

Review

The role of vitamin A in differentiation and skin carcinogenesis

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The field of vitamin A research has witnessed a remarkable surge in interest since the late 1980's, when the retinoid receptors were discovered and their genes cloned. Heterodimeric interactions between the retinoid X receptors (RXRs α , β , and γ), which bind 9-cis-retinoic acid, and other hormone receptors, including the retinoic acid receptors (RARs α , β , and γ), the thyroid hormone receptor (TR), the vitamin D receptor (VDR), the peroxisomal proliferator activated receptor (PPAR), and others make hormone action dependent on retinoid homeostasis. Retinoid response elements (RAREs) are present in the promoter and/or enhancer regions of several genes, including some of the homeobox genes, which control development and differentiation. The interaction between hormones and retinoids is added additional orders of complexity by the diversity of the RAREs including the spacer length, their 5' or 3' position, and their coexistence in composite sequences with other hormone response elements (e.g., an estrogen response element in the lactalbumin gene promoter, see Table 2). Control of normal epithelial differentiation is a fundamental function of retinoids. The histogenesis of squamous metaplasia caused by vitamin A deficiency is a stepwise process, which permits the gradual transition of phenotypes from simple-columnar, typical of the endocervical epithelium, to pseudostratified, to stratified-squamous and, eventually, to keratinizing. Conversely, the maintenance of the squamous keratinizing differentiation in the ectocervix and vagina requires estrogen. In the absence of this hormone, the squamous stratified ectocervical epithelium retrogrades to a simpler, two or three cell layer morphology, with the topmost layer expressing keratin K8, typical of the endocervical epithelium and mucous cells. Retinoid and estrogen receptor transcript expression is governed by dietary retinoid status and by estrogen availability, with squamous cells mostly expressing RAR γ and estrogen receptor transcripts, and columnar cells mostly expressing RAR β . RXR transcripts appear mostly expressed in proliferating cells. The relevance of the retinoid receptors to carcinogenesis is highlighted in the work on acute promyelocytic leukemia. This work has demonstrated that the fusion gene PML-RAR α , resulting from the t(15;17) chromosomal translocation, is etiologically connected with the disease and with complete remission after oral retinoid administration. Developments in retinoid metabolism, including the cloning of the cytochrome P450RAI and the connection between RA metabolism and cell growth inhibition, have recently taken place. Recent work has also shown that pharmacological dietary retinoic acid specifically inhibits malignant conversion in the mouse two-stage carcinogenesis system. Because RA upregulates retinoid receptor expression, it seems that retinoid receptors function as tumor suppressors.

This field should serve as a paradigm for things to come for other essential nutrients, and spells out the notion that nutritional sciences are indeed fundamentally important, because they can contribute significantly to our understanding of different diseases and provide effective therapeutic approaches. (J. Nutr. Biochem. 8: 426–437, 1997) © Elsevier Science Inc. 1997

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Introduction

I (LDL) have spent some 30 years of my professional life working on vitamin A, and I am more excited than ever about this vitamin. Though undoubtedly this attachment is a sign of my own limitations, the majority of the credit for the

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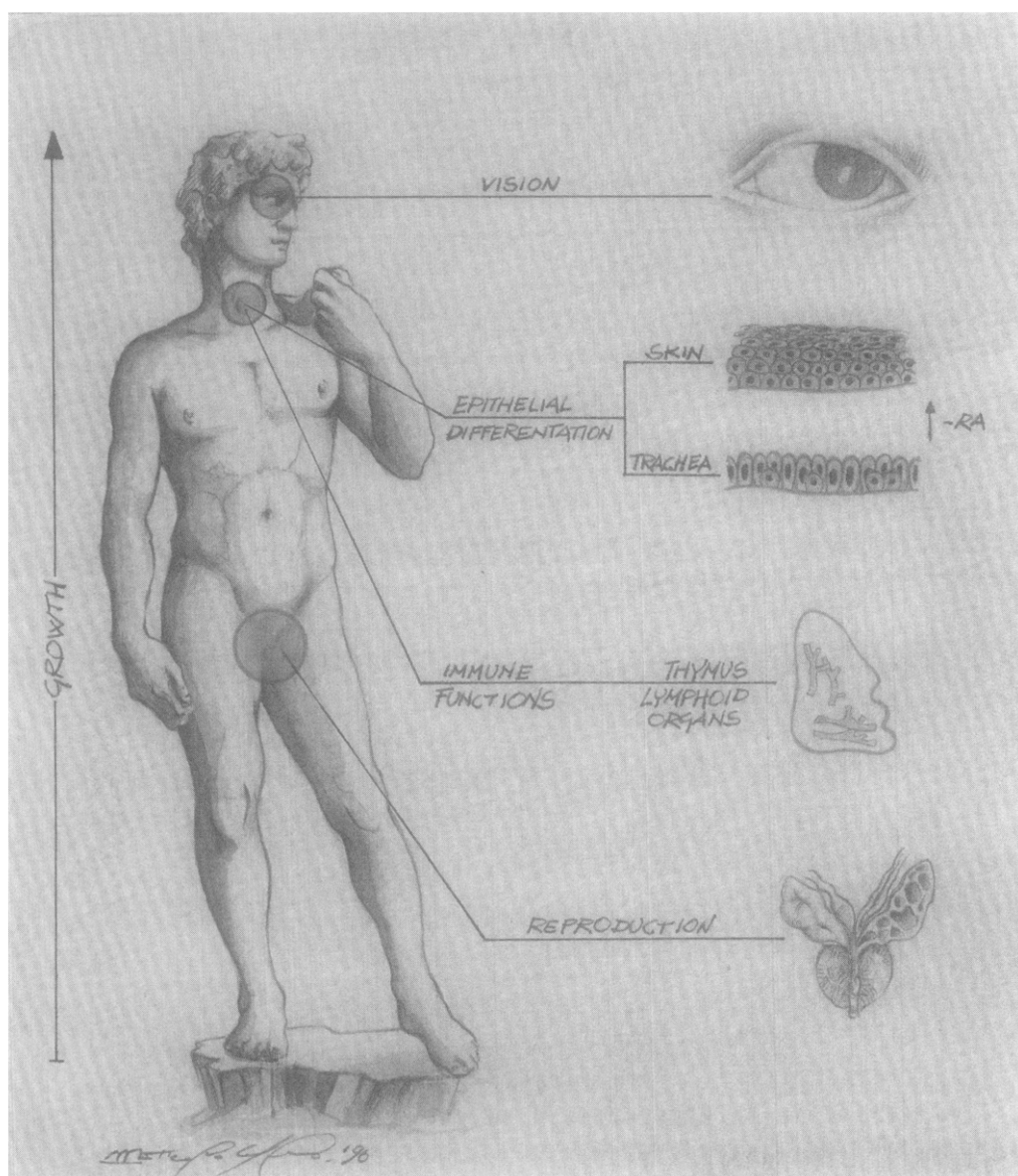


Figure 1 Artistic rendition to highlight the various functions of vitamin A.

enthusiasm goes to the nature of the substance itself. The wide scope of its involvement in fundamental biological processes is evident from *Figure 1*, which highlights its requirement for growth, reproduction, vision, epithelial differentiation, and immune functions. The field of vitamin A research has continued to grow since the 1960's, when it was mostly the realm of nutritional biochemists; through the 1970's, with the realization that retinoids might be the golden key to cancer chemoprevention; and the 1980's, when some, apparently unrelated findings in molecular biology, permitted the cloning of the retinoid receptors. Retinoids are now of fundamental interest to researchers and clinicians in fields as diverse, and yet interrelated, as dermatology, oncology, embryogenesis, etc.

This review considers some aspects of the field and falls short of being comprehensive, both because of space limitations and those of the senior reviewer himself.

Retinoid metabolism

Excellent reviews on retinol and retinoic acid metabolism^{1,2} and transport^{3,4} have been published. *Figure 2* shows the chemical structures of the most common retinoids. *Figure 3* shows the salient points in the oxidative pathway from retinol to retinoic acid and its derivative 4-hydroxy and 4-oxo-RA. Here, we focus our attention on how RA itself can actively contribute to control its own levels within the cell by regulating both its biosynthesis and metabolism. Once taken up, retinol binds the cellular retinol binding protein (CRBP). The resulting holo-CRBP then functions as a substrate for two different families of enzymes, which compete for its availability: a) the microsomal lecithin: retinol acyl transferase (LRAT),⁵ which synthesizes retinyl esters, the storage form of retinol in many tissues and cells³ and b) the microsomal retinol dehydrogenases,^{6,7} which

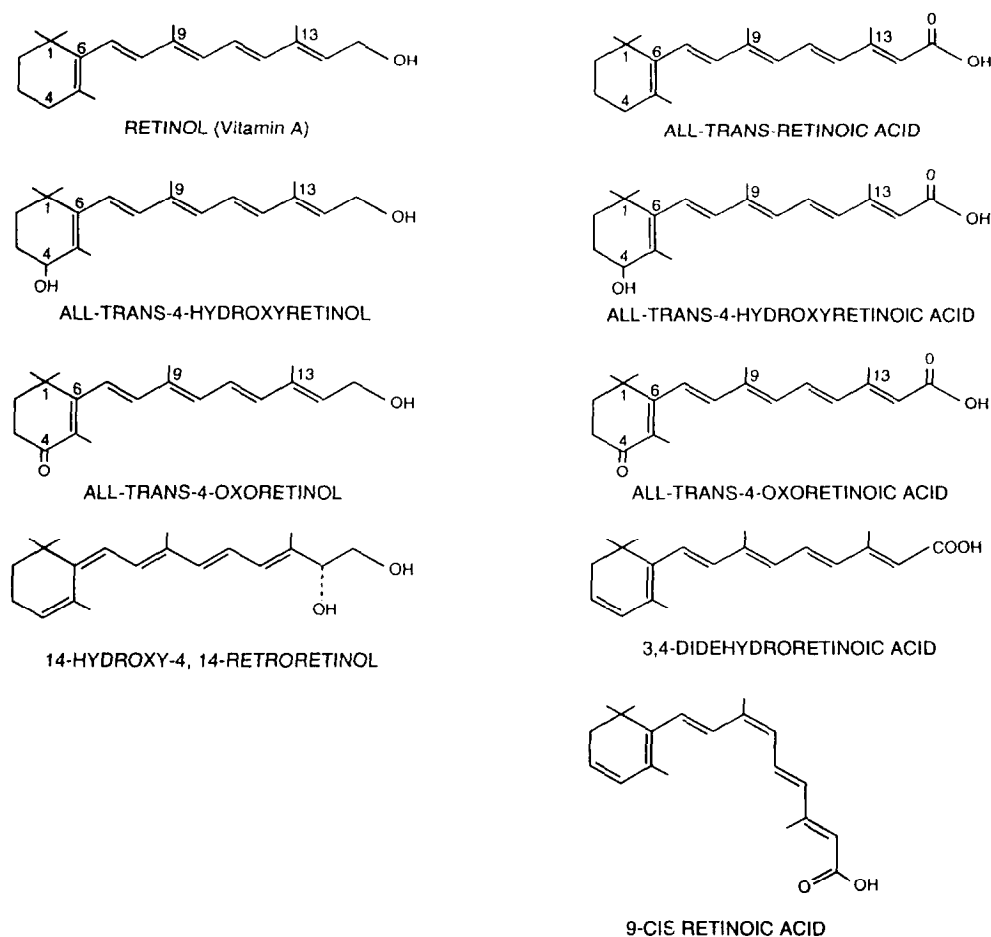


Figure 2 The structures of the most common natural retinoids are shown.

catalyze the oxidation of retinol to retinal, the rate-limiting step in the oxidative formation of RA.²

Recently, a new interesting autoregulative system has been described in human keratinocytes. In these cells RA-treatment causes both a strong induction of LRAT activity and a 50% reduction in the conversion of retinol to RA. It has been suggested that RA, through the activation of LRAT, sequesters retinol from the oxidative pathway leading to RA; in fact, when LRAT is inhibited by other agents such as the serine protease inhibitor PMSF or apo-CRBP,

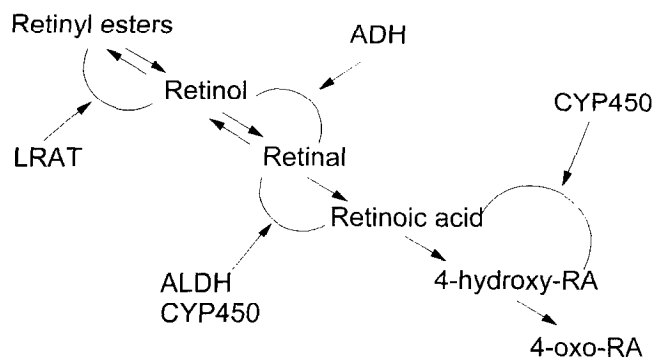


Figure 3 The metabolic flow from retinyl palmitate to retinoic acid and its oxidation products is shown. Note that the oxidation of retinal to retinoic acid and further oxidation reactions are irreversible.

RA synthesis rises to control levels, i.e., levels of RA in solvent-treated cells.⁸

As shown in *Figure 3*, RA can be further oxidized to 4-hydroxy and eventually 4-oxo-RA. These metabolites have been considered inactive forms of RA, but some recent evidence credits them with a pivotal role in development, growth and differentiation.^{9,10} It is thought that they might act by binding to and activating RARs. In particular, a receptor specificity has been postulated for 4-oxo-RA, as it binds avidly to RAR β , but poorly to RAR γ .^{10,11}

Cytochrome P-450s are the enzymes responsible for the biosynthesis of these RA metabolites; several of these enzymes have been found to be able to oxidize at the carbon 4 position, not only RA, but also retinal and retinol.¹²

A new cytochrome (P450RAI) has been cloned recently¹³ from regenerating zebrafish fins and shown to generate 4-hydroxy and 4-oxo-RA. P450RAI is not normally expressed, but it becomes expressed after wounding, in the process of regeneration, and the transcripts are specifically expressed deep in the epithelial layer at the distal tip of the blastemal mesenchyme.¹³ The cloning of CYP-RAI is obviously an important development in our understanding of retinoid metabolism and function.

We have studied RA metabolism in 15 different cell lines from diverse sources.¹⁴ Nine cell lines were growth inhibited by RA and quickly metabolized it to oxidation products. In sharp contrast, the 6 RA-resistant cell lines accu-

mulated as much as 20 fold more RA because of their inability to metabolize and/or use it.¹⁴ These data would suggest that the RA-sensitive cells synthesize a metabolite that is responsible for the inhibition of cell growth. This possibility is presently being tested in our laboratory.

Recent studies have shown that 4-oxo-retinol (*Figure 2*), is a good activator of RARs and is able to induce differentiation of the embryonal carcinoma cells F-9.¹⁵ Of interest are also the 4, 14 dihydroxy retinol compounds (*Figure 2*), which have been shown by Buck, Hammerling, and collaborators, to be essential for lymphocyte cell growth.¹⁶

Retinoids and epithelial differentiation

It has been known since 1925 that vitamin A deficiency leads to metaplastic changes in epithelial tissues,¹⁷ similar to those caused by chemical carcinogens. Sporn and colleagues have used the hamster trachea organ culture system to grade the potency of retinoids in differentiation, using H and E staining to monitor epithelial changes.⁹ Our laboratory has studied the dynamics of epithelial cell replacement and differentiation in hamster tracheal epithelium and in mouse endocervical epithelia undergoing squamous metaplasia as the result of nutritional vitamin A deficiency. We have defined stages during the formation of the preneoplastic lesion squamous metaplasia.^{18,19} These stages are best observed in the simplest system, the endocervical epithelium of the mouse. This epithelium is of the simple-columnar type, so called because it is made up of one layer of columnar cells (*Figure 4*). These cells express keratin K8, cease to divide and are replaced by squamous K8-negative, but K5-positive cells, under conditions of vitamin A deficiency (*Figure 4*). Our work has shown that this replacement is gradual and proceeds through the following stages: formation of pseudostratified, stratified-squamous, and keratinized metaplastic lesions.^{18,19} The characterization of these stages has been achieved through the use of specific keratin antibodies, which have permitted monitoring for the appearance of K5-positive basal cells in a loan of negative columnar cells (simple to pseudostratified transition); the formation of multiple K5-positive squamous cell layers (pseudostratified to squamous-stratified transition); and finally the formation of a keratinizing epithelium.^{19,20} *Figure 4* indicates that vitamin A deficiency causes a simple-columnar epithelium to gradually become more complex through the acquisition of phenotypes normally present in other, more stratified epithelia: i.e., the simple epithelium in succession becomes pseudostratified (i.e., similar to the normal phenotype of trachea), squamous stratified (similar to buccal mucosa) and eventually keratinizing (similar to the epidermis).¹⁹ These data suggest that homeostatic mechanisms dependent on the cellular milieu control the phenotypic expression of epithelial cells under normal conditions, and that vitamin A concentration may be an important factor in maintaining a simple or more stratified epithelial morphology. The concentration of retinoids and their second messengers in different epithelia, therefore, seem to be important determinants of differentiation.

Epithelial, cell type specific expression of retinoid receptor transcripts

We have reported a cell type-specific expression of the retinoid receptor transcripts.²¹ Retinoic acid receptor RAR β transcripts were found specifically expressed in the columnar cells of the endocervix (*Figure 5*) and in the proliferating cells of the squamous metaplastic lesions (*Figure 4*); RAR γ transcripts were absent from the normal columnar endocervical epithelium and is normally present in squamous-stratified epithelium of the ectocervix (*Figure 5*). It also is expressed in squamous cells of the metaplastic lesions of the endocervix (*Figure 4*); RAR α transcripts seem ubiquitous, as expected of a house-keeping gene; retinoid-X-receptor RXR α and β transcript expression was very high in proliferating cells of the endocervix and squamous lesions (*Figure 4*).²¹

Retinoid-steroid interactions in cervical epithelial differentiation

Estrogen is involved in the differentiation of vaginal epithelial phenotypes and usually counteracts the action of retinoids, in that it causes the normally squamous, nonkeratinizing epithelium of the cervix and vagina to become keratinizing.²² The interplay among steroid hormones, the thyroid hormone and the retinoids, and possibly other members of this superfamily, has been demonstrated with the discovery that heterodimers of their receptors are formed and can either activate or repress gene transcription. In particular, the 9-cis-retinoic acid receptor, RXR, has been shown to form heterodimers with a variety of other transcriptional activators, which bind to their specific response elements.^{21,23}

The availability or deficiency of estrogen profoundly alters the phenotype of the cervical and vaginal epithelia. Ovariectomy caused the normally squamous stratified ectocervical epithelium to change into an epithelium with, at the most, three cell layers. The topmost cells were columnar and keratin K8-positive. The epithelium lacked keratin K1, normally occurring at the suprabasal level in squamous stratified ectocervix. After estrogen administration these K8-positive cells disappeared and the stratified morphology resumed with the appearance of keratin K1-positive cells in suprabasal position. Stimulation of RAR γ , estrogen receptor and of the oncogene *fos* occurred 1 to 2 hr after estrogen.²⁴ Our most recent data (Kirkhof et al., in preparation) show that induction of vitamin A deficiency in ovariectomized mice takes longer than normal, suggesting an interaction between the steroid and the retinoid pathways in the maintenance of normal differentiation.

The two families of retinoid receptors

The cloning and characterization of the retinoid receptors represents a landmark in nutritional biochemistry and molecular biology. The finding was a direct consequence of basic work in the field of steroid and thyroid hormone receptors. All these receptors contain six different domains (A to F) with different functions as reviewed previously.²¹ The C-domain is also known as the DNA-binding domain or

RAR α
Ubiquitous

RAR β & RXR α,β
in columnar
& basal cells

RAR γ in basal
& suprabasal
stratified
squamous cells

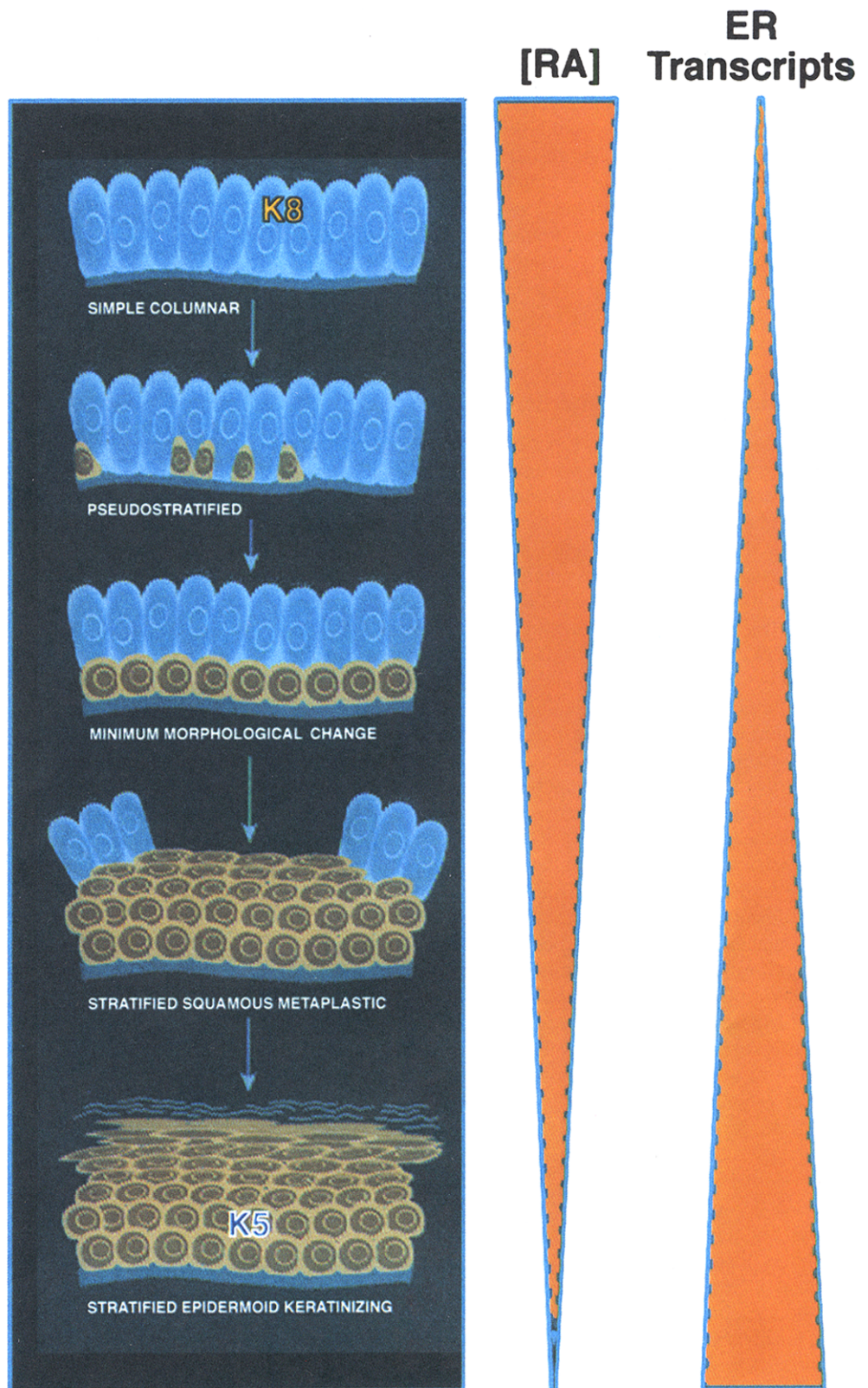


Figure 4 The figure shows the stepwise pathological process of squamous metaplasia formation in the simple-columnar epithelium of the endocervix. A single row of K8 positive columnar cells characterizes the simple-columnar epithelium of the endocervix, as it is under normal conditions of vitamin A nutriture. Under conditions of vitamin A deficiency, K5-positive basal cells appear in subcolumnar positions. Eventually a continuous layer of subcolumnar basal cells lifts the columnar cells, which cease to divide and are shed off, whereas the K5-positive cells proliferate and form a stratified squamous-metaplastic focus. Different foci merge into a stratified squamous keratinizing epithelium. These changes are reversible upon administration of vitamin A. Conversely, the stratified-squamous keratinizing epithelium of the ectocervix and vagina acquire characteristics of a simpler epithelium with K8-positive cells in ovariectomized mice, resembling the minimal morphological stage attributable to vitamin A deficiency in the endocervical epithelium. The figure also indicates changes in the expression of retinoid and estrogen receptor transcripts during the establishment of squamous metaplasia.

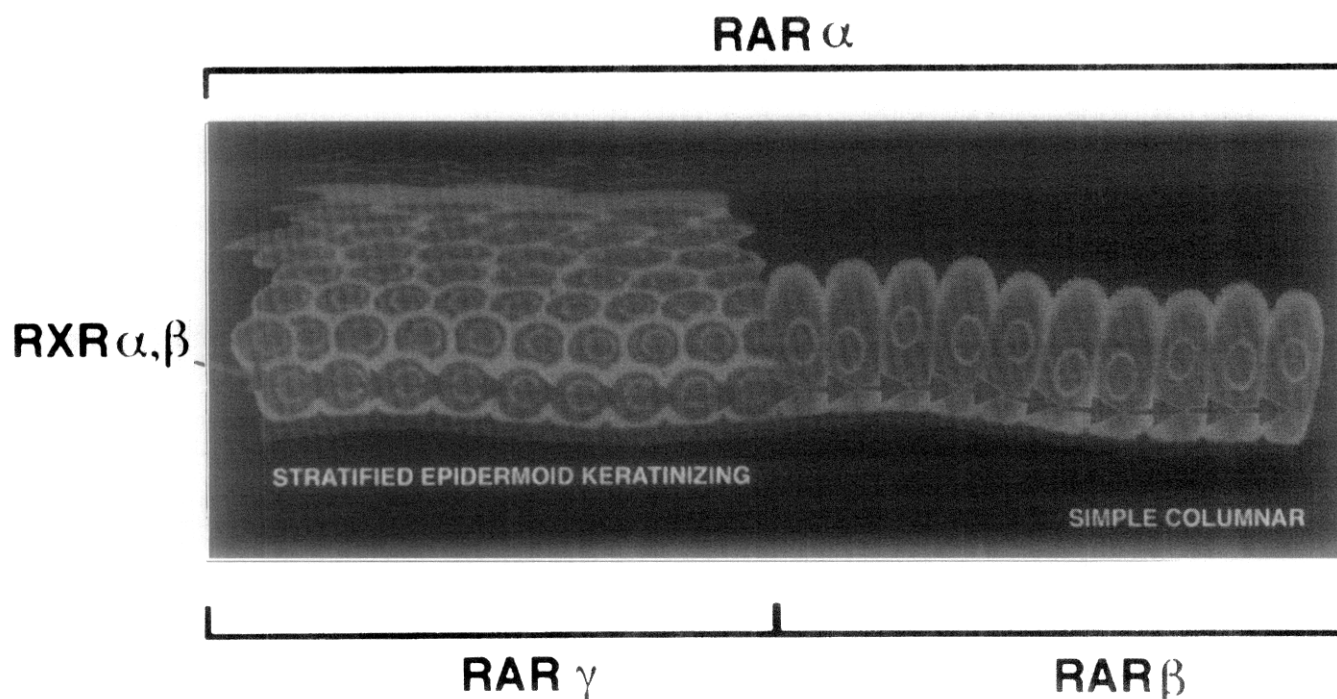


Figure 5 The figure shows the expression of retinoid receptor transcripts as studied by in situ hybridization. Schematics of the normal epithelial junction (squamo-columnar junction) of the cervix showing the cell type specific expression of retinoid receptor transcripts.

DBD and is very highly conserved between these different receptors so that a 24-nucleotide sequence shared by all the receptors can be used as a common probe to detect all the various receptors, including those whose ligands are unknown (orphan receptors). Retinoid receptor cloning was in fact possible because of the common 24-nucleotide probe used to identify new orphan receptors.^{25,26}

The approach to demonstrating that the new orphan receptors were RA-dependent transcriptional activators required the molecular engineering of a chimeric receptor with the DNA binding domain of the estrogen receptor, because no RA-dependent genes were known.^{25,26} Activation of ER-dependent reporter constructs was thus induced by RA binding to the RAR, which then bound to the ERE of the estrogen receptor. Soon, this and similar approaches permitted the characterization of three genes (α , β , and γ) for RARs and for RXRs.²⁷ The latter class of receptors specifically bind 9-*cis*-RA^{27,28} and RARs, on the other hand, bind both RA and 9-*cis*-RA.²³

Genes containing RAREs in their promoters are known to be involved in diverse and yet interconnected biological processes, such as embryogenesis, growth and differentiation.^{23,29,30} The complexity of interactions becomes greater, if one considers that RXRs, in addition to forming homodimers,²⁷ are also able to form heterodimers with other receptors,^{27,31–33} including RARs, the thyroid hormone receptor, TR, the 1,25-dihydroxy-vitamin D3 receptor VDR,³¹ the peroxisomal proliferator activated receptor, PPAR,^{34–36} and other members. Complexity increases if one also considers that there are some 18 isoforms of the RARs and probably just as many RXRs through the use of different promoters or alternative splicing.³⁷

In addition to the activation function AF-1 in the amino terminal A/B regions of the receptors, the use of various reporter gene assays has made it possible to identify a transcriptional activation function (AF-2), which overlaps the ligand binding domain (LBD) in the E-region of the RARs and RXRs. RAR AF-2s are activated similarly by all-*trans* and 9-*cis*-RA and their 3,4-didehydroderivatives (Figure 1), whereas RXR AF-2s are only efficiently activated by 9-*cis* RA and by 9-*cis*-3,4-didehydroRA (Ref. 37 and references therein).

A third level of complexity accrues from interactive elements on different promoters. These may differ for the same receptor heterodimer and for different heterodimers. For instance, response elements containing direct repeats (DR) of the canonical sequence AGGTCA with a spacer of two nucleotides (DR2) or five (DR5) are known to occur in the gene for the homeobox b-1^{38,39} and in the RAR β 2 gene. In addition, the actual sequence of the direct repeats and the types of flanking bases seem to be important determinants for RAR- and RXR-binding efficiencies.⁴⁰ Moreover, interactions with other proteins, which may either function as transcriptional repressors^{41–44} or ligand-dependent activators,^{45–47} such as the cyclic AMP response element binding protein (CBP), have also been reported and may add another level of complexity and permit a variety of interactive pathway to specific gene expression regulation.

Speculations on orders of receptor interactions

These considerations suggest different orders of interactions that may lead to diverse biological results. We suggest that effects of interactions between RXR-RAR heterodimers and

Table 1 The table shows natural retinoic acid response elements (RAREs) from mouse and human RAR α ^{82,83} and RAR β ⁸⁴⁻⁸⁶ promoters, human RAR γ 2 promoter,⁸³ the human alcohol dehydrogenase 3 promoter (ADH3),⁸⁷ the mouse cellular retinol binding protein I (mCRBPI),⁸⁸ laminin BI (mLB1),^{89,90} the human apolipoprotein AI promoter,⁹¹ the complement factor H (mCP-H)⁹² promoter, the rat cellular retinol binding protein II (rCRBPII) promoter,⁹³ the putative RARE from the promoter of the human medium chain acyl-coenzyme A dehydrogenase (hMCAD),⁹⁴ composite element containing an RARE and ERE from the human lactoferrin promoter,⁹⁵ two RAREs from the mouse cellular retinoic acid binding protein II (mCRABPII)⁹⁶ promoter and RARE from the rat phosphoenol pyruvate carboxykinase (rPEPCK)⁹⁷ and the mouse transglutaminase type II promoter (mTGRRE1),⁹⁸ which contains three hexad repeats (DR5 and DR7 motif) capable to bind both RXR homodimers as well as RXR-RAR heterodimers, are shown. Repeated hexad motifs in the 3' enhancer of the mouse Hox1.6 (mHox1.6),⁹⁹ the mouse Hoxb-1^{38,39} and the mouse Hoxb-1 5' repressor^{38,39} are also shown. The repeated hexad motifs, identified as the specific response elements⁴⁰ are highlighted.

Natural retinoic acid response elements (RAREs)

mRAR α 2
hRAR α 2
mRAR β 2
hRAR β 2
hRAR γ 2
hADH3
mCRBPI
mLamBI

hapoAI
mCP-H
rCRBPII

hMCAD

hLactoferrin
Composite
RARE/ERE
mCRABPII

RARE1:
RARE2:
rPEPCK
mTGase (mTGRRE1)

mHox1.6
3' enhancer
mHoxb-1
3' enhancer
RARE
mHoxb-1
5' repressor
RARE

Consensus

5'-(−59)GGCG**AGTT**CAGCAAG**AGTT**CAGCCGA(−34)-3' (82)
5'-(−58)GGCG**AGTT**CAGCGAG**AGTT**CAGCCGC(−33)-3' (83)
5'-(−57)GAAG**GGTT**CACCGAA**AGTT**CACTCGC(−32)-3' (84)
5'-(−57)GTAG**GGTT**CACCGAA**AGTT**CACTCGC(−32)-3' (85,86)
5'-(401)GGCC**GGGT**CAGGAGG**AGGT**GAGCGCGC(−375)-3' (83)
5'-(−280)ACAG**GGGT**CATT**AGTT**CAGTTT(−305)-3' (87)
5'-(−1015)TAGT**AGGT**CA=AA**AGGT**CAACAC(−993)-3' (88)
5'-(−432)=**GAGGT**GAGCT=AG**GT**TAAGCCCTTAGAA
AA**AGGT**CAA(−468)-3' (89,90)
5'-(−192)**AGGG**CAG**GGGT**CA=AG**GGT**TCAGTGGG(−217)-3' (91)
5'-(−147)CAGC**AGGT**CACTGAC**AGGG**CATAGTA(−122)-3' (92)
5'-(−639)GCT**GT**CA**AGGT**CAC=AG**GT**CAC
AGGTCAC=AG**TT**CA(−605)-3' (93)
5'-(−341)GGGTTTGACCTTCTCTCCGGGTA**AGGT**GAAAGG(−308)-3'
3'-CCCAA**ACT**GGAAAGAGAGGGCCATTTCCACTTCC-5' (94)
5'-(−351)AA**GT**GT**CA****AGGT**CA(RXRE)AGGTAACCCAC(−326) (95)
TTCACAGTGTCC(ERE)**AGTT**CCATT**GGG**TG
5'-(−1162)CCCC**AGTT**CACC=AG**GT**CAGGGCT(−1140)-3' (96)
5'-(−657)CTGT**GAC**CTC=TG**CC**CTTCT(−639)-3' (96)
5'-(−451)TG**AC**CTTTGGCCGTGGGA(−434)-3' (97)
5'-(−1703)CATGG**GGGT**CACTGTGAG**AGGT**CCAG
TG**GGGT**CAAGGATTA(−1751)-3' antisense (98)
5'-(Sac-74)CAG**GT**TCACCGAA**AGTT**CAAG(Sac-55)-3' (99)
5'-CTTAG**AGGT**AAAA**AGGT**CAGCCAG-3' (38,39)

5'-AGGGCAAGAGTTCA-3' (38,39)

	G	T	A	T
5'-	G	TCA	(X)	G TCA-3'
	A	G	G	G
	1	2	3	4 5 6

target gene promoters are the most immediate and would be the first to respond to retinoid depletion or excess. These reactions would acquire the characteristic acute response, if the RARE is located in the promoter of the receptor gene itself. This is the case for the RAR β 2 gene, which is therefore a "first order dependence gene." Other first-order dependence genes would be the RAR γ 2 and α 2 and all the genes that contain a RARE in their promoters. Some of these are listed in Table 1. First order dependence would also be observed with ligands activating RXR-RXR homodimers, such as for 9-cis-RA in the activation of the CRBPII gene (Table 1).

RXR cognate receptors other than RARs, such as VDR, TR,^{33,48-50} COUP-TF,⁵¹ and PPAR³⁶ would mediate second-order types of retinoid responses, in that their responses, though possibly dependent on 9-cis-RA, are also dependent on other hormonal ligands such as vitamin D3, thyroxine,³¹ as well as xenobiotic agents.

We suggest that genes belonging to the second-order

dependence are probably much more numerous than those of first-order dependence. These genes control most gene activation processes dependent on thyroid hormone, vitamin D, and other important hormonal and xenobiotic ligands.

We call third-order dependence genes all those genes that would be activated as the result of secondary transcriptional events. An example of this type of dependence is genes that depend on AP-1 complexes. It is well known that transcriptional transrepression occurs at the AP-1 site concomitant with RA mediated gene activation on various RAREs, especially when RA is in excess. Genes containing TPA-responsive elements (TREs), such as the stromelysin or the collagenase genes, are negatively regulated by RA. This negative regulation was thought to be attributable to binding of the AP-1 Jun-Fos protein to the RARs, thus removing them from interactions with the TRE. More recent results indicate that *trans*-repression is the result of limiting concentrations of the (cyclic-AMP response element binding protein) CREB-binding protein (CBP). This protein

apparently binds with high affinity to CREB as well as to RARs, ERs, and possibly a variety of other receptors.⁴⁵ Whereas the binding and transcriptional activation by the CREB homodimer is independent of ligands, CBP binding to RARs and other hormone receptors and consequent transcriptional activation is ligand dependent.⁴⁵ Because CBP is present in limiting amounts, AP-1 transrepression normally occurs when RAR or ER concentrations are increased. When CBP is nonlimiting, transrepression is not observed. Therefore, the concentration of CBP and of other ligand-dependent coactivators, as well as that of corepressors, add another level of control to transcription of the various genes. Recent reviews on the important aspects of structural configuration and space filling models²⁷ of the retinoid receptors and on the genetic knockout⁵² of their genes have recently been published and the reader is referred to those reviews for these subjects.

Mutants of RARs and their biological consequences

Acute promyelocytic leukemia (APL) is a rare leukemia that is characterized by accumulation of immature cells, the promyelocytes, in the blood of the patient. Normally these cells do not accumulate because the normal process of differentiation would make them become granulocytes, the end cell differentiated phenotype in this lineage. Approaches to reestablish normal differentiation by inducing the promyelocyte to granulocyte pathway would result in remission from the disease through what is known as "differentiation therapy."

Blood cells from patients with APL contain the APL-RAR α transcript and protein.⁵³ This transcript comes from a gene that is the fusion product resulting from the balanced translocation of the long arm of chromosome 17 and chromosome 15, t(15;17).⁵⁴ Other translocations involving chromosome 17 are also known to occur, however, by far the most common and studied translocation is the t15;17 translocation.^{55,56} The presence of PML-RAR α is a reliable marker of the disorder.^{54,57-59} Even though RAR is fused to PML in PML-RAR, APL is highly responsive to RA differentiation therapy.⁵⁸⁻⁶⁰ This is probably because RA may use other receptors for its function. The other possibility is that RA may still work through PML-RAR.⁶¹ This fusion protein is in fact transcriptionally active, albeit under in vitro conditions in assays based on reporter gene activation.⁶² Transcriptional activation assays are highly dependent on newly discovered factors such as CBP, therefore investigations to determine whether PML-RAR is equally active as RAR under optimal conditions, i.e., with CBP also present are very important.

Even though PML-RAR transcripts are used as a diagnostic tool for APL, their presence and the presence of the t(15;17) translocation does not establish that PML-RAR is the causative agent of APL. Recent work by Pandolfi and collaborators (personal communication) has demonstrated that transgenic overexpression of PML-RAR causes the development of APL in mice. Moreover, mouse genetic knockout of the normal PML gene is associated with

splenomegaly and other lymphoid organ disorders (Pandolfi, personal communication).

Chemoprevention of skin carcinogenesis by dietary retinoic acid

The skin carcinogenesis system⁶³ has been used in studies of chemoprevention by retinoids, because it offers the advantage of observing the neoplastic lesions without having to kill the animal. The process of skin carcinogenesis has been divided in three stages:⁶⁴ initiation, promotion (which gives rise to benign tumors, papillomas), and malignant conversion (which generates carcinomas from the benign tumors). In the relatively large literature on retinoids and skin carcinogenesis,⁶³ our studies are among the very few to use dietary, rather than topical retinoids, and a semipurified diet supplemented with different levels of retinoic acid.

Dietary retinoic acid inhibits malignant conversion

We conducted a series of experiments using a purified vitamin A-free diet supplemented with either low (0.3 μ g/gm diet; 0.3RA diet); intermediate (3 μ g/gm diet; 3RA diet) or pharmacological (30 μ g/gm diet; 30RA diet) doses of RA. Dietary retinoic acid at pharmacological concentrations (30RA diet) has little effect on the formation of papillomas (low-risk tumors), but specifically inhibits carcinoma incidence in the two-stage (DMBA, TPA) system of skin carcinogenesis in female SENCAR mice,^{63,65-67} independent of age at initiation.⁶⁸ The 30RA diet protected against mezerein-induced high-risk papillomas and against carcinomas,⁶⁹ but had no effect on papilloma and carcinoma formation by the complete carcinogenesis protocol, which uses weekly dorsal applications of DMBA, as both the initiator and the tumor promoter.^{63,66,70} The 30RA diet retains the inhibitory activity on malignant conversion in the DMBA-TPA system, even if given from week 20, i.e., the time of maximum papilloma formation. This experiment excludes the possibility that RA acts via a direct effect on initiation in this system, because the DMBA dose was given 17 weeks before switching the diet from 3 to 30RA.⁶³

Downregulation of RARs during skin carcinogenesis

We have defined the cellular localization of several of RAR (α 1 and γ 1) and RXR (α , β) transcripts in normal skin and in chemically-induced mouse skin tumors at several stages of skin tumor progression. A key finding is that RXR α transcripts, unlike RARs, are mainly compartmentalized in the basal cell layers and concentrated in hair follicles in normal skin and are abundant in skin malignancies.⁷¹ RXR β transcripts are more widespread in skin malignancies, whereas RAR α 1 and RAR γ 1 are decreased relative to normal skin. In normal skin, RXR α transcripts are mainly localized in the rapidly proliferating basal cells and are concentrated in the outer root sheath and matrix cells of hair follicles. Skin tumor progression results in increased levels of RXR and reduced levels of RAR transcripts, which could result in lower levels of RXR/RAR heterodimers. Spindle cell carcinomas, which have lost the epithelial phenotype

and most epithelial markers, namely keratins as well as the RARs, still retain the RXRs.⁷¹ Therefore, malignant progression in the two-stage system reduced RAR α and γ expression, whereas RXR α and β expression remained high in proliferating cells.⁷¹

Retinoic acid receptors are altered during premalignant progression and malignant conversion

Current studies indicate that RAR α protein is reduced in high-risk papillomas, relative to low-risk papillomas, and the promoting agent mezerein, that induces high-risk papillomas, causes a substantial reduction in RAR α in nontumorous skin. Transducing cultured normal keratinocytes with v-ras^{Ha} reduces RAR α and γ proteins in nuclear extracts and decreases RAR mediated transcriptional activity.⁷² Introduction of a recombinant RAR α expression vector into papilloma cells inhibits growth in response to retinoic acid.⁷² Modulation of RARs could contribute to the neoplastic phenotype directly or indirectly through interaction with AP-1 and may be involved in the differential promoting activity of mezerein and TPA, influencing the selection of tumors at high risk for malignant conversion.

Conclusive remarks

Progress in the field of vitamin A research has been remarkable. Who could have foreseen in the 1960s that retinoic acid would be used as a routine form of treatment for acute promyelocytic leukemia patients? And who could have imagined the complexity of receptor interactions connecting thyroid hormone, vitamin D, and xenobiotics with retinoid homeostasis? It is these interactions that make vitamin A essential for many biological processes, including embryogenesis and the maintenance of epithelial differentiation in the adult organism. Recently Tontonoz et al.⁷³ have shown that PPAR γ plays a central role in adipogenesis and Lehmann et al.⁷⁴ have shown that the antidiabetic agents thiazolidinediones are high-affinity ligands for this receptor. This latter observation led to the discovery of 15-dioxo- $\delta^{12,14}$ -prostaglandin J₂ as a natural PPAR γ ligand.^{75,76} These data illustrate yet another unexpected connection, that between prostanoids, adipogenesis, glucose homeostasis,²⁷ and their dependence on an RXR pathway of gene activation.

For those of us who have been in this field long enough, it is to be expected that additional and perhaps even more exciting developments will follow. In particular, it is conceivable that rearrangements similar to the PML-RAR α , involving a retinoid receptor, might explain additional diseases resulting in loss of growth control and altered differentiation, consistent with the suggestion that retinoid receptors may function as tumor suppressor genes.⁷⁷

A related area of interest is the connection between metabolism and control of cell growth. This connection was made in our laboratory, with the realization that only cell lines able to metabolize RA at a fast rate were also growth-inhibited.¹⁴ This would suggest the synthesis of a RA metabolite responsible for growth inhibition. Metabolic activation may also occur through the formation of covalent derivatives of RA or its metabolites with various macro-

molecules. This area of research is also growing and may explain some of the less well understood effects of retinoids.⁷⁸

Another area of interest is the use of retinoids as chemopreventive agents, particularly in populations at high risk for cancer development. Retinoids have been shown to be very effective inhibitors of skin,⁷⁹ head and neck,⁸⁰ and liver⁸¹ carcinogenesis in humans and the list of applications of these compounds as chemopreventive agents will probably grow in the near future.

We conclude this review with the hope that it will provide incentive to those students who are considering nutritional biochemistry as a field for their professional life. We are optimistic that nutritional biochemistry will grow considerably in the next decades and that similar interest will continue to develop for other essential nutrients and dietary factors as it has for vitamin A.

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