



## Iron-induced oxidative stress modify tau phosphorylation patterns in hippocampal cell cultures

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### Abstract

Oxidative stress phenomena have been related with the onset of neurodegenerative diseases. Particularly in Alzheimer Disease (AD), oxygen reactive species (ROS) and its derivatives can be found in brain samples of postmortem AD patients. However, the mechanisms by which oxygen reactive species can alter neuronal function are still not elucidated. There is a growing amount of evidence pointing to a role for mitochondrial damage as the source of free radicals involved in oxidative stress. Among the species that participate in the production of oxygen reactive radicals, transition metals are one of the most important. Several reports have implicated the involvement of redox-active metals with the onset of different neurodegenerative diseases such as Alzheimer's Disease (AD), Progressive Supranuclear Palsy (PSP), Amyotrophic Lateral Sclerosis (ALS) and Parkinson's Disease (PD). On the other hand, our previous studies have indicated that A $\beta$ -induced deregulation of the protein kinase Cdk5 associated with tau protein hyperphosphorylation constitute a critical pathway toward neurodegeneration. In the current paper we have shown that iron induces an imbalance in the function of Cdk5/p25 system of hippocampal neurons, resulting in a marked decrease in tau phosphorylation at the typical Alzheimer's epitopes. The loss of phosphorylated tau epitopes correlated with an increase in 4-hydroxy-nonenal (HNE) adducts revealing damage by oxidative stress. This effects on tau phosphorylation patterns seems to be a consequence of a decrease in the Cdk5/p25 complex activity that appears to result from a depletion of the activator p25, a mechanism in which calcium transients could be implicated.

### Introduction

Oxidative stress can be defined as the loss of the balance between the systems that produce reactive oxygen species (ROS) and the antioxidant machinery. The production of ROS is the result of oxidative processes affecting cellular and biochemical integrity in neuronal cells. This imbalance occurs in several human neurodegenerative diseases and in animal models that mimics brain disorders (Markesberry 1997;

Butterfield *et al.* 2001; Varadarajan *et al.* 2000). Neurodegenerative diseases involve protein aggregation, phenomena such as those occurring in Alzheimer's disease (AD) (Smith *et al.* 2000; Joseph *et al.* 2001; Maccioni *et al.* 2001a, b), Huntington's disease (HD) (Deckel 2001; Sayre *et al.* 2001), amyotrophic lateral sclerosis (ALS) (Estevez *et al.* 1999; Julien 2001), prion disorders such as Creutzfeld-Jacob disease (CJD) (Brown 2001), and disorders with aggregated  $\alpha$ -synuclein such as Parkinson's disease (PD) and frontotemporal dementia (FTD) (Goedert *et al.*

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2001). In addition to aggregated  $\alpha$ -synuclein in PD and FTD, other protein aggregates have been detected. These included  $\beta$ -amyloid peptide and tau protein in AD, huntingtin in HD and prions in CJD. The relationship between oxidative stress and protein aggregation still remains to be elucidated. In human aging there is an increase in oxidative stress markers and damage to cellular proteins, DNA and lipids (Christen 2000). The central nervous system (CNS) appears to be particularly vulnerable to ROS damage. A number of factors that contribute to the high vulnerability of the CNS to oxidative damage include a decreased level of the natural antioxidant glutathione in neurons, membranes containing a high proportion of polyunsaturated fatty acids (Hazel & Williams 1990), and a relatively increased oxygen requirement due to the high metabolic activities of the brain (Benzi & Moretti 1995).

During the last 10 years an increasing number of papers have dealt with the relationships between the presence of transition metals and neurodegenerative disorders (reviewed in Lynch *et al.* 2000; Qian & Shen 2001). Multiple lines of evidence implicate redox-active transition metals as mediator of oxidative stress and ROS production in neurodegenerative disorders (Perez *et al.* 1998; Sayre *et al.* 1999; Quintana *et al.* 2000). Several studies have been conducted to analyze the roles of Fe, Cu, Mn and Zn in the production of oxygen and nitrogen reactive species, and oxidative stress damage to cells as related to neurodegeneration. Particularly iron has been implicated in the ethiopathology of several degenerative diseases of neuronal systems such as Alzheimer disease (Lovell *et al.* 1998), Parkinson (Jellinger 1999), progressive supranuclear palsy (PSP) (Perez *et al.* 1998) and cataracts (Goldstein *et al.* 2000). Iron is primarily stored in ferritin, although elevated levels of iron seem not to correlate with an increase in ferritin levels or the transport protein transferrin in Alzheimer's patients (Fischer *et al.* 1997). In this paper we analyze the changes in the levels of Cdk5 and p25 in hippocampal neuronal cells and tau hyperphosphorylation patterns in response to acute iron treatments. Our results indicate that iron-mediated oxidative stress induces oxidative stress markers such as HNE adducts and hemoxygenase-1, as compared with untreated neuronal cells and control cells treated with the iron chelating agent deferoxamine mesylate (Deferal). Furthermore, iron does not modify the intraneuronal level of Cdk5, even though a decreased pool of p25 was observed. The phosphorylation at Tyr-15 in Cdk5 was also assessed, revealing that iron did not produce any

effect on the phosphorylation dynamics. Interestingly, iron treatment of hippocampal cells with 20  $\mu$ M Fe produced a significant decrease in the exposure of Alzheimer's type epitopes as analyzed with PHF-1 and AT-8 antibodies. The data suggests that the pathway involved in iron-mediated oxidative damage could involve different mechanisms than those implicated for  $\beta$ -amyloid induced oxidative stress.

## Materials and methods

### Primary cell cultures

Hippocampal neuron cell cultures were prepared from E18.5 rat embryos (Banker & Cowan 1977). Briefly, the hippocampus was dissected and then incubated in 0.25% trypsin-EDTA during 10 min at 37 °C. After trypsin digestion the tissue was washed with HBSS (GIBCO-BRL) solution and then disaggregated using a fire polished Pasteur pipette. Neurons were plated over poly-L-lysine coated coverslips at a 5,000 cells  $\text{cm}^2$  for immunofluorescence experiments and 15,000 cells  $\text{cm}^2$  for Western blots analyses. Cultures were maintained in 10% bovine serum until 3 h after plating, when the culture medium was replaced with medium containing the N2 supplement (GIBCO-BRL) (Bottenstein & Sato 1979). Cells were maintained in culture for 5 days, and the N2 medium was replaced every 48 h.

### Iron treatment

Iron was supplied as iron citrate at 20  $\mu$ M in a medium containing N2 supplement. For iron chelating experiments the drug Desferal (deferioxamine mesylate) (Sigma) was supplemented at 100  $\mu$ M in a medium containing N2 supplement. Iron and iron-chelating treatments were performed during 24 h.

### Immunoblots

After iron treatments, neurons were homogenized in RIPA buffer and the protein concentration determined by using the Bradford analyses (Bradford 1976). Equal quantity of each sample was resolved into 10% PAGE-SDS gels (Laemmli 1974). After transfer onto nitrocellulose membranes, samples were blocked in 5% non-fat dry milk and then incubated with the primary antibodies for 2 h at room temperature, or overnight at 4 °C. After three washing steps with PBS-Tween

(0.05%), membranes were incubated with peroxidase-conjugated secondary antibodies (Sigma). Finally, detection was performed using the chemiluminescence system (ECL, Amersham Pharmacia) and samples were analyzed in a molecular imager FX (Biorad) of the Millennium Institute CBB core facility. We used the following primary antibodies: AT8 that recognize a phosphorylated epitope on tau protein; Tau-1 that recognize an unphosphorylated epitope of tau; PHF1 that recognize an Alzheimer's type phosphorylated epitope on tau protein, and Tau5 that recognize a normal phosphorylation epitope on tau protein conformation. A  $\beta$ -actin antibody (Sigma) was used to normalize the amount of protein loaded on each well.

### Immunofluorescences

Cell cultures were fixed in 4% paraformaldehyde/4% sucrose during 15 min at 37 °C. After fixation, samples were permeabilized with 0.2% Triton X-100 at room temperature during 5 min. Samples were then washed three times in PBS and blocked with 5% BSA during 1 h at room temperature. Primary antibodies were diluted in 1% BSA and incubated in a wet chamber for 2 h at room temperature or overnight at 4 °C. After three washings with PBS, preparations were incubated with fluorescein or rhodamine-conjugated secondary antibodies (Sigma) during 1 h at room temperature (Capote & Maccioni 1998). Finally, samples were washed with PBS and mounted with Prolong mounting media (Molecular Probes). Additionally, F-actin was detected with rhodamine-conjugated Phalloidin at 5  $\mu$ g/ml (Sigma). Images were obtained from a Zeiss confocal microscope.

## Results and discussion

### Overall morphology of iron-treated hippocampal neurons

We first analyzed the effect of iron treatment on the general morphological features and cytoskeleton organization in cultured hippocampal cells. For such purpose, neuronal cultures maintained for 4 days *in vitro* (DIV) were incubated with increasing concentrations of iron ranging from 0 to 80  $\mu$ M (data not shown). This study indicated that the optimal working iron concentration to be used for subsequent experiments was 20  $\mu$ M, which is in the physiological range of iron concentration. Hippocampal neurons were at stage three of brain development by

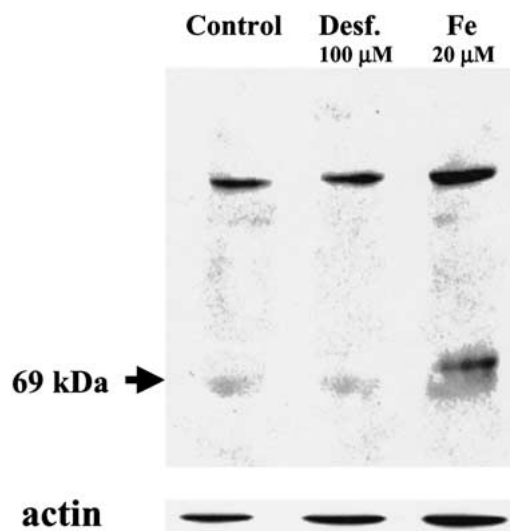


Fig. 1. Western blots of cells extracts from hippocampal neurons incubated in the presence or absence of iron. Neuronal cells were incubated in the absence of iron (control), or in the presence of 100  $\mu$ M Deferoxamine or 20  $\mu$ M iron. Cells were homogenized and subjected to Western blot assays by using an anti-HNE adduct rabbit polyclonal antibody. The migration of actin as internal reference is indicated. A protein band of around 69 kDa was apparent after exposure of neuronal cells to iron.

the time of iron administration (Dotti *et al.* 1988). There were not significant morphological differences between iron-treated and control cells, as analyzed through immunofluorescence using a monoclonal anti-tubulin FITC conjugated antibody and staining with rhodamine-Phalloidin for actin filaments (data not shown). Thus, cytoskeleton staining of microtubules and actin microfilaments showed no variations between treated and control groups. Iron does not appear to produce major changes in the cytostructure, therefore functional aspects of iron-treated neurons (Maccioni *et al.* 2001b) was investigated in the context of the experiments described below.

### A marker for lipid-peroxidation is increased in iron-treated neurons

It was of importance to analyze if iron-treatment produced an increase in the oxidative stress response within the hippocampal neurons. For such purpose we measured the levels of 4-HNE adducts. 4-HNE is an aldehyde product of lipid peroxidation that can damage primary neuron cell cultures (Mark *et al.* 1997), and can induce cross-linking of cytoskeletal proteins. As it is shown in the Figure 1, there is a marked increase in the amount of HNE-adducts in samples

derived from iron-treated cells. Controls using the iron chelating agent Desferal showed similar 4-HNE adducts levels as those observed in untreated controls, thus supporting the observation that the increase in HNE levels is due to iron overload. This increase in the amount of HNE-adducts found in treated cells also suggests that iron is triggering the oxidative stress response inside the neurons, and affecting lipids of the cell membrane. There is a vast amount of reports dealing with the importance of oxidative stress in the pathology of Alzheimer's disease (reviewed in Markesberry 1997; Smith *et al.* 2000). The results that imply free radical oxidative stress in AD includes: (i) increased levels of redox-active metals ion in AD brain; (ii) increased lipid peroxidation as detected by an increase in HNE adducts; (iii) increased protein, DNA and RNA oxidation, and upregulation of antioxidant enzymes; and (iv) extensive amounts of peroxynitrite and advanced glycation end products (AGE)-modifications. These studies point to the effect of iron treatment over hippocampal neurons in culture, due to an increase in oxidative stress of the cell. An increase in the amount of HNE-adducts in the iron-treated neurons support this conclusion. HNE-adducts are generated in response to lipid peroxidation induced by an increase in oxidative stress.

#### *The levels of Cdk5 remained unchanged after iron treatment*

Previous findings of our laboratory have implicated a deregulation of the Cdk5 enzyme in the pathway of  $A\beta$ -mediated neurotoxicity (Alvarez *et al.*, 1999, 2001). Studies have also revealed that an activation of the Cdk/p35 protein complex mediated by a single site Cdk5 phosphorylation is responsible for the anomalous overactivation of this protein kinase (Alvarez *et al.* 2001; Patrick *et al.* 2000). Additionally it has been shown that the generation of free radicals in neurons treated with  $A\beta$  may be important in the role of neurotoxicity (Behl *et al.* 1994; Harris *et al.* 1995; Mattson *et al.* 1995 a, b; Sagara *et al.* 1996). In this context, we decided to analyze the Cdk5 and the phospho-Cdk5 (at Tyr<sup>15</sup>) levels (Zuckerberg *et al.* 2000) in the iron-treated cells. Looking at the total levels of this kinase we found no significant variations in the amount of Cdk5 (Figure 2A). Moreover, the levels of phosphorylated Cdk5 also remained unchanged as analyzed with antibody that recognize phosphorylated Tyr<sup>15</sup> epitope on this protein (Figure 2B). However, when we analyzed the levels of p35, one of the neu-

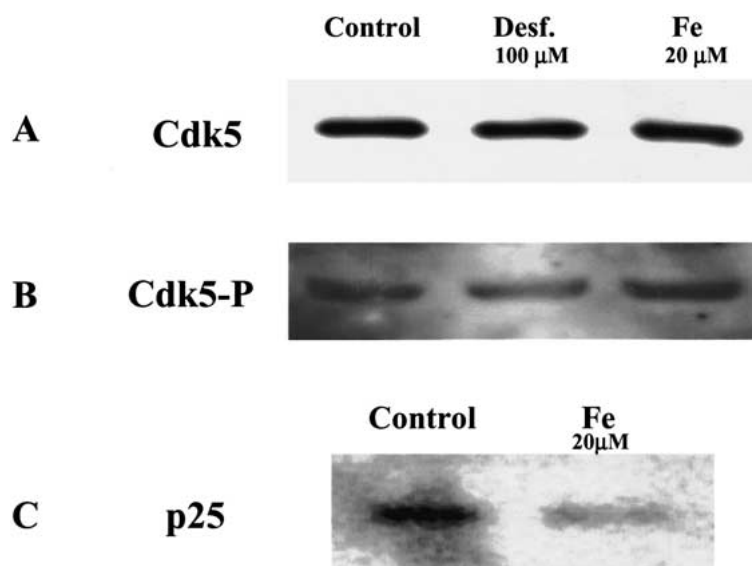
rospecific activators for Cdk5 we found that although p35 did not change its levels within the range of iron concentrations used, the expression of the soluble fragment p25 lacking the N-terminal p35 protein moiety decreased (Figure 2C). It has been reported that soluble p25 could act as a regulatory protein controlling Cdk5 activity (Patrick *et al.* 2000). Taken collectively these results suggest that iron-treatment of hippocampal cells produce a decrease in the activity of the Cdk5/p25 complex.

#### *Iron alter the phosphorylation patterns of brain tau protein*

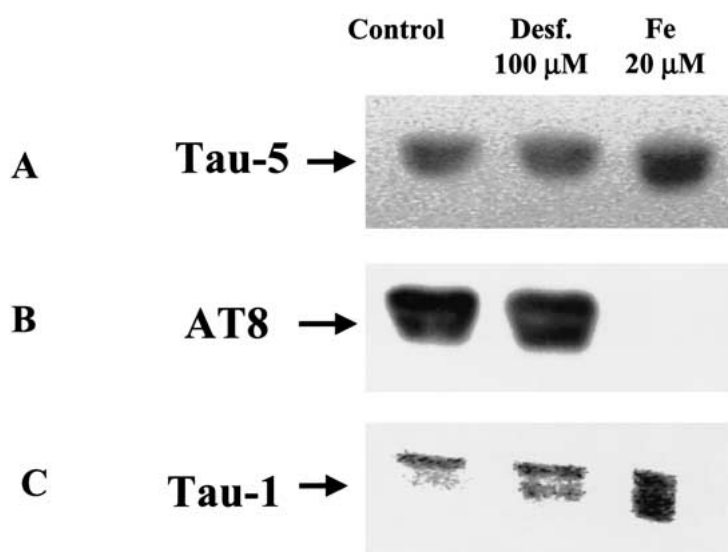
Tau total levels were not altered in the cells treated with iron as shown with a phosphorylation independent antibody Tau-5 (Figure 3A). However, when we looked for the phosphorylated forms of the tau protein, we unexpectedly found a significant decrease in phosphorylated tau as shown with the AT8 antibody that recognize tau epitopes of Alzheimer's type (Figure 3B). Data of Figure 3 indicates that tau protein loses its hyperphosphorylation upon iron treatment. Studies have indicated that Cdk5 driven hyperphosphorylation occurs at residues Ser<sup>202</sup>-Pro, Thr<sup>205</sup>-Pro and Ser<sup>235</sup>-Pro (Alvarez *et al.* 1999). Consistent with the latter result, the amount of tau protein in its hypophosphorylated form was increased in response to iron treatments, as shown with Tau1 antibody (Figure 3C). There are two generic reactions in which transition metals are related with some relevance to neurodegenerative disorders. First, a metal-protein association leading to protein aggregation; this reaction can involve redox-inert metal ions such as Zn<sup>2+</sup>, or redox-active metal ions such as Cu<sup>2+</sup> and Fe<sup>3+</sup>. Second, metal-catalyzed protein oxidation leading to protein damage: this reaction involves a redox-active metal ion such as Cu<sup>2+</sup>, Fe<sup>3+</sup> or Mn<sup>2+</sup> (Smith *et al.* 1997; Perry *et al.* 1998).

#### *In the search for a mechanistic approach for the analysis of oxidative stress effects on tau phosphorylation patterns*

Several reports have indicated that an imbalance in the oxidative stress cellular responses could be responsible for the hyperphosphorylation of cytoskeleton proteins involved in neurodegenerative diseases. This has been extensively analyzed with respect to the role of the microtubule-associated protein tau in the etiology and pathogenesis of Alzheimer's disease (Smith *et al.* 1998; Maccioni *et al.* 2001b). Nevertheless, there are



*Fig. 2.* Western blots of hippocampal extracts incubated in the presence or absence of iron. Neuronal cells were incubated in the absence of iron (control), and in the presence of 100  $\mu$ M Deferal or 20  $\mu$ M iron. A. Cells were homogenized and the high speed supernatants subjected to Western blots assays by using an anti-Cdk5 antibody clone C8 from Santa Cruz. B. Cell extracts were analyzed by using an anti-Cdk5 phosphorylated at Tyr15. C. Cell extracts of cells incubated in the presence and absence of iron were subjected to Western blot analysis for p25 using an anti-p25 monoclonal antibody.



*Fig. 3.* Western blots of neuronal extracts incubated in the presence or absence of iron. Neuronal cells were incubated without iron (control), and in the presence of 100  $\mu$ M Deferal or 20  $\mu$ M iron. A. Hippocampal extracts treated and untreated with iron analyzed by Western blots using Tau-5 antibody which recognizes conformational epitopes for all tau variants. B. Cells were homogenized and the high speed supernatants subjected to Western blots assays by using the AT8 antibody that recognizes Alzheimer's type tau epitopes. C. Cell extracts were analyzed by using Tau-1 antibody that recognizes unphosphorylated tau.

contradictory data on the phosphorylation state of tau protein in response to oxidative stress. Some reports point out an increase in the phosphorylation of tau in AD brains derived tissue (Takeda *et al.* 2000). On the other hand H<sub>2</sub>O<sub>2</sub>-induced oxidative stress has been shown to produce dephosphorylation of tau protein in rat primary neuronal cultures (Davis *et al.* 1997). An increase in the amount of dephosphorylated tau is also shown in neurons treated with glutamate (Anderton *et al.* 1995; Davis *et al.* 1995; Fleming & Johnson 1995) and ischaemia (Geddes *et al.* 1994; Schakelford & Nelson 1996). However the decrease of hyperphosphorylated tau protein is not dependent on an increase of GSK3 $\beta$  kinase levels (Davis *et al.* 1997). Thus, the increase of dephosphorylated tau isoforms upon oxidative stress effects is likely to depend on Cdk5, since AT8, PHF1 and Tau1 antibodies recognize mainly phosphoepitopes on tau that are catalyzed by kinases belonging to the proline directed protein kinases family. This could be the situation for the effects of iron observed in this study, since the depletion in p25 levels could account for the low levels of tau phosphorylation upon iron treatment. Therefore, the fine regulation and cross-talks of these kinases involved in the molecular events in the pathogenesis of Alzheimer's disease, needs further analysis (for review Maccioni *et al.* 2001b).

The fact that different oxidative stress treatments lead to contradictory results in the tau phosphorylation levels suggest that some of these differences could be related to variations of intracellular messengers in response to such treatments. Calcium ion could be one of the possible intracellular messengers involved in this response. Calcium is an important intracellular messenger for neuronal signaling pathways. Through variations in both the amplitude and frequency of intracellular calcium transients, the same calcium ion can elicit different responses. Alterations in intracellular calcium concentrations are clearly involved in modulating the phosphorylation state of tau protein *in situ*. However, results have been decidedly mixed, and there is little consensus as to the specific effects of elevating calcium intracellular concentration on tau phosphorylation. For example, acute treatment of primary neuronal cultures with calcium ionophores has been reported to increase (Mattson *et al.* 1991; Mattson *et al.* 1992) and decrease (Adamec *et al.* 1997) tau phosphorylation. The same mixed results have been found using human neuroblastoma cell lines, as ionophore treatment resulted in both increases (Shea *et al.* 1997) and decreases (Xie & Johnson 1998) in

tau phosphorylation. Increasing intracellular calcium by activation of N-methyl-D-aspartate receptors has been shown to result in the dephosphorylation of tau in rat brain slices (Fleming & Johnson 1995) and cortical neuronal cultures (Adamec *et al.* 1997). In an elegant study, it was shown that the variations of the levels of tau phosphorylation were in fact dependent on the transient calcium concentration (Hartigan & Johnson 1999). Thus, a possible explanation for discrepancies between different studies dealing with the role of oxidative stress could be related with the overall modification of the intracellular calcium homeostasis. These differences could be mimicking some acute or chronic responses of the cellular machinery to oxidative stress (Figure 4).

What are the relationships between A $\beta$  neurotoxicity and oxidative stress effects in neurodegeneration? In regard to  $\beta$ -amyloid effects in inducing deregulation of the Cdk5/p35 complex, Cdk5 activation increases hyperphosphorylated tau protein in neuronal cell cultures (Alvarez *et al.* 1999) and in a transgenic mice overexpressing tau protein (Gotz *et al.* 2001). Moreover, tau hyperphosphorylation is also detected in a double mutant mouse overexpressing amyloid precursor protein and tau (Lewis *et al.* 2001). The effect of A $\beta$  fibrils have been suggested to produce an increase in the oxidative stress (Behl *et al.* 1994; Harris *et al.*, 1995; Manelli & Puttfarcken 1995; Mattson 1995a, b; for review Maccioni *et al.* 2001b). Also, it has been reported that A $\beta$  induced an increase in tau phosphorylation (Busciglio *et al.* 1995; Takashima *et al.* 1996 Alvarez *et al.* 1999).

Alzheimer's disease is characterized by the deposition of A $\beta$  within the neocortex, associated with neuronal loss and oxidative stress. The deposition of A $\beta$  is considered to be closely related to the primary pathogenesis of familial AD. Familial AD-linked mutations of amyloid precursor protein (APP), presenilin-1 and presenilin-2, increase both cerebral A $\beta$  burden and A $\beta$ 1-42 production, underscoring the role that A $\beta$  metabolism plays in AD pathogenesis. Furthermore, the deposition of A $\beta$  in the neocortex of transgenic mice overexpressing A $\beta$  is accompanied by many of other neuropathological features of AD including intraneuronal tau abnormalities and neuronal loss (Calhoun *et al.* 1998), as well as signs of oxidative damage similar to those observed in AD-affected brain (Smith *et al.* 1998). The length of the A $\beta$  species is considered to be one important factor in AD pathogenesis as A $\beta$ 1-42, a minor free soluble species in biological fluids, is enriched in amyloid

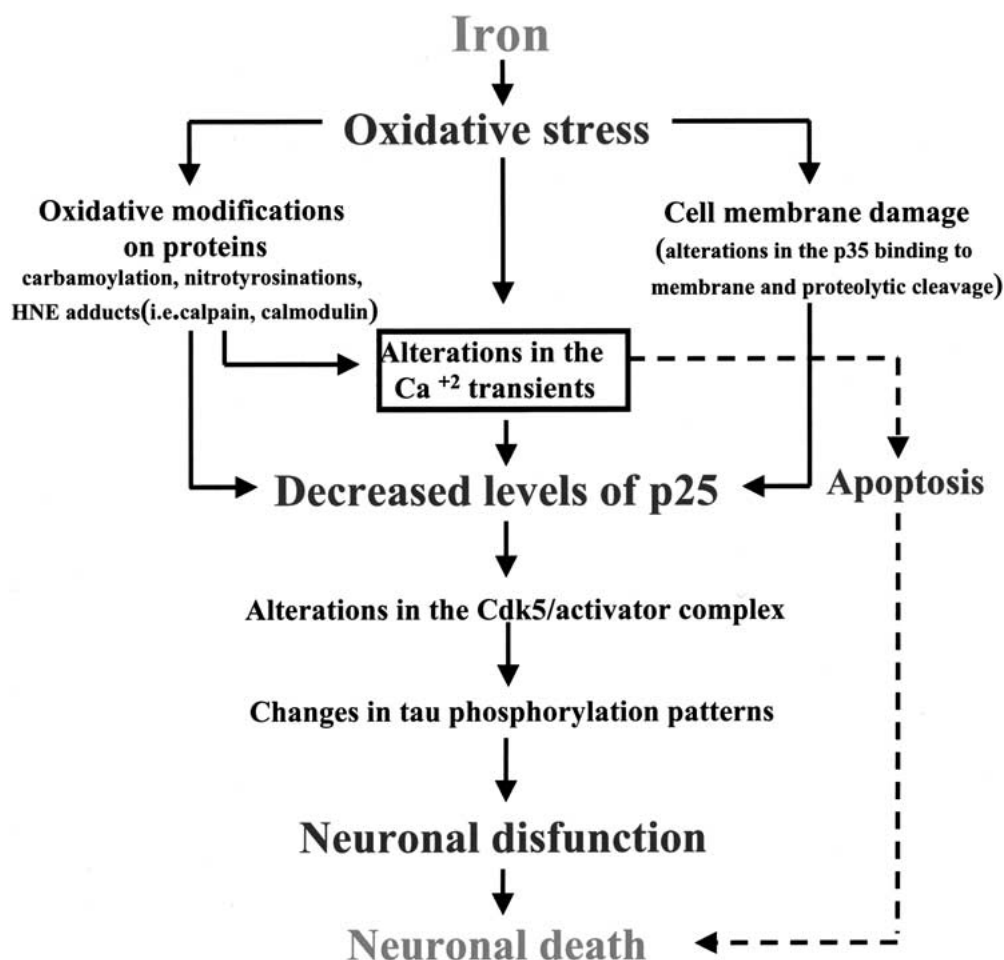


Fig. 4. Schematic representation of the action of oxidative stress via iron effects on neurodegeneration of hippocampal cells on the basis of data from these studies and previous investigations (for review Maccioni *et al.* 2001b). The mechanism considers the possible contribution of changes in calcium transient and the depletion in Cdk5 activators (i.e., p25) in the observed changes on phosphorylation patterns on brain tau protein.

deposits. Many studies have now confirmed that A $\beta$  is neurotoxic in cell culture. Hence, there is a compelling argument to consider A $\beta$  deposition as a therapeutic target in AD. As for transition metals role in A $\beta$ -mediated neurotoxicity it has been suggested that Cu<sup>2+</sup> and Fe<sup>3+</sup>, unlike Zn<sup>2+</sup> induce greater A $\beta$  aggregation under mildly acidic conditions such as those believed to occur in AD brain (Atwood *et al.* 1998). Significantly, the solubility of rat or mouse A $\beta$ 1-40 is unaffected by Zn (II) or Cu (II) at low micromolar concentrations. Apolipoprotein E can also modulates the precipitation of A $\beta$  by Cu<sup>2+</sup> and Zn<sup>2+</sup>, which is important because ApoE isoforms segregate with the genetic risk for AD; inheritance of the ApoE4 isoform carries the greatest risk. The ApoE4 isoform is poorest in maintaining A $\beta$  in a soluble form, as com-

pared with the others isoforms (ApoE2 and ApoE3), whether the precipitating metal is Cu<sup>2+</sup> or Zn<sup>2+</sup> (Moir *et al.* 1999). It has been also reported that some Cu/Zn selective chelators enhance the solubilization of A $\beta$  deposits from post-mortem AD brain samples, supporting the possibility that these metals could play a role in the assembly of the deposits (Atwood *et al.* 1998). However, metals could be playing more than this role. It has been also reported that A $\beta$  is redox active, and reduces Cu (II) or Fe (III) and then produces H<sub>2</sub>O<sub>2</sub> by electron transfer to O<sub>2</sub>. The metal-reducing activity and H<sub>2</sub>O<sub>2</sub> production of A $\beta$  species is enhanced in human A $\beta$ 42 as compared with human A $\beta$ 40. Considering that neurodegeneration is a multifactorial process, these investigations suggest that oxidative stress and A $\beta$  amyloid, through its different

aggregation forms, could induce different alterations in the signaling pathways of neurons. This could be exerted by either independent mechanisms or by concerted actions, and the potentiation of these signals appears to be critical for neuronal degeneration.

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