Autophagy and Metabolic Syndrome Characteristics in the Pathogenesis of Atherosclerosis

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(Glass and Witztum, Cell 2001; 104:503–516)

Metabolic syndrome



Obesity and atherosclerosis



(Di Pino and DeFronzo, Endocr Rev. 2019; 40(6):1447-1467)

- Normal insulin signaling
 - Insulin signaling → activation of nitric oxide (NO) (vasodilator and antiatherogenic agent) → normal endothelial function
 - Insulin → insulin receptor → tyrosine phosphorylation of insulin receptor substrate-1/2 (IRS-1/IRS-2) and activation of phosphatidylinositol 3kinase (PI3K) and protein kinase B (Akt) → augmenting glucose transport and other metabolic processes



Glucose intolerance and atherosclerosis



Dyslipidemia and atherosclerosis



Adipose tissue \rightarrow liver

(Xu et al., Front. Cell Dev. Biol. 2021; 9:641852)

Hypertension and atherosclerosis

- Under insulin
 resistance/hyperinsulinemia:
 - ET-1 (vasoconstrictor) can suppress insulin-induced Akt activation in VSMCs to exacerbate the development of hypertension and atherosclerosis.
 - Increased systolic BP levels may stiffen the arterial wall and accelerate the progression of atherosclerosis



Autophagy and atherosclerosis

PROTECTIVE ROLE OF BASAL AUTOPHAGY LEVELS

- MetS → impaired autophagy → accumulation of cytotoxic aggregates, dysfunctional organelles in atherosclerotic plaques
- Drugs repairing impaired autophagy [by targeting mammalian target of rapamycin (mTOR) signaling] showed an effect of stabilizing plaques

DETRIMENTAL EFFECTS OF EXCESSIVE AUTOPHAGY

- Excessive autophagy may induce autophagy-dependent cell death
- MetS-induced reactive ROS, oxidized lipids and inflammation → related to impaired or excessive autophagy activation → damage of vascular wall and development of atherosclerosis

Autophagy



(Hassanpour et al., J Inflamm 2019;16:8)

- Autophagy normally occurs at a basal level
- Highly inducible by starvation and other stresses
- Misfolded proteins/damaged organelles → autophagosomes → +lysosomes
 →autophagolysosomes
- mTOR and AMPK: protein kinases, regulate (inhibit) autophagy through inhibitory phosphorylation of the Unc-51-like kinases ULK1 and ULK2 (mammalian homologues of Atg1)
- Autophagy initiation: Autophagy-related gene 1 (Atg1) and microtubule-associated protein 1A/1B-light chain 3 (LC3)
- Beclin-1: vesicle nucleation
- LC3: vesicle elongation to form autophagosome
- LC3-I LC3-II: formation of autophagolysosomes
- Nucleoporin p62 (p62) (LC3-binding protein): docking of cargo to the cell membrane, sequestration of ubiquitinated proteins into autophagosomes

Autophagy

- Overnutrition/effects of insulin:
 - Class I PI3K → mTOR and mTOR complex 1 (mTORC1) → activation of Atg1 → autophagy
- Nutrient insufficiency:
 - Class III PI3K-beclin1 complex → assembly of Atg12-Atg5-Atg16L complex and Atg8/LC3 → autophagosome formation
- Pathogenesis of atherosclerosis: caveolin-1 (marker protein for caveolar organelles) is involved in the regulation of autophagy:
 - mTOR and PI3K pathways → phagophore → + Atg5-Atg12-Atg16 → + caveolin-1 → interaction with LC3→ autophagosome formation and caveolin-1 degradation
 - Caveolin-1 deficiency: Atg7, beclin1 and LC3-II, which indicated an increasing of autophagic activity and atheroprotection
- Characteristics of MetS including high glucose and dyslipidemia → caveolin-1 activation → autophagosomes





Autophagy in endothelial cells (ECs)

- LDL: PI3K/Akt/mTOR pathway in ECs endothelial autophagy
- ox-LDL: Sirtuin 1 (SIRT1)/forkhead box protein O1 (FoxO1) pathway → autophagic flux and promotes apoptosis and adhesion molecule expression
- Balance in autophagy function:
 - Basal autophagy endothelial eNOS expression and NO bioavailability to maintain endothelial function
 - Autophagy decreases oxidative stress and inhibits the expression of inflammatory cytokines, including MCP-1 and IL-8
- Basal autophagy is a key regulator of oxidant-antioxidant balance and inflammatory-anti-inflammatory balance in ECs



(Zhu *et al*., Sci Rep 2019; 9:3020)



(Wu *et al.*, Int J Mol Sci. 2019; 20(17): 4132)

Autophagy in endothelial cells (ECs)

- Balance in autophagy function
 - Inefficient/impaired (via Atg3 siRNA) autophagy: eNOS phosphorylation and NO production, ROS accumulation and inflammatory cytokine production, promotes inflammation and apoptosis and contributes to the development of atherosclerotic plaques in ECs
 - Autophagy defects in ECs → IL-6dependent endothelial-tomesenchymal transition and organ fibrosis
 - Induced caveolin-1 attenuates autophagic flux, caveolin-1 silencing induces autophagy in ECs

- Balance in autophagy function
 - Excessive autophagy may mediate cell death in ECs and lead to plaque instability
 - Ox-LDL → ↑ ROS → ↑ autophagy (increased LC3, beclin-1 and Atg5) → ECs apoptosis
 - **↑** ROS and **↑** ox-LDL → initiate autophagy in human ECs in an atherosclerotic environment

Autophagy in vascular smooth muscle

cells (VSMCs)

- Abnormalities, death and proliferation in VSMCs participate in the formation and instability of atherosclerotic plaques
- MetS and autophagy in VSMCs:
 - High-fat diet-fed ApoE-/- mice (obese) and mice with VSMC-specific Atg7 deletion (impaired autophagy in VSMCs) have atherosclerotic lesions compared with ApoE-/- control mice
 - Modest ox-LDL concentrations and excess free cholesterol 1 autophagy in VSMCs
 - Induced autophagy is considered a cellular survival mechanism to prevent the death of VSMCs

- Balance in autophagy function:
 - Basal and modest autophagic activity in VSMCs: protective mechanism against cell death that maintains plaque stability.

Autophagy in vascular smooth muscle cells (VSMCs)

- Balance in autophagy function:
 - Autophagy deficiency accelerates cell senescence and promotes diet-induced atherogenesis



2015; 11(11):2014-2032)

Autophagy in vascular smooth muscle cells (VSMCs)

- Balance in autophagy function:
 - Excess autophagy may result in VSMC death and plaque destabilization
 - Severe oxidative stress or inflammation (TNF-a) → JNK/Akt pathway → excessive autophagy (increased expression of LC3-II and beclin-1) → VSMC death
 - Ang II ROS production and levels of LC3-II and beclin-1 and
 Sequestosome 1 (SQSTM1)/p62 → promotes autophagosome formation (in rat VSMCs) which may also be detrimental



Autophagy in macrophages



(Kishimoto et al., Mar. Drugs 2016; 14:35)

Monocytes in the bone marrow \rightarrow stimulated by MetS conditions (elevated TC and LDL) \rightarrow enter blood circulation \rightarrow move into subendothelium of vessel walls \rightarrow differentiate into macrophages, subsequently turning into foam cells that are filled with ox-LDL

BALANCE IN AUTOPHAGY FUNCTION

- Basal autophagy in macrophages → atheroprotective role
- Suppression of autophagy → apoptosis and plaque destabilization:
 - Fat-fed LDLR-/- mice: macrophage Atg5 deficiency increases apoptosis and oxidative stress and promotes plaque necrosis
 - Macrophage-specific Atg5-knockout mice: autophagy deficiency (increased p62, decreased LC3 levels)
 - Atg5-null macrophages: IL-1 β secretion \rightarrow inflammasome activation and increased plaques
 - Macrophage autophagy activation via the inhibition of the PI3K/Akt/mTOR pathway can stabilize vulnerable atherosclerotic plaques
- Excessive autophagy may also lead to autophagic death in macrophages via poorly understood type II programmed cell death, which further exacerbates the inflammatory response

The importance of autophagy balance



Mitophagy

- PTEN-induced kinase 1 (PINK1) and Parkin on the surface of damaged mitochondria → mitochondria elimination
- Changes in mitochondrial membrane potential (Ψm)
 → mitochondrial fusion and fission process
- Pro-apoptotic BH3-only domain protein (BNIP3) and NIX → selective mitochondrial clearance
- Mitophagy deregulation: ROS overload, ATP depletion
 → atherosclerosis
- Dyslipidemia, obesity and mitophagy:
 - Ox-LDL decreased mitochondrial aldehyde dehydrogenase 2 (ALDH2) via ROS-mediated VSMCs senescence, inhibited fusion, inhibited PINK1 and Parkin → impaired mitophagy → VSMC and endothelial apoptosis
 - SIRT3/FOXO3a/parkin pathway: potential target for suppressing NLRP3 inflammasome activation to attenuate plaque size and vulnerability



Pharmacological interventions in the treatment of atherosclerosis

- Resveratrol: activator of 5'adenosine monophosphate-activated protein kinase (AMPK), is a polyphenolic phytoalexin that occurs naturally in many plant parts and products, has antidiabetic and cardiovascular benefits
- Metformin: first-line treatment for T2DM, with benefits on MetS and cardiovascular diseases, it can directly activate AMPK and then suppress the mTOR pathway to induce autophagy and inhibit atherosclerosis
- Metformin and statin (atorvastatin): decrease atherosclerotic lesion areas, promote cholesterol efflux to achieve antiatherosclerotic benefits

ed	Compounds	Mechanisms of autophagy induction	Primary functions	Antiatherosclerotic effects
S	Resveratrol	AMPK activation, mTOR inhibition, anti-inflammation, antioxidation, SIRT1 activation	AMPK activation	Decreases the size and density of atherosclerotic plaques, reduces the layer thickness (Wang et al., 2005)
to	Metformin	AMPK activation, mTOR inhibition, anti-inflammation, antioxidation, anti-hyperlipidemia	Anti- hyperglycemia	Reduces monocyte-to- macrophage differentiation (Vasamsetti et al., 2015), promotes cholesterol efflux, attenuates plaque
ote				formation, and decreases atherosclerotic lesion areas (Luo et al., 2017)

Pharmacological interventions in the treatment of atherosclerosis

 Statins: stabilizing effects on vulnerable atherosclerotic plaques → prevention of atherosclerotic cardiovascular disease

Natural products:

- **Berberine**, an extract of Coptis, exhibits antioxidant, antiinflammatory, and antihyperlipidemic effects
- **Geniposide**, an extract of *Gardenia jasminoides Ellis*, shows antioxidant and anti-inflammatory effects

Compounds	Mechanisms of autophagy induction	Primary functions	Antiatherosclerotic effects
Statins	mTOR inhibition, anti-inflammation	Anti- hyperlipidemia	Plaques stabilization (Bea et al., 2002; Rodriguez et al., 2017), reduces infarct size (Andres et al., 2014)
Berberine	AMPK activation, mTOR inhibition, anti-inflammation, antioxidation, anti-hyperlipidemia	AMPK activation	Inhibition of inflammation in macrophages (Fan et al., 2015)
Geniposide	mTOR inhibition	Anti- inflammation	Decreases the size of atherosclerotic plaques (Xu Y. L. et al., 2020)

Conclusions



- Dysregulation of autophagy induced by MetS

 → endothelial dysfunction,
 monocyte/macrophage migration and adhesion

 → progression of atherosclerosis
- Basal and mild adaptive autophagy protective against the progression of atherosclerotic plaques
- Impaired or excessive autophagy activation induced by MetS is related to oxidative stress, inflammation, apoptosis, and foam cell formation, contributing to plaque instability or even plaque rupture
- Drugs used to treat MetS or CVD symptoms regulate autophagy beyond their fundamental effects
- **Precise control of autophagy** should be considered a potential therapeutic strategy in the prevention and treatment of atherosclerosis

• Main reference:



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Relationship Between Autophagy and Metabolic Syndrome Characteristics in the Pathogenesis of Atherosclerosis

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