

Metabolic reprogramming contributes to radioprotection by protein kinase C δ

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Angela M. Ohm¹, Trisiani Affandi¹, Julie A. Reisz², M. Cecilia Caino³, Angelo D'Alessandro², and Mary E. Reyland^{1,*}

From the ¹Department of Craniofacial Biology, School of Dental Medicine, ²Department of Biochemistry and Molecular Genetics, and ³Department of Pharmacology, School of Medicine, University of Colorado Anschutz Medical Campus, Aurora, Colorado, USA

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Loss of protein kinase C δ (PKC δ) activity renders cells resistant to DNA damaging agents, including irradiation; however, the mechanism(s) underlying resistance is poorly understood. Here, we have asked if metabolic reprogramming by PKC δ contributes to radioprotection. Analysis of global metabolomics showed that depletion of PKC δ affects metabolic pathways that control energy production and antioxidant, nucleotide, and amino acid biosynthesis. Increased NADPH and nucleotide production in PKC δ -depleted cells is associated with upregulation of the pentose phosphate pathway (PPP) as evidenced by increased activation of G6PD and an increase in the nucleotide precursor, 5-phosphoribosyl-1-pyrophosphate. Stable isotope tracing with U-[¹³C₆] glucose showed reduced utilization of glucose for glycolysis in PKC δ -depleted cells and no increase in U-[¹³C₆] glucose incorporation into purines or pyrimidines. In contrast, isotope tracing with [¹³C₅, ¹⁵N₂] glutamine showed increased utilization of glutamine for synthesis of nucleotides, glutathione, and tricarboxylic acid intermediates and increased incorporation of labeled glutamine into pyruvate and lactate. Using a glycolytic rate assay, we confirmed that anaerobic glycolysis is increased in PKC δ -depleted cells; this was accompanied by a reduction in oxidative phosphorylation, as assayed using a mitochondrial stress assay. Importantly, pretreatment of cells with specific inhibitors of the PPP or glutaminase prior to irradiation reversed radioprotection in PKC δ -depleted cells, indicating that these cells have acquired codependency on the PPP and glutamine for survival. Our studies demonstrate that metabolic reprogramming to increase utilization of glutamine and nucleotide synthesis contributes to radioprotection in the context of PKC δ inhibition.

Many diseases are associated with disruption of normal metabolism, and metabolic regulators are emerging as druggable targets or cotargets for cancer therapy (1, 2). Protein kinase C δ (PKC δ) is a broadly functional, ubiquitous protein kinase that regulates a variety of cellular processes including proliferation, survival, and cell death (3). For example, we have shown that PKC δ is required for DNA damage-induced apoptosis, and genetic ablation or inhibition of PKC δ is protective against

irradiation (IR) and other types of DNA damage (4–7). Likewise, loss of PKC δ function *in vivo* is protective in many mouse models of tissue injury (3). The diverse functions of PKC δ may derive in part from its ability to modulate fundamental homeostatic mechanisms such as metabolism.

While the DNA damage response (DDR) is typically thought of as a series of nuclear events that protect DNA integrity, extranuclear responses to DNA damage are also clearly important for cell survival. These can include metabolic reprogramming to increase generation of nucleotides for DNA synthesis and/or DNA repair, activation of antioxidant pathways, and alterations in pathway utilization for energy production (8). The contribution of PKC δ to cell death *via* extranuclear signaling is not well understood; however, there is evidence that PKC δ can regulate some mitochondrial functions. For example, PKC δ regulates energy flux at the mitochondria, which plays a central role in executing cell death programs *via cytochrome c* release and pro-apoptotic signal activation (9–11). In addition, PKC δ promotes apoptosis by modulating mitochondrial ROS production (12, 13), which in turn activates PKC δ (14).

Here, we have explored a mechanistic connection between PKC δ , metabolic reprogramming, and IR-induced cell death. Our studies show that PKC δ knockdown (KD) results in dramatic alterations in metabolism resulting in the suppression of oxidative phosphorylation, increased glycolysis, and increased use of glutamine for biosynthetic pathways. PKC δ KD also results in activation of the pentose phosphate pathway (PPP) for generation of NADPH, a cofactor essential to redox homeostasis, and increased production of nucleotides. Importantly, this metabolic reprogramming is necessary for resistance to cell death upon depletion or inhibition of PKC δ . Our studies define a novel mechanism for regulation of IR-induced cell death by PKC δ and suggest potential new targets for radioprotection.

Results

PKC δ regulates metabolic pathways that control energy production, nucleotide, antioxidant, and amino acid biosynthesis

We hypothesized that regulation of metabolic functions could contribute to the wide-ranging effects of PKC δ on

* For correspondence: Mary E. Reyland, Mary.Reyland@cuanschutz.edu.

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proliferation, cell death, and DNA repair. To test this hypothesis, we performed global metabolomics on Par-C5 salivary acinar cells engineered to express a nontargeted shRNA control (shNT) or two unique shRNAs targeted to PKC δ (sh δ 110 and sh δ 680). Figure 1B shows depletion of PKC δ in all Par-C5 sh δ cell lines used in this manuscript. A heat map view of the top 50 metabolites (by *t* test *p*-values) in shNT and sh δ 110 cells reveals that PKC δ KD globally alters steady state levels of metabolites (Fig. 1A), an observation also supported by partial least squares discriminant analysis (PLS-DA) whereby PKC δ status clusters along principal component 1, which explains 38.3% of the phenotypic variance between groups (component 1, Fig. 1C). Analogous data comparing Par-C5 shNT and sh δ 680 cell metabolites is shown in Fig. S1, A and B and in a second independent cell line, A549 (Fig. S2,

A–C). A549 human lung cancer cells, like Par-C5 cells, require PKC δ for cell death, and depletion of PKC δ increases survival in A549 cells treated with DNA damaging agents (15).

Enrichment over-representation analysis revealed that metabolites in 26 pathways were significantly enriched in sh δ 110 cells (Fig. 1D). Eleven (42%) of these pathways were also significant in sh δ 680 cells (Fig. S1B). Together, these commonly disrupted pathways include nucleotide and amino acid metabolism, the tricarboxylic acid (TCA) cycle, the Warburg effect, and glutathione metabolism. Pathway impact analysis was then performed on significantly altered metabolites ($p < 0.1$, 1.2-fold change cutoff) from Par-C5 sh δ 110 and sh δ 680 cells (Fig. 2, A and B). Quantification of the pathway impact factor involves determining the number of metabolites that exist within the pathway after conducting an analysis of its

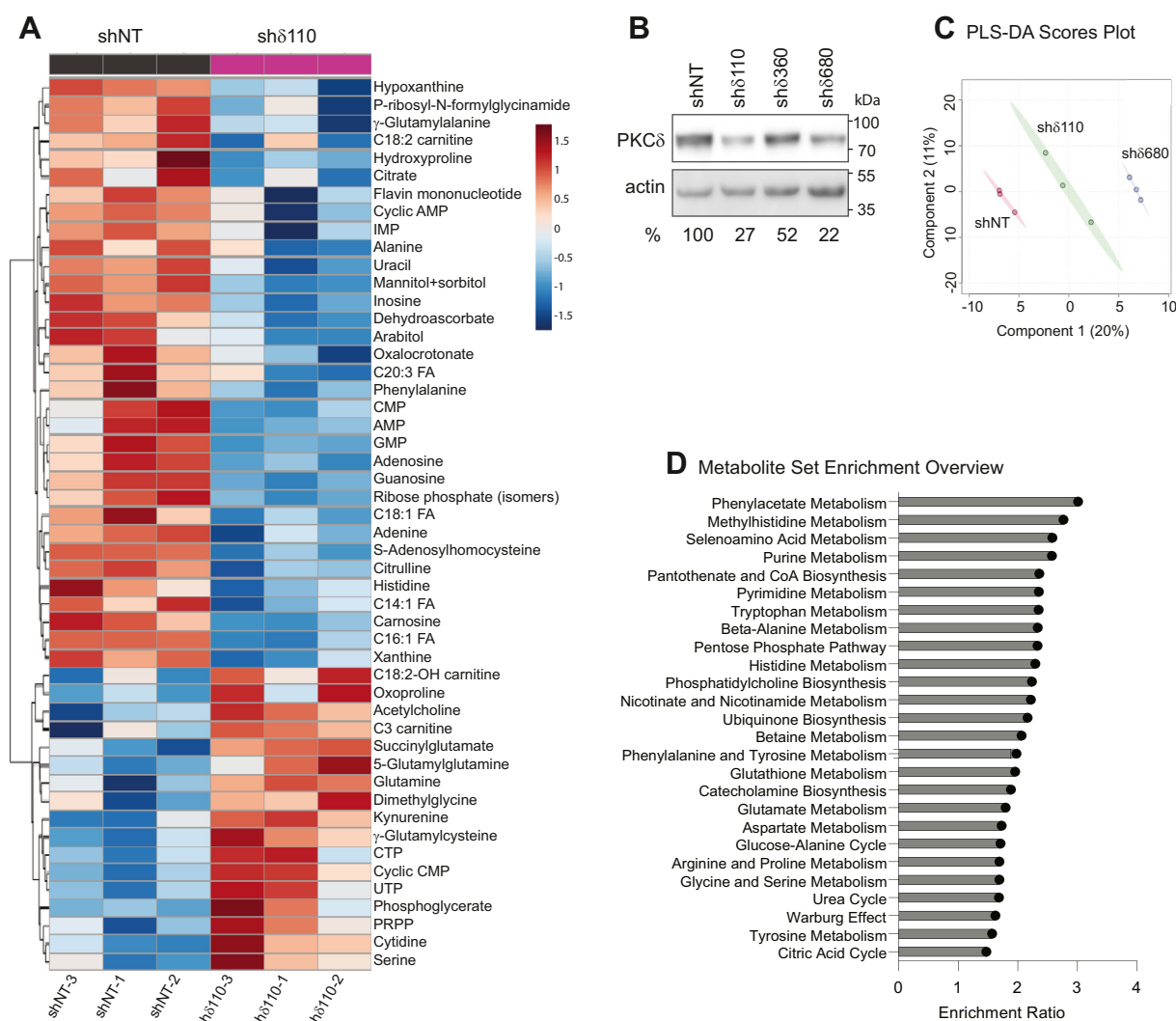


Figure 1. Global metabolic profiling of Par-C5 cells depleted of PKC δ (sh δ 110) or untargeted control shRNA (shNT). Untargeted metabolomics was performed on triplicate biological samples of Par-C5 cells depleted of PKC δ (sh δ 110) or untargeted control shRNA (shNT). A, heat map with hierarchical clustering of the top 50 significant metabolites in Par-C5 shNT and sh δ 110 cells is shown following student's *t* test analysis ($\alpha = 0.05$). B, immunoblot showing the depletion of PKC δ with three different shRNA constructs. Densitometry quantifying the percent of PKC δ expression, as compared to shNT and normalized to actin, is shown below the blots. C, partial least squares discriminant analysis (PLS-DA) scores plot of metabolomics data. Shaded ovals represent 95% confidence intervals. D, enrichment analysis of sh δ 110 cells as compared to shNT cells. The top 26 metabolite groups from quantitative enrichment analysis are shown in the bar chart ($p < 0.05$). Enrichment ratio represents the number of observed metabolite hits divided by the number of expected metabolite hits within each pathway. PKC δ , protein kinase C δ .

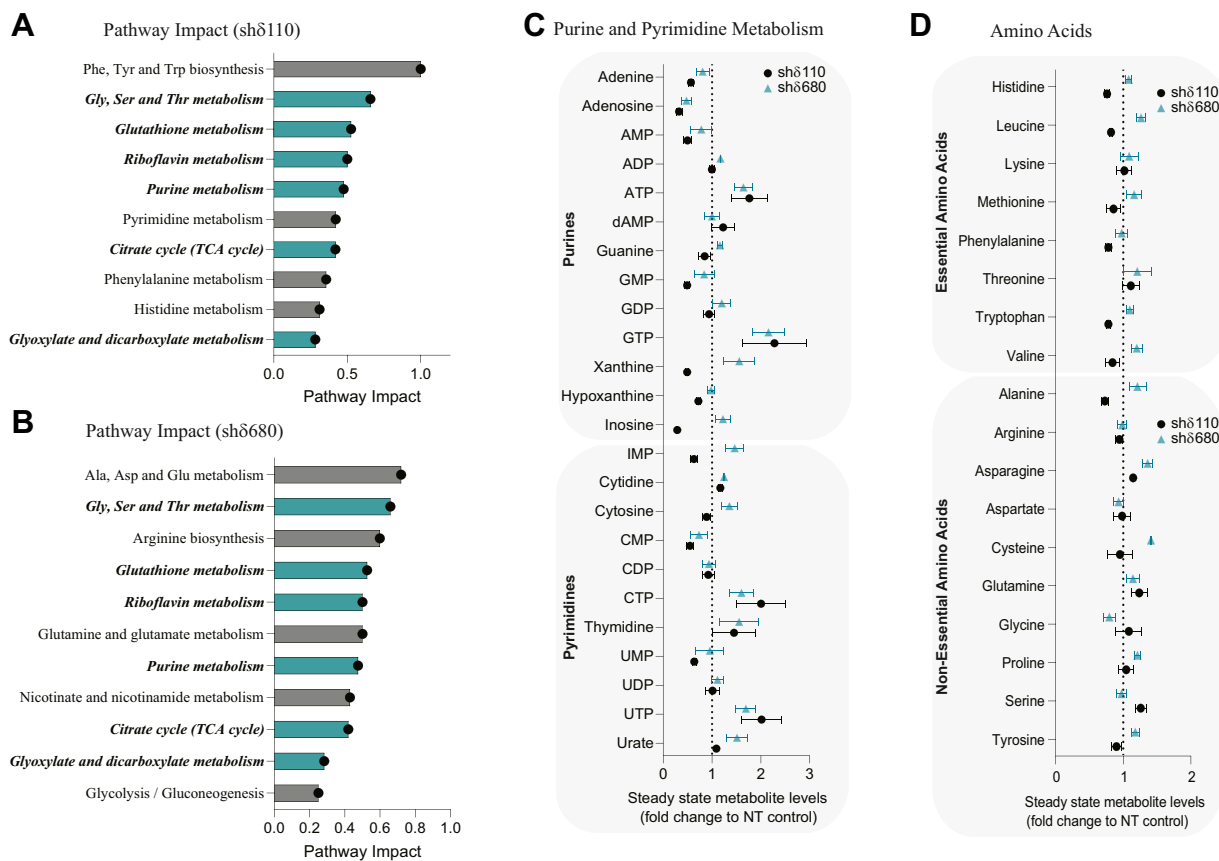


Figure 2. Metabolic pathways impacted by loss of PKC δ . A and B, pathway impact (>1.2 fold compared to shNT cells, $p < 0.1$) was determined by comparing untargeted global metabolomics of Par-C5 cells depleted of PKC δ sh δ 110 (A) and sh δ 680 (B) cells to control cells (shNT). Pathway impact quantifies the number of metabolites that are present in a particular pathway following enrichment and pathway topology analysis. Shown are pathways with greater than 0.25 pathway impact score. Italicized and bolded pathway labels with teal bars are those shared between sh δ 110 and sh δ 680 depleted cells. C and D, steady state levels of individual metabolites from the nucleotide and amino acid pathways shown in A and B. Data is presented as fold change of sh δ 110 cells (black circle) or sh δ 680 cells (teal triangle) relative to shNT control. Error bars represent SEM from a representative experiment with triplicate biological replicates. PKC δ , protein kinase C δ .

topology and enrichment (16). Comparison of Par-C5 shNT cells to sh δ 110 and sh δ 680 cells shows that 6 of 13 pathways impacted are shared between both PKC δ KD cell lines (Fig. 2, A and B, bold and italicized). Top pathways impacted include purine, riboflavin, and glutathione metabolism, the TCA cycle, and amino acid metabolism. Notably, the PPP and pyrimidine pathways were significantly impacted in sh δ 110 cells (Fig. 2A) and in both A459 sh δ cell lines (Fig. S2, D and E), while purine metabolism was impacted in all Par-C5 and A549 sh δ cell lines. Likewise, the nicotinate/nicotinamide pathway was significantly impacted in both A549 sh δ cell lines (Fig. S2, D and E) and in Par-C5 sh δ 680 cells (Fig. 2B).

The relative abundance of metabolites in nucleotide and amino acid metabolism are shown in Figure 2, C and D. Purine and pyrimidine triphosphate nucleotides (ATP, GTP, CTP, and UTP) are increased in both Par-C5 sh δ 110 and sh δ 680 cells compared to shNT cells (Fig. 2C). Similar changes are seen in two A549 sh δ cells (Fig. S3A). Changes in the steady state abundance of specific amino acids are shown in Figure 2D. While many amino acids showed increased abundance in sh δ 680 cells, only threonine, asparagine, and glutamine were increased in both cell lines. Taken together, this indicates that PKC δ plays a role in regulating the steady state

level of molecules needed for proliferation (amino acids and nucleotides), redox homeostasis (glutathione, nicotinamide), and energy production (TCA cycle and glycolysis).

PKC δ -depleted cells upregulate the PPP

Shuttling of glucose through the PPP results in generation of reducing equivalents in the form of NADPH along with ribose sugars to produce nucleobases for proliferation and DNA repair. Based on our data that depletion of PKC δ increases nucleotide synthesis, we analyzed the abundance of metabolites in the PPP pathway in Par-C5 and A549 PKC δ depleted cells (Fig. 3, A–C). Our data shows that steady state glucose levels do not change significantly with PKC δ KD, while glucose 6-phosphate (G6P) is slightly increased in Par-C5 cells and more dramatically increased in A549 cells depleted of PKC δ (Fig. 3, B and C). An increase in steady state levels of PPP intermediates can be explained either by increased biosynthesis or less consumption of the intermediates for ancillary pathways. Thus, we examined the enzymatic activity of glucose 6-phosphate dehydrogenase (G6PD), the enzyme that converts G6P to 6-phosphogluconolactone and the rate limiting enzyme for the PPP. We found that G6PD enzymatic activity is increased up to 1.3-fold in three Par-C5 sh δ cell lines and up to

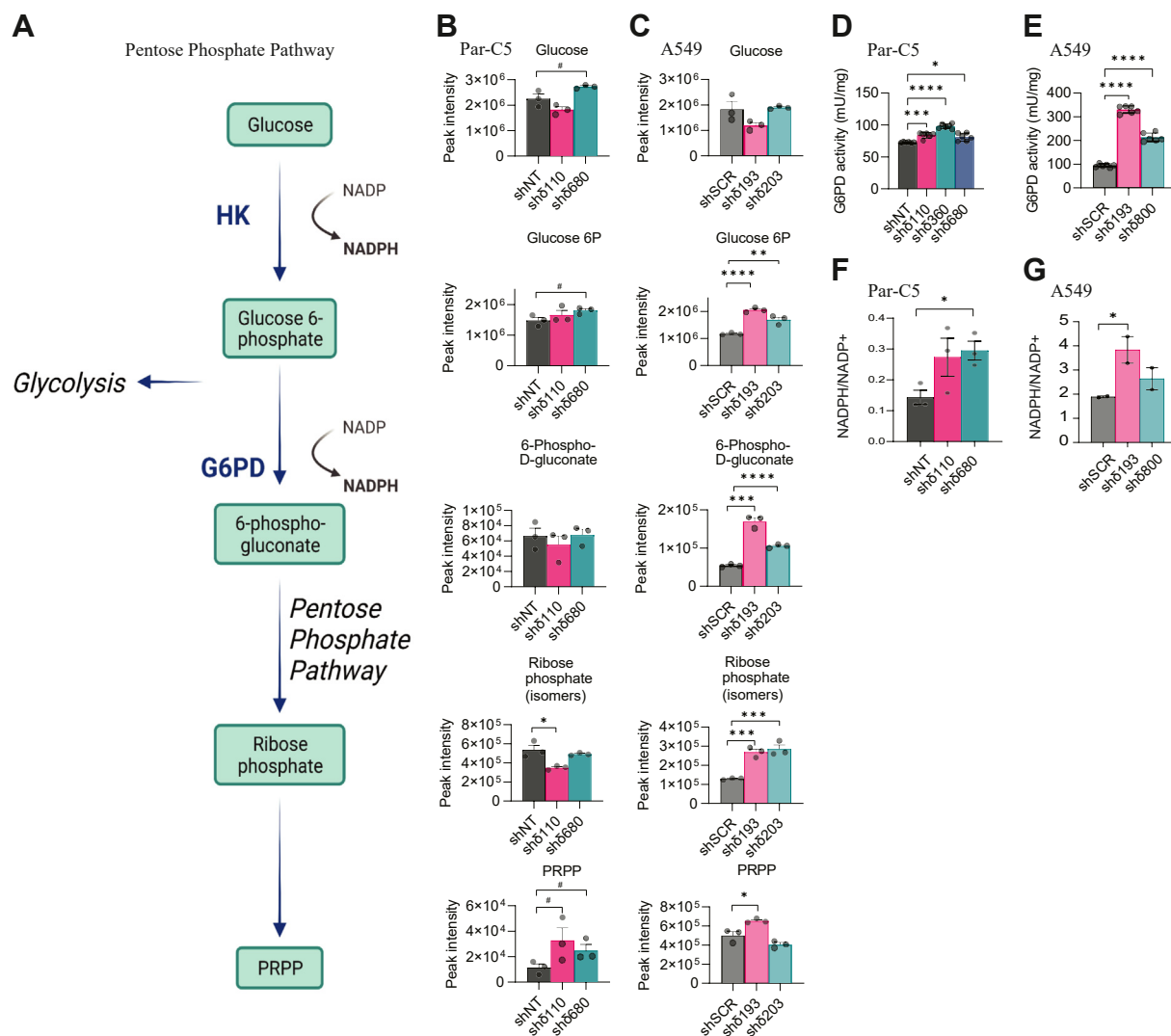


Figure 3. Linkage of PKC δ status to the pentose phosphate pathway. Global metabolomic analysis was performed on either Par-C5 cells depleted of PKC δ (sh δ 110 or sh δ 680) or untargeted control shRNA (shNT) or A549 cells depleted of PKC δ (sh δ 193 or sh δ 800) or untargeted control shRNA (shSCR). *A*, schematic of pentose phosphate pathway (PPP). *B* and *C*, quantification of selected PPP metabolites in Par-C5 cells (*B*) and A549 cells depleted of PKC δ (*C*). *D* and *E*, G6PD activity in Par-C5 and A549 PKC δ depleted cells. *F* and *G*, NADPH/NADP $^{+}$ ratio was determined for Par-C5 and A549 PKC δ depleted cells. G6PD and NADPH/NADP $^{+}$ experiments were repeated a minimum of three times with triplicate biological replicates. Data represents the average of a minimum of $n = 3$ experiments. Error bars represent SEM, statistics represent 1-way ANOVA, # $p < 0.10$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$. G6PD, glucose 6-phosphate dehydrogenase; PKC δ , protein kinase C δ .

3.5-fold in two A549 cell lines that express sh δ (Fig. 3, *D* and *E*). In addition, sh δ cells showed increased steady state levels of 6-phosphogluconate and ribose phosphate (A549 sh δ cells) and glutamine 5-phosphoribosyl-1-pyrophosphate (PRPP) amidotransferase, the rate-limited step in *de novo* purine synthesis. Additional PPP metabolites were elevated in A549 cells (Fig. S3B) but were below the level of detection in Par-C5 cells. This suggests that A549 cells (human lung cancer) maintain greater pools of PPP intermediates compared to Par-C5 cells (rat epithelial cells) upon PKC δ depletion.

Increased utilization of the PPP is consistent with an increased supply of nucleotides for DNA repair. The PPP is also the major source of NADPH, which provides reducing power for generation of nucleotides and other biosynthetic pathways. We next assayed steady state levels of NADP $^{+}$ and NADPH in Par-C5 and A549 cells depleted of PKC δ .

The ratio of NADPH:NADP $^{+}$ was increased up to two fold in sh δ Par-C5 cells and A549 cells (Fig. 3, *F* and *G*). Note that nicotinate and nicotinamide metabolites, precursors to NAD, are also enriched in Par-C5 sh δ 110 cells (Fig. 1C) and this pathway was among the top four pathways impacted in A549 sh δ 193 and sh δ 203 cells (Fig. S2, *C* and *D*).

PKC δ -depleted cells have reduced utilization of glucose and increased utilization of glutamine

To determine how PKC δ alters glucose utilization, we performed stable isotope tracing with uniformly labeled U-[$^{13}\text{C}_6$] glucose. Par-C5 shNT and sh δ 110 cells were starved for glucose 18 h prior to the addition of the metabolic tracer; metabolite ^{13}C enrichment was assayed at 0, 1, and 6 h

(Fig. 4A). Compared to Par-C5 shNT (control) cells, sh δ 110 cells showed a modest decrease in uptake of [$^{13}\text{C}_6$] glucose at 6 h. Incorporation of ^{13}C atoms into glycolytic metabolites downstream of glucose, and in TCA cycle metabolites, was likewise decreased at the six-hour time point in sh δ 110 cells.

Given the reduced utilization of [$^{13}\text{C}_6$] glucose for glycolysis and the increase in utilization of the PPP as shown in the global metabolic analysis (Fig. 3), we asked if glucose is preferentially being used for nucleotide synthesis. Figure 4A shows that ^{13}C enrichment in ribose phosphate and PRPP is reduced in Par-C5 sh δ 110 cells compared to shNT cells. Likewise, utilization of [$^{13}\text{C}_6$] glucose for both purine and pyrimidine nucleotide synthesis *via* the PPP (yellow bar) is reduced (Fig. 4B). However, we observed that the steady state level of ^{12}C nucleotides is increased in Par-C5 sh δ cells ("zero" time point Fig. S4A), supporting our global metabolomics analysis (Fig. 2C) that shows overall increased nucleotide synthesis in sh δ cells. Based on these findings, we conclude that increased nucleotide synthesis is not driven by increased utilization of glucose.

Glutamine is a likely source of alternative fuel in PKC δ -depleted Par-C5 cells as it can drive the TCA cycle, amino acid, nucleotide, and antioxidant biosynthesis, all of which are upregulated upon depletion of PKC δ (Figs. 1 and 2). Analysis of [$^{13}\text{C}_5,^{15}\text{N}_2$] glutamine flux shows that both glutamine

uptake and conversion of glutamine to glutamate are increased in PKC δ -depleted cells (Fig. 5A). PKC δ KD increases utilization of glutamine for the TCA cycle as judged in particular by elevated levels of $^{13}\text{C}_5$ α -ketoglutarate and $^{13}\text{C}_4$ levels of subsequent TCA intermediates including succinate, fumarate, malate, and citrate (Fig. 5A). Further, in PKC δ -depleted cells, glutamate is also used *via* transamination to produce aspartate and alanine (from oxaloacetate and pyruvate, respectively) and for synthesis of glutathione (GSH, Fig. 5A). Notably, in Par-C5 sh δ cells, increased utilization of glutamine is accompanied by increased expression of glutaminase 1/2, the enzyme which converts glutamine to glutamate, and a modest reduction in glutamine synthetase (GLUL) which catalyzes the reverse reaction (Fig. 5C).

We then asked if glutamine is preferentially being used for nucleotide synthesis. [$^{13}\text{C}_5,^{15}\text{N}_2$] glutamine can contribute to purine synthesis through donation of ^{15}N . Figure 5B shows that incorporation of ^{15}N from glutamine into both AMP and ATP, but not GMP, is increased dramatically in Par-C5 sh δ cells. [$^{13}\text{C}_5,^{15}\text{N}_2$] glutamine can also contribute to pyrimidine synthesis *via* donation of ^{15}N or through donation of $^{13}\text{C}_3$ and ^{15}N from aspartate. As shown in Figure 5B, synthesis of UMP from [$^{13}\text{C}_5,^{15}\text{N}_2$] glutamine directly (red bars and green bars) and *via* aspartate (blue bars and green bars) is also increased dramatically in Par-C5 sh δ cells. Likewise, utilization of [$^{13}\text{C}_5,^{15}\text{N}_2$] glutamine for synthesis of CMP (*via* UMP) is

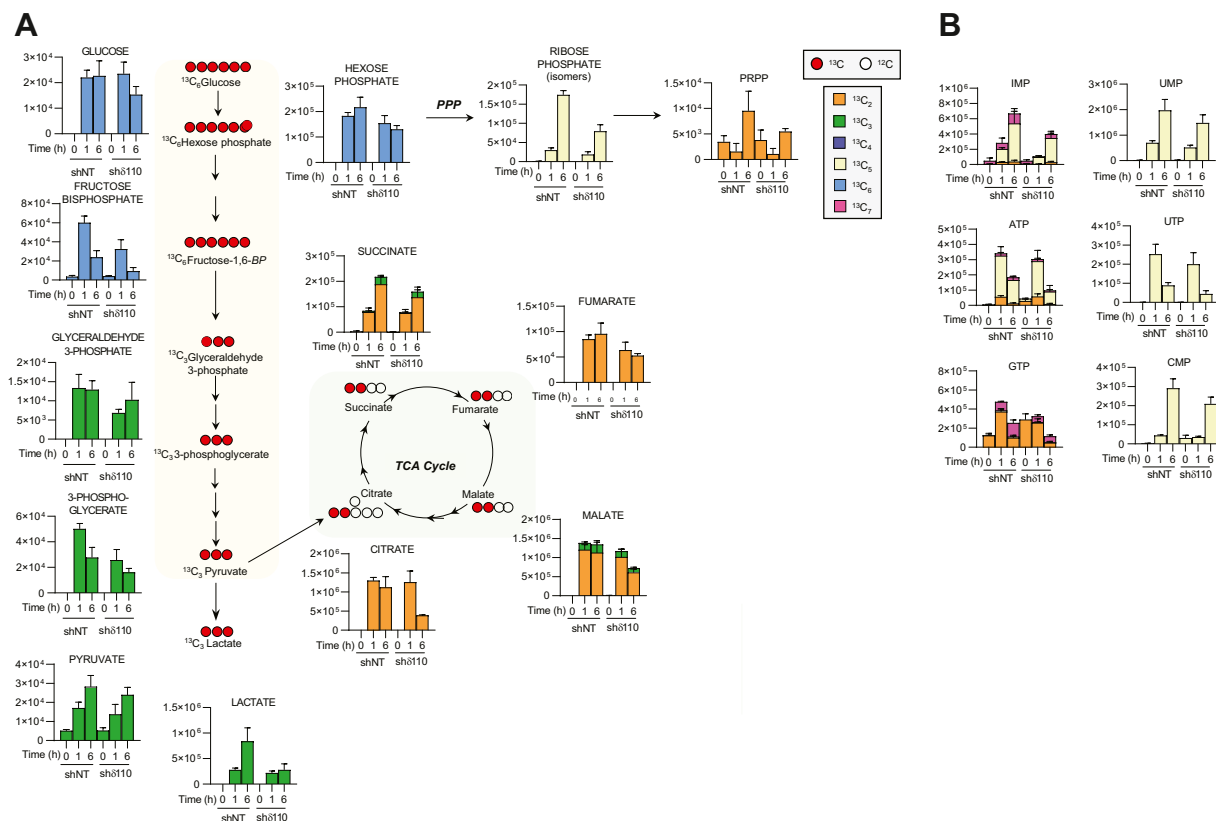


Figure 4. Stable isotope tracing in Par-C5 sh δ 110 cells with U- ^{13}C glucose. Par-C5 cells were starved of glucose for 18 h and then labeled with complete media substituted with labeled [U- ^{13}C]glucose for 0, 1, and 6 h. A, schematic showing glycolysis, pentose phosphate pathway (PPP), and TCA cycle metabolites following addition of labeled glucose. Top legend indicates labels for ^{13}C (red circle) or ^{12}C (white circle) in glycolysis, TCA, and PPP schematic. Multi-colored legend (boxes) shows ^{13}C isotopologs for all tracing graphs. B, ^{13}C enrichment in nucleotides; TCA, tricarboxylic acid.

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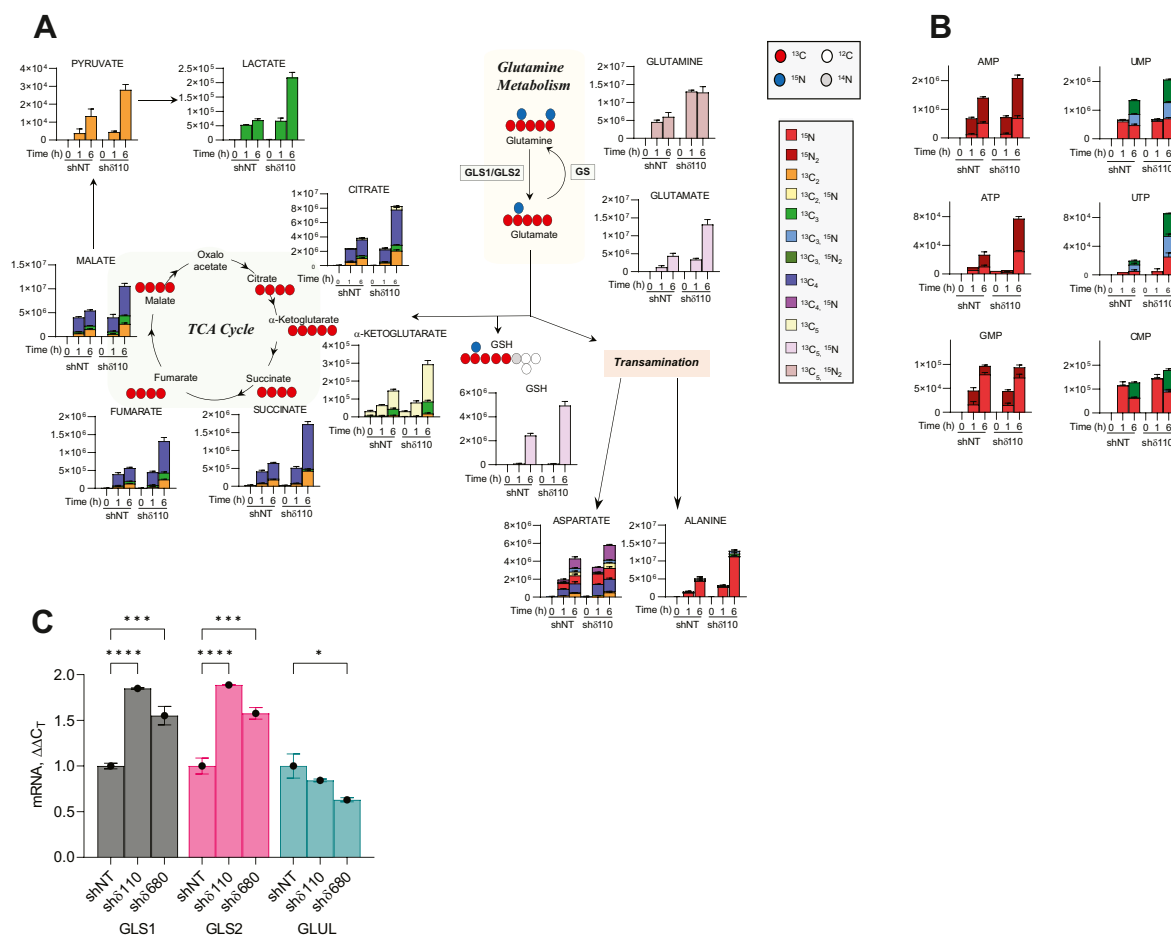


Figure 5. Stable isotope tracing in Par-C5 sh δ 110 cells with [$^{13}\text{C}_5$, $^{15}\text{N}_2$] glutamine. Par-C5 cells were starved of glutamine for 18h and then incubated with complete media substituted with labeled glutamine for 0, 1, and 6 h. *A*, schematic of relevant glutamine metabolism pathways. *Top* legend indicates labels for ^{13}C (red circle), ^{12}C (white circle), ^{15}N (blue circle), or ^{14}N (gray circle) in glutamine pathway schematic. Multi-colored legend (boxes) shows ^{13}C - ^{15}N isotopologs for all tracing graphs. *B*, ^{13}C , ^{15}N enrichment in nucleotides. *C*, q-RT PCR for GLS1, GLS2, and GLUL was performed on Par-C5 cells depleted of PKC δ (sh δ 110 or sh δ 680) or untargeted control shRNA (shNT). Graph represents fold change in mRNA expression ($\Delta\Delta\text{C}_t$) as compared to shNT = 1. A representative experiment, including triplicate samples, is shown. q-RT PCR experiments were repeated a minimum of three times. Error bars represent SEM, statistics represent 1-way ANOVA, * $p < 0.05$, *** $p < 0.001$, **** $p < 0.0001$. GLS1, glutaminase-1; GLS2, glutaminase-2; GLUL, glutamine synthetase; PKC δ , protein kinase C δ .

increased (Fig. 5B). Taken together, our data indicates that in the absence of PKC δ , Par-C5 cells increase utilization of glutamine for nucleotide synthesis. Increased production of ribose phosphate from elevated flux through the PPP may also contribute to nucleoside synthesis, complementing glutaminolysis dependence for synthesis of purine and pyrimidine bases.

PKC δ depletion suppresses oxidative phosphorylation and increases anaerobic glycolysis

Our data suggests that depletion of PKC δ has significant effects on pathways that regulate energy production. To further explore the effect of PKC δ on cell energetics, we used the Seahorse Mito Stress Test to measure oxidative phosphorylation in Par-C5 shNT, sh δ 110, and sh δ 680 cells. Both sh δ cell lines showed a dramatic decrease in oxygen consumption (Fig. 6A). This reflects decreases in basal and maximal respiration (Fig. 6, B and C). Using the Seahorse Real-Time ATP Rate assay, we assessed the contribution of

anaerobic glycolysis and oxidative phosphorylation to ATP production by measuring the rates of ATP production from both sources simultaneously. There was a significant shift toward increased generation of ATP from glycolysis in both sh δ cell lines (Fig. 6D). The graphs in Figure 6, E–G show the proton efflux rate (PER) over time (glycolytic rate) and basal and compensatory glycolysis. PKC δ KD increased compensatory glycolysis in both PKC δ -depleted cell lines, while basal glycolysis was increased in sh δ 110 cells. Further, both steady state levels of pyruvate and lactate were increased in A549 sh δ PKC cells (Fig. 6, H and I), while Par-C5 cells showed a trend toward increased pyruvate but not lactate (Fig. 6, J and K). Analysis of [$^{13}\text{C}_6$] glucose flux in Par-C5 cells indicated that lactate (and possibly pyruvate) synthesis from glucose is reduced (Fig. 4A), while pyruvate and lactate production from [$^{13}\text{C}_5$, $^{15}\text{N}_2$] glutamine are dramatically increased (Fig. 5A). To verify increased utilization of glutamine for pyruvate and lactate production, we glutamine starved Par-C5 cells and assayed pyruvate and lactate at 0 to 24 h after replenishment of glutamine. Both metabolites increased dramatically at 6 h after

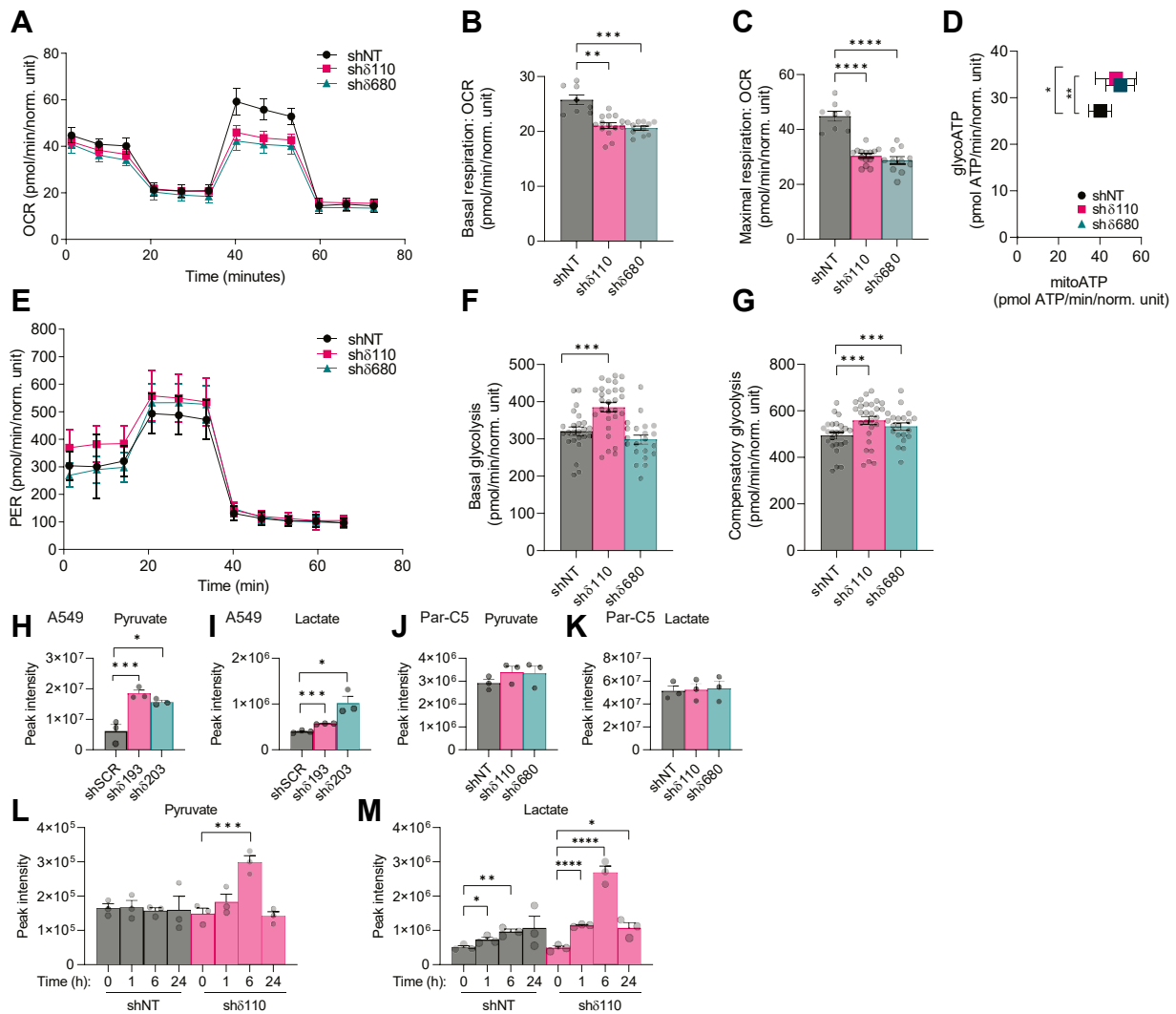


Figure 6. Depletion of PKC δ suppresses oxidative phosphorylation and increases glycolysis. A, Agilent Seahorse Mito Stress test was used to assay mitochondrial oxygen consumption rates in Par-C5 control (shNT) and PKC δ -depleted cells (sh δ 110 and sh δ 680). Graph shows oxygen consumption rate (OCR, pmol/min/norm. unit) of cells over time when treated sequentially with 1.5 μ M oligomycin, 1 μ M FCCP, and 0.5 μ M rotenone/antimycin. From the tracing in (A), OCR-associated measurements for basal respiration (B) and maximal respiration (C) were calculated using Agilent Seahorse Analytics software. D, Agilent Seahorse ATP Rate assay was used to quantify the contribution of either mitochondrial (mitoATP) or glycolytic (glycoATP) ATP production rates in Par-C5 control (shNT) and PKC δ -depleted cells (sh δ 110 and sh δ 680). E, Agilent Seahorse Glycolytic Rate Assay shows proton efflux rate (PER) in cells treated sequentially with 0.5 μ M rotenone/antimycin A and 50 mM 2-deoxyglucose. From the tracing in (E), basal glycolysis (F) and compensatory glycolysis (G) were calculated with Agilent Seahorse Analytics software. Pyruvate and lactate were assayed using untargeted global metabolomics analysis in A549 (H and I) and Par-C5 (J and K) cells depleted of PKC δ and in control cells. L and M, Par-C5 cells depleted of PKC δ (sh δ 110) and control (shNT) cells were starved of glutamine for 18 h and then assayed for pyruvate and lactate using untargeted global metabolomics analysis, 0, 1, 6 and 24 h following re-addition of glutamine. Error bars in (A and E) represent SD. Statistics in B–D, F–M represent 1-way ANOVA, error bars are SEM, and * p < 0.05, ** p < 0.01, *** p < 0.001, **** p < 0.0001. PKC δ , protein kinase C δ .

glutamine replenishment in sh δ 110 cells but returned to the level seen in shNT cells by 24 h (Fig. 6, L and M). We conclude that as a consequence of depletion of PKC δ , energy production shifts to a higher contribution of anaerobic glycolysis to ATP production, with parallel increase of glutamine oxidation in sh δ cells.

Metabolic reprogramming upon depletion of PKC δ contributes to radioprotection

We used pharmacological inhibitors of hexokinase and glucose-6-phosphate isomerase (2-deoxyglucose, 2DG), G6PD (6-aminonicotinamide, 6-AN), and glutaminase (CB-389) to

determine if increased utilization of the PPP and/or glycolysis contributes to radioprotection in PKC δ -depleted cells. Activation of caspase in response to IR was assayed in cells pretreated with each inhibitor. Hexokinase catalyzes the conversion of glucose to G6P, the precursor of both glycolysis and the PPP. Pretreatment with 2DG resulted in increased caspase activation under all conditions (Fig. 7A). In contrast, both 6-AN and CB-389 had little effect on basal caspase activation in shNT Par-C5 cells (Fig. 7, B and C). However, 6-AN dramatically increased basal caspase activation in sh δ 110 cells (Fig. 7B), indicating acquired dependency on the PPP for survival. In response to IR, 6-AN significantly reduced apoptosis in shNT cells but increased apoptosis in sh δ 110 cells

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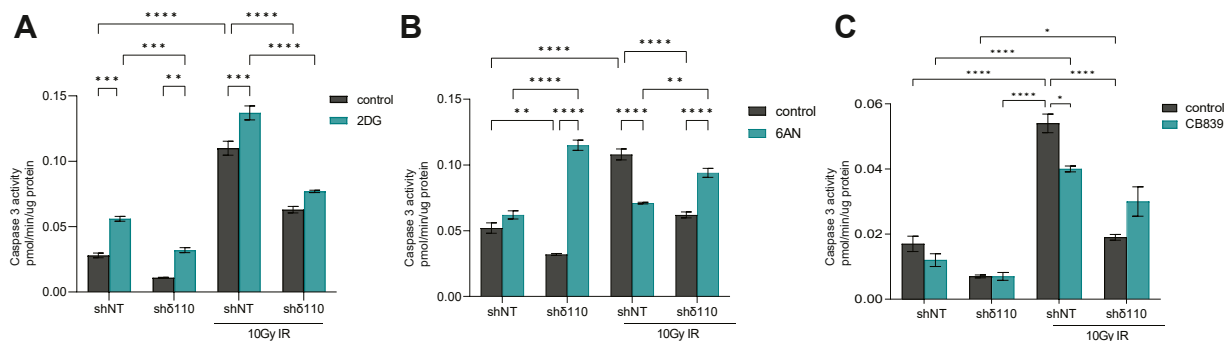


Figure 7. PKC δ -depleted cells are dependent on the pentose phosphate pathway and glutamine for radioprotection. Par-C5 cells depleted of PKC δ (sh δ 110) or untargeted control shRNA (shNT) were pretreated with DMSO or with indicated inhibitors for 24 h prior to treatment with 10 Gy IR. Cells were harvested 24 h following IR and measured for caspase 3 activity. **A**, 12.5 mM 2-deoxyglucose (2-DG). **B**, 50 μ M 6-aminonicotinamide (6-AN). **C**, 500 μ M CB-839. Statistics represent 2-way ANOVA, error bars are SEM, and * p < 0.05, ** p < 0.01, *** p < 0.001, **** p < 0.0001. IR, irradiation; PKC δ , protein kinase C δ .

(Fig. 7B). Similar results were seen when irradiated cells were pretreated with CB-389 (Fig. 7C), although in this situation, increased caspase activation in CB839-treated sh δ 110 cells was only evident after IR. Taken together, these data suggest that sh δ 110 cells have acquired dual dependency on the PPP and glutamine for survival and that these dependencies contribute to radioprotection in the context of PKC δ depletion.

Discussion

In this study, we demonstrate a novel role for PKC δ as a master regulator of metabolism in epithelial cells. Depletion of PKC δ reduces glucose and increases glutamine utilization for nucleotide and antioxidant synthesis, the TCA cycle, and glycolysis. In addition, PKC δ KD is associated with increased utilization of the PPP and a switch from oxidative phosphorylation to glycolysis. This suggests that loss of PKC δ rewires cells to be resistant to DNA-damaging agents, including IR, in part by increasing the production of nucleotides needed for DNA repair.

PKC isoforms, including PKC α , β , and ϵ , have been linked to modulation of glucose and lipid metabolism in the context of metabolic diseases (17); however, there are few studies that address the role of PKC δ in metabolic homeostasis. A proteomic analysis by Mayr *et al.* reported that enzymes required for glycolysis were decreased, while enzymes that regulate lipid biosynthesis were increased in hearts from PKC δ ^{-/-} mice (18). Similarly, loss of PKC δ correlated with a reduction in glycolytic metabolites and an increase in fatty acid metabolites in serum from PKC δ ^{-/-} mice (19). In hepatocytes, PKC δ has been linked to suppression of insulin signaling, activation of NADPH oxidase, and a concomitant increase of oxidative stress (20). Likewise, PKC δ inhibited insulin signaling and increased glucose uptake in a mice model of obesity due to leptin receptor mutation (21). A role for PKC δ in regulating insulin sensitivity and glucose tolerance suggests that loss of PKC δ function may improve the outcome of metabolic diseases. Other studies show that loss of PKC δ function *in vivo* can be protective in tissue injury models and in mouse models of neurodegenerative disease (3, 22, 23). Loss of PKC δ also facilitates protection against radiation damage *in vivo*;

however, whether this involves metabolic reprogramming has not been previously addressed. It will be interesting to determine if protection against radiation injury is mechanistically similar to protection against other forms of tissue injury in the context of PKC δ depletion.

Our metabolic flux analysis in epithelial cells supports earlier data showing a role for PKC δ in glucose utilization and identifies PKC δ as an important regulator of the PPP for nucleotide and NADPH generation. At the mechanistic level, PKC δ KD increased the enzymatic activity of G6PD, the rate-limiting step of the PPP. While previous studies have shown a link between PKC δ and NADPH levels, the reported mechanism was through PKC δ -dependent activation of NADPH oxidase (24). Here, we propose that PKC δ depletion produces NADPH *via* activation of G6PD. Of note, while A549 cells show increased 6-phosphogluconate and ribose phosphate upon PKC δ depletion, the steady state level of these metabolites is not increased in Par-C5 sh δ cells despite the increased activity of G6PD. This may be explained by increased utilization of 6-phosphogluconate and ribose phosphate to ultimately produce PRPP and nucleotide synthesis at a higher rate than in A549 cells; however, this hypothesis will need further confirmation. In contrast to our data which shows upregulation of GAPDH activity with PKC δ depletion, Gupte *et al.* have reported that GAPDH activation by KCl is blocked by PKC δ depletion (25). At this time, we do not know the underpinnings for G6PD modulation by PKC δ ; further studies will need to focus on examining whether direct (*e.g.*, phosphorylation of G6PD by PKC δ) or indirect mechanisms are at play. However, we have previously reported that PKC δ depletion increases expression of TIGAR, a positive regulator of the PPP that has been associated with chemoresistance (26–28). The connection between TIGAR, the PPP, and PKC δ merits further investigation.

Glucose tracing experiments suggest that PKC δ controls glycolysis, with PKC δ KD leading to decreased utilization of glucose for TCA metabolism. Conversely, PKC δ KD increased compensatory glycolysis while reducing oxidative respiration (both basal and maximal respiration). As a result, 60% of the ATP was produced through glycolysis in Par-C5 PKC δ KD cells. Alternatively, studies from Acin-Perez have shown that

activation of PKC δ increases oxidative phosphorylation through regulation of pyruvate dehydrogenase activity, a possibility that should be addressed in the future (11). In our current studies, loss of PKC δ shifts cells to utilize glutamine in biosynthetic pathways instead of oxidative respiration. Metabolite tracing of glutamine in PKC δ KD cells revealed that labeled glutamine was utilized for synthesis of nucleotides, glutathione, and TCA intermediates. Likewise, PKC δ KD cells show an increase in labeled α -KG and increased flux of glutamine through the TCA cycle.

We have uncovered a novel role for PKC δ in metabolic reprogramming to increase nucleotide synthesis, consistent with the increased capacity of PKC δ -depleted cells for DNA repair (29). Cells can increase PPP activity to produce more nucleotides in response to DNA damage and/or increased demand for proliferation (30, 31). Flux analysis using [$^{13}\text{C}_6$] glucose and [$^{13}\text{C}_5, ^{15}\text{N}_2$] glutamine indicates that PKC δ -depleted cells increase utilization of glutamine to fuel synthesis of nucleobases and glucose for generation of ribose phosphate *via* the PPP. This includes both through increased generation of aspartate from glutamate for purine and pyrimidine synthesis and increased use of glutamine as an N donor for purine synthesis.

PKC δ -depleted cells are codependent on the PPP and increased glutamine utilization for survival after IR damage, indicating that these reprogramming events contribute to radioprotection. Inhibition of hexokinase with 2DG increased cell death in both control and PKC δ KD cells, while inhibition of G6PD increased cell death in δ sh110 cells but decreased cell death in control cells. This is consistent with a switch from utilization of glucose to utilization of glutamine for survival. In PKC δ KD cells, utilization of glutamine is facilitated by increased expression of glutaminase 1/2, and pretreatment with the glutaminase-1 (GLS1) inhibitor CB-839 reversed radioprotection in PKC δ -depleted Par-C5 cells. Radioresistant cells have been shown to have a high demand for glutamine, and inhibition of GLS1 can radiosensitize numerous cancer cell types (32–34). Other studies show that overexpression of GLUL promotes radiation resistance and that GLUL KD can enhance radiosensitivity (35). In contrast to our findings, overexpression of PKC δ reduced GLUL expression in glial cells (36). It is possible that epithelial and glial cells regulate divergent signaling pathways which crosstalk with PKC δ to determine GLUL levels.

Our studies show that suppression of PKC δ results in metabolic rewiring to create a radioresistant phenotype. Characteristics of this phenotype, including increased activity of the PPP and increased dependency on glutamine, are shared with many cancer cells and with cells that are chemo and radiation resistant (37–40). For instance, in colon and lung cancer, inhibition of G6PD, the rate-limiting enzyme in the PPP, can reverse cisplatin resistance (40, 41). Similarly, inhibition of G6PD reversed radioprotection in PKC δ -depleted Par-C5 cells. The contribution of PKC δ to EGFR-resistant phenotypes has also been demonstrated (42, 43). It will be interesting to determine if PKC δ expression or activity in cancer cells predicts chemoresistance. Our data suggests that

PKC δ may play a fundamental role in regulating radiation, and perhaps chemo-sensitivity, through changing the metabolic landscape to promote DNA repair. Further studies will be needed to understand in greater depth how these metabolic changes are regulated and their contribution to therapy-resistance phenotypes.

Experimental procedures

Cell culture and generation of shRNA stable KD cell lines

Par-C5 (RRID: CVCL_D695) cells have previously been described (44). A549 (RRID: CVCL_0023) cells were obtained from the CU Anschutz Cell Technologies Shared Resource and cultured in RPMI1640 (Thermo Fisher Scientific, #SH30027.01) supplemented with 10% fetal bovine serum (Sigma, #F2442) and grown in 5% CO $_2$ humid cell culture incubator. Cell line profiling for authentication was done through the CU Anschutz Cell Technologies Shared Resource at the University of Colorado Anschutz Medical Campus. Cells used in these experiments were within 10 passages of authentication and were monitored for *mycoplasma* once a month using the Plasmotest kit from Invivogen. Par-C5 cells were stably depleted of PKC δ by transduction with lentivirus against PRKCD or a nontargeting shRNA (Cat# V3SR11242-243761456 (sh δ 110), Cat#V3SR11242-242319029 (sh δ 680), Cat#VSC11722 (shNT), Sigma-Aldrich). Human cell line A549 was stably depleted of PKC δ with the following shRNA (#TRC00010193 (sh193), #TRC00010203 (sh203), #TRCN0000196625 (sh625) or a nontargeting shRNA (shSCR), Open Biosystems). HEK-293T (RRID: CVCL_0063) cells cultured in Dulbecco's modified Eagle's medium/high glucose medium supplemented with 10% fetal bovine serum were used to package lentiviral particles containing shRNA following transfection with jetPRIME (Cat# 101000046, Polyplus) and lentiviral packaging vectors (45).

We obtained inhibitors for three metabolic pathways: G6PD, hexokinase, and GLS1. Specifically, we used 6-AN (Cat# A-68203) and 2-DG (Cat# D3179), Sigma-Aldrich, for G6PD and hexokinase, respectively, and telaglenastat (CB-839, Cat# S7655; Selleckchem) for GLS1. All inhibitors were added 24 h prior to 10 Gy γ -IR exposure from a cesium-137 source.

Metabolomics

Par-C5 and A549 cells depleted of PKC δ and control cells (shNT or shSCR) were submitted to the CU Anschutz Mass Spectrometry Metabolomics Shared Resource (*Cancer Center Support Grant (P30CA046934)*) for global and metabolic flux analysis. Global metabolomics were performed on cells grown in Par-C5 or A549 complete media. For Par-C5 flux analysis, cells were incubated in Par-C5 media lacking either glucose or glutamine for 18 h, at which time (time 0) media was changed to Par-C5 media containing either 25 mM [$\text{U-}^{13}\text{C}$]D-glucose (Cat# 389374) or 5 mM [$^{13}\text{C}_5, ^{15}\text{N}_2$]L-glutamine (Cat# 607983; Sigma-Aldrich). Cells were incubated in tracer media for 1, 6, or 24 h. Cells for both global and flux experiments were harvested by mechanically lifting cells off the plate, recording cell counts, and pelleting and snap freezing at -80°C .

Protein kinase C δ and metabolism

Metabolites were extracted from frozen cell pellets at 2 million cells per mL by vigorous vortexing in the presence of ice cold 5:3:2 MeOH:MeCN:water (v/v/v) for 30 min at 4 °C. Following vortexing, supernatants were clarified by centrifugation (10 min, 12,000g, 4 °C) and an aliquot of each extract was diluted 1:1 with the aforementioned solution during transfer to autosampler vials. The resulting samples were analyzed (10 μ L per injection) by ultra-high-pressure liquid chromatography coupled to mass spectrometry (Vanquish and Q Exactive, Thermo Fisher Scientific). Metabolites were resolved on a Kinetex C18 column using a 5-min gradient method as previously described (46). Following data acquisition, .raw files were converted to .mzXML using RawConverter then metabolites assigned, and peaks integrated using Maven (Princeton University) in conjunction with the KEGG database and an in-house standard library. ^{13}C , ^{15}N isotopic enrichment was visualized using GraphPad Prism 9.0. $^{13}\text{C}_2$, ^{15}N , and $^{15}\text{N}_2$ metabolite peak areas were corrected for natural abundance. Quality control was assessed as using technical replicates run at beginning, end, and middle of each sequence as previously described (47).

Cell count-normalized metabolomics data was imported into MetaboAnalyst 5.0 (16) where it was log-transformed, auto-scaled, and used for subsequent PLS-DA, heat map, quantitative enrichment, and pathway topology analysis. Assessment of the quality of replicates was performed on all samples through PLS-DA for detection of outliers and clustering patterns. Construction of heatmaps involved Minkowski distance measure with average or Ward linkage clustering as indicated. Metabolite set enrichment analysis was performed using quantitative enrichment analysis, the SMPDB metabolite reference set, and a $p < 0.05$ cutoff. Enrichment ratio represents the number of observed metabolite hits divided by the number of expected metabolite hits within each pathway. Pathway impact was conducted on metabolites changed >1.2 -fold change in PKC δ -depleted cells compared to shNT cells, with a significance cutoff of < 0.1 . Pathway impact quantifies the number of metabolites that are present in a particular KEGG pathway following pathway enrichment (Globaltest) and pathway topology analysis (degree centrality and betweenness centrality). Pathway impact scores > 0.1 (arbitrary scale of 0–1) are shown. This means that 10% or more of the pathway metabolites vary when compared to the control.

Immunoblot analysis

Immunoblot analysis was performed following lysis of cell pellets in JNK lysis buffer (25 mM Hepes pH 7.5, 300 mM NaCl, 1.5 mM MgCl₂, 0.2 mM EDTA, 0.1% Triton X-100, 0.5 mM DTT, and 1 \times HALT Protease and Phosphatase Inhibitor Cocktail (Thermo Fisher Scientific)), quantification of protein concentration (DC protein assay #5000111, Bio-Rad) and separation of protein by SDS-PAGE. Proteins were transferred to polyvinylidene difluoride membranes and membranes stained with Ponceau S (Sigma-Aldrich, P3504) following transfer to confirm equal transfer and loading. Antibodies to PKC δ and β -actin were obtained from Proteintech

(14188-1-AP) and Abcam (ab49900), respectively. Chemiluminescent images were obtained following incubation with Millipore Luminata Forte ECL reagent and imaging with KwikQuant Image Analyzer 5.9 (Kindle Biosciences).

Quantitative PCR analysis of mitochondrial gene expression

mRNA gene expression was quantified using the StepOne-Plus Real-Time PCR System produced by Applied Biosystems and SYBR Select Master Mix (Thermo Fisher Scientific). PrimeTime qPCR primer assays were obtained from IDT for GLS1 (Rn.PT.58.44759709), glutaminase-2 (Rn.PT.58.46148356.g), and GLUL (Rn.PT.58.8245284). The instrument automatically determined CT, and the relative expression fold change was calculated using the $2^{-\Delta\Delta\text{CT}}$ method (48). For normalization of mRNA expression levels, a panel of reference genes was used to determine the most stable normalization gene for each run. The relative expression levels were calculated as fold enrichment compared to control shNT cells ($\Delta\Delta\text{CT}$). All samples were analyzed in biological triplicates, and the data is presented as mean \pm SEM.

Seahorse oxygen consumption rate analysis

The Seahorse XF96 Extracellular Flux analyzer (Agilent) was used for *in vivo* measurement of oxygen consumption rate, extracellular acidification rate, and PER rates. Mito Stress Test (Cat# 103015-100), glycolytic rate (Cat# 103344-100), and Real-Time ATP Rate (Cat# 103592-100) assays were performed according to the manufacturer's recommendations with the exception of FCCP concentration which was optimized for cell type (Par-C5, 1 μ M). The Mito Stress Test assay analysis generated measurements of oxygen consumption rate attributed to basal and maximal respiration rates. The glycolytic rate assay allowed for examination of glycoPER, as well as basal and compensatory glycolysis. For all Seahorse assays, cells were plated at a previously optimized density (Par-C5–7500 cells/well), allowed to grow overnight, and analyzed on the Seahorse XF96 analyzer the next day. The Real-Time ATP Rate assay quantifies the rate of mitochondrial- and glycolytic-derived ATP production. Seahorse analytics report generators were used for all of the calculations. Experiments were designed with a minimum of four replicates per condition.

Caspase activity assay

Caspase 3 activity was measured using the Caspase-3 Cellular Activity Assay Kit Plus (Biomol, Farmingdale, NY; BML-ALK7030001) according to manufacturer's recommendations. This assay utilizes a colorimetric substrate, *N*-acetyl-DEVD-p-nitroaniline, that is cleaved to detect caspase 3 activity.

G6PD activity assay

The G6PD activity was assayed using the G6PD Activity Colorimetric Assay Kit (Cat # ab102529, Abcam) according to the manufacturer's protocols. Briefly, cells were harvested and washed in PBS prior to being lysed in JNK lysis buffer (25 mM Hepes pH 7.5, 300 mM NaCl, 1.5 mM MgCl₂, 0.2 mM EDTA,

0.1% Triton X-100, 0.5 mM DTT, and 1 \times HALT Protease and Phosphatase Inhibitor Cocktail (Thermo Fisher Scientific)). Protein concentration was assayed using the BCA kit (Bio-Rad). An equal amount of protein from each cell line was used to perform the assay. Absorbance at OD 450 nm was measured on a microplate reader (SpectraMax190, Molecular Devices) in kinetic mode for 30 min at 37 °C. The G6PD activity in biological triplicates was assayed at 5 min and 30 min.

NADPH/NADP⁺ assay

The NADPH/NADP⁺ ratio was measured using the NADPH/NADP⁺ Fluorometric Assay Kit (Cat # ab176724, Abcam) according to the manufacturer's protocols. An equal number of cells from each cell line was used to perform the assay. Briefly, Par-C5 shNT, sh δ 110, and sh δ 680 cells were harvested and washed in PBS and lysed in NADPH/NADP⁺ lysis buffer. The lysate was collected and used to perform the assay. Fluorescence intensity of biological triplicates was measured on a microplate reader (Synergy2, Biotek) at a 560 nm excitation wavelength and a 590 nm emission wavelength.

Statistical analysis

Unless otherwise indicated, figures depict representative experiments, utilizing triplicate samples (Caspase-3 activity, G6PD, and NADPH/NADP⁺) that were conducted a minimum of three times, and error bars denote SEM. Statistical analysis was performed either within MetaboAnalyst 5.0 (www.metaboanalyst.ca) software or using GraphPad Prism 9 software (www.graphpad.com), utilizing student's *t* test or a one-way or two-way ANOVA as indicated (significance level of 0.05) with Dunnett's multiple comparisons ($\#p < 0.10$; $*p < 0.05$; $**p < 0.01$; $***p < 0.001$; $****p < 0.0001$).

Data availability

All data are available in the main text or in the Supporting Information section. Mass spectrometry data is available upon request from Dr D'Alessandro (angelo.dalessandro@cuanschultz.edu).

Supporting information—This article contains supporting information.

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Abbreviations—The abbreviations used are: 2DG, 2-deoxyglucose; 6-AN, 6-aminonicotinamide; G6P, glucose 6-phosphate; G6PD, glucose 6-phosphate dehydrogenase; GLS1, glutaminase-1; GLUL, glutamine synthetase; IR, irradiation; KD, knockdown; PER, proton efflux rate; PKC δ , protein kinase C δ ; PLS-DA, partial least squares discriminant analysis; PPP, pentose phosphate pathway; PRPP, 5-phosphoribosyl-1-pyrophosphate; TCA, tricarboxylic acid.

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