In a group of β_2 AR $^{-/-}$ mice ($n = 20$), we placed a silastic catheter into the femoral artery distal to the resection, through which a solution containing 10^{11} tvp of either an adenovirus encoding for LacZ or the human β_2 AR gene was infused into the HL and allowed to remain there for 30 min while the saphenous vein was temporarily occluded (Santulli *et al.*, 2009a). Afterwards, the virus was removed through the catheter, the common femoral artery removed and the wound closed in layers. With this manoeuvre, we ascertained that endothelial cells, vascular smooth muscle cells and skeletal myocytes of the hindlimb express the transgene carried by the viral vector, as found previously (Santulli *et al.*, 2009a). Mice were checked daily for fur loss, skin lesions (blistering), necrosis, self-inflicted amputations of the ischaemic hindlimb. Surgical aftercare and distress surveillance were performed according to institution's guidelines.

Blood flow determination

Blood flow (BF) in the posterior tibial artery of ischaemic and non-ischaemic HL was evaluated by ultrasound (US) (using a VisualSONICS VeVo 770 imaging system with a 710 MHz scanhead) in isoflurane-anaesthetized mice (2% v·v $^{-1}$) immediately after surgery and at days 3, 7, 10 and 14 thereafter. We measured maximal velocity (Vmax) and maximal diameter of the vessel. After calculation of the vessel area, BF was calculated using the formula: BF = Vmax/vessel area (Santulli *et al.*, 2009a). Data are expressed as ischaemic to non-ischaemic ratio. Fourteen days after surgery, mice were anaesthetized as above, and a PE 10 catheter was placed into the abdominal aorta through the left common carotid, as previously described (Iaccarino *et al.*, 2002). Maximal vasodilatation was obtained by administration of nitroglycerin (2 μ g i.a.) followed by injection of 3×10^6 orange-dyed beads (15 μ m diameter, Triton Technologies, San Diego, CA, USA). Animals were then killed by cervical dislocation, samples of the gastrocnemius muscle from the ischaemic and non-ischaemic HL were collected and frozen with liquid nitrogen and stored at -80°C . Next, the samples were homogenized and digested according to manufacturer protocol; the beads were collected and suspended in DMTF. The release of dye was assessed by light absorption at 450 nm (Santulli *et al.*, 2009a). Data are expressed as ischaemic to non-ischaemic muscle ratio.

Immunofluorescence and morphology

At 14 days, we used B mode US for morphological analysis of the ischaemic and contralateral hindlimbs. In particular, we evaluated bone rarefaction, muscle fibrosis and skin thickness, all processes that are associated with HL ischaemia (Santulli *et al.*, 2009b).

The anterior tibial muscle was isolated and harvested for immunostaining as described previously (Zhou *et al.*, 2003). Specimens were fixed in 4% paraformaldehyde and then embedded in paraffin. A series of cross-sections (6 μ m) were obtained. Rat anti-CD31 antibody (1:50, BD Pharmingen, CA) and rabbit anti-von Willebrand (vW) factor (1:50, DAKO,

Carpinteria, CA) were used as primary antibodies for double staining of endothelial cells. As a negative control, normal rat and rabbit IgG were used instead of the primary antibody. The primary antibodies were recognized by Alexa Fluor 594 goat anti-rat (Green) and Alexa Fluor 488 goat anti-rabbit (Blue) secondary antibodies (1:100), respectively (Molecular Probes, Eugene, Oregon). Nuclei were counterstained with VECTASHIELD mounting medium with DAPI (Red) (Vector, Burlingame, CA). Immunofluorescence was visualized under a fluorescence microscope (Olympus IX71, Olympus, Center Valley, CA, USA) and the number of capillaries per 20 fields was measured on each section by two independent operators (M.C., R.H.Z.), blinded to treatment. Another series of tissue sections were stained with haematoxylin/eosin (H&E) for morphological analysis.

β AR radioligand binding

Membrane fractions were obtained from quadriceps muscle homogenates by centrifugation as previously described (Iaccarino *et al.*, 1998). Total receptor density was assessed by β AR radioligand binding studies using the non-selective β AR antagonist [125 I]-cyanopindolol (125 I-CYP), as described previously (Iaccarino *et al.*, 2001b). The percentage of β_2 ARs was calculated from the high affinity binding subpopulation using GraphPad Prism.

Adenoviral constructs

We used adenoviral vectors encoding for the human wild-type β_2 AR gene (Ad β_2 AR) and the LacZ (control virus) as previously described (Iaccarino *et al.*, 2002; 2005; Ciccarelli *et al.*, 2007).

Cell culture

Aortic endothelial cells (ECs) from β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ mice were isolated as previously described (Iaccarino *et al.*, 2002). Vessels were cut into rings, placed on matrigel, incubated in DMEM supplemented with 20% FBS and EC growth supplement ($10\text{ mg} \cdot 100\text{ mL}^{-1}$), and incubated at 37°C in 5% CO_2 . After 7 days, aortic rings were removed, and the ECs remaining on matrigel were expanded in DMEM containing 10% FBS.

Western blotting

Cells were deprived of serum overnight, exposed to agonists and lysed in RIPA/SDS buffer ($50\text{ mmol} \cdot \text{L}^{-1}$ Tris-HCl, pH 7.5, $150\text{ mmol} \cdot \text{L}^{-1}$ NaCl, 1% NP-40, 0.25% deoxycholate, $9.4\text{ mg} \cdot 50\text{ mL}^{-1}$ sodium orthovanadate, 20% SDS). Protein concentration was determined using a BSA assay kit (Pierce, Thermoscientific, Rockford, IL, USA). I κ B α was immunoprecipitated from total lysates with anti-I κ B α antibody and protein A/G agarose. Immunocomplexes or total lysates were electrophoresed by SDS/PAGE and transferred to a nitrocellulose filter. Total I κ B α and β_2 AR were visualized by specific antibodies (Santacruz, Santa Cruz, CA, USA), anti-rabbit horseradish peroxidase-conjugated secondary antibody (Santacruz) and standard chemiluminescence (Pierce). Autoradiographies were then digitalized and densitometry quantification performed using dedicated software (ImageQuant, GE HealthCare, Milano, Italy). Data are presented as arbitrary densitometry units (ADU) after

normalization for actin. In other experiments, cells were infected with Ad β_2 AR at a rate of 20:1.

VEGF quantification

Aortic ECs from β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ mice were deprived of serum overnight and then stimulated with isoprenaline (Iso) for 6 h. Culture medium was collected and VEGF was immunoprecipitated with anti-VEGF antibody (Santacruz) and protein A/G agarose (Santacruz). After being extensively washed, the immunocomplexes were electrophoresed by SDS/PAGE and transferred to nitrocellulose; VEGF was visualized by specific antibody (Santacruz), anti-rabbit HRP-conjugated secondary antibody (Santacruz) and standard chemiluminescence (Pierce). For our analysis, we examined the Western blot band corresponding to VEGF 164 isoform.

Cell transfection and luciferase assay

Transient transfection was performed using Lipofectamine 2000 (Invitrogen, Paisley, UK) according to manufacturer's instruction. Aortic ECs from β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ mice were transfected with plasmid expression vectors coding cAMP response element binding protein (CREB) and I κ B plasmids (Sorriento *et al.*, 2009; 2010) used for signal transduction studies, or with a κ B-luciferase reporter and β -galactosidase for NF κ B activity. In this latter case, 24 h after transfection, cells were deprived of serum overnight and stimulated with TNF α ($20\text{ ng} \cdot \text{mL}^{-1}$), as positive control, and Iso ($10^{-7}\text{ mol} \cdot \text{L}^{-1}$) for 1, 3 and 6 h. Lysates were analysed using the luciferase assay system with reporter lysis buffer from Promega and measured in a β -counter. Relative luciferase activity was normalized against the co-expressed β -galactosidase activity to overcome variations in transfection efficiency between samples. In other experiments, cells were stimulated with Iso ($10^{-7}\text{ mol} \cdot \text{L}^{-1}$) or TNF α ($20\text{ ng} \cdot \text{mL}^{-1}$) for 3 h (Santulli *et al.*, 2009b).

Tube formation assay

When plated on matrigel (Becton Dickinson, Bedford, MA, USA), ECs organize themselves into a network-like structure, resembling sinusoids of immature vessels (Ciccarelli *et al.*, 2008). Six-well multidishes were coated with growth factor-reduced matrigel ($10\text{ mg} \cdot \text{mL}^{-1}$) according to the manufacturer's instructions. Control and β_2 AR $^{-/-}$ ECs (2×10^5) were incubated at 37°C for 12 h in 1 mL of DMEM medium. Tube formation was defined as a structure exhibiting a length four times its width. Network formation was observed using an inverted phase-contrast microscope (ZEISS). Representative fields were taken, and the average of the total number of complete tubes formed by cells was counted in 15 random fields by two independent investigators (D.S and E.C.).

RT PCR

Total RNA was isolated from ECs deprived of serum overnight or mouse hindlimb muscle using Trizol reagent (Invitrogen) and cDNA was synthesized by means of Thermo-Script RT-PCR System (Invitrogen), following the manufacturer's instruction. After reverse transcription, real-time quantitative polymerase chain reaction (RT-PCR) was performed with the SYBR Green Real Time PCR master mix kit (Applied Biosystems, Carlsbad, CA, USA). The reaction was visualized with

SYBR Green Analysis (Applied Biosystem) software on a StepOne thermocycler (Applied Biosystem). Primers for VEGF-165 and GAPDH gene analysis were as previously described (Sorriento *et al.*, 2009).

Statistical analysis

Data are presented as mean \pm SEM. Each experiment was performed from three to five times. *P* values were calculated by Student's *t*-test or two-way ANOVA as appropriate. For distribution statistics, the chi-squared test was performed.

The nomenclature conforms to the British Journal of Pharmacology's 'Guide to Receptors and Channels' (Alexander *et al.*, 2009).

Results

In vivo post-ischaemic angiogenesis

Blood perfusion evaluation. As shown in Figure 1A, compared to β_2 AR proficient controls, hindlimbs from β_2 AR $^{-/-}$ mice present a significantly lower β AR membrane-density. Intra-

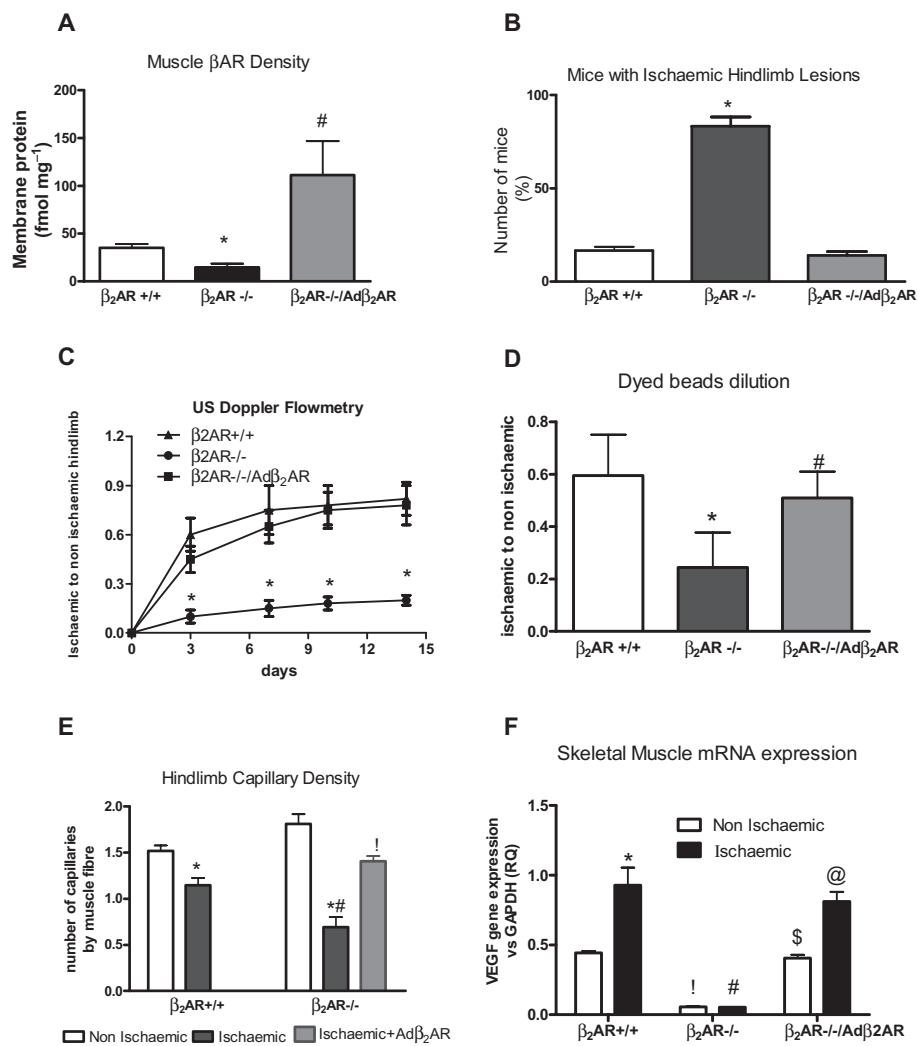


Figure 1

β_2 AR knock-out exacerbated the symptoms of ischaemia and impaired perfusion and angiogenesis in ischaemic hindlimbs of mice. (A) Effects of adenoviral-mediated gene transfer on β AR levels (**P* < 0.05 β_2 AR $^{-/-}$ vs. β_2 AR $^{+/+}$; # *P* < 0.05, β_2 AR $^{-/-}$ /Ad β_2 AR vs. β_2 AR $^{-/-}$, *n* = 3 to 5). (B) Ischaemia-induced skin lesions in β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ hindlimbs (HLs) (**P* < 0.05 β_2 AR $^{-/-}$ vs. β_2 AR $^{+/+}$, χ^2 test, *n* = 10 per group). (C) HL blood flow over 14 days in β_2 AR $^{+/+}$, β_2 AR $^{-/-}$, and Ad β_2 AR-treated β_2 AR $^{-/-}$ ischaemic HL, as measured by US Doppler. Ad β_2 AR ameliorated blood perfusion in the ischaemic HL (**P* < 0.05 β_2 AR $^{-/-}$ vs. β_2 AR $^{+/+}$; # *P* < 0.05, Ad β_2 AR vs. β_2 AR $^{-/-}$; *n* = 10 per group). (D) Blood perfusion in the ischaemic HL as evaluated by dyed beads dilution method (**P* < 0.05 β_2 AR $^{-/-}$ vs. β_2 AR $^{+/+}$; # *P* < 0.05, β_2 AR $^{-/-}$ /Ad β_2 AR vs. β_2 AR $^{-/-}$; *n* = 10 per group). (E) HL muscle capillary density. (**P* < 0.05 ischaemic vs. non-ischaemic muscle; # *P* < 0.05 β_2 AR $^{-/-}$ vs. β_2 AR $^{+/+}$; ! *P* < 0.05, β_2 AR $^{-/-}$ /Ad β_2 AR vs. β_2 AR $^{-/-}$; *n* = 5 per each group). (F) VEGF gene expression in ischaemic gastrocnemius muscle 3 days after femoral artery ligation and resection (**P* < 0.05 vs. non-ischaemic, *n* = 3; ! *P* < 0.01 vs. non-ischaemic β_2 AR $^{+/+}$; # *P* < 0.01 vs. ischaemic β_2 AR $^{+/+}$; *n* = 3; \$ *P* < 0.01 vs. non-ischaemic β_2 AR $^{-/-}$; @ *P* < 0.01 vs. ischaemic β_2 AR $^{-/-}$ alone; *n* = 3).

vascular delivery of adenovirus leads to the infections mostly of vascular cells, including endothelium and VSMC, and perivascular fibroblasts and skeletal myocytes as shown by LacZ staining (Figure S1A and B). Administration by this route of Ad β_2 AR in β_2 AR $^{-/-}$ mice restores β AR density in the hindlimb (Figure 1A). Gross morphology and functional analysis of mice following chronic ischaemia indicate a higher occurrence of necrosis, autoamputation and limping in β_2 AR $^{-/-}$ mice as compared to β_2 AR $^{+/+}$ controls (Figure 1B). β_2 AR restoration by Ad β_2 AR was also able to prevent this symptom (Figure 1B). US evaluation of hindlimb perfusion (blood flow, BF) immediately after femoral artery removal shows an absence of flow in ischaemic HL in all groups of mice (data not shown). Over two weeks, BF was partially restored in β_2 AR $^{+/+}$ while no improvement was observed in β_2 AR $^{-/-}$ mice (Figure 1C). A similar result was obtained with the dyed beads perfusion analysis (Figure 1D). As assessed by both techniques, the Ad β_2 AR restores blood perfusion through the ischaemic hindlimb (Figure 1C and D). In line with these results, chronic ischaemia appeared to induce a capillary rarefaction that was higher in the β_2 AR $^{-/-}$ compared to the β_2 AR $^{+/+}$ mice, and Ad β_2 AR reversed this effect in the β_2 AR $^{-/-}$ (Figure 1E). β_1 AR mRNA levels were not affected by the β_2 AR removal, nor by Ad β_2 AR gene therapy (Figure S1C). We thus evaluated the production of reactive VEGF in the ischaemic hindlimb. Consistent with the perfusion data, VEGF gene expression was upregulated in the ischaemic hindlimbs of β_2 AR $^{+/+}$ mice, while it was blunted in the

β_2 AR $^{-/-}$ mice both before and after ischaemia (Figure 1F). In the latter, Ad β_2 AR gene therapy restored the VEGF level in basal conditions as well during chronic ischaemia (Figure 1F).

Evaluation of angiogenic phenotypes in vitro

Matrigel assay and VEGF production in primary cultures of ECs. In order to study angiogenesis *in vitro*, we tested the ability of mouse EC primary cultures to organize into a network when plated on a matrigel substrate. β_2 AR gene deletion inhibited the ability of ECs to form into vascular tubes compared to wild-type cells (Figure 2A). To verify the relevance of NF κ B to the pro-angiogenic phenotype of EC, we transfected β_2 AR $^{+/+}$ cells with the NF κ B inhibitor I κ B, 48 h before plating cells on matrigel. As expected, I κ B blocked the tubular formation of β_2 AR $^{+/+}$ endothelial cells on matrigel (Figure 2B). We further investigated the pro-angiogenic phenotype of β_2 AR $^{-/-}$ ECs by evaluating VEGF production in basal conditions and after isoprenaline treatment. As shown in Figures 2C and 6 h of stimulation with Iso increased VEGF levels in β_2 AR $^{+/+}$ but not in β_2 AR $^{-/-}$ EC. A similar result was obtained when VEGF mRNA levels were determined by RT-PCR in the same conditions (Figure 2D).

β_2 AR effects on NF κ B signalling. To investigate the ability of β_2 ARs to modulate VEGF production and angiogenesis, we tested the possibility that β_2 AR may regulate the activity of the NF κ B transcription factor. Indeed, in β_2 AR $^{+/+}$ EC, β AR

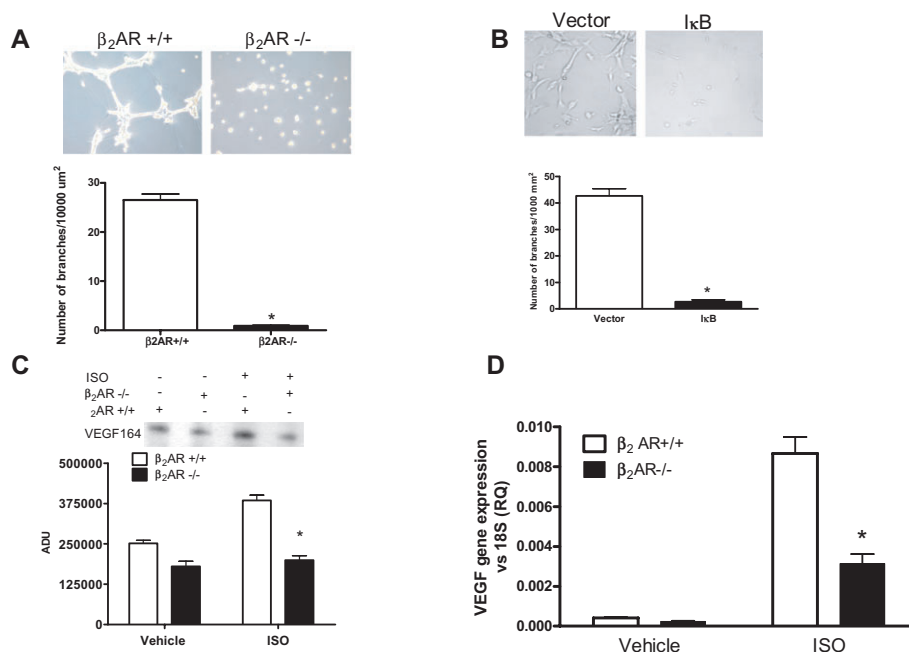


Figure 2

β_2 AR gene deletion inhibits VEGF production and vascular tube formation *in vitro*. (A) Vascular tube formation of endothelial cells (ECs) was assessed on matrigel. β_2 AR $^{-/-}$ and β_2 AR $^{+/+}$ control ECs (2×10^5) were incubated at 37°C for 12 h in 1 mL DMEM. Representative fields were taken, and the average of the total number of complete tubes was counted in 15 random fields by two independent investigators (* $P < 0.05$ vs. β_2 AR $^{+/+}$ EC, 3 experiments). (B) Vascular tube formation of β_2 AR $^{+/+}$ ECs (2×10^5) transfected with an empty Vector or a plasmid encoding for I κ B was assessed on matrigel. Cells were treated as above. (* $P < 0.05$ vs. Vector, 3 experiments). (C) VEGF production in ECs measured by Western blot of extracellular medium. (* $P < 0.05$ vs. β_2 AR $^{+/+}$; $n = 3$ per group). (D) VEGF mRNA in ECs measured by RT-PCR. (* $P < 0.05$ vs. β_2 AR $^{+/+}$; $n = 3$ per group).

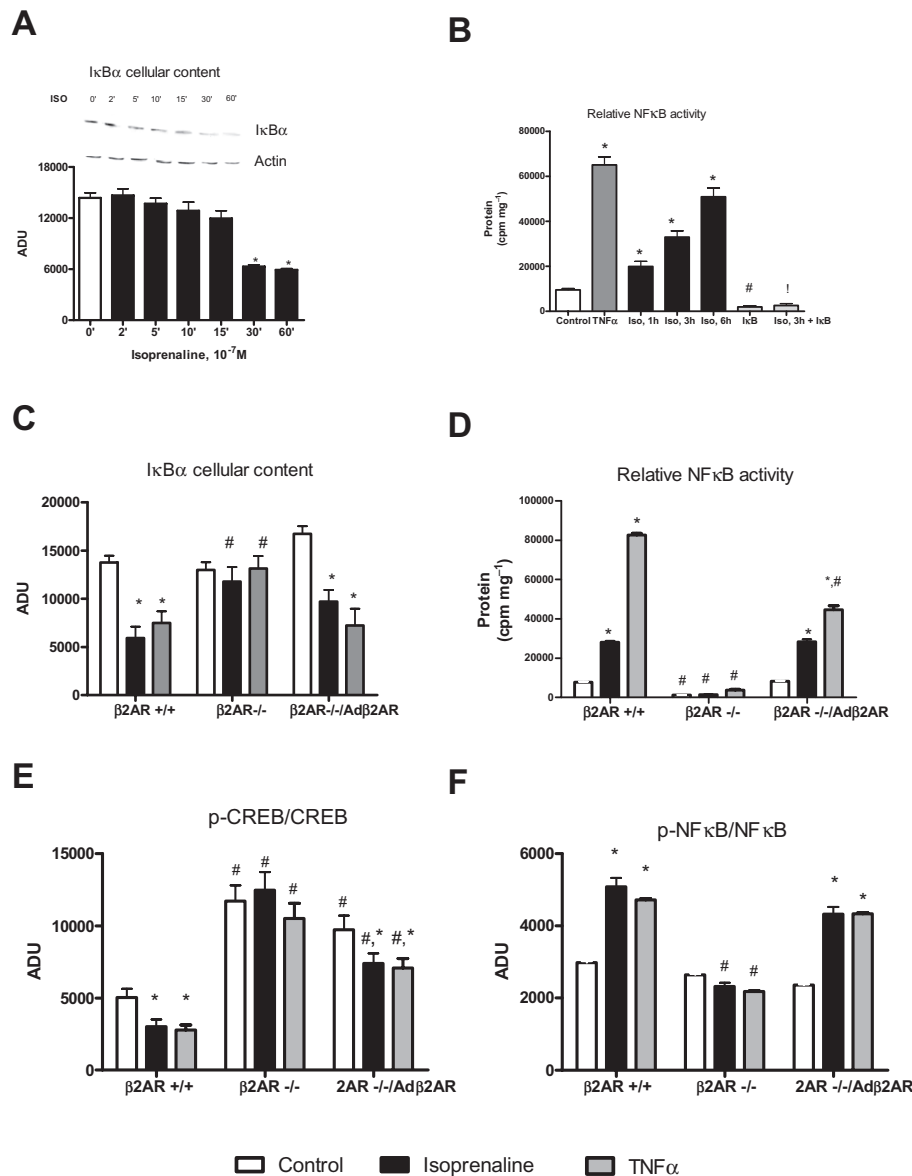


Figure 3

Effects of β₂AR gene deletion on NFκB signalling. (A) IκBα levels visualized by Western blot in β₂AR^{+/+} ECs. Isoprenaline (Iso, 10⁻⁷ M) was kept in the tissue culture medium for the time indicated. Densitometry units (ADU) (results normalized to actin response) are depicted in graphs. (* *P* < 0.05 vs. control, *n* = 3). (B) Effects of TNFα (20 ng·mL⁻¹) for 6 h or Iso (10⁻⁷ M) for 1, 3 and 6 h on NFκB transcriptional activity in β₂AR^{+/+} EC and in β₂AR^{+/+} EC transfected with the IκB plasmid (* *P* < 0.05 vs. control, # *P* < 0.05 vs. control; ! *P* < 0.05 Iso + IκB vs. IκB; *n* = 3 to 5). (C) IκBα levels assessed by Western blot in β₂AR^{-/-} and β₂AR^{+/+} ECs stimulated with Iso (10⁻⁷ M, 1 h) or TNFα (20 ng·mL⁻¹, 1 h) (* *P* < 0.05 vs. control; # *P* < 0.05 vs. β₂AR^{+/+}; *n* = 3 to 5). (D) NFκB activity in EC induced by Iso (10⁻⁷ M) and TNFα (20 ng·mL⁻¹) (* *P* < 0.05 vs. control; # *P* < 0.05 vs. β₂AR^{+/+}; *n* = 3 to 5). (E) ECs were stimulated with Iso (10⁻⁷ M) and TNFα (20 ng·mL⁻¹). CREB phosphorylation was visualized by Western blot, digitalized and corrected for endogenous CREB. (* *P* < 0.05 vs. control; # *P* < 0.05 vs. β₂AR^{+/+}, *n* = 3). (F) EC were stimulated as in (E), and NFκB phosphorylation was visualized by WB, digitalized and corrected for total NFκB. (* *P* < 0.05 vs. control; # *P* < 0.05 vs. β₂AR^{+/+}, *n* = 3).

stimulation with Iso induced a time-dependent degradation of the endogenous NFκB inhibitor, IκBα (Figure 3A). Consistent with this result, the luciferase assays demonstrated a time-dependent increase in NFκB transcriptional activity after Iso stimulation (Figure 3B). As expected, TNFα also increased NFκB transcriptional activity in β₂AR^{+/+} EC, and the overexpression of IκB inhibited the Iso-induced increase in NFκB activity (Figure 3B).

In ECs, β₂AR gene deletion inhibits Iso-induced IκBα downregulation (Figure 3C), confirming that β₂AR may regulate NFκB activation in response to Iso. Surprisingly, β₂AR gene deletion also inhibited TNFα-induced IκBα downregulation (Figure 3C). Accordingly, restoration of β₂ARs by means of Adβ₂AR infection corrected both Iso and TNFα-mediated IκBα degradation to levels comparable to the ones observed in β₂AR^{+/+} EC (Figure 3C), confirming the importance of

β_2 ARs in NF κ B endothelial signalling. In accord with this, in β_2 AR $^{-/-}$ EC, both Iso and TNF α -induced NF κ B-activity were blocked, and Ad β_2 AR restored the responses to both agonists (Figure 3D). These data suggest that β_2 AR knock-out may have a general impact on cytokine transcription.

Recently, CREB, another β_2 AR-controlled transcription factor, has been shown to down-regulate the activity of NF κ B (Ye, 2001). Indeed, CREB binding protein (CBP) and the related cofactor p300 are co-activators able to regulate the activity of transcription factors, and CREB and NF κ B have been shown to compete for limiting amounts of CBP/p300 (Ye, 2001). In fact, the recruitment of these co-activators by CREB reduces their availability for NF κ B. Thus, we evaluated CREB and NF κ B activation by Western blot in β_2 AR $^{-/-}$ ECs stimulated with Iso or TNF α . β_2 AR gene deletion increased CREB phosphorylation both in basal conditions and after

stimulation with Iso or TNF α and the restoration of β_2 ARs by adenovirus-mediated gene transfer decreased p-CREB levels (Figure 3E). Reciprocal results were obtained with NF κ B. Indeed, compared to β_2 AR proficient controls, in β_2 AR $^{-/-}$ ECs, Iso and TNF α failed to induce NF κ B phosphorylation while Ad β_2 AR infection restored the responses to both agonists (Figure 3F).

Identification of signal transduction components. To determine whether CREB upregulation is a common mechanism of inhibition for β_2 AR and TNFR stimulation of NF κ B, we assessed pNF κ B after stimulation with Iso or TNF α in β_2 AR $^{+/+}$ EC transfected with CREB or I κ B. Indeed, both substances resulted in the inhibition of NF κ B activation to both agonists (Figure 4A). Given the ability of the β_2 AR to couple to both Gs and Gi, we tested the possibility that Gi is indeed involved in

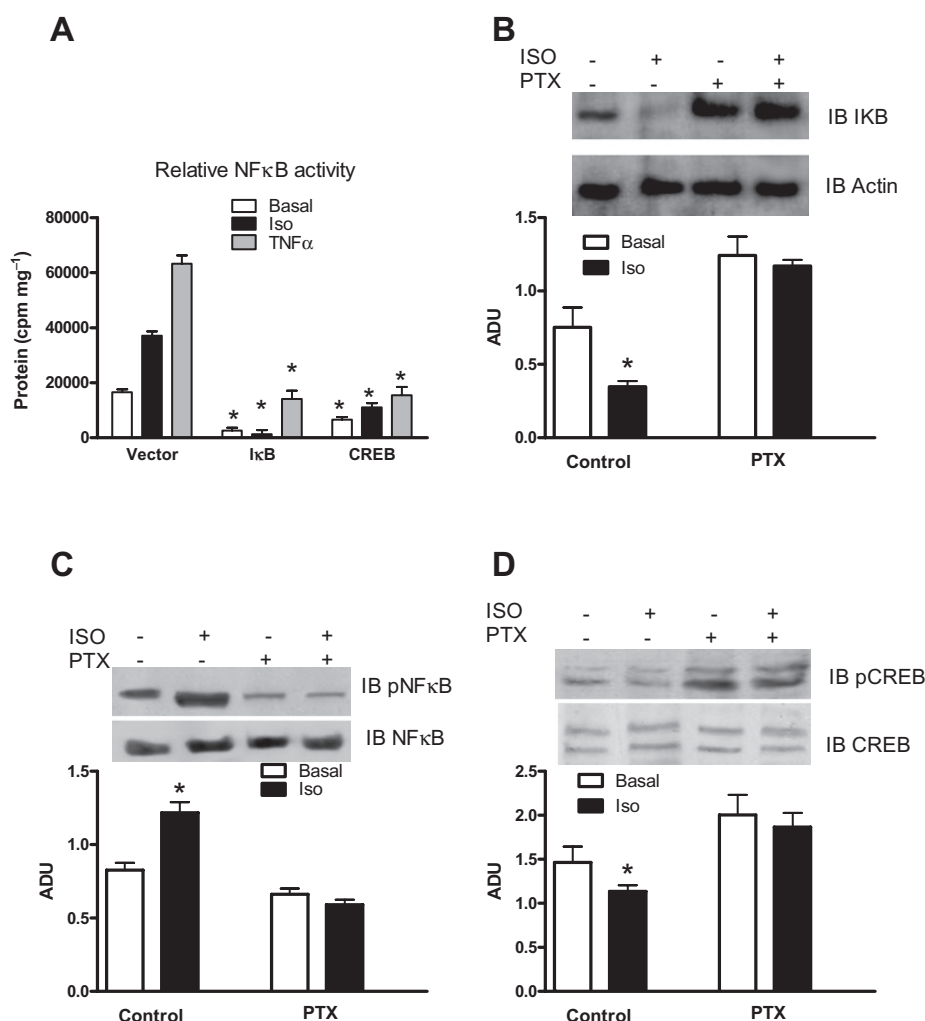


Figure 4

Molecular mechanisms involved in β_2 AR activation of NF κ B. (A) Effects of transgenic expression of I κ B and CREB in β_2 AR $^{+/+}$ EC on NF κ B activation in response to Iso (10^{-7} M, 3 h) and TNF α (20 ng \cdot mL $^{-1}$). * P < 0.05 vs. Vector, n = 3. (B) Evaluation by Western blot of β_2 AR $^{+/+}$ EC of the effects of pertussis toxin (PTX, 10^{-4} M) on Iso-induced I κ B downregulation. * P < 0.05 vs. basal, n = 4; ADU: arbitrary densitometric units. (C) Evaluation by Western blot of β_2 AR $^{+/+}$ EC of the effects of pertussis toxin (PTX, 10^{-4} M) on Iso-induced NF κ B phosphorylation. * P < 0.05 vs. basal, n = 4. (D) Evaluation by Western blot of β_2 AR $^{+/+}$ EC of the effects of pertussis toxin (PTX, 10^{-4} M) on Iso-induced CREB dephosphorylation. * P < 0.05 vs. basal, n = 4.

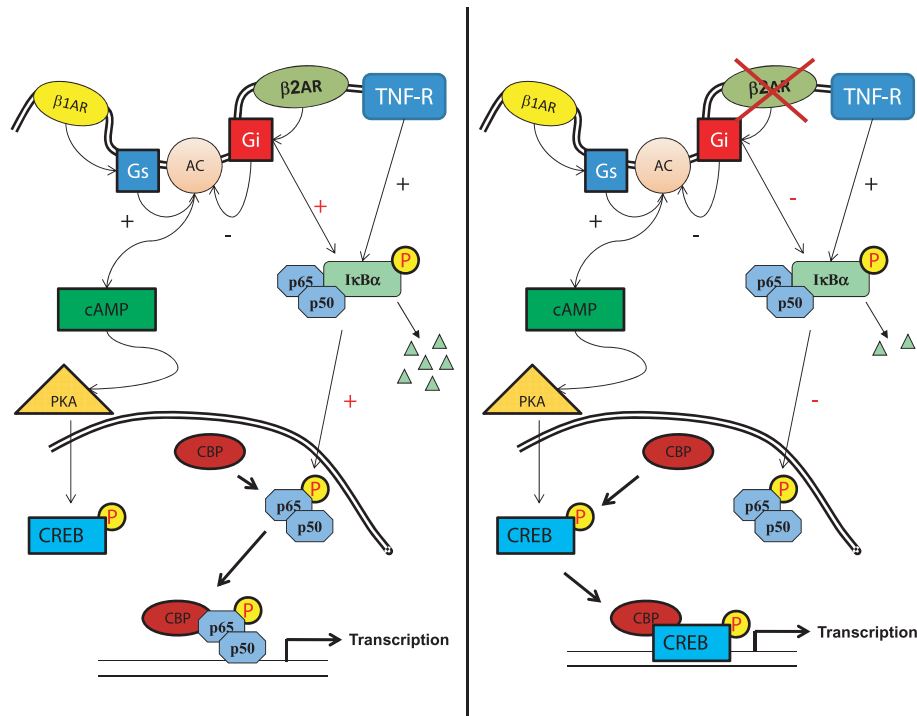


Figure 5

In the wild-type cell (left), the presence of the β₂AR causes a tonic stimulation that fosters the activation of NFκB, which, by translocating to the nucleus upon activation, competes for CBP with CREB. Furthermore, the β₂AR exerts a tonic inhibition on cAMP production, by coupling to Gi. Once the receptor is removed (right), the inhibitory effect on cAMP is released, unbalancing the nuclear transcription towards CREB, which binds more CBP, thus making NFκB binding to the same cofactor unlikely to occur. pP65/p50: NFκB; TNFR: TNFα receptor.

maintaining low levels of CREB within the cell. To test this hypothesis, we treated cells with the Gi inhibitor *Pertussis* toxin for 18 h and then stimulated β₂AR^{+/+} ECs with Iso. Gi inhibition was accompanied by the inhibition of Iso-induced IκB downregulation (Figure 4B) and NFκB phosphorylation (Figure 4C). Furthermore, PTX increased the basal level of pCREB and prevented Iso-induced dephosphorylation of CREB (Figure 4D).

Finally, we have presented these new findings in a cartoon as shown in Figure 5.

Discussion

The results of our study provide compelling evidence that the removal of the β₂AR impairs angiogenesis both *in vitro* and *in vivo*. This finding extends previous knowledge regarding the ability of β₂AR overexpression to enhance angiogenesis *in vivo*, and it further supports the knowledge of the ability of β₂AR to induce VEGF and cytokine production. Indeed, our work adds novel findings concerning the signalling that connects β₂ARs and the nuclear transcriptional activity of NFκB.

Evidence has been obtained suggesting that the adrenergic system is activated within ischaemic regions (Newton *et al.*, 1997) but the physiological relevance of this response is unclear. A teleological explanation would suggest that this activation is needed to better adapt to the ischaemic stress.

Indeed, the regenerative properties of catecholamines have been implicated by the observation that catecholamine-deficient mice undergo inappropriate embryo development (Zhou *et al.*, 1995). During postnatal life, catecholamines participate in cardiac and vascular remodelling and in tissue regeneration in response to various stresses (Iaccarino *et al.*, 2001a; Ciccarelli *et al.*, 2008). Adrenoceptors are the effectors of catecholamines, but their role appears to be redundant, since correct embryo development occurs in all of the AR knock-out models, and in adult life, mice with deletion of AR genes do not present basal phenotypic alterations. Under stress conditions, though, or in the presence of catecholamine challenge, a perturbation in the phenotype of KO mice has been noted (Rohrer *et al.*, 1999). In particular, previous studies in βAR^{-/-} mice have shown that β₂ARs are mostly involved in vascular and metabolic mechanisms (Chruscinski *et al.*, 1999; Rohrer *et al.*, 1999). Our study extends this notion and is the first to illustrate the requirement for endogenous β₂ARs in neoangiogenesis following chronic ischaemia, by providing the following evidence: (i) β₂AR^{-/-} mice present impaired tolerance to chronic ischaemia; (ii) this phenotype is rescued by the local restoration of β₂AR membrane-density, induced by adenoviral-mediated gene transfer; (iii) a functional relationship appears to exist between the β₂AR and NFκB, the transcription factor involved in ischaemia-induced cytokine production.

These results accord with our recent observation that overexpression of the β₂AR enhances the adaptive pro-

angiogenic response to ischaemia (Iaccarino *et al.*, 2005). Importantly, the present results add to the hypothesis that other endogenously expressed β AR subtypes cannot undertake this role of β_2 ARs in ischaemic neo-angiogenesis. Intimate differences in the signalling capabilities of this receptor make it unique, and probably this is the reason for our findings. Removal of this receptor alters the intracellular signal transduction pathways to such an extent that the transcriptional status of the cell is modified. Our *in vitro* study revealed that angiogenesis is impaired in β_2 AR $^{-/-}$ EC, probably due to the impaired production of cytokines such as VEGF. The main transcription factors modulating VEGF expression are hypoxia-inducible factor-1 α (HIF-1 α) (Marti *et al.*, 2000) and NF κ B (Kiriakidis *et al.*, 2003). HIF-1 α activates the transcription of target genes in response to hypoxia and is inactive in basal conditions due to ubiquitination and degradation. NF κ B, in contrast, can be activated following stimulation of different receptors. The ability of GPCRs to activate this transcription factor has been established in different cell types, mainly in the immune system. With regard to the β ARs, the evidence showing that β AR agonists are able to induce NF κ B activation is controversial. In monocytes, Farmer and Pugin (2000) showed that a number of β AR agonists had inhibitory effects on LPS-induced TNF α and IL-8 production, and proposed that cAMP through PKA is the mediator of such inhibition (Farmer and Pugin, 2000). In contrast, Chandrasekar *et al.* (2004) showed that in cardiac-derived ECs, Iso induces NF κ B promoter activity in a β_2 AR-dependent manner. These authors concluded that β_2 ARs induce NF κ B activation in a cAMP-independent manner, through the activation of Gi, PI3K, Akt and IKK with I κ B α degradation. Our results accord with the latter findings, since in β_2 AR $^{+/+}$ EC, Iso induced I κ B α degradation and enhanced NF κ B transcriptional activity in a time-dependent manner. Furthermore, our data indicate that the physical presence of β_2 ARs is needed to activate NF κ B; indeed, β_2 AR gene deletion inhibited NF κ B activity in response to both GPCRs and TNF-Rs. G α s and G α i signalling pathways have opposite effects on NF κ B: Gs-dependent signalling, induces PKA-dependent CREB activation and consequently inhibition of NF κ B activity (Ye, 2001). In contrast, Gi activates NF κ B by inhibiting/removing I κ B. Our hypothesis is that the lack of β_2 ARs that have the ability to couple to Gi tilts the balance towards Gs-dependent signalling, which would lead to PKA-induced CREB activation and CBP/p300 recruitment, making the latter unavailable for NF κ B activation (Figure 5). Indeed, validation of such a hypothesis derives from our studies with the pertussis toxin, showing the relevance of Gi for β_2 AR-induced activation of NF κ B. Irrespective of this result, the observation that regardless of its mechanism of action β_2 AR influenced not only isoprenaline, but also TNF α -dependent activation of NF κ B is strongly suggestive of a pivotal role played by β_2 ARs in the instruction of signals required for the fine-tuning of NF κ B transcriptional activity. We have performed our experiments in the endothelial cells, but it is most likely that the β_2 AR can regulate NF κ B activity also in other cell types. In particular it would be interesting to evaluate the skeletal muscle, which expresses a large number of β_2 ARs and is also an important source of VEGF.

In conclusion, our data indicate that the β_2 AR is important in mediating production of key pro-angiogenic cytok-

ines, such as VEGF. The impairment of the signal transduction of this receptor results in impairment of angiogenesis in response to chronic ischaemia. Our data add a novel piece to the puzzling paradigm of those pathophysiological conditions that are characterized by increased adrenergic neural drive, impaired β adrenoceptor signalling and impaired organ function such as myocardial ischaemia. Under these conditions, the reduction of β_2 ARs signalling is detrimental not only for the cardiac function but also for the development of an adequate compensatory neoangiogenesis, which would worsen the blood supply to the ischaemic heart and accelerate the progression of myocardial dysfunction. The use of therapeutic strategies aimed at improving β AR signalling, may therefore achieve double efficacy, by ameliorating myocardial function and by hastening compensatory angiogenesis.

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Conflict of interest

The authors declare that they have no competing financial interests.

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Supporting information

Additional Supporting Information may be found in the online version of this article:

Figure S1 Efficient gene delivery via femoral artery catheterization (A–B). Recombinant LacZ Adenovirus was delivered to the ischemic hindlimb via catheterization as described in the Methods section and results in gene transduction of capillaries (A) as well as perivascular muscle fibers (B). Muscle β 1AR mRNA levels measured by RT-PCR (C). Hindlimb muscles processed as described in methods showing unmodified β 1AR mRNA levels among β 2AR +/+, β 2AR –/– and Ad β 2AR treated mice.

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