Chapter 6 Nitric Oxide Contributes to Retinal Ganglion Cell Survival Through Protein S-Nitrosylation After Optic Nerve Injury

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Abstract Neuroprotective strategies to attenuate retinal ganglion cell (RGC) death could lead to novel therapies for chronic optic neuropathies such as glaucoma. Nitric oxide (NO) signaling results in both neurotoxic and neuroprotective effects in CNS neurons after nerve lesion. However, the functional mechanisms of NO in the nervous system are not fully understood. Protein S-nitrosylation by NO is a posttranslational modification that regulates protein function through the reaction of NO with a cysteine thiol group on target proteins. NO/S-nitrosylation is now thought to be important in regulating cell death, survival, and gene expression. However, there are few reports on the role of protein S-nitrosylation in glaucoma. Therefore, we investigated the role of protein S-nitrosylation signaling in RGC survival after optic nerve injury.

Keywords Glaucoma • Keap1 • Nitric oxide • Nrf2 • Retinal ganglion cell • S-nitrosylation

6.1 NO Signaling in Glaucoma

6.1.1 Nerve Injury Model of Glaucoma in Rodents

Glaucoma is a neurodegenerative disorder characterized by the progressive loss of retinal ganglion cells (RGCs) and by degeneration of optic axons. Elevated intraocular pressure is considered to be one of the major risk factors associated with this

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neuropathy [1]. However, in some glaucomatous patients, loss of RGCs and a subsequent loss of vision can occur even with normal intraocular pressure. Although the causes of glaucoma are unclear, the various pathogenetic mechanisms of glaucoma result in the common end stage of RGC apoptosis. For example, almost 90 % of RGCs die within 2 weeks after optic nerve injury [2]. In particular, oxidative stress and nitrative stress appear to play important roles in this progressive neuronal death. Eye tissue uses four times more oxygen than brain tissue and thus is highly exposed to various reactive oxygen species (ROS) including hydrogen peroxide, hydroxyl radicals, and superoxide anions. Consequently, eye tissue contains very high amounts of antioxidants, such as superoxide dismutase, catalase, ascorbate, and vitamins [3]. In the pathogenetic stages of RGC death, increasing intracellular ROS generation has been reported to accompany glutathione depletion [4]. Evidence also indicates that there are reductions in endogenous antioxidants in aging and induction of lipid peroxidation [5]. On the other hand, mechanical injury of axons, and thereby a lack of neurotrophins being supplied to RGC bodies, is one of the mechanisms proposed for the retrograde degeneration of RGCs following optic nerve injury [2]. RGC death after nerve injury is mostly caused by apoptosis associated with upregulation of proapoptotic Bax and downregulation of antiapoptotic Bcl-2 and Bcl-xL [6]. As RGC cell loss and optic nerve degeneration in the crush injury model mimics many of the features of glaucoma, we use this model to study the mechanisms of RGC survival and/or axonal regeneration [7].

Nitric oxide (NO) levels also increase in many retinal cells within a few days of optic nerve damage [8]. Many reports suggest that excess NO plays a crucial role in neuronal cell death. However, NO can also prevent neuronal cell death. In general, NO mediates neuroprotection through two main signaling pathways: the NO/cyclic guanosine monophosphate (cGMP) pathway and the protein S-nitrosylation pathway. However, whether S-nitrosylation of target protein promotes RGC survival after injury is unknown. This is the focus of this review.

6.1.2 Role of Three Isoforms of Nitric Oxide Synthase in Glaucomatous Retina

NO is an important signaling molecule that regulates a range of physiological processes, including vasodilatation, neuronal function, inflammation, and immune function [9]. NO is an organic gas ubiquitously synthesized by NO synthase (NOS). In mammalian cells, NOS is subclassified into three types: brain or neuronal NOS (nNOS or NOSI), inducible NOS (iNOS or NOSII), and endothelial NOS (eNOS or NOSII). The function of NO is different depending on the cell type and enzyme isotype.

nNOS may be involved in neurotransmission by creating retrograde signaling between synapses. At synapses, nNOS is coupled to *N*-methyl-D-aspartate receptors (NMDA-R) via postsynaptic density-95 protein complexes [10]. Upon glutamate stimulation of NMDA-R, calcium ions enter the cytoplasm through the ion channel.

In conjunction with calmodulin, calcium ion influx triggers nNOS activation and NO generation [11]. Low levels of NO (picomole order) that are produced under physiological conditions stimulate many normal intracellular signaling pathways. In contrast, overstimulation of NMDA-R and subsequent calcium ion influx promote pathological signaling, resulting in neural damage and death through production of toxic amounts of NO [12]. Increased expression of nNOS in the retina and optic nerve head was reported in rats with elevated intraocular pressure. Most axotomized RGCs express nNOS protein, and these cells degenerate within 2 weeks after optic nerve injury [13]. Excessive NO generated from injured RGCs might be one risk factor for RGC cell death in glaucoma.

iNOS can be upregulated by acute inflammatory stimuli. For example, neurotoxic levels of NO (nanomole order [14]) via iNOS induction in activated glial cells give arise various neurodegenerative diseases. NO will further oxidize to nitrite, peroxynitrite, and free radicals to highly interact with thiols and iron-sulfur centers of various enzymes [14] to alter the biological function of cells and result in apoptosis, neurotoxicity, optic nerve degeneration, and numerous eye diseases. It has been reported that glaucoma could be due to neurotoxic effects of NO at the optic nerve head and in the RGCs which results in optic nerve head degeneration and visual field loss [15]. Inducible NOS was triggered by ocular inflammation, LPS, endotoxin, or cytokines including tumor necrosis factor α (TNF α) and interleukin-1 or interleukin-6 [16]. Therefore, one possibility for the treatment of glaucoma could be the use of inhibitors of iNOS induction and/or its activity. In the retina, Müller glial cells can express the iNOS isoform after endotoxin and cytokine exposure [17]. Retinal pigment epithelium (RPE) cells also contain iNOS in various species [18]. Goureau et al. [19] reported that fibroblast growth factors (FGFs) and transforming growth factor β (TGF β) have opposite effects on the regulation of the production of NO in RPE cells. FGFs inhibit the induction of iNOS at the transcriptional level. Conversely, TGF^β frequently acts as an immunosuppressor. TGF^β attenuates NO production in human and rat RPE and Müller glial cells [20]. These molecules might be candidates to reverse or treat NO-related glaucoma. On the other hand, upregulation of TNF α and TNF α receptor-1 expression was accompanied by progressive optic nerve degeneration in the glaucomatous optic nerve head [21]. It has been reported that TNF α contributes to the progression of optic nerve degeneration by inducing iNOS expression in glial cells. Thus, the TNFa inhibitor etanercept or other antagonists of $TNF\alpha$ or suppressors of inflammation could be considered as therapeutic tools against glaucoma [22].

The major function of eNOS is vasodilation, by regulating vascular smooth muscle relaxation. Immunoreactivity of eNOS is seen in the retinal vascular endothelial cells, choroid and retina [23]. In glaucomatous eyes, overexpression of nNOS and iNOS is linked to glaucomatous RGC apoptosis through increased levels of NO, while enhanced staining for eNOS is assumed to be a compensatory neuroprotective reaction [24]. Furthermore, no significant changes in eNOS expression have been observed in the chronic glaucoma model.

The reagents that can regulate NO levels in the retina could become a reasonable neuroprotective agent for treating glaucoma.



Fig. 6.1 Schematic diagram for detecting S-nitrosylated proteins (biotin-switch assay). Step 1: free thiols are blocked by methylthiolation reagent. Step 2: the reduction of SNO bonds to thiols with reductant. Step 3: newly reformed cysteines react with biotin-conjugated thiol-modifying reagent. Step 4: target biotinylated proteins are collected by avidin-coupled reagents

6.1.3 Anti- and Proapoptotic Mechanisms by NO and Protein S-Nitrosylation

Because NO is a free gas, it can easily penetrate the biological membrane. Superoxide radical shows a high affinity toward NO. The reaction between NO and superoxide anion produces peroxynitrite [25], a highly reactive molecule that can cause extensive damage to proteins, lipids, and DNA molecules. Furthermore, NO can react with thiols, organosulfur compounds containing a carbon-bonded sulfhydryl (-C-SH or R-SH) group. Some actions of NO, including neurotransmission and vasodilation, are mediated via the activation of soluble guanylate cyclase and subsequent elevation of cGMP levels [26]. Other actions of NO are mediated via S-nitrosylation of the free cysteine SH group of proteins and regulate their activities when cysteines are present at their active site [26].

Since Jafferey and Snyder discovered the "biotin-switch assay" for protein S-nitrosylation [27], nearly 1,000 proteins have been identified as *S*-nitrosoproteins. The biotin-switch assay consists of four steps (Fig. 6.1):

- Step 1—the methylthiolation of free cysteine thiols with methyl methanethiosulfonate.
- Step 2-the reduction of SNO bounded to thiols with reductant.
- Step 3—newly reformed cysteines are reacted with biotin-conjugated thiolmodifying reagent.
- Step 4—target biotinylated proteins are collected by avidin-coupled reagents.

S-nitrosylation can mediate either neuroprotective or neurotoxic effects, depending on the action of the target protein [28]. For the neuroprotective effect, S-nitrosylation of caspases inhibits their activation. Most caspases contain a single cysteine at their catalytic site, which is susceptible to redox modification and can be effectively modified by S-nitrosylation in the presence of NO with subsequent

Functions	Name	References
Cell survival/death	14-3-3	[41]
	Apoptosis signal-regulating kinase 1	[42]
	Bcl-2	[43]
	Caspases	[30]
	Cyclin-dependent kinase 5	[44]
	Cyclooxygenase-2	[45]
	Dynamin-related protein 1	[46]
	Erk	[47]
	Fas	[48]
	GAPDH	[34]
	GOSPEL	[49]
	Keap1	[50, 51]
	Matrix metalloproteinase 9	[52]
	Parkin	[37]
	Peroxiredoxin2	[53]
	PTEN	[39, 40]
	STAT3	[54]
	X-linked inhibitor of apoptosis protein	[55]

Table 6.1 S-nitrosylated proteins targeting for cell survival/death

inhibition of enzyme activity [29]. S-nitrosylation has been shown to reduce the activity of caspases such as caspase-3, caspase-8, and caspase-9 in various types of neurons [30]. These results indicate that endogenous NO generated by NOS exerts an antiapoptotic function by S-nitrosylation-dependent inactivation of caspases. In contrast, another target protein of S-nitrosylation promotes activation of caspases and induces cell death. Caspase activation during NO stimulation also occurs as a result of downregulation of X-linked inhibitor of apoptosis protein (XIAP) [31]. Under normal conditions, XIAP efficiently binds to the catalytic sites of caspases and inhibits them [32]. However, NO inactivates the E3 ligase activity of XIAP through S-nitrosylation, thus stabilizing caspases [33]. On the other hand, various S-nitrosylated target proteins are also involved in cell death signaling. For example, NO S-nitrosylates glyceraldehyde-3-phosphate dehydrogenase (GAPDH) and binds to Siah, an E3 ubiquitin ligase [34]. Inside the nucleus, S-nitrosylated GAPDH stabilizes Siah, and the complex facilitates ubiquitination and degradation of the nuclear coreceptor [35]. This mechanism is thought to regulate gene expression associated with cellular dysfunction and death [36]. Recent studies have shown unregulated S-nitrosylation of many proteins involved in neuronal death and neurodegenerative disorders, such as Parkin [37], protein disulfide-isomerase (PDI) [38], and phosphatase and tensin homologue deleted on chromosome 10 (PTEN) [39, 40]. The target S-nitrosylated proteins for cell death or cell survival are listed in Table 6.1. In the future, there might be new targets that could be used for the treatment of glaucoma.

6.2 Antioxidative Effects of NO Through Keap1 S-Nitrosylation Signaling in RGCs

6.2.1 Protective Effects of Nip Against Oxidative Stress

Although a growing number of S-nitrosylated proteins are reported to contribute to pathogenetic brain disease, there are few such reports for retinal diseases. Therefore, we studied the role of protein S-nitrosylation by NO in RGC survival and axonal regeneration after optic nerve injury [50, 51, 56–58]. Many chemicals such as glyceryl trinitrate, sodium nitroprusside, and S-nitrosothiols have been reported as NO donors [59]. Recently, novel hybrid NO donor drugs have been designed as NO-releasing compounds such as NO-NSAIDS and nipradilol (Nip), which already has been registered as an antiglaucoma agent in Japan. Nip acts as a vasodilator by releasing NO from the nitroxy moiety [60]. Nip lowers intraocular pressure via both selective α 1-adrenoceptor and nonselective β -adrenoceptor antagonists. The protective effects of Nip have been shown in various neuronal cells [61] including RGCs [62]. Mizuno et al. demonstrated that the protective effects of Nip were NO dependent because both selective α 1- and nonselective β -adrenoceptor antagonists had no effect on RGCs [63]. However, the detailed mechanism of NO-dependent protection is not clear. Several lines of evidence indicate that NO can suppress RGC cell death [64] through an NO/cGMP-dependent pathway [65]. Furthermore, Tomita et al. [66] reported that the beneficial effect of Nip on RGC cell death was partially cancelled by inhibiting protein kinase G. Moreover, Naito [67] reported that Nip attenuates hydrogen peroxide-induced lipid peroxidation. Thus, we wanted to know whether the neuroprotective action of Nip is mediated by antioxidative processes via a NO/cGMP- or a NO/S-nitrosylation-dependent mechanism. In addition, as Nip did not S-nitrosylate caspase-3 under our experimental conditions, we focused on the possibility of Kelch-like ECH-associated protein 1 (Keap1) S-nitrosylation to understand its antioxidative action.

The Keap1 and NF-E2-related factor 2 (Nrf2) pathways regulate the expression of cytoprotective genes in response to oxidative stress or electrophilic stress [68]. Keap1 is the redox-sensor protein that allows the activation of Nrf2 by modification including oxidation or S-nitrosylation [69]. Once activated, Nrf2 translocates from the cytosol to the nucleus, binds to the antioxidant responsible element (ARE) of target genes, and drives their expression of antioxidative heme oxygenase-1 (HO-1), NAD(P)H:quinone oxidoreductase-1 (NQO-1), and glutamate cysteine ligase C (GCLC). Keap1 sensor protein contains 27 cysteine residues. Several analyses have identified multiple Keap1 cysteine residues to be involved in the reaction with oxygen or electrophiles. The most frequently reported targets are Cys151, Cys257, Cys273, Cys288, Cys297, and Cys613 [70, 71]. However, there are notable differences between laboratories, electrophilic probes, and species. Interestingly, NO activates the Keap1/Nrf2 pathway by S-nitrosylation of Keap1 protein in colon carcinoma cells [72]. Two reactive cysteines, Csy273 and Cys288, of Keap1 have been identified as key sites of translocational activity of Nrf2 [73].

Thus, we focused on the neuroprotective mechanism of Nip thorough Keap1 S-nitrosylation.

We first tested whether Nip could induce NO generation in a retinal ganglion cell line: RGC-5 [51]. Nip (20 μ M) significantly increased (1.6-fold) fluorescence intensity of NO indicator compared to no treatment (control) within 1 h of treatment. Denitro-nipradilol (DeNip) has weak selective α 1-adrenoceptor and nonselective β -adrenoceptor antagonist properties, but no NO-donating action. DeNip did not increase NO production in RGC-5 cells.

To evaluate the protective action of Nip against oxidative stress in RGC-5 cells, we used oxidative stress models in culture with hydrogen peroxide, tBOOH, and serum withdrawal. Charles et al. [74] studied the signaling cascades involved in RGC-5 cell death under serum deprivation. They demonstrated that serum deprivation increases malondialdehyde and decreases reduced glutathione. Furthermore, several groups have already reported that serum deprivation produced ROS in RGC-5 cells [75]. While pretreatment with Nip 4–6 h before oxidative stress exposure showed the maximum protective effect, no protective effect was observed when Nip was applied to RGC-5 0–2 h before oxidative stress stimulation. Another NO donor, NOR1, also showed protective effects against oxidative stress [50]. These protective effects were reversed by a NO scavenger. The protective effects of Nip were suppressed by the protein synthesis inhibitor cycloheximide. In contrast, DeNip did not show any neuroprotective effect against oxidative stress.

6.2.2 NO/S-Nitrosylation-Dependent Antioxidative Protein Induction by Nip

As the protective effect of Nip was dependent upon newly synthesized proteins, we tested the inducibility of antioxidative enzymes in RGC-5 cells. After 4 h of Nip treatment, we found that heme oxygenase-1 (HO-1) mRNA and protein had increased in RGC-5 cells. HO-1 [76] is an enzyme that degrades intracellular heme to free iron, carbon monoxide, and biliverdin. Bilirubin, converted from biliverdin, acts as a strong endogenous ROS scavenger and attenuates lipid peroxidation related to 4-hydroxy-2-nonenal (4HNE). Other antioxidative proteins, such as NQO-1 and GCLC, did not increase for up to 12 h after treatment of Nip. DeNip did not alter HO-1 expression. These results indicate that the protective effect of Nip is dependent on NO. An HO-1 inhibitor prevented the neuroprotective effect of Nip against oxidative stress. The data indicate that the neuroprotective action of Nip is caused by NO generation following antioxidative HO-1 expression.

To test the involvement of the Keap1/Nrf2 system in the Nip-induced increase in HO-1 expression, we analyzed the translocation of Nrf2 to the nucleus. Nip facilitated the translocation of Nrf2 into the nucleus. Both a NO scavenger and an S-nitrosylation blocker (dithiothreitol) inhibited nuclear translocation of Nrf2 by Nip. Furthermore, translocated Nrf2 was bound to the E1 enhancer of HO-1 promoter as an ARE site [50]. These results suggest that Nip-mediated translocation



Fig. 6.2 Schematic diagram of Keap1 S-nitrosylation-dependent antioxidative signaling pathway. NO donors induce S-nitrosylation of Keap1 and thereafter HO-1 expression through Nrf2/ARE signaling

of Nrf2 to the nucleus is dependent on NO/S-nitrosylation pathways. We further investigated the effects of the NO scavenger and S-nitrosylation blocker on HO-1 induction by Nip. As expected, the increase in HO-1 was blocked by both reagents. By using the biotin-switch assay, we determined that Nip increased S-nitrosylated Keap1 but not caspase-3.

To extend the protective effect of Nip in vivo, we used an optic nerve injury model in mice. Nip suppressed the final products of lipid peroxidation: 4HNE accumulation mediated by inducing HO-1 expression in RGCs after nerve injury. Finally, RGC death after nerve injury was reduced by Nip. These results demonstrate for the first time that Nip protects RGC death against oxidative stress both in vitro and in vivo through the induction of HO-1 by S-nitrosylation of Keap1 (Fig. 6.2). This novel neuroprotective action of Nip in RGCs may shed additional light on possible antiglaucomatous agents.

6.3 PTEN S-Nitrosylation-Induced Optic Nerve Regeneration by Nip

Nip has also been reported as having neuritogenic action in cat RGCs [77]. However, the mechanism of Nip-induced optic nerve regeneration has not been fully elucidated. It has been reported that PTEN deletion strongly showed optic nerve



Fig. 6.3 Schematic diagram of PTEN S-nitrosylation-dependent axonal regeneration. In the case of NO stimulation, PTEN was inactivated through S-nitrosylation. Subsequently, Akt phosphorylates a wide range of substrates involved in the regulation of cellular functions, including cell growth and survival. Akt activation also induced mTOR/S6 signaling, which is known as a novel pathway of axonal regeneration. *RTK*, tyrosine kinase receptor; *PIP2*, phosphatidylinositol (4, 5) biphosphate; *PIP3*, phosphatidylinositol (3, 4, 5) triphosphate

regeneration after injury in part by increasing protein translation through the mammalian target of rapamycin (mTOR) pathway [78–81]. PTEN and mTOR are critical factors for controlling the regenerative capacity of mouse RGCs and corticospinal neurons [81]. It has been known that PTEN is inactivated by S-nitrosylation and then activates phosphoinositide 3-kinase (PI3K) and its down-stream pathway [39]. We showed a correlation between Akt/mTOR activities and optic nerve regeneration through S-nitrosylation of PTEN in RGCs [80] (Fig. 6.3).

6.4 Future Studies

For treatment of glaucomatous degeneration, neuroprotective and neuritogenic actions in RGCs play a central role. As there are a few reports on protein S-nitrosylation in glaucoma, elucidating specific targets of S-nitrosylation and understanding their regulatory mechanism could assist the development of therapeutic intervention and be a next-era target for the treatment of injured RGCs in glaucomatous retina.

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