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▶ To cite this version:

Laetitia Bey, Xavier Coumoul, Min Ji Kim. TCDD aggravates the formation of the atherosclerotic plaque in ApoE KO mice with a sexual dimorphic pattern. Biochimie, 2022, 195, pp.54-58. 10.1016/j.biochi.2022.01.012 . hal-03745304

HAL Id: hal-03745304 https://hal.science/hal-03745304v1

Submitted on 5 Aug 2022

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1 TCDD aggravates the formation of the atherosclerotic plaque in ApoE KO mice with a sexual dimorphic pattern 2 3 Laetitia Bey¹, Xavier Coumoul¹, Min Ji Kim² 4 5 6 **Institutions**: ¹ Université de Paris, INSERM UMR-S1124, Paris, France 7 ² Université Sorbonne Paris Nord, Bobigny, INSERM UMR-S1124, Paris, France 8 9 Correspondance: Min Ji Kim email: min-ji.kim@inserm.fr 10 Keywords: atherosclerosis, AhR, TCDD, sexual dimorphism 11 12 **Abbreviations** 13 AhR: Aryl hydrocarbon receptor 14 ApoE KO: Apolipoprotein E Knock-Out 15 bHLH/PAS: basic Helix Loop Helix/Per ARNT Sim 16 CD68: Cluster of Differentiation 68 17 ICAM1: InterCellular Adhesion Molecule 1 18 MCP1: Monocyte Chemoattractant Protein 1 19 20 SEM: standard error of the mean α -SMA: a-smooth muscle actin 21 TCDD: 2,3,7,8-Tetrachlorodibenzo-para-dioxin 22 VCAM1: Vascular Cell Adhesion Molecule 1 23 24 VSMCs: vascular smooth muscle cells 25

Abstract:

Aryl hydrocarbon receptor (AhR) ligands are recognized as aggravating factors in cardiovascular diseases but little is known about the role of the AhR in atherosclerosis considering the effects of age and gender. We exposed male and female ApoE knock-out mice, a model to study the pathogenesis of atherosclerosis, to a potent AhR ligand, 2,3,7,8-tetrachlorodibenzo-*p*-dioxin (TCDD) by an intraperitoneal injection of 1 μg/kg/week for 8 weeks. Atherosclerotic lesions, histological parameters and critical atherosclerotic markers in aorta were analysed. TCDD increased atherogenic lesions in 35-week old female mice, leading to a switch of vascular smooth muscle cells (VSMCs) from a contractile to a proatherogenic phenotype and increased expression for VCAM1. AhR activation accelerates the formation of atherosclerotic plaques with sex and age differences due to the phenotypical switch of VSMCs.

1. Introduction

The AhR is a bHLH/PAS transcriptional factor and a xenobiotic receptor. It is of interest in the fields of toxicology because of its exogenous agonists such as 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD), a potent carcinogen. In addition to the environmental chemicals, dietary and endogenous AhR ligands have been identified including tryptophan metabolites and flavonoids [1]. After ligand binding, AhR transactivates the expression of xenobiotic metabolizing enzymes and many other genes involved in cell proliferation and inflammatory responses. Endogenous ligands are inferred to be involved in the regulation of cardiac functions since vascular abnormalities are among the most common phenotypes observed in AhR knock-out (KO) mice [2-4]. Epidemiological studies suggest the role of AhR in dyslipidemia, hypertension, carotid atherosclerosis and myocardial ischemia [5,6] and mouse studies have reported a role for AhR in the increased expression of inflammatory genes in the aorta [7,8]. One of the mechnisms by which AhR could play a role in atherosclerosis is the modulation of inflammatory cytokines, observed in multiple models [9–12].

Atherosclerosis results from the accumulation of lipids in the arterial wall with the occurrence of atheromatous plaques which disrupt the permeability of the vessel wall leading to infiltration of low-density lipoproteins whose oxidized forms are specifically captured by infiltrated macrophages. This last process is stimulated by the expression of biomarkers including VCAM1 and ICAM1, two adhesion proteins which attract monocytes which then differentiate into macrophages. Macrophages and vascular smooth muscle cells (VSMCs) differentiate into CD68-expressing foam cells following the internalization of oxidized LDLs [13,14]. Normally present in the medial layer of blood vessels, VSMCs switch from a contractile phenotype to a migratory/secretory phenotype with an increased extracellular matrix production. In ApoE KO mice, the progression of atherosclerosis is associated with a decreased expression of α -SMA and an increased expression of cell adhesion molecules (ICAM1 and VCAM1) on VSMCs [15].

Although the role of AhR has been studied in the early stages of atherosclerotic development [7], few studies have focussed on its role in the progression of the pathology. Here, we studied the effects of chronic TCDD treatment on the progression of atherosclerosis in ApoE KO mice that are in advanced phases of atherosclerosis. We tested the hypothesis that chronic stimulation of the AhR aggravates the development of atherosclerosis and assessed the influence of sex and age as they are important biological variables in atherosclerosis [16–20].

2. Materials and Methods

2.1. Animals

ApoE KO mice purchased from Charles River were bred in our facility on a 12-hour light-dark cycle and a standard chow diet (temperature 22° C) in accordance with EU directive 2010/63/EU for animal experiments. 20- and 27-week-old male and female ApoE mice (n = 10 per group) were included in the study. They received an intraperitoneal (ip) injection of corn-oil or $1 \mu g/kg$ of TCDD (LGC Standards) in corn-oil / week for 8 weeks (table 1). This dose was chosen as the highest dose with no observed effect in a previous study [21]. They were sacrified one week after the last injection by intraperitoneal injection of ketamine-HCl 100 mg/kg and xylazine 20 mg/kg.

	Number of mice	
	Corn-oil	TCDD
28-week old females	5	5
35-week old females	5	5
28-week old males	4	6
35-week old males	6	4

Table 1: Composition of the groups and number of ApoE KO mice studied

2.2. Quantification of atherosclerotic plaques (Oil red O staining)

The sizes of atherosclerotic lesions were measured in oil red O-stained frozen transverse sections of aortas. The root of the aorta was dissected under a macroscope and frozen in OCT embedding medium at -80°C. Five sections of 10 µm (at 200, 400, 600 and 800 µm from the cusps) were harvested. The sections were counterstained with hematoxylin. The oil red-O stained slides were observed with AxioObserver Z1 (Zeiss) at a magnification of 5 and analysed by Leica Qwin software (Leica) to quantify the surface area of the lesion and of the vessel. The density of the lesion was calculated by dividing the surface area of the lesion by the surface area of the vessel.

2.3. Immunohistochemistry

Ethanol-fixed cryosections of aorta were blocked in 5% BSA and 0,1 % fish gelatin and then processed for immunostaining with CD68 (rat, Serotec), aSMA (rabbit, Abcam) and VCAM1

97	(goat, R&D) antibodies in $1X\ PBS-1\%\ BSA$ and the anti-rat alexa fluor 647, anti-rabbit
98	rhodamine and anti-goat FITC secondary antibodies (Jackson ImmunoReasearch). The nuclei
99	were visualized with Hoechst (Molecular Probes).
100	
101	2.4. Statistical analysis
102	The statistical analyses were performed using GraphPad Prism. All data were expressed as
103	the mean +/- SEM. The control and TCDD-treated groups were compared using either
104	Kruskal Wallis followed by Mann-Whitney test or directly by Mann-Whitney test. A p-value
105	of < 0.05 was considered statistically significant.
106	
107	3. Results
108	3.1. Exposure to TCDD aggravates the development of atherogenic lesions specifically in
109	ApoE KO female mice
110	Twenty- and 27-week-old ApoE KO animals were injected with 1 μg of TCDD/kg/week for
111	8 weeks and sacrifed one week after the last injection. At the end of the study, they were
112	respectively 28 and 35 weeks old.
113	The atherosclerotic plaque surface was quantified to determine the lesion density, obtained by
114	dividing the surface area of the lesion by the surface area of the vessel (Figure 1A-D). This
115	ratio avoids the overestimation of the surface area of lesions and facilitates the comparison
116	between animals. Both of them were increased by TCDD specifically in 35-week-old ApoE
117	KO female mice (Figure 1B, E-H), whereas they were not affected in corresponding male

mice. The stage of atherosclerosis development also seems be a differentiating factor: in 28-

week old mice, TCDD had no effect on the lesion density (Figure 1A, C).

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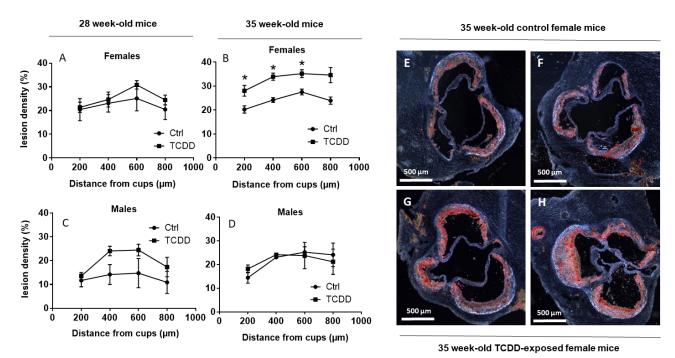


Figure 1. Lesion density in the aortas of 28- and 35 week-old ApoE KO female (A-B) and male (C-D) mice. It is calculated as the ratio, lesion area / aorta area x100, and is expressed as mean \pm SEM. * : p<0.05. Oil red-O staining of aortas from 35 week-old female mice exposed or not to TCDD. Two representative aortas are displayed per group (control mice: E-F and TCDD-exposed mice: G-H).

3.2. Exposure to TCDD leads to a migratory phenotype of VSMCs in the atherosclerotic plaque of ApoE KO female mice.

We focused on 35 week-old female mice to investigate the effect of TCDD exposure in the aorta on the expression of markers: 1) CD68, a marker of foam cells, inflammatory cells and of SMCs with a migratory phenotype, 2) VCAM1, expressed on activated endothelial cells and on VSMCs from the atherosclerotic plaque, 3) α -SMA, a marker of VSMCs with a contratile phenotype, which normally decreases in the atherosclerotic plaque. The increase in the number of CD68+ cells was not significant in the TCDD treated group (Figure 2A-E). However, we observed that α -SMA+ cells were significantly decreased (Figure 2A-D, 2F) while a significant increase of VCAM1+ cells was found (2A-D, 2G). The increased development of atherosclerotic lesions observed in TCDD-treated mice can be explained by the switch of VSMCs from a contractile phenotype to a migratory and secretory phenotype which promotes atherosclerotic plaque development along with expression of proatherosclerotic markers such as VCAM1.

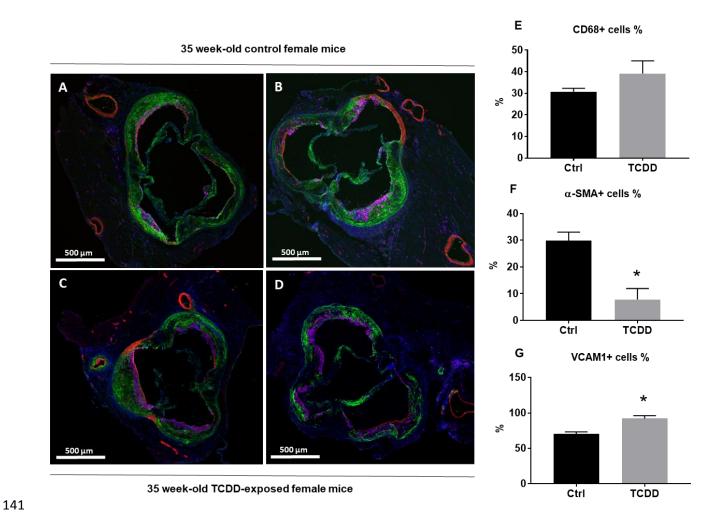


Figure 2: Immunostaining and pourcentage of CD68, α -SMA, VCAM1+ cells in the aortic root of 35 weeks-old control or TCDD-exposed female mice. Aortas from 35 week-old control or TCDD-exposed female mice were stained for CD68 (pink), α -SMA (red) and VCAM1 (green) and the nuclei were visualized with Hoechst. Two representative aorta are displayed per group (control: A-B or TCDD-exposed mice: C-D). The number of positive cells was normalised by the total cell number and represented as the mean \pm SEM for each group (* : p<0.05, E-G).

4. Discussion

In this study, we aim to better understand the role of the AhR in the development of atherosclerosis. In fact, AhR has been suggested to be involved in the growth of atherosclerotic plaques in ApoE-KO mice and the expression of the AhR gene is increased in the atherosclerotic mouse aorta and in human carotid artery disease tissue [9]. In the early

155 steps of atherosclerotic development, AhR activation has been shown to aggravate lesions through an inflammatory response [7]. This is coherent with the many studies which directly 156 link the AhR pathway to the regulation of pro-inflammatory cytokines [9–12]. 157 In this manuscript, we describe for the first time, a gender difference in effects of TCDD on 158 the progression of atherosclerotic plaques. We exposed 20 and 27 week-old female and male 159 mice to 8-weeks of ip injections of TCDD, a AhR ligand. Increased lesion densities were 160 present in the older group of ApoE female mice exposed to TCDD as compared to the same 161 aged male mice. 162 We then focused on the phenotypic switching of VSMCs. VSMCs play a crucial remodeling 163 164 role in the vessel wall potentially recruiting monocyte/macrophages into the plaque [14]. AhR activation leads to a significantly decreased expression of α-SMA due to a decreased 165 number of contractile VSMCs and an increased expression of VCAM1. Our data are in 166 agreement with those of Guo et al. [22] who reported that TCDD promotes proliferation and 167 migration of human VSMCs with a decreased expression of α -SMA. 168 The influence of gender and age in the development of atherosclerosis has been 169 170 documented. The atheroprotective effects of estrogen have been reported in ApoE KO mice on high cholesterol diets [18] but other studies showed larger surface lesions in female ApoE 171 172 KO mice as compared to male mice [17,19,20]. It also can be interesting to explore if the sexual dimorphism is due to a differential response to AhR activation in aortic cells between 173 males and females as it was already observed in the liver of C57BL/6 mice [23]. 174 Our results suggest that the development of AhR antagonists may be useful therapeutically, 175 with age and gender as important parameters to be considered. The plasticity of the AhR 176 which binds a variety of ligands (aromatic hydrocarbons, tryptophan metabolites, indoles 177 178 from the diet...) will be also a key factor [1]. Interstingly, these ligands are reported to have differential or even opposite effects on Th17 differentiation [24,25]. The competition 179 between the different types of ligands for the AhR could influence the development of the 180 atherogenic plaques over time and it might be interesting to consider, as a preventive 181

pharmacological approach, antagonizing the effect of aromatic hydrocarbons.

Author contributions

182

- 184 Conception of the work: XC, MJK; planning of experiments, collection & analysis of data:
- LB, MJK; writing of manuscript: XC, MJK. All authors have read and approved the final
- manuscript.
- 187 **Funding:** This work was supported by INSERM; Université de Paris; Université Sorbonne
- 188 Paris Nord.
- **Acknowledgements:** We thank Dr L.Aggerbeck for critical reading of the manuscript.
- 190 **Conflicts of Interest:** The authors declare no conflict of interest.

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