

Mesodermal Deletion of Transforming Growth Factor- β Receptor II Disrupts Lung Epithelial Morphogenesis

CROSS-TALK BETWEEN TGF- β AND SONIC HEDGEHOG PATHWAYS*

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In vertebrates, Sonic hedgehog (Shh) and transforming growth factor- β (TGF- β) signaling pathways occur in an overlapping manner in many morphogenetic processes. *In vitro* data indicate that the two pathways may interact. Whether such interactions occur during embryonic development remains unknown. Using embryonic lung morphogenesis as a model, we generated transgenic mice in which exon 2 of the *T β RII* gene, which encodes the type II TGF- β receptor, was deleted via a mesodermal-specific Cre. Mesodermal-specific deletion of *T β RII* (*T β RII Δ/Δ*) resulted in embryonic lethality. The lungs showed abnormalities in both number and shape of cartilage in trachea and bronchi. In the lung parenchyma, where epithelial-mesenchymal interactions are critical for normal development, deletion of mesenchymal *T β RII* caused abnormalities in epithelial morphogenesis. Failure in normal epithelial branching morphogenesis in the *T β RII Δ/Δ* lungs caused cystic airway malformations. Interruption of the *T β RII* locus in the lung mesenchyme increased mRNA for *Patched* and *Gli-1*, two downstream targets of Shh signaling, without alterations in Shh ligand levels produced in the epithelium. Therefore, we conclude that *T β RII*-mediated signaling in the lung mesenchyme modulates transduction of Shh signaling that originates from the epithelium. To our knowledge, this is the first *in vivo* evidence for a reciprocal and novel mode of cross-communication between Shh and TGF- β pathways during embryonic development.

Transforming growth factor- β (TGF- β)² ligands are multifunctional signaling proteins that exhibit a wide range of biological activities including regulation of cell proliferation and differentiation. TGF- β initiates its cellular actions by interacting with a heteromeric complex of transmembrane serine/threonine kinase receptors, the type I (T β RI) and type II (T β RII)

receptors. The binding of TGF- β ligand to the receptor complex induces phosphorylation of type I by the type II receptors and activates Smads, a family of transcriptional factors that act as intracellular effectors of TGF- β signaling (1). Smad2 and/or Smad3 are phosphorylated in their C-terminal domain upon stimulation by either activin or TGF- β (2). Phosphorylation of Smad2 and Smad3 is accompanied by their association with Smad4 and translocation of the heteromeric complex to the nucleus where they affect transcription of target genes through interaction with promoter-specific transcriptional factors or by direct DNA binding (3).

Genetic manipulations of endogenous TGF- β signaling have revealed their important functions in vertebrate development. Targeted deletion of each of the three ligand isoforms causes severe abnormalities in morphogenesis of various organs including the lung. *Tgf- β 2*-null mice exhibit perinatal mortality and a wide range of developmental abnormalities that include cardiac, lung, craniofacial, limb, spinal column, eye, inner ear, and urogenital defects (4). *Tgf- β 3* mutants die as neonates due to abnormal lung development and cleft palate (5). Targeted disruption of the *Tgf- β 1* gene results in abnormalities in the lung, manifested as dilation of the airways (6). Mice with targeted deletion of *Smad3* are viable, but develop lung abnormalities akin to emphysema (7). Little is known about the role of other components of the TGF- β pathway and interactions with other signaling molecules in the lung.

Embryonic lung development represents a useful model in which to study complex tissue interactions in organ development. Lung morphogenesis is strictly dependent on cross-talk between two distinct tissues, the endodermal-derived epithelium and the mesodermal-derived lung mesenchyme (8). A major signaling pathway in this communication is *Shh*, the vertebrate homologue of *Drosophila hh*, which is highly expressed by embryonic lung epithelium. *Patched* (*Ptc*), the receptor for Shh is expressed by the lung mesenchyme, the site of highly localized *Fgf10* production. The role of *Fgf10* in directing epithelial morphogenesis is central to lung development (9–12). In *Fgf10*($-/-$) embryos, the lung tissue below the main stem bronchi is entirely absent (13, 14). Shh interacts with the *Ptc*/*Smoothened* (*Smo*) complex on the mesenchymal cell membrane and activates *Gli-3*, a 190-kDa transcription factor (15, 16). Activated *Gli-3* binds directly to the *Gli-1* promoter and induces its transcription in response to Shh (17). *Gli-1* is a zinc transcription factor that activates the transcription of *Ptc* (18).

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² The abbreviations used are: TGF, transforming growth factor; X-gal, 5-bromo-4-chloro-3-indolyl- β -D-galactopyranoside; Shh, Sonic hedgehog; PBSMC, parabronchial smooth muscle cells; GAPDH, glyceraldehyde-3-phosphate dehydrogenase.

TGF- β Sonic Hedgehog Cross-talk

Thus, increased transcription of *Gli-1* & *Ptc* are reliable markers of Shh pathway activation. All three *Gli* family members are expressed in and are important for lung development (18, 19). The currently accepted model is that Shh both stimulates and restricts the level and spatial distribution of *Fgf10* expression during lung morphogenesis. Consistent with this concept, deletion of *Shh* leads to diffused, but expanded *Fgf10* mRNA throughout the mesenchyme as a consequence of which airways develop into large cystic structures (20). Precisely how Shh controls *Fgf10* gene expression has hitherto remained unknown.

Because of its established role as a negative regulator of lung branching morphogenesis (21) TGF- β is a potential mediator in epithelial-mesenchymal cross-talk during lung development. Conventional deletion of *T β RII* lead to early embryonic lethality, and therefore was not informative for lung development (22). In the present study, we used a mesodermal-specific *cre-loxP* system to delete exon 2 in the *T β RII* locus in the lung mesenchyme. The lungs of *T β RII^{ΔΔ}* mouse fetuses are abnormal with evidence of cystic airway malformations associated with alterations in *Fgf10* gene expression, likely due to interruption of normal epithelial-mesenchymal cross-talk. Inactivation of *T β RII* and hence the specific TGF- β signaling pathway mediated through its normal activity in the lung mesenchyme results in alterations in *Ptc* and *Gli* mRNAs in the mutant lungs indicating interference with Shh signaling. Thus, TGF- β signaling, mediated via *T β RII* can modulate mesenchymal reception of Shh signaling, which originates from the epithelium, indicating cross-communication between the two signaling pathways during embryonic lung morphogenesis.

MATERIALS AND METHODS

Animals—*Dermo1-cre*, *Rosa26-lacZ*, and *T β RII^{fl/fl}* mice were generated and genotyped as previously described (23–25) and maintained on C57BL/6 genetic background. *Dermo1-cre*; *Rosa26-lacZ* mice were generated by crossing *Dermo1-cre* and *Rosa26-lacZ* mice. To generate *T β RII^{fl/fl}*; *Dermo1-cre* embryos (*T β RII^{ΔΔ}*), *T β RII^{fl/+}*; *Dermo1-cre* mice were crossed with *T β RII^{fl/fl}* mice.

Detection of β -Galactosidase (*LacZ*) Activity—*LacZ* activity was determined by X-gal staining as described (26). Whole mount staining was performed for embryonic lungs. Lungs of E15.5 and older were fixed and sectioned by cryostat, and the frozen sections were stained for *LacZ* activity.

Immunohistochemistry—For immunohistochemistry, samples were fixed in 4% paraformaldehyde and processed into serial paraffin sections using routine procedures. Immunostaining were performed as previously described (27). Primary antibodies that were used are: α -SMA (Sigma), PAI-1 (Abcam Cambridge, MA), PECAM (BD Pharmingen, San Diego, CA), Flk1 (Cell Signaling Technology, Beverly, MA), β -Tubulin (Biogenix, San Ramon, CA), Collagen1 (Abcam, Cambridge, MA), and *T β RII* (Abcam Cambridge, MA).

Western Blot Analysis—Protein extracts were prepared from E15.5 *Dermo1-cre*; *T β RII^{fl/fl}* and *T β RII^{ΔΔ}* lungs in RIPA buffer (Sigma) from homogenizer, and then separated on 4–12% NuPAGE gels (Invitrogen). Proteins were then transferred onto Immobilon-P transfer membrane (Millipore Corp.). Mem-

branes were probed with antibodies to *T β RII* (Abcam) and analyzed with the ECL Western blot analysis system as described by the manufacturer (GE Health, Memphis, TN).

In Situ Hybridization—Whole mount and section *in situ* hybridization were performed as previously described (27, 28). The digoxigenin-labeled RNA antisense and sense probes were prepared from following cDNA templates: a 0.4-kb fragment of *SpC*, a 1.4-kb fragment of *Nkx2.1* (29), a 0.5-kb fragment of *Foxj1*, a 0.6-kb fragment of *Shh* (Dr. Andrew P. McMahon, Harvard University), a 0.7-kb fragment of *Ptc* (Dr. Matthew P. Scott, Stanford University), a 0.7-kb fragment of *Gli-1*, a 0.7-kb fragment of *Foxf1* (Dr. Peter Carlsson, Göteborg University), a 0.4-kb fragment of *Fgf10*, a 1.3-kb fragment of *Tbx4*, and a 1-kb fragment of *Tbx5* (Dr. Virginia Papaioannou, Princeton University).

RNA Extraction, Polymerase Chain Reaction (PCR), and Northern Blotting—Total RNA was isolated from embryonic lungs and MRC5 cells (ATCC) by using TRIzol (Invitrogen). Superscript First-Strand Synthesis System kit (Invitrogen) was used to generate cDNA. Quantification of the selected genes by real-time PCR was performed using a LightCycler (Roche Applied Sciences) as previously described (30). Sequence of the primers were as follows: Mouse *T β RII*: 5'-ATG CAT CCA TCC ACG TAA G-3' (forward), 5'-GAC ACG GTA GCA GTA GAA GA-3' (reverse); human *T β RII*: 5'-CAC GTT CAG AAG TCG GAT GT-3' (forward), 5'-CAT CAG AGC TAC AGG AAC AC-3' (reverse); Mouse *T β RII*(qPCR): 5'-CAT GAA AGA CAG TGT GCT GAG A-3' (forward), 5'-CTC ACA CAC GAT CTG GAT GC-3' (reverse); Mouse *Foxf1*: 5'-AGC ATC TCC ACG CAC TCC-3' (forward), 5'-TGT GAG TGA TAC CGA GGG ATG-3' (reverse); Mouse *Tbx4*: 5'-GCA TGA GAA GGA GCT GTG G-3' (forward), 5'-TTA CCT TGT AGC TGG GGA ACA-3' (reverse); Human *PAI-1*: 5'-AAC GGC CAG TGG AAG ACT C-3' (forward), 5'-GGG CGT GGT GAA CTC AGT AT-3' (reverse); Human *Ptc*: 5'-AAC AAA AAT TCA ACC AAA CCT C-3' (forward), 5'-TGT CCT CGT TCC AGT TGA TGT G-3' (reverse); Human *Gli-1*: 5'-CAG GGA GGA AAG CAG ACT GA-3' (forward), 5'-ACT GCT GCA GGA TGA CTG G-3' (reverse); Human *Fgf10*: 5'-CGG GAC CAA GAA GGA GAA CT-3' (forward), 5'-ACG GCA ACA ACT CCG ATT-3' (reverse); Human *GAPDH*: 5'-GAA GGT GAA GGT CGG AGT C-3' (forward), 5'-GAA GAT GGT GAT GGG ATT TC-3' (reverse). Ten micrograms of total RNA were electrophoresed in 1% RNA formaldehyde-agarose gel and blotted. Blots were hybridized with probes specific for *T β RII*, *Shh*, *Ptc*, *Gli-1*, *Fgf10*, *Gapdh*, and then autoradiographed or measured with Kodak Molecular Imaging Software Ver 4.0 to determine the quantity. ³²P-labeled probes were synthesized from the following cDNA fragments: the *T β RII* probe was from a 0.4-kb PCR product of *T β RII* coding region. The *Shh* probe was from a 0.6-kb cDNA (Dr. Brigid L. M. Hogan, Vanderbilt University). The *Ptc* probe was from a 0.7-kb cDNA (Dr. Matthew P. Scott, Stanford University), The *Gli-1* probe was from a 0.7-kb cDNA. The *Fgf10* probe was from a 0.4-kb cDNA. The *GAPDH* probe was as reported before (31).

Cell Culture and TGF- β Treatment—Human pulmonary mesenchymal cell line MRC5 (ATCC, Manassas, VA) was maintained in EMEM medium (ATCC), containing 10% fetal

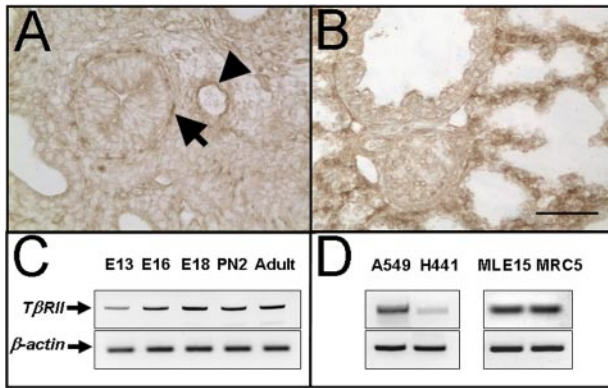


FIGURE 1. T β RII expression in the murine lung. *A* and *B* show immunolocalization of T β RII protein in lungs from E15.5 and E18.5 embryos, respectively. The arrow shows T β RII protein localized in the subepithelial layer of proximal airways. The arrowhead points to endothelial localized T β RII around the blood vessel. *B* shows immunolocalized T β RII distributed throughout the parenchyma of E18.5 lungs, with highest expression in the interstitium, including cells of mesenchymal origin. *C*, semi-quantitative RT-PCR of T β RII mRNA during murine lung morphogenesis. *E*, embryonic day; *PN*, postnatal day. *D*, T β RII mRNA is also detectable in both human (A549 and H449) and murine (MLE15) transformed epithelial cell lines. MRC5 is a fetal human mesenchymal cell line. Scale bar, 100 μ m.

bovine serum and 1% penicillin-streptomycin. MRC5 cells were treated with recombinant TGF- β (R&D systems, Minneapolis, MN) at 200 ng/ml for 2 h and then collected for RNA extraction.

RESULTS

T β RII Expression during Lung Development—T β RII has been reported to be expressed in both the epithelium and the mesenchyme of the lung (32). To elucidate the expression pattern of T β RII in the murine lung, we used semi-quantitative RT-PCR and immunohistochemistry. Expression of T β RII mRNA can be detected by RT-PCR throughout lung development (Fig. 1 *C*). Commercially available antibody (Abcam) detects T β RII protein in mesenchymal cells localized around the airways (Fig. 1, arrows) and blood vessels (Fig. 1, arrowhead) in E15.5 lungs (Fig. 1*A*) and throughout the mesenchyme in E18 lungs (Fig. 1*B*). T β RII mRNA is clearly expressed in human lung epithelial carcinoma, H441 and A549 cell lines as well as mouse-immortalized epithelial MLE15 cells (Fig. 1*D*).

Recombination Mediated by Dermo1-cre in the Lung Mesenchyme—Recombination driven by Dermo1-cre in the lung was analyzed by crossing with the reporter mouse strain Rosa26-LacZ. Double transgenic, Rosa26-LacZ; Dermo1-cre fetuses were identified by PCR genotyping, and the lungs were excised and stained for LacZ. As shown in Fig. 2*A*, expression of Dermo1-cre resulted in nearly 100% recombination of the loxP sites in Rosa26-lacZ lung mesodermal cells (Fig. 2*A*, panels *a–f*). This recombination was entirely mesenchymal-specific in that no epithelial cells showed LacZ staining (Fig. 2*A*, panels *a*, *b*, *d*, and *f*, arrows).

Inactivation of T β RII by Dermo1-cre-driven Recombination—Conventional deletion of T β RII led to early embryonic lethality (22). Thus, we used a conditional Cre-LoxP approach to specifically delete exon 2 in the T β RII locus in mesodermal lineages, including those of the lung. Accordingly, we crossed T β RII^{fl/fl} females with Dermo1-cre male mice and backcrossed the het-

erozygotes to generate T β RII^{fl/fl}; Dermo1-cre progeny. The latter genotype is referred to simply as T β RII Δ/Δ . To validate Dermo1-cre-induced recombination and deletion of exon 2 within the T β RII gene, we used three approaches. First, we utilized lung DNA with PCR primers that could distinguish between deleted and intact T β RII alleles. The deletion in T β RII gene was verified by genomic PCR analysis shown in Fig. 2*B*, panel *b*. Second, we measured T β RII protein content by Western blot analysis in protein extracts of total lung tissue from control and T β RII Δ/Δ embryos. These studies showed greater than 60% decrease in total lung T β RII protein, the remainder indicating non-mesenchymal (e.g. epithelial and endothelial) T β RII protein (Fig. 2*B*, panels *c* and *d*). In contrast, the protein level of T β RI and phosphorylated Smad2 (p-Smad2) remained the same. Therefore mesenchymal deletion of T β RII in the lung does not alter the level of phosphorylated Smad2 and T β RI. Finally, functional deletion of T β RII was verified by immunohistochemistry using antibodies to Plasminogen Activator Inhibitor (PAI-1), which is a downstream target of TGF- β signaling. In the control lungs, diffuse PAI-1 was detected throughout both the epithelium and the mesenchyme, but particularly in the progenitor of parabronchial smooth muscle cells (PBSMC) in the subepithelial mesoderm (Fig. 2*C*, panel *b*, arrows). In contrast, PAI-1 in the T β RII Δ/Δ lungs was found only in the epithelium. As expected, there was virtually no PAI-1 staining in the mesoderm, nor in the PBSMC progenitors in T β RII Δ/Δ lungs (Fig. 2*C*, panel *d*, arrowheads).

Ultrastructure and Cellular Differentiation in T β RII Δ/Δ Lungs—Dermo1-cre-induced deletion of exon 2 within the T β RII gene was embryonically lethal by day 16–17 of gestation. E16–17 fetuses developed gross abnormalities in multiple organs that caused fetal demise. We therefore, collected and characterized lungs from T β RII Δ/Δ E15.5 fetuses. Gross morphological assessment of the proximal lung structure showed a readily discernible phenotype manifested as disorganized formation of tracheal cartilage (Fig. 3*N*). Both the number as well as the shape of the tracheal cartilage was altered. The first and the second generation bronchi in the mutant lungs were devoid of cartilage altogether (not shown).

Mesodermal deletion of T β RII also impacted the shape and the size of the various lung lobes as shown in Fig. 3. However, the overall process of lobation and the number of lobes were normal (Fig. 3, *H–L*). Histological assessment showed a distinct phenotype in T β RII Δ/Δ lungs, characterized by the presence of large, dilated airways, lined with columnar epithelial cells in the proximal lung (Fig. 4*A*).

The epithelial cells throughout the T β RII Δ/Δ lungs showed expression of NKX2.1, a transcription factor associated with onset of lung epithelial morphogenesis and normal lung structural development (Fig. 4*B*, panels *a* and *d*) (33). Transcripts for Surfactant Protein C, SPC, a marker of distal epithelial cells and a target of NKX2.1 was also expressed in the mutant lungs. Also, differentiation of ciliated cells as evidenced by expression of Foxj1 appeared to be normal in the absence of epithelial T β RII activity (Fig. 4*B*). The normal level and distribution of Surfactant Protein B, SPB, expressed in proximal and distal, differentiated epithelium, as well as β -tubulin, an established marker of airway ciliated cells were also observed by immunohistochem-

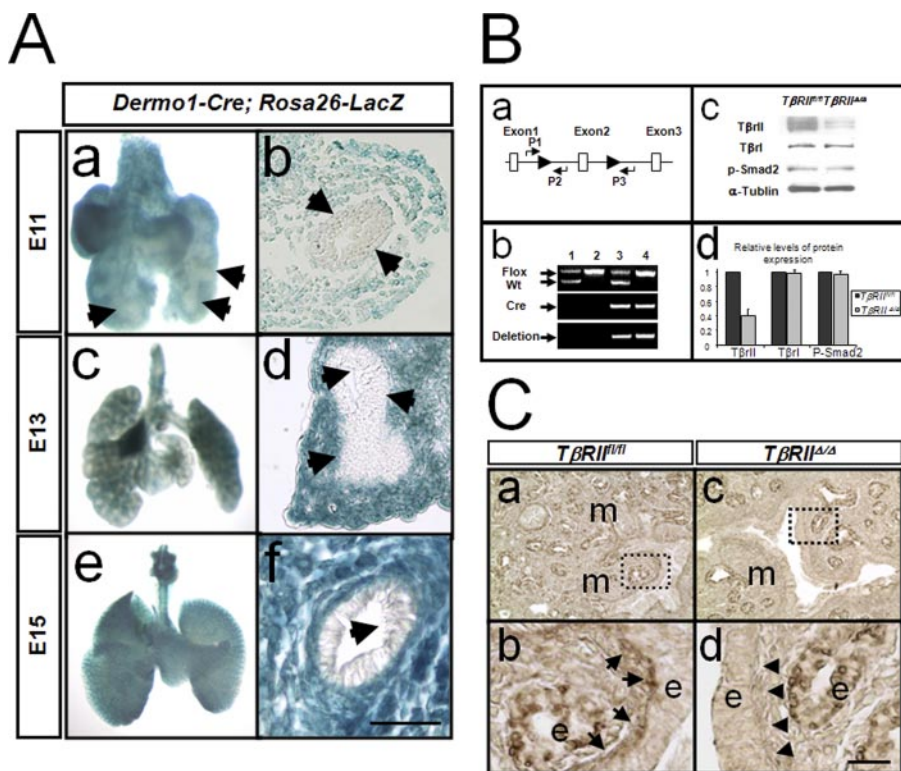


FIGURE 2. Generation and validation of *TBRII* conditional knock-out alleles. *A*, mesenchymal specific recombination induced by *Dermo1-cre* as determined by LacZ assay in murine lungs from various stages of embryonic development. *Panels a, c, and e* are whole mount lung tissue. *Panels b, d, and f* are frozen sagittal sections of the lungs in *panels a, c, and e*. *Arrows in panels a, b, d, and f* show the absence of LacZ in mouse epithelial cells. *Scale bar, 50 μ m*. *B*, evidence for deletion of *TBRII* gene by *Dermo1-cre*. *Panel a*, map of the mouse *TBRII* locus showing the position of the lox-P (floxed) sequences and the primers used in identifying various genotypes. Primers for Cre were used as described by Yu *et al.* (23). *Panel b*, PCR analysis of *TBRII* gene using lung-extracted DNA and the primers P1, P2, and P3, as shown in *panel a*. *Lane 1*, *TBRII*^{+/+} lungs, showing two bands corresponding to the wild type (*Wt*) and the allele carrying the lox-P insertion. The absence of a PCR product using P1/P3 primers is due to the large distance between the two primers (absence of deletion). *Lane 2*, *TBRII*^{+/+} lungs showing a single band corresponding to floxed allele. *Lane 3*, *TBRII*^{Δ/+} lungs. Deletion of Exon 2 brings the sequences recognized by P1 and P3 primers sufficiently close to allow amplification of a PCR product (deletion). *Lane 4*, *TBRII*^{Δ/Δ} lungs. *Panel c*, Western blot analysis of *TBRII*, *TBRI*, and p-Smad2 in total lung protein from *TBRII*^{+/+} (*lane 1*) and *TBRII*^{Δ/Δ} (*lane 2*) mice. *Panel d*, densitometric quantification of the Western blot shown in *panel c*. *C*, immunohistochemical analysis for PAI-1 in *TBRII*^{Δ/Δ} and *TBRII*^{+/+} lungs. *Arrowheads in panel d* show the reduced expression of PAI-1 in the PSMCs of mutant lungs compared with *arrows in panel b* (control). *m*, mesenchyme; *e*, epithelium. *Scale bar, 100 μ m for panels a and c, 23 μ m for panels b and d*.

istry (data not show). Collectively, these data indicate that the absence of *TBRII* in the lung mesenchyme does not alter lung epithelial cell identity and differentiation.

Expression of TGF- β Targets in *TBRII*^{Δ/Δ} Lungs—In wild-type embryonic lungs, α -smooth muscle actin-positive cells are found as rings of smooth muscle progenitor cells surrounding the columnar epithelium of the proximal airways (Fig. 4C, *panel a*). In contrast, we found reduced α -SMA-positive cells surrounding the dilated airways in the mutant lungs (Fig. 4C, *panel b*). This is the same layer of smooth muscle cells in which PAI-1 was found to be abundantly expressed in the wild-type lung and drastically reduced in *TBRII*^{Δ/Δ} lungs (Fig. 2C). Immunohistochemistry was also performed to determine potential changes in the expression or spatial localization of other mesenchymal genes including collagen type I and platelet/endothelial cell adhesion molecule (PECAM) known to be modulated by TGF- β (6, 34). Reduced levels of PECAM were found in the mutant lungs (Fig. 4C, compare *panels c* and *d*). Another marker of endothelial cell differentiation, Flk1 appeared to have the same level and distribution in the mutant lungs as wild type

(Fig. 4C, *panels e* and *f*). Collagen production is also under TGF- β control (6). Both in the wild-type control and the mutant lungs, collagen Type I was localized to the extracellular matrix surrounding both the distal and the proximal airways (Fig. 4C, *panels g* and *h*). No drastic alteration in collagen type I was observed in *TBRII*^{Δ/Δ} lungs suggesting that either TGF- β is signaling through utilization of type I receptor (homotetramer) or that collagen production and deposition may not be entirely TGF- β -dependent.

Expression of *Fgf10* in *TBRII*^{Δ/Δ} Lungs—Whole mount and section *in situ* hybridization were performed for a number of genes with established roles during lung morphogenesis. Because the shape and size of the airways can be regulated by FGF10 activity and its expression domain, we investigated the expression pattern of *Fgf10* in *TBRII*^{Δ/Δ} lungs. Whole mount *in situ* hybridization revealed increased expression, and expansion of the *Fgf10* domain in the mutant embryonic lungs (Fig. 5A, *panels e* and *f*). A clearer demonstration of this alteration was observed by *in situ* hybridization experiments on tissue sections (Figure 5A, compare *panels c* and *g*). In the control lungs, *Fgf10* mRNA was localized to mesenchymal cells adjacent to the growing

tip of the peripheral airways (Fig. 5A, *panels c* and *d*) consistent with previously reported results (12). In the mutant lungs, however, we found an expanded *Fgf10* expression domain and likely increased mRNA in the peripheral mesenchyme adjacent to the branching airways (Fig. 5A, *panels e–h*). This alteration in *Fgf10* expression domain may explain the phenotype of the *TBRII*^{Δ/Δ} lungs in which airways are significantly dilated. Two transcription factors, Foxf1 and Tbx4 have been found to stimulate *Fgf10* expression in the lung mesenchyme (35, 36). Consistent with this finding, *in situ* hybridization on tissue sections (Fig. 5B, *panels a, b, d, and e*) and real-time PCR (Fig. 5C) revealed increased transcripts for both in *TBRII*^{Δ/Δ} lungs compared with controls. Expression of another *Tbx* gene, *Tbx5* remained unchanged (Fig. 5B, *panels c* and *f*). These data support the finding that *Fgf10* is both increased and expanded in its expression domain in *TBRII*^{Δ/Δ} lungs.

Cross-talk between TGF- β and Shh Pathways—Shh is thought to negatively regulate *Fgf10* magnitude and distribution, thereby, controlling lung branching morphogenesis (20,

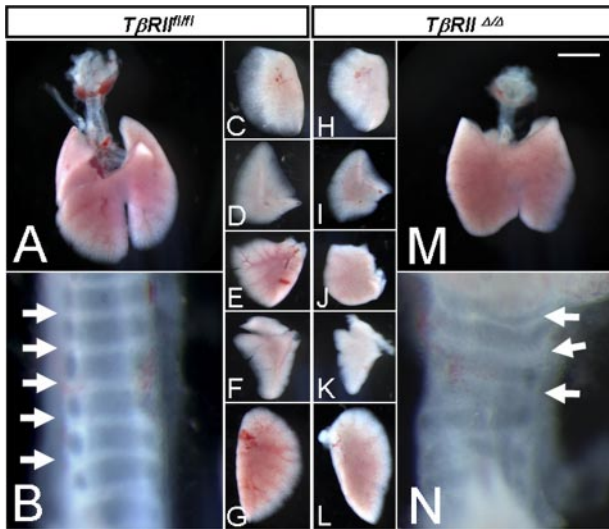


FIGURE 3. Gross morphology of $T\beta RII^{\Delta/\Delta}$ and $T\beta RII^{fl/fl}$ trachea and lungs from E15.5 embryos. *B* and *N*, tracheas. Arrows show abnormal number and shape of tracheal cartilage. *C* and *H*, right apical lobes. *D* and *I*, right middle lobes. *E* and *J*, right caudal lobes. *F* and *K*, accessory lobes. *G* and *L*, left lobes. Scale bar, 1.0 mm for *A* and *M*; 0.2 mm for *B* and *N*; 0.8 mm for *C–F*, *H–K*, and 1.2 mm for *G* and *L*.

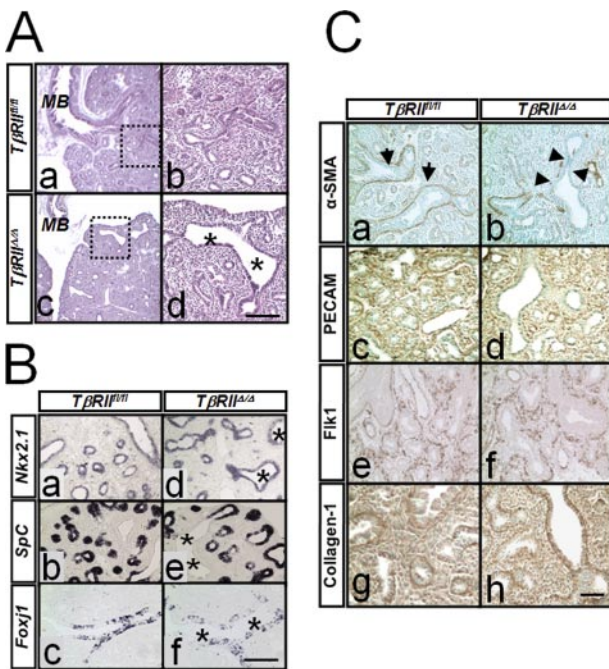


FIGURE 4. H & E staining and immunohistochemical analysis for lung developmental markers in $T\beta RII^{\Delta/\Delta}$ and control lungs. *A*, gross histology of lungs from $T\beta RII^{fl/fl}$ (panels *a* and *b*) and $T\beta RII^{\Delta/\Delta}$ (panels *c* and *d*) E15.5 embryos. Sagittal sections of lungs were analyzed by H & E staining. *MB*, mainstem bronchus. Asterisks show dilated proximal airways. Panels *b* and *d* are high magnification of areas within dotted squares in panels *a* and *c*, respectively. Scale bar, 330 μ m for panels *a* and *c*; 100 μ m for panels *b* and *d*. *B*, cell differentiation in $T\beta RII^{\Delta/\Delta}$ embryonic lungs. *In situ* hybridization for *Nkx2.1* (panels *a* and *d*), *SpC* (panels *b* and *e*), and *Foxj1* (panels *c* and *f*). Asterisks, dilated airways. Scale bar, 100 μ m. *C*, immunohistochemical analysis for α -SMA (panels *a* and *b*), PECAM (panels *c* and *d*), Flk1 (panels *e* and *f*), and Collagen1 (panels *g* and *h*) in E15.5 $T\beta RII^{fl/fl}$ and $T\beta RII^{\Delta/\Delta}$ lungs. Arrowheads in panel *b* show reduced expression of α -SMA surrounding the dilated airways of mutant lungs compared with arrows in panel *a* (control). Scale bar, 100 μ m.

37). The mechanistic connection between *Fgf10* and *Shh* remained unknown. We therefore examined *Shh* signaling by investigating the level and distribution of *Shh* and its down-

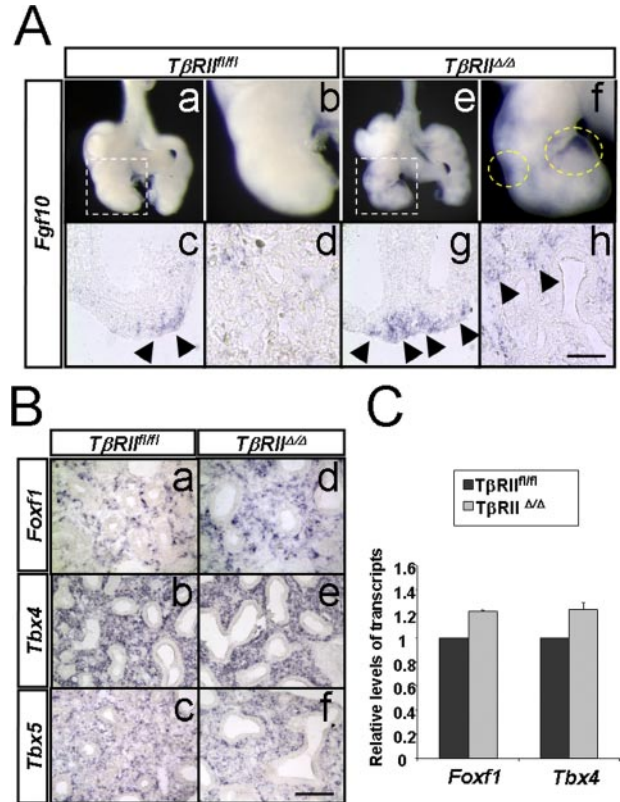


FIGURE 5. *In situ* hybridization analysis of *Fgf10* and its upstream transcriptional regulators in $T\beta RII^{\Delta/\Delta}$ and control lungs. *A*, whole mount (panels *a*, *b*, *e*, and *f*) and section (panels *c*, *d*, *g*, and *h*) *in situ* hybridization. Note expansion and increased *Fgf10* expression in $T\beta RII^{\Delta/\Delta}$ (panels *e–h*) compared with $T\beta RII^{fl/fl}$ (panels *a–d*) lungs. Scale bar, 2.2 mm (panels *a* and *c*); 1 mm (panels *b* and *d*); 100 μ m (panels *e–h*). *B*, section *in situ* hybridization for *Foxf1* (panels *a* and *d*), *Tbx5* (panels *b* and *e*), and *Tbx4* (panels *c* and *f*) in $T\beta RII^{\Delta/\Delta}$ and $T\beta RII^{fl/fl}$ (control) E15.5 lungs. Scale bar, 100 μ m. *C*, quantification of *Foxf1* and *Tbx4* mRNA by real-time PCR. Values are fold induction or repression, compared with $T\beta RII^{fl/fl}$ controls (arbitrarily adjusted to 1). *p* value, 0.004.

stream targets *Ptc* and *Gli-1* in the mutant lungs compared with the $T\beta RII^{fl/fl}$ controls. Whole mount and tissue section *in situ* hybridization showed similar levels and spatial localization of *Shh* mRNA in the control and mutant lungs (Fig. 6, *A*, *D*, *G*, and *J*). In contrast, there was a significant increase in the level of mRNA for both *Ptc* (Fig. 6, *B*, *E*, *H*, and *K*) and *Gli-1* (*C*, *F*, *I*, and *L*) in the $T\beta RII^{\Delta/\Delta}$ mutant lungs compared with the control. To validate the above *in situ* hybridization results, we used Northern blot analysis as shown in Fig. 7. Transcripts for *T\beta RII* were decreased by nearly 80% in $T\beta RII^{\Delta/\Delta}$ lung tissue, compared with controls. Other changes included a ~1.8-fold increase in *Ptc* and *Gli-1* mRNA and a 1.5-fold increase in *Fgf10*. The magnitude of *Shh* remained nearly the same in the mutant and control lungs confirming the *in situ* hybridization findings.

Because deletion of *T\beta RII* occurs specifically in the lung mesenchyme, one potential hypothesis is that TGF- β signaling through *T\beta RII* normally represses *Gli-1* and *Ptc* mRNA levels in the lung mesenchymal cell layer. To determine the validity of this hypothesis, we used cultured MRC5 cells, which are derived from normal lung mesenchymal cells of a 14-week-old male fetus, and assessed the impact of exogenous TGF- β treatment on *Gli-1* and *Ptc* mRNA levels by real-time PCR. In support of our *in vivo* observations, the results clearly showed that TGF- β represses steady state levels of both *Gli-1* and *Ptc*

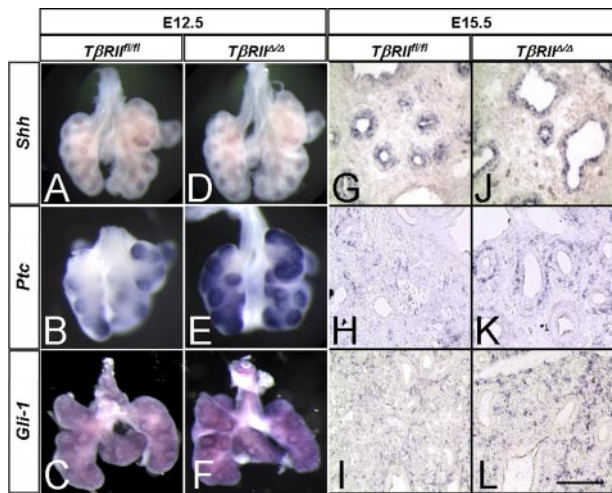


FIGURE 6. Whole mount and section *in situ* hybridization for components of the Shh pathway in *TBR1^{fl/fl}* and *TBR1 Δ/Δ* E12.5 (A–F) and E15.5 (G–L) lungs. Abundance of mRNA for both *Ptc* and *Gli-1* is increased in the mutant lungs (E, F, K, and L) compared with the control lungs (B, C, H, and I). Little if any change is detectable in the epithelial-localized *Shh* (A, D, G, and J). Scale bar, 2.2 mm (A, B, E, F, I, J); 100 μ m (C, D, G, H, K, L).

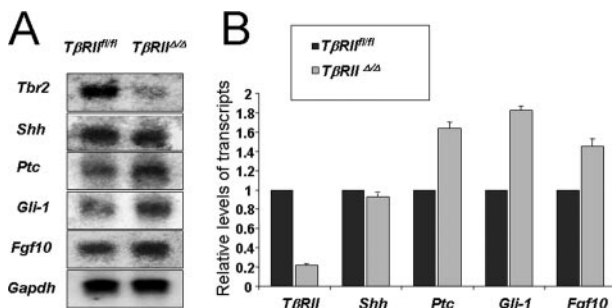


FIGURE 7. Quantification of mRNA changes in *TBR1 Δ/Δ* lungs. Total RNA from E15.5 *TBR1 Δ/Δ* and *TBR1^{fl/fl}* (control) embryonic lungs was used for Northern blot analysis (A), and the results were quantified by densitometry and normalized by GAPDH (B). Values are fold induction or repression, compared with *TBR1^{fl/fl}* controls (arbitrarily adjusted to 1).

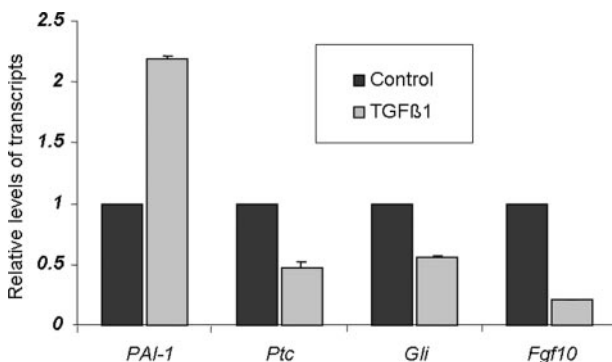


FIGURE 8. *In vitro* verification of the *in vivo* evidence that TGF- β is a negative regulator of Shh pathway. MRC5 cells were treated with either 200 ng/ml of TGF- β 1 or equivalent bovine serum albumin (control). Real-time PCR-quantified mRNA for *PAI-1* (positive control), *Ptc* and *Gli-1*. Values are fold induction or repression, compared with controls (adjusted to 1).

mRNAs by nearly 50% (Fig. 8). *Fgf10* has been proposed to be a target of Shh signaling in the lung (36) although this regulation has not been experimentally explored or demonstrated. In MRC5 cells, TGF- β treatment repressed *Fgf10* mRNA consistent with our *in vivo* observations in Fig. 5A. Thus, these *in vitro*

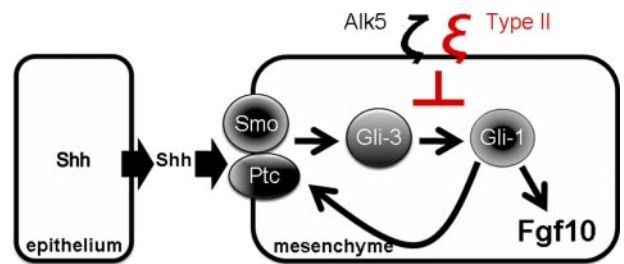


FIGURE 9. A hypothetical model for TGF- β ~Shh cross-talk in the developing lung. Shh is made in the lung epithelium. The Shh receptor complex, Ptc/smoothened is expressed on the cell surface of lung mesenchymal cells. Activation of Shh pathway leads to increased Gli-3 activity, which in turn stimulates *Gli-1* and *Ptc* transcription. TGF- β ligand acts through *TBR1* and as yet unknown intracellular mediators (e.g. Smads) to interfere with Shh signal transduction in mesenchymal cells, evidenced by reductions in both *Ptc* and *Gli-1* observed in this study.

results validate our *in vivo*-based conclusions and support a model for interactions between TGF- β and Shh signaling pathways (Fig. 9).

DISCUSSION

The purpose of the current study was to examine the consequences of interruption in mesenchymal *TBR1*-mediated TGF- β signaling on lung morphogenesis. To this end, we generated mice carrying mesodermal-specific deletion of the *TBR1* exon 3 by Dermo1-cre-driven recombination. *TBR1 Δ/Δ* fetuses died *in utero* due to multi-organ abnormalities. Examination of embryonic lungs revealed that mesenchymal abrogation of endogenous TGF- β signaling caused abnormalities in epithelial morphogenesis, indicating disruption of normal epithelial-mesenchymal communication that is central to lung development. Analysis of key mediators of this cross-talk showed alterations in components of the Shh pathway. Both *Ptc* and *Gli-1* as well as the transcription factor *Foxf1* were increased in the mesenchyme of the mutant lungs. *Shh* mRNA in the lung epithelium was unchanged. Thus, abrogation of *TBR1*-mediated signaling in the lung mesenchyme results in increased expression of *Shh* downstream targets (*i.e.* Shh signaling). To our knowledge, this is the first demonstration of cross-communication between the TGF- β and the Shh pathways during vertebrate embryonic development.

At least two major phenotypic abnormalities were readily observable in *TBR1* mutant lungs. First, the trachea of the mutant lungs showed abnormalities in both structure and number of cartilage. Both TGF- β and Shh are known to be involved in the induction of early cartilaginous differentiation of mesenchymal cells in the limb and in the spine. *In vitro*, treatment of human bone marrow-derived mesenchymal stem cells (MSCs) with either TGF- β or recombinant Shh induced expression of cartilage markers aggrecan, Sox9, CEP-68, and collagen type II and X (38). Thus, the abnormalities observed in tracheal cartilage formation in *TBR1 Δ/Δ* lungs can be explained as either a direct result of mesenchymal *TBR1* deletion or indirect effect of interruption in Shh signaling.

Mesodermal inactivation of *TBR1* also caused abnormal epithelial morphogenesis manifested as cystic, dilated bronchi (Figure 4A). Lung branching morphogenesis is strictly dependent on epithelial-mesenchymal communication between the

foregut endoderm and the mesodermal-derived splanchnic mesenchyme. The lung mesenchyme, via Fgf10 provides instructional signaling that directs epithelial morphogenesis. Targeted deletion of *Fgf10* results in profoundly abnormal lungs that lack structures distal to the main stem bronchi (13, 14). Dynamic changes in the magnitude and spatial distribution of *Fgf10* are critical to normal branching morphogenesis and are thought to be controlled by diffusible signals originating from the epithelial cells themselves. Shh is expressed in the distal epithelium, from where it activates signaling in the corresponding mesenchyme via its receptor, the patched (Ptch1)/smoothed (Smo) complex and their transcriptional effectors Gli-1, Gli-2, and Gli-3 (9, 11). Results from both *in vitro* and *in vivo* studies indicate that Shh negatively regulates Fgf10 production in the lung mesenchyme (20, 37). Thus, a current model of embryonic lung development is centered on epithelial Shh as playing a dual role in both activating and limiting mesenchymal signaling thereby "fine-tuning" the process of branching morphogenesis. In *Shh(-/-)* lungs, *Fgf10* mRNA is found diffusely throughout the mesenchyme, as a consequence of which the airways develop into large cystic structures and branching morphogenesis is severely disrupted (20). Although not as severe, the phenotypically abnormal, cystic bronchi observed in *TBR1* mutant lungs are similar to those observed in *Shh(-/-)* lungs (Fig. 4A). *In situ* hybridization revealed a clear expansion of the *Fgf10* domain in E15.5 *TBR1 Δ/Δ* lungs (Fig. 5A). Consistent with these results, *Foxf1* and *Tbx4*, two transcription factors that stimulate *Fgf10* production in the lung mesenchyme (35, 36), were also increased in the *TBR1 Δ/Δ* lungs (Fig. 5, B and C).

An abnormal characteristic of the cystic bronchial airways in *TBR1* lungs was the absence of PBSMCs (Fig. 4C). During development and in adult tissues, mesenchymal cells serve as precursors to diverse cell lineages, including PBSMCs. The function of TGF- β in promoting myofibroblast differentiation is well recognized (39, 40). Therefore, the absence of PBSMCs may be a direct impact of mesenchymal *TBR1* inactivation, suggesting that TGF- β signaling via the Type II receptor is required for PBSMC differentiation. The relatively high level of endogenous *TBR1* protein and the TGF- β target, PAI-1 in the PBSMCs (Figs. 1 and 2C) and drastic reduction of PAI-1 in response to mesodermal deletion of *TBR1* in these cells in the mutant lungs (Fig. 2C, panel d) supports the above hypothesis. In addition however, we showed previously that PBSMC progenitors express *Fgf10*, and the transcription factor *Pitx2*, both of which may be important in maintaining their undifferentiated status (41). These proliferating cells cease to express *Fgf10* before onset of differentiation into PBSMCs (42). Thus, increased levels, or spatial expansion of *Fgf10* distribution in *TBR1* mutants, may provide another, alternative mechanistic explanation for the absence of PBSMCs in the dilated bronchial airways; high levels of *Fgf10* may inhibit PBSMC differentiation.

TGF- β signaling is inhibitory to branching morphogenesis (21). Activation of TGF- β in mesenchymal cells markedly inhibits *Fgf10* expression (37, 43, 44). Positive transcriptional regulators of *Fgf10*, *Tbx4*, and *Foxf1* are controlled by Shh signaling that emanates from the branching epithelium. Recently, potential interactions between Shh and TGF- β pathways have

been examined in *in vitro* settings. Shh promotes motility and invasiveness of gastric cancer cells through TGF- β -mediated activation of the ALK5-Smad3 pathway (45). In contrast to our findings, TGF- β was shown to induce *Gli-1* and *Gli-2* expression in various human cell lines (46). Also, in transgenic mice overexpressing TGF- β 1 in the skin, *Gli-1* and *Gli-2* were elevated in a Smad3-dependent manner (46). This apparent discrepancy may suggest both cell type (skin *versus* lung) and dose-dependent specificity of TGF- β effect on adult and embryonic tissue. The relationship between TGF- β and Shh during organogenesis, the focus of the present study had remained unknown. In particular whether the inhibition of *Fgf10* in the lung mesenchyme in response to TGF- β involves the Shh pathway remained unknown. We found increased expression of *Ptc* and *Gli-1*, as well as the transcription factors *Tbx4* and *Foxf1* in the mesenchyme of *TBR1* mutant lungs, suggesting that endogenous TGF- β signaling via the type II receptor in the wild-type lung regulates Shh signal transduction in the mesenchyme. In previous studies, we found that Wnt5a alters Shh signaling by modulating *Shh* mRNA in the lung epithelium (30). In contrast, increased Shh signaling in the mesenchyme in response to *TBR1* inactivation occurs in the absence of changes in epithelial *Shh* mRNA (Figs. 6 and 7). Therefore, TGF- β does not directly interfere with Shh originating from the lung epithelium, but dampens its transduction within the target tissue, the lung mesenchyme. This interference by TGF- β may provide a potential mechanism by which Shh limits *Fgf10* expression domain in the lung mesenchyme during branching morphogenesis. *In vitro* studies using MRC5 cells, showed that treatment with TGF- β reduces the steady state level of *Fgf10*, concomitant with decreases in *Ptc* and *Gli-1* mRNAs (Fig. 8) thereby validating the *in vivo* observations. Based on the collective *in vivo* and *in vitro* findings, a hypothetical model depicting the mechanisms of TGF- β ~Shh cross-talk is proposed in Fig. 9. In the wild-type lung, TGF- β fine-tunes Shh signaling through modulation of its downstream targets, *Gli-1* and *Ptc*, which in turn may control the magnitude and spatial distribution *Fgf10*. In this manner, TGF- β signaling via *TBR1* participates in the response of mesenchymal cells to Shh signaling that originates from the lung epithelium.

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