Expression and Regulation Of Chemokines in Murine and Human Type 1 Diabetes

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Network for Pancreatic Organ Donors with Diabetes



Inflammation and Type 1 Diabetes

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• T1D is a progressive autoimmune disease that is accompanied by a pronounced inflammatory component.

• Many (>25) chemokines and chemokine receptors have emerged as potential contributors to initiation and progression of the T1D.





Unbiased and Integrated Approach

Goal: Foundation for the informed selection of potential therapeutic targets within the chemokine/receptor family.

• Human islet culture system (islets incubated 24h in ± IL-1 β , IFN γ and TNF α)

• Murine models of virus-induced (LCMV) and spontaneous T1D (NOD)

• Histopathological examination of pancreata from diabetic organ donors (nPOD)





Chemokine Family in Human



Genomic organization of the major human chemokine clusters. 31 human chemokine genes are organized in 4 major clusters on Chr 4 (GRO and IP10 regions) and Chr 17 (MCP and MIP regions).

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 Cytokine-induced chemokines genes in response IL-1β and/or TNFa (red arrows) or in response IFNγ (yellow/red) arrows

• Black arrows = chemokines not differentially regulated by cytokine treatments

• Gray arrows = pseudogenes Direction of the arrows = transcriptional orientation.

CCL5, CCL8, CCL22, CX₃CL1, CXCL9 and CXC110





Microarray Analysis and qRT-PCR CCL5, CCL8, CCL22, CX, CL1, CXCL9 and CXCl10



A. Chemokine transcripts induced in human islet cells in response to inflammatory stimuli. obtained on HG U133 Plus 2.0 Affymetrix chip (n=3-4). Asterisks indicate significant differences between control and cytokine treated islets with p<0.05).



B. Validation of chemokine transcripts by gRT-PCR. Endogenous **HPRT1** was used for normalization. Data (mean ± SE; 4 donors) was quantified using $2^{-\Delta\Delta}C_T$ method. Asterisks indicate significant differences between control and cytokine treated islets (p<0.05).

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Chemokines in cultured human

islets

- Islets cultured for 24h in MIX
- Fixed, embedded and sectioned
- Immunofluorescent staining: Insulin (green/ Cy2), glucagon (Blue/AMCA), and chemokine (red/Cy3)



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Chemokines in the LCMV Mouse Model (RIP-GP)

• 7-8 week old RIP GP mice

• Single IP dose of 10⁵ pfu LCMV (harvested day 7 post-infection)

• Minimal or absent expression of Ccl22 and Cxcl9

• Expression of Cc18 and Cxcl10 in β -cells and Cx₃cl1 α -cells



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Cxcl10 Expression in Female NOD Mice

A. Chemokine (CCL5, CCL8, CCL22, CX3C11, CXCL9 and CXC110) mRNA transcript expression in islets isolated from Balb/c (n=6) and 8 and 13 weeks old female NOD mice (n=6) by qRT-PCR.

B. Cxcl10 production by pancreatic β -cells in female NOD mice.



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Case Description for T1D

| Case | Age | Gender/ Ethnicity | C-peptide (ng/ml) | AutoAb | BMI | Clinical History |
|------|----------------|----------------------|----------------------|--|------|--|
| 6036 | 49 (34 w T1D) | F/AA | <0.05 | mIAA* | 25.5 | Ketoacidosis Pancreatitis Alcohol/Drug abuse, GI ulcers |
| 6052 | 12 (1 w T1D) | M/AA | 0,18 | ICA512 ⁺ mIAA ⁺ IA2ic ⁺ | 20.3 | Diabetic ketoacidosis CMV positive |
| 6087 | 17.5 (4 w T1D) | M/C | <0.05 | mIAA* ZnT8 * | 21.9 | Amputation, Colon resection, Cataract Glaucoma, Hypertension, CHF |







CXCL10 in Human Pancreata













ID # 6087

ID #6036







In situ CXCL10 expression in T1D and healthy control pancreata. Combined insulin, glucagon, CD45 and CXCL10 stains.

•Absence of CXCL10 staining in the healthy control (case ID #6112).

•CXCL10 present in T1D samples (ID #6087 and #6052), in close association with infiltrating leukocytes (CD45+).

•Acinar CXCL10 most prominent in diabetic donor (1D #6036) with clinically confirmed pancreatitis.





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Conclusions

 Remarkable concordance and synergy between experimental models.

 Cytokine synergy in human islets at the level of gene expression.

• CXCL10 emerges as the key chemokine in both mouse and human.

• Concomitant acinar and endocrine inflammatory involvement can be seen in early T1D.

• Treatment of diabetes: a) Common pathophysiological pathways that targets natural disease course (like inflammation), b) Immnunomodulatory therapeutic regimens for specific components of chemokine/receptor system.





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