

Exercise reverses preamyloid oligomer and prolongs survival in α B-crystallin-based desmin-related cardiomyopathy

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The R120G mutation in the small heat shock-like protein α B-crystallin (CryAB^{R120G}) causes desmin-related myopathy (DRM), which is characterized by the formation of desmin- and CryAB-containing aggregates within muscle fibers. Mice with cardiac-specific overexpression of CryAB^{R120G} develop cardiomyopathy at 3 months and die at 6–7 months from heart failure (HF). Previous studies showed that overexpression of CryAB^{R120G} results in accumulation of preamyloid oligomer (PAO). PAO is considered to be the cytotoxic entity in many of the protein misfolding-based neurodegenerative diseases. On the basis of data from mouse models of neurodegenerative diseases showing that exercise or environmental enrichment reduces the amyloid oligomer level and improves cognitive ability, we hypothesized that CryAB^{R120G}-induced DRM would also respond favorably to prolonged voluntary exercise, reducing HF symptoms and rescuing the mice from premature death. Six months of voluntary exercise in CryAB^{R120G} animals resulted in 100% survival at a time when all unexercised mice had died. After 22 weeks of exercise, PAO levels were decreased by 47% compared with the unexercised CryAB^{R120G} control mice ($P = 0.00001$). Although CryAB^{R120G} expression led to decreased levels of the metalloproteinase neprilysin, normal levels were maintained in the exercised CryAB^{R120G} mice, and *in vitro* loss-of-function and gain-of-function experiments using adenovirus-infected cardiomyocytes confirmed the importance of neprilysin in ameliorating PAO accumulation. The data demonstrate that voluntary exercise slows the progression to HF in the CryAB^{R120G} DRM model and that PAO accumulation is mediated, at least in part, by decreased neprilysin activity.

cardiac | disease | heart | transgenic

Desmin-related myopathy (DRM) belongs to the family of protein-misfolding diseases and is associated with mutations in desmin, α B-crystallin (CryAB) (1), and selenoproteins (1, 2). Multiple mutations in CryAB can cause human DRM, and one of the mutations, resulting in a change from arginine to glycine at residue 120 (CryAB^{R120G}), has been modeled in transgenic (TG) mice (3). Cardiomyocyte-specific overexpression of CryAB^{R120G} resulted in dilated cardiomyopathy by 3 months, with the animals developing heart failure (HF) and dying by 6–7 months (4). CryAB-DRM is characterized by the accumulation of desmin- and CryAB-containing aggregates, which are large perinuclear protein depositions formed by microtubule-dependent accumulation of small aggregates that initially develop at the cell periphery (5). Aggregates are associated with the protein conformation-based neurodegenerative disorders (5–8). Accumulation of misfolded or unfolded proteins underlies the pathogenesis of most amyloid-based neurodegenerative diseases such as Alzheimer's disease and Parkinson's disease, in which aggregates containing the mutant protein develop via reorganization of soluble monomers into prefibrillar oligomers. These can coalesce into protofilaments, which then go on to form the characteristic amyloid-positive tangles and/or plaques (9). Recent data show a poor correlation

between the mature plaques and disease severity (10), and, for at least some of the neurodegenerative disorders, it is the soluble, preamyloid oligomers (PAOs) that are the most potent mediators of cytotoxicity (11). Data in support of this hypothesis have also been gathered by using animal models in which the development of structural and functional neuronal deficits substantially preceded the formation of amyloid plaques (12).

Recent data have uncovered several parallels between CryAB^{R120G}-induced DRM and the neurodegenerative diseases. First, as is the case for a number of the neurodegenerative diseases, CryAB^{R120G}-DRM is associated with cytoplasmic accumulation of misfolded proteins within inclusion bodies (13). Second, an antibody that recognizes the toxic conformer shared between PAOs that form from diverse, amyloidogenic proteins (14) reacts strongly to material present in neurons derived from various neurodegenerative diseases as well as from CryAB^{R120G}-positive cardiomyocytes (13, 15). For both the neurodegenerative and CryAB^{R120G}-based cardiac diseases, disease severity correlates directly with levels of the antibody-reactive, PAO material rather than with aggregates or amyloid-positive plaques or tangles, and the data are consistent with the contribution of PAO to CryAB^{R120G}-induced pathogenesis (15). Third, like neurodegenerative diseases, CryAB^{R120G}-DRM progression strongly correlates with mitochondrial dysfunction, particularly with inhibition of complex I (16).

Results obtained from mouse models of neurodegenerative disease show that environmental enrichment or voluntary exercise is beneficial in terms of delayed onset and progression of disease (17–20). Investigators modeled human physical, social, and intellectual enrichment by placing at least two animals in large cages with running wheels, toys, and colorful tunnels (21). A physical component of environmental enrichment has particular clinical importance. Voluntary exercise delayed the onset of neurological deficits in a mouse model of Huntington's disease (20), and long-term exercise decreased the amyloid load in a mouse model of Alzheimer's disease (19). Voluntary exercise of mice housed in cages with running wheels resulted in significant decreases in neural amyloid deposits and enhanced learning ability compared with nonexercised littermates (17). On the basis of these data and the parallels between the neurodegenerative disorders and CryAB^{R120G}-induced cardiomyopathy, we

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Abbreviations: DRM, desmin-related myopathy; TG, transgenic; NTG, nontransgenic; NTGtr, NTG exercised; TGtr, TG exercised; PAO, preamyloid oligomer; CryAB, α B-crystallin; NRC, neonatal rat cardiomyocyte; HF, heart failure.

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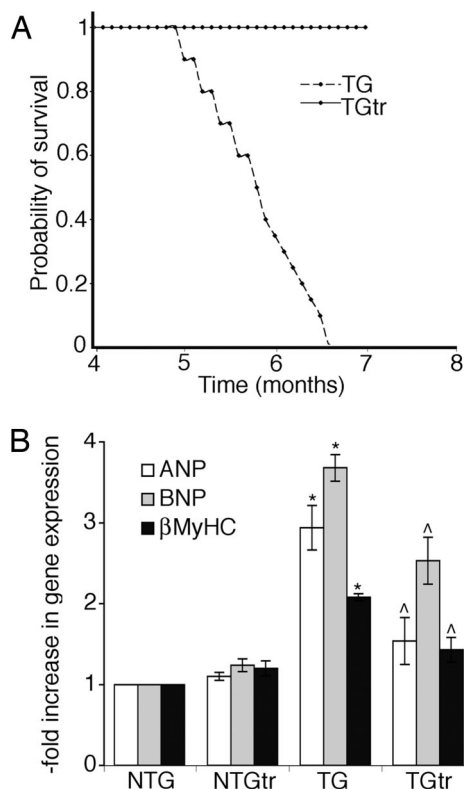


Fig. 1. Voluntary exercise. (A) Kaplan–Meier curves for exercised (solid line) and unexercised (broken line) CryAB^{R120G} mice. (B) Quantitative PCR analysis revealed that voluntary exercise significantly attenuated activation of the fetal gene program that is normally observed in the CryAB^{R120G} TG mice. *, significant difference vs. NTG ($P < 0.05$); \wedge , significant difference vs. unexercised TG ($P < 0.05$).

tested the effects of long-term voluntary exercise in the CryAB^{R120G}-DRM model. The data show that exercise led to significant reductions of PAO with a concomitant increase in lifespan.

Results

To investigate the effects of exercise on CryAB^{R120G}-induced HF, 24 1-month-old males from nontransgenic (NTG) and TG groups were housed in regular cages (control groups) or in cages equipped with voluntary running wheels (exercised groups) with two mice per cage. All CryAB^{R120G} TG mice from the unexercised group died from HF by 6 months (Fig. 1A). Despite developing heart disease in the TG cohorts, there were no significant differences between the TG and NTG cohorts in distances run in the early and mid-phases of the study (data not shown). Our analyses subsequently focused on the exercised and

unexercised CryAB^{R120G} TG groups. After 22 weeks of exercise the mice underwent echocardiographic assessment, which showed modest differences in the heart rates between the two groups but no significant differences in functional parameters (Table 1). Running did produce the expected reduction in body weight in both groups. Strikingly, voluntary running appeared to be cardioprotective, with all members of the exercised group alive after all CryAB^{R120G} mice housed in the cages without the wheels had died (Fig. 1A).

Hypertrophied and failing hearts are often characterized by activation of the fetal gene program (4). Consistent with the developing cardiac pathology, at 28 weeks in the unexercised TG animals, atrial natriuretic peptide, β -myosin heavy chain, and brain natriuretic peptide, which are all characteristic of murine cardiac fetal gene expression and/or adult cardiac hypertrophy, were significantly elevated. The hearts isolated from the exercised TG cohorts showed a significant attenuation of this response (Fig. 1B).

CryAB^{R120G}-mediated DRM belongs to the family of protein-misfolding diseases and is characterized by the formation of CryAB- and desmin-containing aggregates as well as high concentrations of PAO in the cardiomyocytes (13). In previous studies the viability of CryAB^{R120G} TG mice was linked to decreased PAO deposition but was independent of aggregate concentrations (15). To determine the effect of voluntary exercise on the accumulation of aggregates and PAO, we probed heart sections with anti-CryAB and anti-PAO antibodies (Fig. 2). Accumulations of the CryAB-positive aggregates were identical between the exercised and unexercised TG groups after 22 weeks of exercise (Fig. 2A and B). We then probed the sections with anti-PAO antibody (14) after 1 month, 3 months, and 6 months of exercise and observed progressive reductions in PAO deposition in the hearts of exercised compared with unexercised TG mice (Fig. 2C and D). Morphometric analysis revealed a 47% decrease of PAO immunoreactivity in the exercised animals compared with the control group at 6 months (Fig. 2D).

Progression of HF is often associated with cardiomyocyte apoptosis (22). Our previous study revealed significant activation of apoptosis in the CryAB^{R120G} hearts (16). Given the above data that exercise reduces PAO accumulation and prolongs life, we tested the hypothesis that exercise decreased activation of apoptosis in the CryAB^{R120G}-induced HF model. A critical step in the development of apoptotic cell death is caspase-3 cleavage and the subsequent cleavage of its substrates. Low levels of cleaved caspase-3 were detected in NTG and exercising TG mice (Fig. 3A). In contrast, the control TG group showed dramatic increases in the level of cleaved protein, and, as early as 2 months, cleavage of two of its substrates, Rho-associated coiled-coil protein kinase and poly-(ADP-ribose)-polymerase, was apparent in the unexercised but not in the exercised mice. At termination (6 months), we quantitated the number of TUNEL-positive cardiomyocytes as a marker for DNA fragmentation and

Table 1. Echocardiography of mouse groups

Mouse group	Body weight, g	Heart weight, g	Heart rate, beats/min	IVS		
				Diastole	Systole	SF, %
NTG	32.92 \pm 0.7	0.236 \pm 0.02	432.22 \pm 24.9	0.09 \pm 0.01	0.13 \pm 0.01	41.22 \pm 1.1
NTGtr	31.03 \pm 0.06*	0.219 \pm 0.01	468.4 \pm 23.01	0.09 \pm 0.01	0.13 \pm 0.01	44.16 \pm 2.4
TG	33.26 \pm 0.7	0.38 \pm 0.03*	306.2 \pm 9.8*	0.14 \pm 0.01*	0.18 \pm 0.01*	31.7 \pm 1.5*
TGtr	30.73 \pm 1.07*†	0.36 \pm 0.03*	388.92 \pm 24.9†	0.14 \pm 0.02*	0.17 \pm 0.01*	30.3 \pm 3.1*

NTGtr and TGtr mice were allowed access to cage wheel exercise. Shown are average values \pm SE for 7-month-old TGtr mice and 6-month-old TG mice ($n = 6$ for each group). IVS, intraventricular septum; SF, shortening fraction. *, significant difference vs. NTG ($P < 0.001$); †, significant difference vs. unexercised TG ($P < 0.001$).

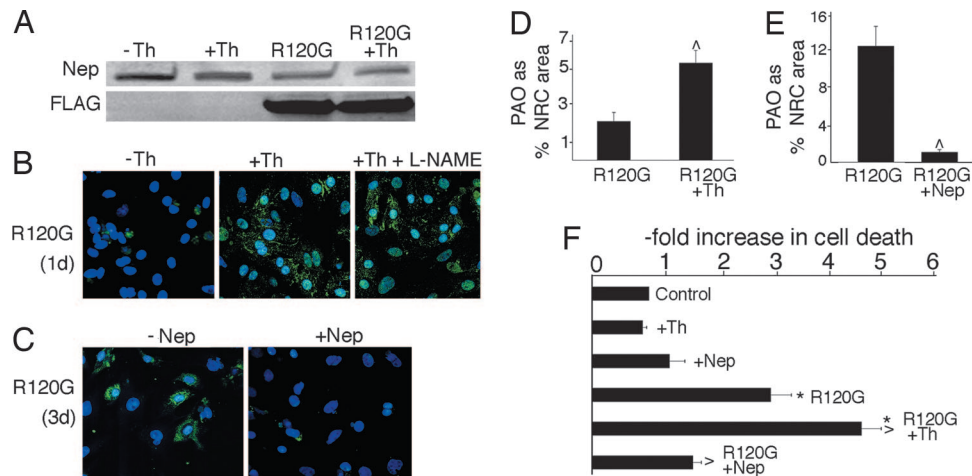


Fig. 5. Neprilysin plays a causative role in PAO accumulation. (A) Representative Western blot showing neprilysin levels in untreated NRCs and CryAB^{R120G}-infected NRCs in the presence or absence of thiorphan 24 h after infection. (B) PAO accumulation (green) in CryAB^{R120G}-infected NRCs 24 h after infection was enhanced by thiorphan. Nuclei (blue) were stained with TO-PRO-3. To confirm that the increased PAO levels were not due to NO production, the NO synthase inhibitor N^G-nitro-L-arginine methyl ester (L-NAME) was also added to selected cultures. (C) Overexpression of neprilysin significantly reduces PAO 3 days after infection. (D and E) Quantitation of PAO-positive areas from B and C, respectively, as a percentage of total NRC area. (F) The effect of overexpression or inhibition of neprilysin on the rate of cardiac cell death as measured by the release of adenylate kinase into the medium. Values shown are the average-fold increase relative to control, nontransfected NRCs for three independent series \pm SE. *, $P < 0.005$ vs. control; \wedge , $P < 0.005$ vs. CryAB^{R120G}-infected NRCs.

the addition of the NO synthase inhibitor N^G-nitro-L-arginine methyl ester to selected cultures (Fig. 5B). To further study the role of neprilysin in the formation of PAO, we prepared an adenovirus expressing mouse neprilysin. Adenovirus carrying the construct resulted in an ≈ 10 -fold increase in neprilysin levels relative to unaffected cardiomyocytes (data not shown) and partially abolished PAO accumulation 3 days after infection (Fig. 5C). Quantitation confirmed a >2 -fold increase ($P < 0.005$) in PAO as a result of neprilysin inhibition (Fig. 5D). Conversely, overexpression of neprilysin led to a 12-fold reduction in PAO relative to the NRCs infected with CryAB^{R120G} alone (Fig. 5C and E). Consistent with PAO's toxic effects, cotransfection of adeno-CryAB^{R120G} with the neprilysin adenovirus construct led to significantly reduced cell death compared with those transfected with CryAB^{R120G} alone (Fig. 5F).

Discussion

Cardiac pathology develops over a period of 5–7 months in the mouse model of CryAB^{R120G}-DRM, resulting in HF and death. Although many factors, such as mitochondrial dysfunction and disruption of the contractile apparatus, are involved during progression of the disease (1, 4, 16, 26), our recent studies showed a strong correlation between PAO levels and cardiac dysfunction (13, 15). Formation of prefibrillar oligomeric deposits from amyloidogenic proteins is now thought to be a primary cytotoxic event in the protein conformation, amyloidogenic diseases (11, 12). However, it should be emphasized that CryAB^{R120G}-DRM does not appear to be a classic amyloidosis, which is characterized by the accumulation of amyloid plaques or insoluble fibrils. Amyloids are classically defined by Congo red or thioflavin T staining and green birefringence under polarized light, and appear as unbranched, 10-nm fibrils in the electron microscope (27). Although CryAB^{R120G} aggregates do stain with Congo red, we have not observed the characteristic “apple green” birefringence, and electron microscopy studies failed to detect the characteristic amyloid fibrils in CryAB^{R120G} TG hearts (unpublished data).

Using inducible cardiomyocyte-based TG CryAB^{R120G} expression, we showed that cessation of CryAB^{R120G} synthesis 2–3 weeks before death rescued the TG mice and was accompanied by significant reductions in PAO levels (15). We hypothesized

that environmental enrichment, which was effective in reducing brain amyloid levels in mouse models suffering from neurodegenerative disease (17–19), might impact favorably on PAO formation and delay or even halt the cascade of pathological events leading to HF. The results strikingly paralleled those obtained with the inducible system, in that voluntary exercise resulted in a 47% decrease in PAO levels, and this was accompanied by 100% survival rather than 100% mortality. Thus, two disparate approaches yielded the same result, the commonality being decreased PAO levels directly correlating with improved survival.

Unlike our more intense, forced exercise models (28), the relatively mild nature of the voluntary exercise is underscored by the lack of any increase in cardiac mass in the exercised animals. In fact, voluntary exercise actually had a potentially beneficial effect on the hypertrophy program, reducing reactivation of fetal gene expression, which often precedes and accompanies pathological hypertrophy (29). Exercise also had a beneficial effect on the apoptotic index in the CryAB^{R120G} hearts (16) with both TUNEL-positive nuclei and activated caspase-3 levels reduced. These results are in agreement with previous studies indicating the antiapoptotic effect of exercise training (30–32). Although voluntary exercise had no effect on the functional parameters measured by echocardiography, these data are consistent with a clinical trial in which 100 chronic HF patients were enlisted. Although moderate long-term exercise did result in improvements in both quality of life and cardiac function, the parameters determined by echocardiography showed no differences between the exercised and nonexercised groups (33). It is unclear what the outcome of more intensive, forced exercise regimens such as swimming or running on a motorized, incline treadmill would be. Under certain conditions, exercise is clearly beneficial, and, in a hypertrophic cardiomyopathic mouse model carrying a mutation in the gene that encodes the predominant cardiac myosin heavy chain, voluntary cage wheel running prevented onset of cardiac pathology and ameliorated existing pathology when initiated in older animals (30). However, intense exercise is associated with sudden cardiac death in symptomatic and asymptomatic heart disease resulting from different etiologies (34), and, for humane reasons, we have not subjected obviously ill mice to high-stress exercise. We hypothesize that one would observe, as cardiac function decreased, an increased inci-

