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## HNF4 $\alpha$ -- role in drug metabolism and potential drug target?

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### Abstract

Hepatocyte nuclear factor 4 $\alpha$  (HNF4 $\alpha$ ) is a highly conserved member of the nuclear receptor superfamily of ligand-dependent transcription factors. It is best known as a master regulator of liver-specific gene expression, especially those genes involved in lipid transport and glucose metabolism. However, there is also a growing body of work that indicates the importance of HNF4 $\alpha$  in the regulation of genes involved in xenobiotic and drug metabolism. A recent study identifying the essential fatty acid linoleic acid (LA, C18:2) as the endogenous, reversible ligand for HNF4 $\alpha$  suggests that HNF4 $\alpha$  may also be a potential drug target and that its activity may be regulated by diet. This review will discuss the role of HNF4 $\alpha$  in drug metabolism, including the genes it regulates, the factors that regulate its activity, and its potential as a drug target.

### Introduction

HNF4 $\alpha$  (NR2A1), a highly conserved member of the nuclear receptor superfamily (NR) of ligand-dependent transcription factors (TFs), is known as a master regulator of liver-specific gene expression [1]. It was originally identified as an activity in rat liver that bound the *APOC3* gene and characterized as an orphan receptor as its ligand status was unknown [2]. It was subsequently identified as the gene mutated in Maturity Onset Diabetes of the Young 1 (MODY1), an inheritable form of non-insulin-dependent diabetes [3]. Therefore, HNF4 $\alpha$  was initially known for its role in carbohydrate and lipid metabolism in the liver and its role in insulin signaling in the pancreas. Subsequently, cytochrome P450 (*CYP*) genes involved in xenobiotic and drug metabolism were identified as targets of HNF4 $\alpha$  [4], although its role in those processes was eclipsed by that of ligand receptors. The recent identification of the endogenous ligand for HNF4 $\alpha$ , as well as several genome-wide studies that have greatly expanded the repertoire of HNF4 $\alpha$  targets, has renewed interest in the role of HNF4 $\alpha$  in drug metabolism. In this review, we will discuss the key findings on this topic and how they relate to the notion of targeting HNF4 $\alpha$  for drug discovery.

### Background on drug metabolism and HNF4 $\alpha$

The detoxification of xenobiotics and metabolism of drugs occurs primarily in the liver and consists of two phases. Phase I is carried out by hundreds of cytochrome P450 enzymes (CYP450s) and a handful of flavin-containing monooxygenases (FMOs) that add or expose a

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polar functional group to lipophilic compounds. Phase II, which consists of conjugation reactions that help eliminate Phase I products from the body, is carried out by glutathione-S-transferases (GSTs), UDP-glucuronosyltransferase (UGTs) and steroid-and bile acid-sulfotransferases (SULTs). In addition to acting on exogenous compounds, the Phase I and Phase II enzymes also act on endogenous compounds, such as steroids, bile acids and fatty acids, as well as drugs.

The expression of Phase I and Phase II genes is influenced by a wide variety of factors, including species, gender, age, diet, genetics and the environment [5]. Not surprisingly, many of the proteins responsible for turning on the expression of the Phase I and Phase II genes are TFs that are highly enriched in the liver. Some of those factors were originally identified as hepatocyte nuclear factors (HNFs) (e.g., HNF1, HNF2 (C/EBP $\alpha$ ), HNF3 (now FOXA), HNF6) while several other factors belong to the NR superfamily. HNF4 $\alpha$  belongs to both groups.

The human HNF4 $\alpha$  gene consists of 12+ exons and two promoters and gives rise to many splice variants/isoforms [1]. The proximal P1 promoter is active in the adult liver, kidney and intestine, where most of the xenobiotic/drug metabolism occurs, and gives rise to two major isoforms -- HNF4 $\alpha$ 1 and HNF4 $\alpha$ 2. Recent genome-wide location analyses of HNF4 $\alpha$  and other liver-enriched TFs (HNF1 $\alpha$ , HNF6 and C/EBP $\alpha$ ), showed that in hepatocytes HNF4 $\alpha$  is much more often found bound to the promoters of liver-specific genes than other HNFs [6,7]. Therefore, since one of the main functions of the liver is detoxification of foreign compounds, the notion that HNF4 $\alpha$  plays a major role in drug metabolism is a reasonable one.

## Phase I and Phase II genes regulated by HNF4 $\alpha$

### Phase I and Phase II target genes – identification by classical means

Several CYP450 genes have been identified as HNF4 $\alpha$  targets using classical means (e.g., promoter cloning, gel shift analysis, reporter assays, etc.) and have been reviewed previously [8] (Figure 1). Among the Phase I enzymes, CYP450 3A4 (*CYP3A4*) is arguably one of the most important as it is involved in the metabolism of nearly half of all drugs currently used. Early studies on *CYP3A4* gene regulation focused on ligand-activated NRs, pregnane X receptor (PXR; NR1I2) and constitutive androstane receptor (CAR; NR1I3) [9,10]. Subsequently, it was found that HNF4 $\alpha$  is required for both PXR- and CAR-mediated transcriptional activation of *CYP3A4* [11]. Tirona et al. examined a variety of NRs, including farnesoid X receptor (FXR, NR1H4), liver receptor homolog-1 (LRH1, NR5A2), liver X receptor  $\alpha$  (LXR1, NR1H3), retinoid X receptor  $\alpha$  (RXR $\alpha$ , NR2B1), and found HNF4 $\alpha$  to have the greatest effect on the *CYP3A4* promoter. Furthermore, when an HNF4 $\alpha$  binding site in the *CYP3A4* enhancer region was mutated, the ability of PXR and CAR to activate the *CYP3A4* promoter was eliminated [11]. Thus, HNF4 $\alpha$  plays a critical and central role in the regulation of this key Phase I gene.

HNF4 $\alpha$  has been shown to activate the expression of several other Phase I genes, including *CYP2C8*, *CYP2C9*, *CYP2C19*, *CYP7A1* and *CYP8B1* [8,12]. Knockdown of HNF4 $\alpha$  by antisense and siRNA in primary human hepatocytes also identified *CYP2A6*, *CYP2B6*, *CYP2D6*, *CYP3A4* and *CYP3A5* as targets of HNF4 $\alpha$  [13,14]. Classical techniques have also shown that HNF4 $\alpha$  can bind and activate *FMO1* promoter activity in concert with HNF1 $\alpha$  [15].

In terms of Phase II genes, HNF4 $\alpha$  also plays an important role in regulating the basal *SULT2A1* promoter, as well as synergizing with PXR and CAR [16]. The expression of the *UGT1A6* and *UGT1A9* genes were found to be positively correlated with HNF4 $\alpha$  and HNF1 $\alpha$  expression in human liver [17] and functional HNF4 $\alpha$  and HNF1 $\alpha$  binding sites were identified in the promoter regions of both UGT genes using several classical techniques [17–

20]. Several transporters that are critical for the elimination of drugs and toxicants (*ABCB1*, *ABCB11*, *ABCC2*, *SLCO1B1*, *SLC22A1*), have also been found to be decreased when HNF4 $\alpha$  is knocked down [14].

### Phase I and Phase II target genes – identification by genomic approaches

The sequencing of the human genome has led to the use of genome-wide approaches that are more high throughput and less biased than the classical approach to target gene identification. Chief among those techniques are genome-wide location analysis (ChIP-chip/seq) and expression profiling. Another less well known but highly complementary technique is protein binding microarrays (PBMs) [21]. PBMs are a high throughput *in vitro* DNA binding assay that allows for the identification of 1000's of distinct DNA binding sequences in a given experiment. We recently modified the PBMs to characterize the DNA binding specificity of native, full length HNF4 $\alpha$  in crude nuclear extracts [22]. This led to the identification of >1400 new binding sequences for HNF4 $\alpha$  that we then used to search the regulatory regions of human genes to identify potential new targets of HNF4 $\alpha$ . The PBM data were also used to train a Support Vector Machine (SVM) algorithm to predict additional HNF4 $\alpha$  binding sites with high accuracy. Finally, cross referencing with expression profiling data from an HNF4 $\alpha$  RNAi knockdown in a human liver cancer cell line (HepG2) and published HNF4 $\alpha$  ChIP-chip data identified >240 new direct, functional targets of HNF4 $\alpha$  [22]. The results for the Phase I and Phase II genes are given in Table 1, along with target genes identified by classical methods. All told there are at least 50 *CYP*, 7 *FMO*, 21 *GST*, 13 *SULT* and 19 *UGT* (~110 total) human genes involved in drug metabolism that are predicted or proven targets of HNF4 $\alpha$ .

## Factors that influence HNF4 $\alpha$ -mediated regulation of drug metabolism genes

### Transcriptional regulation network

Many NRs such as PXR, CAR, LXR, FXR, small heterodimer partner (SHP, NR0B2), Vitamin D receptor (VDR, NR1I1), chicken ovalbumin upstream promoter transcription factor (COUP-TF, NR2F1) and glucocorticoid receptor (GR, NR3C1) interact with HNF4 $\alpha$  to regulate the expression of drug metabolism genes in a complex fashion (Figure 1). For example, HNF4 $\alpha$  is involved in crosstalk with PXR and CAR on the promoters of the *CYP3A4* [23], *CYP2C8* [24], *CYP2C9* [25], *CYP7A1* [26,27] and *SULT2A1* [28] genes. While for several of these genes the crosstalk has not been characterized beyond requirements for specific NRs and their respective binding sites, on two genes – *CYP3A4* and *CYP7A1* -- the mechanisms have been explored. Ligand (rifampacin)-activated PXR recruits HNF4 $\alpha$  and co-activator SRC-1 to the *CYP3A4* promoter, thereby increasing its expression [23]. HNF4 $\alpha$  is one of the few NRs able to activate the human *CYP7A1* gene, a key player in bile acid synthesis (see [26]), but its ability to do so is negatively modulated by other NRs. In contrast to *CYP3A4*, a direct physical interaction between HNF4 $\alpha$  and PXR, that is enhanced by rifampacin, displaces the co-activator PGC1 $\alpha$  from HNF4 $\alpha$  resulting in down regulation of *CYP7A1* (and *CYP8B1*) gene expression [26,29]. Likewise, on *CYP7A1*, CAR competes with HNF4 $\alpha$  for binding both DNA response elements and co-activators GRIP1 and PGC1 $\alpha$ , thereby repressing the ability of HNF4 $\alpha$  to activate this gene [27]. The VDR also interacts directly with HNF4 $\alpha$  to suppress *CYP7A1* expression [30]. High levels of SHP, a NR that lacks a DNA binding domain, represses *CYP3A4* and *CYP7A1* gene expression by interacting with HNF4 $\alpha$  and PXR [23,31]. In contrast, rifampacin-activated PXR suppresses SHP, allowing for the crosstalk between HNF4 $\alpha$ , PXR and coactivators (PGC1, SRC1) to maximally induce *CYP3A4* [23]. FXR also suppresses *CYP7A1* through up regulation of SHP. However, down regulation of *CYP7A1* reduces bile acid synthesis and subsequently hepatic JNK activity that in turn increases HNF4 $\alpha$  expression [32,33]. Interestingly, HNF4 $\alpha$  not only co-regulates target genes with PXR, CAR and SHP but it also regulates their expression [14,22,23,34–36]. FXR gene is also direct target of HNF4 $\alpha$  while FXR protein can indirectly up regulate the expression of the *HNF4A*

gene [22,32] (Figure 2A). Finally, on *CYP2C9*, HNF4 $\alpha$  works with GR and NR coactivator 6 (NCOA6) to mediate maximum induction of the gene [37]. It is anticipated that similar complex networks involving multiple NRs will be found on one or more of the other HNF4 $\alpha$ -regulated Phase I and Phase II genes in Table 1.

In addition to protein-protein and protein-promoter interactions between HNF4 $\alpha$  and other NRs, there is also direct competition for binding to common response elements between HNF4 $\alpha$  and the COUP-TFs, orphan NRs that tend to repress transcription. Both COUP-TFs and HNF4 $\alpha$  bind DNA via direct repeats of a half site AGGTCA with a spacing of 1–2 nucleotides (DR1s and DR2s, respectively) and thus compete for regulation of the rat *Cyp2C* and human *CYP2D6* genes. COUP-TFs also repress the strong transactivation function of HNF4 $\alpha$  by binding additional response elements on the rat *Cyp3a1* and *Cyp3a23* promoters. In humans, COUP-TF2 inhibits HNF4 $\alpha$  transactivation activity on the *CYP3A4* promoter via both the DNA binding-dependent and –independent mechanisms [8] (Figure 1). Interestingly, HNF4 $\alpha$  and COUP-TF2 can transactivate the expression of each others' expression [38] (Figure 2A). Crosstalk between HNF4 $\alpha$  and other TFs, such as C/EBP $\alpha$  and Oct-1, has also been observed on *CYP2A6* [8]. More recently, two microRNAs have been identified that down regulate the expression of HNF4 $\alpha$  (miR-24 and miR-34a). These miRNAs are up-regulated by reactive oxygen species (ROS) and phorbol ester (PMA), both of which down regulate HNF4 $\alpha$  protein levels [39] (Figure 2B).

## Genetics

Mutations in HNF4 $\alpha$  response elements contribute to diseases such as hemophilia and MODY3 [4], while mutations in the HNF4 $\alpha$  P2 promoter result in MODY1 [3]. Likewise an altered HNF4 $\alpha$  binding site in a drug metabolism gene promoter could result in dysregulation of that gene and nucleotide changes in the HNF4 $\alpha$  P1 promoter could result in altered levels of HNF4 $\alpha$ 1/2 protein in the liver, kidney and intestine, which would in turn affect Phase I and Phase II gene expression (Figure 2B). Indeed, a single nucleotide polymorphism (SNP) at a putative HNF4 $\alpha$  binding site in the *CYP2B6* promoter is able to alter the level of expression of that gene [40]. A SNP has also been identified in the HNF4 $\alpha$  coding region that affects expression of the *CYP2D6* gene that metabolizes a wide variety of drugs including beta blockers for heart disease and Prozac and other drugs for mental disorders [41]. Numerous genetic variations resulting in altered levels of Cyp2D6 have also been associated with altered metabolism of 4-hydroxy tamoxifen and responsiveness to treatment for breast cancer [42]. While it is not known if HNF4 $\alpha$  is directly involved in those effects, it is possible that HNF4 $\alpha$  activity in the liver could affect one's response to chemotherapeutic agents such as tamoxifen via Cyp2D6. Therefore, it will be of great interest to identify SNPs in HNF4 $\alpha$  response elements in other Phase I and Phase II promoters, and to further characterize SNPs in the promoter and coding region of the *HNF4A* gene itself (Figure 2B).

## Gender

In humans, it is estimated that there is a 40% difference in pharmacokinetics between men and women [43]. Much of this difference could be due to differential expression of drug metabolism genes between genders. *CYP3A4*, for example, is expressed at a higher level in women than in men [44], resulting in higher clearance rates of CYP3A4-targeted xenobiotics in women [45]. While these differences in human have not yet been attributed to HNF4 $\alpha$ , in rodents HNF4 $\alpha$  has been found to be a key player in gender-specific gene expression in liver and to be involved in crosstalk with STAT5b, a key intermediary in the growth hormone-mediated sexual dimorphism seen in hepatic gene expression [46,47]. An additional layer of complexity is achieved by the fact that STAT5b and HNF4 $\alpha$  also co-regulate the expression of TFs that regulate gender-specific *Cyp* genes. For example, in response to growth hormone stimulation, STAT5b and HNF4 $\alpha$  bind and activate the promoter of HNF6 (*Onecut1*) [48], a female-

predominant transcription factor [49] that positively regulates the female-specific gene *Cyp2c12* [50,51].

### Environmental factors

The liver is exposed to a wide variety of toxic agents, many of which damage DNA and result in increased levels of the tumor suppressor protein p53. We previously showed that p53 inhibits the transactivation function of HNF4 $\alpha$ 1 [52] and suppresses the HNF4 $\alpha$  P1 promoter in human liver cells exposed to doxorubicin [53]. Other cellular stress conditions known to up regulate p53 expression, such as hypoxia [54] and arsenic trioxide [55], also down regulate the expression of HNF4 $\alpha$ , and hence presumably affect Phase I and Phase II gene expression. We have also shown that protein kinase C (PKC) phosphorylates the DNA binding domain (DBD) of HNF4 $\alpha$ , thereby inhibiting its ability to bind DNA and increasing its degradation. Importantly, the PKC site in the HNF4 $\alpha$  DBD is completely conserved in all non steroid NRs, suggesting that other NRs such as CAR, RXR, FXR and COUP-TF, could also be affected by PKC activators [56]. This suggests that compounds such as phorbol esters that activate PKC could also alter the regulation of drug metabolism enzymes via HNF4 $\alpha$  and other NRs. Finally, while HNF4 $\alpha$  mRNA levels do not appear to be affected by the circadian clock, as are many other NR mRNAs [57], HNF4 $\alpha$  protein does interact with Period (PER), a key component of the circadian clock regulatory pathway [58]. This opens the possibility that HNF4 $\alpha$  activity may also be affected by the light/dark cycle.

### Diet and the HNF4 $\alpha$ Ligand

Diet can influence the levels and hence activity of HNF4 $\alpha$  in several ways. HNF4 $\alpha$  protein and mRNA levels are up regulated in the liver during fasting [59], as is the potent HNF4 $\alpha$  co-activator PGC1 $\alpha$  [60]. The effect on HNF4 $\alpha$  is due in part to increased levels of insulin after feeding, which up regulates the sterol response element binding proteins SREBPs which in turn down regulate the expression of the HNF4 $\alpha$  P1 promoter [59]. The energy/metabolic sensing kinase AMPK also phosphorylates both HNF4 $\alpha$  and PGC1 $\alpha$  thereby altering their activity [61,62]. Finally, bile acids, as a product of dietary metabolism, alter HNF4 $\alpha$  expression in a complex fashion [32,33]. Hence, nutritional status can be expected to affect the transcription of many Phase I and Phase II genes via HNF4 $\alpha$ .

One of the most controversial issues regarding HNF4 $\alpha$ , and other orphan NRs, has been whether they respond to ligands [63]. HNF4 $\alpha$  was known as a constitutively active NR that did not require the addition of exogenous ligand in order to activate transcription [2,64], but the identity of its endogenous ligand remained elusive. The crystallographic structures of bacterially expressed HNF4 showed that it did indeed contain a hydrophobic ligand binding pocket that could accommodate lipophilic compounds [65,66]. However, since those compounds, a mixture of fatty acids, bound HNF4 in an irreversible fashion, the ligand status and potential for HNF4 as a drug target remained in doubt. These issues were resolved once the endogenous HNF4 $\alpha$  ligand expressed in the appropriate physiological context – mammalian tissues and cells – was identified. Using an unbiased and highly sensitive approach (affinity isolation followed by mass spectrometry, AIMS), linoleic acid (LA, C18:2 $\omega$ 6) was found bound to HNF4 $\alpha$  in the livers of fed but not fasted mice [36]. This made physiological sense as LA is an essential polyunsaturated fatty acid that must be obtained from the diet. Furthermore, it was shown that LA binds mammalian-expressed HNF4 $\alpha$  in a reversible fashion, suggesting that it could be available for drug targeting. While a specific transactivation function of LA on HNF4 $\alpha$ , was not observed, a modest but consistent decrease in HNF4 $\alpha$  target gene expression in the presence of LA that was associated with a decrease in HNF4 $\alpha$  protein levels was noted [36]. These findings raise the intriguing possibility that different diets containing different amounts of LA could affect HNF4 $\alpha$  levels, and hence drug metabolism, although this remains to be proven *in vivo*.

## HNF4 $\alpha$ as a drug target?

While the function of the endogenous HNF4 $\alpha$  ligand remains uncertain, what is clear is that HNF4 $\alpha$  contains a ligand binding pocket that is occupied in a reversible fashion dependent upon the feeding state of the host. Hence, it is possible that one could design a drug that could bind in the pocket of HNF4 $\alpha$  and alter its ability to activate transcription. However, since HNF4 $\alpha$  regulates so many Phase I/II and other genes in the liver, there is a high likelihood of side effects, unless one can develop a drug that is specific to a given HNF4 $\alpha$  target. But this is not a new problem, nor is it unique to HNF4 $\alpha$ . Any NR or TF with multiple targets faces similar problems. The trick will be to develop drugs that are specific to HNF4 $\alpha$  on one or at most a few genes. This specificity could be found in the DNA sequence of the response elements that we now know can vary greatly between different target genes [22].

## Perspectives

It is now evident that HNF4 $\alpha$  is a key player in the regulation of genes involved in drug metabolism. Indeed, since HNF4 $\alpha$  is one of the most ancient of the NRs and since *Cyp* genes have equally ancient evolutionary origins [63], it is possible that HNF4 $\alpha$  was the first NR to control the expression of this critical gene family in animals. The regulation of these genes, however, has evolved, just as the genes themselves. In addition to HNF4 $\alpha$ , that regulation now involves many additional NR, and other TFs, in a complex network of synergy, inhibition and mutual regulation that is affected by a variety of internal factors such as SNPs and external factors such as diet and environmental stress. Detailed knowledge of this network and the factors that influence it is essential for understanding individual responses to drug treatment.

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livers of five vertebrates, including man. The results provide a global view of potential HNF4 $\alpha$  and C/EBP $\alpha$  target genes and is an invaluable resource.

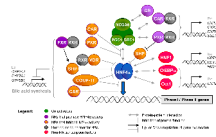
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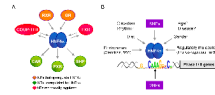
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**Figure 1. Central role of HNF4α in the regulation of Phase I and Phase II genes**

Depicted are the NRs and liver-enriched transcription factors known to interact with HNF4α protein (an obligate homodimer) either physically and/or functionally to regulate the various Phase I/II genes shown. See Table 1 for a complete list of potential Phase I/II targets of HNF4α. See Figure 2 for additional interactions on the level of gene expression. See main text for references and additional detail.



**Figure 2. Factors affecting HNF4 $\alpha$  expression and function**

**A.** The *HNF4A* gene is at the center of a complex transcriptional network of NR genes that are involved in xenobiotic and drug metabolism. All interactions are on the HNF4 $\alpha$  P1 promoter except COUP-TF2 that acts on both the P1 and P2 promoter. See main text and [1] for references.

**B.** Shown are broad categories of factors known to regulate the activity and level of HNF4 $\alpha$  that could ultimately affect the expression of Phase I and Phase II genes and hence alter one's ability to metabolize drugs. SNPs in the *HNF4A* gene as well as in the response elements bound by HNF4 $\alpha$  protein could also account for some of the variability in drug metabolism among individuals. Shown is the position weight matrix for strong binders from [22]. ROS, reactive oxygen species. ?, effects not proven but are likely. See main text for references and additional detail.

Table 1

Verified and predicted HNF4 $\alpha$  Phase I and Phase II human target genes<sup>1</sup>

Family	Gene Symbol	Family	Gene Symbol	Family	Gene Symbol	Family	Gene Symbol
<b>Phase I</b>							
CYP450	CYP1A1*	CYP450	CYP7A1	GST	GSTA1	SULT	SULT1A1
	CYP1A2	(cont)	CYP7B1*		GSTA2*		SULT1A2
	CYP1B1*		CYP8B1		GSTA3*		SULT1A3
	CYP2A6		CYP11A1*		GSTA4*		SULT1A4
	CYP2A7*		CYP11B1*		GSTA5*		SULT1C1
	CYP2A13*		CYP11B2*		GSTCD*		SULT1C2*
	CYP2B6		CYP17A1*		GSTK1*		SULT1C3*
	CYP2C8		CYP19A1*		GSTM1		SULT1C4*
	CYP2C9		CYP20A1*		GSTM2*		SULT1E1
	CYP2C19		CYP21A2*		GSTM1L*		SULT2A1
	CYP2D6		CYP24A1		GSTM4		SULT2B1*
	CYP2J2*		CYP26A1*		GSTM5		SULT4A1*
	CYP2R1*		CYP27A1*		GSTO1*		SULT6B1*
	CYP2S1*		CYP27B1*		GSTO2*		
	CYP3A4		CYP27C1*		GSTP1*	UGT	UGT1A1
	CYP3A5		CYP27E1*		GSTP2*		UGT1A3
	CYP3A7		CYP27F1*		GSTT1*		UGT1A4
	CYP3A43*		CYP39A1*		GSTT2*		UGT1A5
	CYP4A11*		CYP46A1*		GSTT2B*		UGT1A6
	CYP4A22*		CYP51A1*		GSTTP1*		UGT1A7
	CYP4B1*				GSTZ1		UGT1A8
	CYP4F2*	FMO	FMO1				UGT1A9
	CYP4F3*		FMO2*				UGT1A10

Family	Gene Symbol	Family	Gene Symbol	Family	Gene Symbol	Family	Gene Symbol
	<i>CYP4F8</i> *		<i>FMO3</i> *				<i>UGT2A1</i> *
	<i>CYP4F11</i> *		<i>FMO4</i> *				<i>UGT2A2</i> *
	<i>CYP4F12</i>		<i>FMO5</i>				<i>UGT2A3</i>
	<i>CYP4F22</i> *		<i>FMO6P</i> *				<i>UGT2B4</i> *
	<i>CYP4V2</i> *						<i>UGT2B7</i> *
	<i>CYP4X1</i> *						<i>UGT2B10</i> *
	<i>CYP4Z1</i> *						<i>UGT2B11</i> *
							<i>UGT2B28</i> *
							<i>UGT3A1</i> *
							<i>UGT8</i> *

*I* Target genes identified by both classical promoter analysis (see text for references) and genome-wide techniques [22]; see Supplemental Tables S7A and S7B for PBM and SVM-predicted HNF4 $\alpha$  binding sites in -2kb to +1 kb relative to the transcription start site (+1), including location and sequence, and Table S3A for expression profiling data of HNF4 $\alpha$  RNAi in HepG2 cells [22]. See HNF4 Motif Finder (<http://hrmotif.ucr.edu/fuzzhtmlform.html>) to identify additional sites.

\* Predicted targets for which an HNF4 $\alpha$  binding site has been identified in -2kb to +1 kb but for which no functional data (e.g., reporter assays, expression profiling) are currently available. These genes require additional verification. Genes without an asterisk have been verified by expression profiling, RT-PCR [14,22,36] or by classical approaches (see text for references). Not listed are transporters (*SLC* genes) or pumps (*ABC*) that also play a role in toxicant/drug elimination (see [14;22]).