



Published in final edited form as:

Cell Cycle. 2009 August 15; 8(16): 2502–2508.

The Akt kinases: isoform specificity in metabolism and cancer

Eva Gonzalez, PhD and Timothy E McGraw, PhD*

Department of Biochemistry, Weill Cornell Medical College, 1300 York Avenue, New York, NY 10065

Eva Gonzalez: evg2005@med.cornell.edu

Abstract

The Akt (PKB) protein kinases are critical regulators of human physiology that control an impressive array of diverse cellular functions, including the modulation of growth, survival, proliferation and metabolism. The Akt kinase family is comprised of three highly homologous isoforms: Akt1 (PKB α), Akt2 (PKB β) and Akt3 (PKB γ). Phenotypic analyses of Akt isoform knockout mice documented Akt isoform specific functions in the regulation of cellular growth, glucose homeostasis and neuronal development. Those studies establish that the functions of the different Akt kinases are not completely overlapping and that isoform-specific signaling contributes to the diversity of Akt activities. However, despite these important advances, a thorough understanding about the specific roles of Akt family members and the molecular mechanisms that determine Akt isoform functional specificity will be essential to elucidate the complexity of Akt regulated cellular processes and how Akt isoform-specific deregulation might contribute to disease states. Here, we summarize recent advances in understanding the roles of Akt isoforms in the regulation of metabolism and cancer, and possible mechanisms contributing to Akt isoform functional specificity.

Keywords

Akt; isoforms; metabolism; cancer; glucose homeostasis; GLUT4; signaling specificity; cellular growth; Akt1; Akt2

Akt activation by extracellular stimuli

The serine/threonine protein kinase Akt is one of the most versatile kinases in the human kinome. Work from numerous laboratories over the last 10 years has elucidated the basic mechanisms underlying the activation of the Akt kinase and has identified a number of substrates that mediate Akt action (for review see references 1,2). Akt activity is modulated downstream of phosphatidylinositol 3 (PI3) kinase in response to extracellular stimuli following a multistep process (Fig 1A). Akt, by virtue of an amino-terminal pleckstrin homology (PH) domain, is recruited to sites of the plasma membrane containing increased PI(3,4,5)P₃ or PI(3,4)P₂ produced by PI3-kinase. Once recruited to the plasma membrane, Akt is phosphorylated at two sites, one within the T-loop of the catalytic domain (Thr³⁰⁸, Akt1 residue) by the phosphoinositide-dependent kinase 1 (PDK1) and within the carboxyl terminal hydrophobic domain (Ser⁴⁷³, Akt1 residue) by the mammalian target of rapamycin complex 2 (mTORC2) 3,4. Targeting of Akt to the plasma membrane, independent of external stimuli (or PI3 kinase activity), results in Akt activation, strongly suggesting that activation is limited predominantly by recruitment to the plasma membrane rather than the

*Corresponding author: Timothy E. McGraw, PhD, temcraw@med.cornell.edu, Tel: 212 746 4982, Fax: 212 746 8875.

direct modulation of PDK1 and/or mTORC2 activities. Akt is transiently localized to the plasma membrane during activation 5,6 and once activated, Akt phosphorylates substrates distributed throughout the cell to regulate multiple cellular functions (Fig 1A)(see reference ² for review).

Akt isoform-specific signaling

Akt kinases control an array of diverse functions including cell growth, survival, proliferation and metabolism, and one critical unresolved question is how Akt activity is specified to discrete cellular functions in response to extracellular stimulus. Recent studies of Akt isoform-specific knockout mice suggest that Akt signaling diversity might in part be due to different functions of the three Akt family members Akt1, Akt2 and Akt3 ⁷ (Fig 1B). Akt1 knockout mice are smaller than their wild-type counterparts and Akt1-null cells display higher rates of apoptosis, indicating a critical role for Akt1 in cell survival ^{8,9}. Akt2 knockout mice develop a type 2 diabetes-like phenotype, and cells derived from those mice show impaired glucose utilization ^{9,10}, suggesting a central role for Akt2 in the maintenance of glucose homeostasis. A role for Akt3 in brain development has been proposed based on the fact that Akt3 knockout mice display impaired brain development¹¹. Although those data strongly support the hypothesis that different cellular processes are primarily under the control of the different Akt isoforms, phenotypic analyses of double Akt isoform knockout mice reveal some overlap (or compensation) among the isoforms. Simultaneous deletion of Akt1 and Akt2 causes lethality shortly after birth ¹², Akt1 and Akt3 double knockout mice are embryonic lethal ¹³, whereas mice with a single functional allele of Akt1 (Akt1^{+/-}Akt2^{-/-}Akt3^{-/-}) are viable despite reduced body weight and insulin and glucose intolerance ¹⁴. All together, these studies provide genetic evidence for overlapping as well as specific roles of the Akt family members. Further studies of Akt isoform conditional and tissue specific knockout mice, as well as in vitro studies of Akt isoform function in different cell types will be required to develop a complete and integrated understanding of the spectrum of common and isoform specific roles of Akt kinases.

The striking observation that despite their high homology, Akt isoforms regulate distinct physiological functions leads to the critical question of how Akt isoform-specific signaling is achieved. A priori, different mechanisms could dictate or contribute to Akt isoform function distinctions (Fig 1C). Those modes of regulation might include:

1. Distinct tissue distribution of the Akt isoforms.
2. Differential activation of the Akt isoforms by extracellular stimuli (that is, cues like the amplitude or timing of PI3 kinase activity triggered by different stimuli could be translated into differential activation/regulation of the Akt isoforms).
3. Distinct *intrinsic* catalytic activity of the Akt isoforms to phosphorylate substrates.
4. Cell context-specific factors. Examples of this mode of regulation include isoform specific subcellular compartmentalization that determines access to substrates and/or specific adaptor proteins that confer specificity to substrate selection.

Elucidating the individual and combinatorial contributions of these mechanisms to Akt isoform functional specificity will be required to understand the complexity of Akt-mediated signaling and to facilitate the development of therapeutic approaches directed to interfere with Akt isoform-specific functions. Akt signaling is at the center of growth and metabolic control, and alterations of Akt signaling are underlying causes of two of the most prominent diseases in developed countries, cancer and type 2 diabetes. Here we focus on these disease models to summarize some of the recent advances and remaining challenges regarding the roles and regulation of Akt isoform-specific signaling.

Akt isoform-specific signaling in metabolism

To date, the regulation of glucose homeostasis is one of the best-characterized Akt-mediated processes with strong isoform specificity. Insulin regulates whole body glucose homeostasis by inducing the uptake of glucose into muscle and fat cells and by inhibiting hepatic glucose output, both of which are under the regulation of Akt signaling¹⁵. To regulate glucose disposal insulin-induces the redistribution of the GLUT4 glucose transporter from intracellular compartments to the plasma membrane of fat and muscle cells¹⁶. The increase in plasma membrane GLUT4 promotes increased flux of glucose into those cells in a concentration dependent manner. As noted above, targeted deletion of Akt2 in mice, but not Akt1 or Akt3, results in fasting hyperglycemia, hyperinsulinemia, glucose intolerance and impaired glucose uptake by fat and muscle cells^{10,17}. Consistent with a requirement for Akt2 in control of glucose metabolism, a mutation in the catalytic domain of Akt2 causes severe insulin resistance and diabetes in humans¹⁸. In vitro studies showed that transient siRNA-mediated down-regulation of Akt2 inhibits insulin-induced GLUT4 translocation to the plasma membrane of 3T3-L1 adipocytes^{19–21}, suggesting that impaired glucose transport in Akt2-null adipocytes is at least in part explained by defective regulation of GLUT4 trafficking in those cells.

How is this Akt2 isoform signaling specificity achieved?

Two of the most likely mechanisms, tissue-specific isoform expression and isoform-specific activation, do not account for the selective requirement for Akt2 in the control of GLUT4 trafficking to the plasma membrane. Overexpression of Akt1 in Akt2-deficient brown fat adipocytes did not rescue the impairment in insulin-mediated glucose transport²² nor does over-expression of Akt1 rescue defects in GLUT4 translocation to the plasma membrane of adipocytes induced by siRNA knockdown of Akt2²¹. Those findings strongly argue that the distinct functional role for Akt1 and Akt2 in the regulation of glucose transport in fat cells is not determined by selective expression of Akt isoforms. Insulin activates both Akt1 and Akt2 in 3T3-L1 and primary rat adipocytes^{21,23}, demonstrating that the failure of Akt1 to regulate GLUT4 translocation to the plasma membrane is not due to differential activation of the Akt isoforms by insulin. Thus, differences in Akt isoform-specific regulation of glucose transport in fat cells are determined post Akt activation, at the step of substrate selection/phosphorylation.

How is this substrate selectivity achieved?

One possibility is that Akt isoform substrate specificity is determined by cell context-specific factors. For example, isoform-specific subcellular compartmentalization could determine access to substrates. The first hints that differential localization might have a role in controlling isoform specific signaling were provided by biochemical fractionation of adipocytes in which Akt2 but not Akt1 was found associated with GLUT4 vesicles^{24,25}. Recent studies in intact cells provide compelling evidence that differences in subcellular localization are primary in determining Akt2-specific control of GLUT4 trafficking in fat cells (Fig 2). Using fluorescence reporters and total internal reflection fluorescence microscopy, we have observed that insulin induces a preferential accumulation of Akt2, relative to Akt1, at the plasma membrane of adipocytes. Changes that reduce the accumulation of the Akt2 kinase domain at the plasma membrane of insulin-stimulated adipocytes without affecting kinase activation, interrupted signaling to GLUT4, indicating that the selectivity is not intrinsic to the Akt2 kinase domain²¹. These data suggest that the greater accumulation of Akt2 at the plasma membrane is a contributing factor to isoform – specific signaling to GLUT4. In support of that hypothesis, expression of an Akt1 mutant with enhanced plasma membrane association, Akt1^{E17K}²⁶, was sufficient to induce GLUT4 translocation and overcome Akt isoform specificity in the regulation of GLUT4 trafficking

²¹. These findings document that Akt1 can regulate substrates involved in GLUT4 translocation when it accumulates at the plasma membrane to a similar degree as Akt2, and thereby establish that stimulus-controlled differences in subcellular localization of Akt isoforms contribute to Akt isoform-specific signaling. Importantly, aberrant Akt subcellular localization, such as this caused by the E17K point mutation, can confer Akt2-like signaling to Akt1 resulting in the loss of isoform-specific signaling. These conclusions are in agreement with previous work in which Akt1 engineered to be constitutively targeted to membranes via addition of a myristoyl group ²⁷ was shown to induce GLUT4 translocation.

The increased accumulation of Akt2 at the plasma membrane correlates with Akt2-specific substrate selection/phosphorylation. The best characterized downstream effector of Akt required for regulation of GLUT4 trafficking to the plasma membrane is the RabGAP AS160 (also known as TBCD1D4) ^{28–30}. Phosphorylation by Akt leads to inhibition of the AS160 GAP activity towards Rab proteins, including Rab8, Rab10, and Rab14 ³¹. The subsequent activation of these Rab proteins facilitates the translocation of GLUT4 to the plasma membrane of adipocytes and muscle cells ^{32,33}. siRNA-mediated Akt isoform specific down-regulation revealed a preferential role for Akt2 in the phosphorylation of AS160 in response to insulin, both in adipocytes ²¹ and muscle cells ³⁴. Furthermore, Akt2 but not Akt1 localizes at the plasma membrane with AS160, indicating that this might be the site of AS160 regulation by Akt2 in insulin-stimulated cells ²¹.

The requirement for Akt activity at the plasma membrane to regulate glucose transport is consistent with previous studies that proposed a role for Akt in the regulation of the late stages of GLUT4 vesicle exocytosis, including the docking and fusion of GLUT4 vesicles with the plasma membrane ^{35–37}. Although AS160 is the best characterized Akt substrate involved in GLUT4 trafficking, the phosphorylation of at least two other substrates believed to have roles in GLUT4 trafficking, Myosin Va and the syntaxin interacting protein Synip, have also been linked specifically to Akt2 ^{38–39}.

The molecular determinants of Akt2 preferential accumulation at the plasma membrane have not been elucidated. Akt plasma membrane targeting is mediated through interactions of its PH domain with PI(3,4,5)P₃ and PI(3,4)P₂ generated by PI3kinase. However, exchange of Akt1 PH domain by that of Akt2, does not confer Akt1 enhanced plasma membrane association, documenting that distinct insulin-induced Akt2 plasma membrane accumulation does not rely solely on Akt2 PH domain ²¹. It is possible that differences in post-translational modifications in the Akt isoforms might contribute to the differences in compartmentalization. This type of regulation contributes to the discrete subcellular localization and functional specificity of the Ras isoforms and members of the Src family of kinases ^{40,41}. However, to date Akt isoform-specific posttranslational modifications have not been described.

A growing number of proteins that interact with and regulate Akt function are being described (for review see references 42,43). However, Akt isoform specific binding partners that regulate subcellular location and substrate recognition are almost unknown. Schenck and colleagues ⁴⁴ reported that Akt interaction with the Rab5 effector APPL1 regulates the activity of Akt and its downstream signaling specificity from an endosomal compartment with implications in vertebrate development. Interestingly, APPL1 interacts with Akt2 in unstimulated adipocytes, and down-regulation of APPL1 in adipocytes impairs insulin-induced GLUT4 translocation and glucose transport, indicating that APPL1 might facilitate Akt2 signaling to GLUT4 ⁴⁵. However, whether APPL1 also regulates Akt1-mediated signaling in adipocytes and muscle cells, and the mechanism by which APPL1 regulates Akt2-mediated GLUT4 translocation are unknown. Recently Ding and colleagues identified ClipR-59, a member of the Clip-170 family, as a scaffolding protein that interacts with Akt

and stabilizes it at the plasma membrane of insulin-stimulated adipocytes⁴⁶. ClipR-59 preferentially binds to Akt2, and down-regulation of ClipR-59 impairs insulin-induced GLUT4 translocation and Akt-mediated phosphorylation of AS160. These studies, together with our recent observations underscore the role of insulin-mediated Akt2 plasma membrane accumulation in GLUT4 regulation and suggest ClipR-59 as a putative regulator of Akt isoform functional specificity in insulin-regulated glucose uptake.

These recent studies have started to uncover the molecular mechanisms that determine Akt isoform signaling specificity in the regulation of glucose homeostasis. The availability of cell-lines derived from mice lacking individual Akt isoforms, combined with the use of siRNA, proteomics, mass spectrometry and live-cell fluorescence microscopy techniques will facilitate the identification of Akt isoform-specific binding partners and signaling networks that regulate Akt-isoform signaling diversity in glucose homeostasis. Whether these modes of regulation will also function in non-insulin responsive cells or in response to other physiological stimulus will also need to be addressed. Due to the intricate relationship between insulin-responsive tissues in the maintenance of glucose homeostasis, the future development of tissue specific Akt isoform knock-ins and knock-outs will also be required to evaluate the contribution of Akt isoform signaling in different tissues to the systemic regulation of glucose homeostasis and insulin sensitivity.

Akt isoform-specific signaling in cancer

Akt is one of most frequently hyperactivated kinases in human cancers⁴⁷, which perhaps is not unexpected considering that Akt modulates cell proliferation, survival, intermediate metabolism, growth, invasiveness and angiogenesis, all of which are hallmarks of cancer. Interestingly, there is evidence for hyperactivation of specific Akt isoforms in certain tumors, suggesting that in some cases there is Akt isoform-specificity to cell transformation. Aberrant activation of Akt can occur by different mechanisms including amplifications, overexpression, mutations in Akt genes, and/or alterations in Akt upstream regulators⁴⁸, and as briefly discussed below, there are examples of all these modes of Akt hyperactivation in tumors.

Activation of specific Akt isoforms in cancer

The Akts are produced from three distinct genes and therefore one mechanism for isoform-specific increased expression is gene amplification. AKT2 gene amplification has been reported in ovarian and pancreatic cancers^{49,50}, AKT1 amplification has been reported in gastric cancers⁵¹, and AKT3 amplification in melanoma⁵². Overexpression of specific Akt isoforms independent of gene amplification has also been found to differ among different cancers. For example, Akt2 has been found to be upregulated in hepatocellular carcinomas and colorectal cancers^{53,54}, Akt1 in breast cancers⁵⁵ and Akt3 mRNA has been shown to be upregulated in estrogen receptor-negative breast tumors⁵⁶ and melanoma⁵². Recently, a somatic activating mutation in Akt1 PH domain was identified in human ovarian, breast and colorectal cancers, in that study no changes in Akt2 or Akt3 were found²⁶; however an equivalent mutation in Akt3 has recently been described in human melanoma cancers⁵⁷. The correlation between specific tumors and the hyperactivation of specific Akt isoforms raises the possibility that Akt isoform-specific signaling might contribute to the development of certain tumors; however, additional studies are required to test this hypothesis.

Akt activity can also be altered by changes in upstream regulatory proteins. Examples include hyperactivation of the PIK3CA gene (which encodes a catalytic subunit of PI3-kinase), loss/down regulation of phosphatase and tensin homolog (PTEN, a lipid phosphatase that counteracts PI3-kinase activity), up-regulation of growth factor receptors or activation of Ras. These changes would/should result in activation of all three Akt isoforms,

therefore it is unknown whether they will translate to different contributions of the Akt isoforms to tumorigenesis. Interestingly, it has recently been shown that deficiency of Akt1 is sufficient to inhibit endometrial and prostate neoplasia in PTEN^{+/-} mice⁵⁸, suggesting a predominant role of Akt1 in these cancers. Whether a similar Akt isoform dependency exists in PI3-kinase and/or Ras induced tumors is largely unknown.

How could differential activation of Akt isoforms contribute to tumorigenesis?

Although our understanding of the distinct roles of Akt isoforms in tumor formation, development and invasiveness is still limited, several studies have begun to address the differential roles for Akt1 and Akt2 in the regulation of cell cycle progression and cell migration. A series of recent studies provide compelling evidence for isoform-specific functions of Akt kinases in the regulation of cell migration (reviewed in reference 59). In vivo and in vitro studies support that Akt1 attenuates while Akt2 enhances cancer cell migration. On the contrary Akt1 specifically promotes migration of non-transformed cells in certain cellular contexts⁶⁰, indicating that isoform specific regulation of cellular migration exist both in transformed and non-transformed cells although it might be dictated by distinct mechanisms. Several mechanisms have been proposed for Akt1-mediated inhibition of cancer cell migration including negative regulation of the extracellular-signal regulated kinase pathway⁶¹, the tumor suppressor tuberous sclerosis complex 2 (TSC2)⁶² and the nuclear factor of activated T cells (NFAT) a pro-migratory and pro-invasive transcription factor in breast cells⁶³. Akt1 down-regulation also caused phenotypic changes characteristic of an epithelial-mesenchymal transition in IGF-IR stimulated breast cancer cells, a phenotype inhibited by down-regulation of Akt2⁶¹. Contrary to Akt1, overexpression of Akt2 promoted adhesion and invasion in eight human breast cancer cell lines that correlated with upregulation of β 1 integrins⁶⁴.

Studies of transgenic mice further support Akt isoform-specific roles in tumor development and metastasis. Coordinated overexpression of activated Akt1 and ErbB-2 in the mammary gland of transgenic mice accelerated the appearance of multifocal mammary tumors and decreased the incidence of metastatic lesions compared to tumors initiated by ErbB-2 alone⁶⁵. Interestingly, coexpression of Akt2 with activated ErbB-2 in the mammary gland did not affect the latency of tumor development, but markedly increased the incidence of pulmonary metastases⁶⁶. Consistent with those findings, ablation of Akt1 delayed mammary adenocarcinoma induction by polyoma middle T (PyMT) and Neu transgenes in mice, while ablation of Akt2 accelerates this process⁶⁷.

Apart from differences in cell migration, a differential role for Akt isoforms in cell cycle control has also been reported. Silencing Akt1 but not Akt2, in non-transformed mammalian cells results in reduction of cyclin A levels and S-phase entry, while over expression of Akt2 hindered cell cycle progression in M-G1 with increased nuclear p21⁶⁸. Analysis of Akt isoform function in early stages of oncogenesis showed that the number of mammary epithelial cells expressing cyclin D1 in PyMT/Akt1^{-/-} mice is lower than in the wild type mice, while PyMT/Akt2^{-/-} mice revealed a higher number of cyclin D1- expressing cells in lesions than PyMT/wild type mice⁶⁷. This work reveals differences in the regulation of the cell cycle progression by the Akt isoforms both in non-transformed and transformed mammalian cells.

Together these studies strongly suggest distinct functions of the Akt family members in the regulation of cell cycle progression, migration and invasion that might translate into differential roles in the modulation of tumor development and metastasis. Although the molecular mechanisms dictating Akt isoform specificity in these settings are largely unknown, some of the mechanisms identified in other cellular contexts, such as the regulation of glucose transport, could potentially be applied in these Akt-regulated

processes. Investigating how these modes of regulation contribute to Akt isoform specific signaling in cell growth, survival and migration, and their relevance in distinct types of tumors would provide the basis to understand the pluripotent role of Akt kinases in human tumorigenesis and determine how Akt inhibitors could be used most efficiently to treat human cancer.

Akt signaling in the metabolic reprogramming of cancer cells

Although the regulation of metabolism and cancer by the Akt kinases are very active areas of study, we still have a very limited understanding about the integration of these two processes by the Akt family members. High proliferating rates characteristic of cancer cells require the efficient conversion of nutrients into biomass. Indeed it is known for many years that cancer cells display a distinct intermediate metabolism from most normal tissues, favoring glycolysis and the production of high concentrations of lactate versus metabolizing glucose to carbon dioxide in the mitochondrial tricarboxylic acid (TCA) cycle as most differentiated cells. Although aerobic glycolysis is less efficient in terms of ATP production than oxidative phosphorylation, it provides cancer cells with an advantage in terms of production of ribose-5 phosphate, acetyl-CoA and NADPH required for macromolecular synthesis (reviewed in reference 69).

Akt signaling is at the crossroads of growth control and glucose metabolism. Akt regulates protein and long chain fatty acid synthesis via modulation of mTOR⁷⁰ and fatty acid synthase⁷¹ respectively. The role of Akt in the modulation of glucose uptake into insulin-responsive tissues has been discussed above, however non-insulin responsive tissues also rely on Akt activity for glucose uptake and utilization. Growth factor-mediated Akt activation induces increased expression of the glucose transporter GLUT1 as well as an increase of GLUT1 in the plasma membrane^{72,73}. Both of these changes promote enhanced glucose flux into the cells. Akt also increases metabolism of glucose by modulating hexokinase association with mitochondria, thereby increasing the efficiency of glucose-6-phosphate production, and Akt stimulates phosphofructokinase activity increasing glycolysis^{74,75}. As a consequence, alterations in the PI3-kinase/Akt pathway leading to enhanced Akt activity correlate with the high glycolytic rates characteristic of cancer cells^{76,77}. Due to this metabolic reprogramming, glucose withdrawal induces cell death in a manner similar to that of growth factor withdrawal⁷⁸. Indeed, glucose uptake by tumors containing mutations in PIK3CA is inhibited by small molecule inhibitors of PI3-kinase and mTOR, and correlates with tumor regression⁷⁹, documenting the role of the PI3-kinase/Akt signaling pathway in the control of glucose metabolism in cancer cells.

The role of the distinct Akt family members in the “glucose addiction” of cancer cells is an exciting and largely unexplored area of study. Although specific functions for these kinases might exist, it is also possible that under deregulation of Akt signaling, as in the presence of activating mutations of PI3-kinase or loss of PTEN, Akt isoform functional specificity might also be lost. Indeed, our recent data suggest that overexpression of Akt1^{E17K}, an Akt mutant with enhanced plasma membrane association identified in human cancers, is sufficient to induce GLUT4 translocation to the plasma membrane of adipocytes, a process that is under specific regulation of Akt2²¹. Therefore, even if Akt isoforms have a distinct contribution to the regulation of glucose metabolism in “non-insulin responsive cells”, that specificity could be overridden by oncogenic mutations. Indeed, oncogenic transformation has been described by overexpression of all 3 myristoylated Akt isoforms⁸⁰. Consequently, it is tempting to speculate that the loss of Akt isoform functional restrictions might further contribute to cellular transformation. The current effort to develop small molecule Akt inhibitors with high potency, improved pharmacokinetics, and isoform selectivity will certainly help to answer these questions.

Perspectives

The development of Akt isoform-specific null mice has proven a functional diversity within the Akt family of kinases in physiology and disease. Work over the last few years has begun to dissect specific roles of these kinases; however, we still have a limited knowledge about the cellular and molecular mechanisms that determine Akt isoform functional specificity. Exploring the contribution of differential expression patterns, substrate specificity, binding partners and subcellular localization to Akt functional specificity through the combination of genetic models, proteomics and live cell microscopy will be required in order to define Akt isoform specific regulatory and signaling networks. A challenge ahead is to understand how/ if deregulation of specific Akt isoforms contributes to the development of disease such as cancer and type 2 diabetes. The answers to these questions will provide the basis for the development of efficient and selective pharmacological interventions of Akt function in disease states without globally perturbing the cellular functions modulated by Akt signaling.

Acknowledgments

We thank members of the McGraw laboratory for critical reading of our manuscript. We apologize to all those colleagues whose contributions could not be mentioned due to space limitations. TEM is funded by NIH grants RO1 DK52852, DK069982 and Robert Pollock and Ahn-Tuyet Nguyen Charitable Trust. EG is a recipient of an American Heart Association postdoctoral fellowship.

References

1. Hanada M, Feng J, Hemmings BA. Structure, regulation and function of PKB/AKT--a major therapeutic target. *Biochim Biophys Acta* 2004;1697:3–16. [PubMed: 15023346]
2. Manning BD, Cantley LC. AKT/PKB signaling: navigating downstream. *Cell* 2007;129:1261–74. [PubMed: 17604717]
3. Alessi DR, James SR, Downes CP, Holmes AB, Gaffney PR, Reese CB, et al. Characterization of a 3-phosphoinositide-dependent protein kinase which phosphorylates and activates protein kinase B α . *Curr Biol* 1997;7:261–9. [PubMed: 9094314]
4. Sarbassov DD, Guertin DA, Ali SM, Sabatini DM. Phosphorylation and regulation of Akt/PKB by the rictor-mTOR complex. *Science* 2005;307:1098–101. [PubMed: 15718470]
5. Bellacosa A, Chan TO, Ahmed NN, Datta K, Malstrom S, Stokoe D, et al. Akt activation by growth factors is a multiple-step process: the role of the PH domain. *Oncogene* 1998;17:313–25. [PubMed: 9690513]
6. Ananthanarayanan B, Ni Q, Zhang J. Signal propagation from membrane messengers to nuclear effectors revealed by reporters of phosphoinositide dynamics and Akt activity. *Proc Natl Acad Sci U S A* 2005;102:15081–6. [PubMed: 16214892]
7. Dummler B, Hemmings BA. Physiological roles of PKB/Akt isoforms in development and disease. *Biochem Soc Trans* 2007;35:231–5. [PubMed: 17371246]
8. Chen WS, Xu PZ, Gottlob K, Chen ML, Sokol K, Shiyanova T, et al. Growth retardation and increased apoptosis in mice with homozygous disruption of the Akt1 gene. *Genes Dev* 2001;15:2203–8. [PubMed: 11544177]
9. Cho H, Thorvaldsen JL, Chu Q, Feng F, Birnbaum MJ. Akt1/PKB α is required for normal growth but dispensable for maintenance of glucose homeostasis in mice. *J Biol Chem* 2001;276:38349–52. [PubMed: 11533044]
10. Garofalo RS, Orena SJ, Rafidi K, Torchia AJ, Stock JL, Hildebrandt AL, et al. Severe diabetes, age-dependent loss of adipose tissue, and mild growth deficiency in mice lacking Akt2/PKB β . *J Clin Invest* 2003;112:197–208. [PubMed: 12843127]
11. Tschopp O, Yang ZZ, Brodbeck D, Dummler BA, Hemmings-Mieszczak M, Watanabe T, et al. Essential role of protein kinase B gamma (PKB gamma/Akt3) in postnatal brain development but not in glucose homeostasis. *Development* 2005;132:2943–54. [PubMed: 15930105]

12. Peng XD, Xu PZ, Chen ML, Hahn-Windgassen A, Skeen J, Jacobs J, et al. Dwarfism, impaired skin development, skeletal muscle atrophy, delayed bone development, and impeded adipogenesis in mice lacking Akt1 and Akt2. *Genes Dev* 2003;17:1352–65. [PubMed: 12782654]
13. Yang ZZ, Tschopp O, Di-Poi N, Bruder E, Baudry A, Dummler B, et al. Dosage-dependent effects of Akt1/protein kinase B α (PKB α) and Akt3/PKB γ on thymus, skin, and cardiovascular and nervous system development in mice. *Mol Cell Biol* 2005;25:10407–18. [PubMed: 16287854]
14. Dummler B, Tschopp O, Hynx D, Yang ZZ, Dirnhofer S, Hemmings BA. Life with a single isoform of Akt: mice lacking Akt2 and Akt3 are viable but display impaired glucose homeostasis and growth deficiencies. *Mol Cell Biol* 2006;26:8042–51. [PubMed: 16923958]
15. Whiteman EL, Cho H, Birnbaum MJ. Role of Akt/protein kinase B in metabolism. *Trends Endocrinol Metab* 2002;13:444–51. [PubMed: 12431841]
16. Huang S, Czech MP. The GLUT4 glucose transporter. *Cell Metab* 2007;5:237–52. [PubMed: 17403369]
17. Cho H, Mu J, Kim JK, Thorvaldsen JL, Chu Q, Crenshaw EB 3rd, et al. Insulin resistance and a diabetes mellitus-like syndrome in mice lacking the protein kinase Akt2 (PKB β). *Science* 2001;292:1728–31. [PubMed: 11387480]
18. George S, Rochford JJ, Wolfrum C, Gray SL, Schinner S, Wilson JC, et al. A family with severe insulin resistance and diabetes due to a mutation in AKT2. *Science* 2004;304:1325–8. [PubMed: 15166380]
19. Jiang ZY, Zhou QL, Coleman KA, Chouinard M, Boese Q, Czech MP. Insulin signaling through Akt/protein kinase B analyzed by small interfering RNA-mediated gene silencing. *Proc Natl Acad Sci U S A* 2003;100:7569–74. [PubMed: 12808134]
20. Katome T, Obata T, Matsushima R, Masuyama N, Cantley LC, Gotoh Y, et al. Use of RNA interference-mediated gene silencing and adenoviral overexpression to elucidate the roles of AKT/protein kinase B isoforms in insulin actions. *J Biol Chem* 2003;278:28312–23. [PubMed: 12734182]
21. Gonzalez E, McGraw TE. Insulin-modulated Akt subcellular localization determines Akt isoform-specific signaling. *Proc Natl Acad Sci U S A* 2009;106:7004–9. [PubMed: 19372382]
22. Bae SS, Cho H, Mu J, Birnbaum MJ. Isoform-specific regulation of insulin-dependent glucose uptake by Akt/protein kinase B. *J Biol Chem* 2003;278:49530–6. [PubMed: 14522993]
23. Kim YB, Peroni OD, Franke TF, Kahn BB. Divergent regulation of Akt1 and Akt2 isoforms in insulin target tissues of obese Zucker rats. *Diabetes* 2000;49:847–56. [PubMed: 10905496]
24. Calera MR, Martinez C, Liu H, Jack AK, Birnbaum MJ, Pilch PF. Insulin increases the association of Akt-2 with Glut4-containing vesicles. *J Biol Chem* 1998;273:7201–4. [PubMed: 9516411]
25. Hill MM, Clark SF, Tucker DF, Birnbaum MJ, James DE, Macaulay SL. A role for protein kinase B β /Akt2 in insulin-stimulated GLUT4 translocation in adipocytes. *Mol Cell Biol* 1999;19:7771–81. [PubMed: 10523666]
26. Carpten JD, Faber AL, Horn C, Donoho GP, Briggs SL, Robbins CM, et al. A transforming mutation in the pleckstrin homology domain of AKT1 in cancer. *Nature* 2007;448:439–44. [PubMed: 17611497]
27. Kohn AD, Summers SA, Birnbaum MJ, Roth RA. Expression of a constitutively active Akt Ser/Thr kinase in 3T3-L1 adipocytes stimulates glucose uptake and glucose transporter 4 translocation. *J Biol Chem* 1996;271:31372–8. [PubMed: 8940145]
28. Bruss MD, Arias EB, Lienhard GE, Cartee GD. Increased phosphorylation of Akt substrate of 160 kDa (AS160) in rat skeletal muscle in response to insulin or contractile activity. *Diabetes* 2005;54:41–50. [PubMed: 15616009]
29. Sano H, Kane S, Sano E, Miinea CP, Asara JM, Lane WS, et al. Insulin-stimulated phosphorylation of a Rab GTPase-activating protein regulates GLUT4 translocation. *J Biol Chem* 2003;278:14599–602. [PubMed: 12637568]
30. Eguez L, Lee A, Chavez JA, Miinea CP, Kane S, Lienhard GE, et al. Full intracellular retention of GLUT4 requires AS160 Rab GTPase activating protein. *Cell Metab* 2005;2:263–72. [PubMed: 16213228]

31. Miinea CP, Sano H, Kane S, Sano E, Fukuda M, Peranen J, et al. AS160, the Akt substrate regulating GLUT4 translocation, has a functional Rab GTPase-activating protein domain. *Biochem J* 2005;391:87–93. [PubMed: 15971998]
32. Sano H, Eguez L, Teruel MN, Fukuda M, Chuang TD, Chavez JA, et al. Rab10, a target of the AS160 Rab GAP, is required for insulin-stimulated translocation of GLUT4 to the adipocyte plasma membrane. *Cell Metab* 2007;5:293–303. [PubMed: 17403373]
33. Ishikura S, Klip A. Muscle cells engage Rab8A and myosin Vb in insulin-dependent GLUT4 translocation. *Am J Physiol Cell Physiol* 2008;295:C1016–25. [PubMed: 18701652]
34. Bouzakri K, Zachrisson A, Al-Khalili L, Zhang BB, Koistinen HA, Krook A, et al. siRNA-based gene silencing reveals specialized roles of IRS-1/Akt2 and IRS-2/Akt1 in glucose and lipid metabolism in human skeletal muscle. *Cell Metab* 2006;4:89–96. [PubMed: 16814735]
35. Huang S, Lifshitz LM, Jones C, Bellve KD, Standley C, Fonseca S, et al. Insulin stimulates membrane fusion and GLUT4 accumulation in clathrin coats on adipocyte plasma membranes. *Mol Cell Biol* 2007;27:3456–69. [PubMed: 17339344]
36. Gonzalez E, McGraw TE. Insulin signaling diverges into Akt-dependent and -independent signals to regulate the recruitment/docking and the fusion of GLUT4 vesicles to the plasma membrane. *Mol Biol Cell* 2006;17:4484–93. [PubMed: 16914513]
37. Bai L, Wang Y, Fan J, Chen Y, Ji W, Qu A, et al. Dissecting multiple steps of GLUT4 trafficking and identifying the sites of insulin action. *Cell Metab* 2007;5:47–57. [PubMed: 17189206]
38. Yoshizaki T, Imamura T, Babendure JL, Lu JC, Sonoda N, Olefsky JM. Myosin 5a is an insulin-stimulated Akt2 (protein kinase Bbeta) substrate modulating GLUT4 vesicle translocation. *Mol Cell Biol* 2007;27:5172–83. [PubMed: 17515613]
39. Yamada E, Okada S, Saito T, Ohshima K, Sato M, Tsuchiya T, et al. Akt2 phosphorylates Synip to regulate docking and fusion of GLUT4-containing vesicles. *J Cell Biol* 2005;168:921–8. [PubMed: 15753124]
40. Hancock JF. Ras proteins: different signals from different locations. *Nat Rev Mol Cell Biol* 2003;4:373–84. [PubMed: 12728271]
41. Resh MD. Palmitoylation of ligands, receptors, and intracellular signaling molecules. *Sci STKE* 2006;2006:re14. [PubMed: 17077383]
42. Du K, Tsichlis PN. Regulation of the Akt kinase by interacting proteins. *Oncogene* 2005;24:7401–9. [PubMed: 16288287]
43. Brazil DP, Park J, Hemmings BA. PKB binding proteins. Getting in on the Akt. *Cell* 2002;111:293–303. [PubMed: 12419241]
44. Schenck A, Goto-Silva L, Collinet C, Rhinn M, Giner A, Habermann B, et al. The endosomal protein Appl1 mediates Akt substrate specificity and cell survival in vertebrate development. *Cell* 2008;133:486–97. [PubMed: 18455989]
45. Saito T, Jones CC, Huang S, Czech MP, Pilch PF. The interaction of Akt with APPL1 is required for insulin-stimulated Glut4 translocation. *J Biol Chem* 2007;282:32280–7. [PubMed: 17848569]
46. Ding J, Du K. ClipR-59 interacts with Akt and regulates Akt cellular compartmentalization. *Mol Cell Biol* 2009;29:1459–71. [PubMed: 19139280]
47. Altomare DA, Testa JR. Perturbations of the AKT signaling pathway in human cancer. *Oncogene* 2005;24:7455–64. [PubMed: 16288292]
48. Bellacosa A, Kumar CC, Di Cristofano A, Testa JR. Activation of AKT kinases in cancer: implications for therapeutic targeting. *Adv Cancer Res* 2005;94:29–86. [PubMed: 16095999]
49. Cheng JQ, Ruggeri B, Klein WM, Sonoda G, Altomare DA, Watson DK, et al. Amplification of AKT2 in human pancreatic cells and inhibition of AKT2 expression and tumorigenicity by antisense RNA. *Proc Natl Acad Sci U S A* 1996;93:3636–41. [PubMed: 8622988]
50. Cheng JQ, Godwin AK, Bellacosa A, Taguchi T, Franke TF, Hamilton TC, et al. AKT2, a putative oncogene encoding a member of a subfamily of protein-serine/threonine kinases, is amplified in human ovarian carcinomas. *Proc Natl Acad Sci U S A* 1992;89:9267–71. [PubMed: 1409633]
51. Staal SP. Molecular cloning of the akt oncogene and its human homologues AKT1 and AKT2: amplification of AKT1 in a primary human gastric adenocarcinoma. *Proc Natl Acad Sci U S A* 1987;84:5034–7. [PubMed: 3037531]

52. Stahl JM, Sharma A, Cheung M, Zimmerman M, Cheng JQ, Bosenberg MW, et al. Deregulated Akt3 activity promotes development of malignant melanoma. *Cancer Res* 2004;64:7002–10. [PubMed: 15466193]
53. Roy HK, Olusola BF, Clemens DL, Karolski WJ, Ratashak A, Lynch HT, et al. AKT proto-oncogene overexpression is an early event during sporadic colon carcinogenesis. *Carcinogenesis* 2002;23:201–5. [PubMed: 11756242]
54. Xu X, Sakon M, Nagano H, Hiraoka N, Yamamoto H, Hayashi N, et al. Akt2 expression correlates with prognosis of human hepatocellular carcinoma. *Oncol Rep* 2004;11:25–32. [PubMed: 14654898]
55. Stal O, Perez-Tenorio G, Akerberg L, Olsson B, Nordenskjold B, Skoog L, et al. Akt kinases in breast cancer and the results of adjuvant therapy. *Breast Cancer Res* 2003;5:R37–44. [PubMed: 12631397]
56. Nakatani K, Thompson DA, Barthel A, Sakaue H, Liu W, Weigel RJ, et al. Up-regulation of Akt3 in estrogen receptor-deficient breast cancers and androgen-independent prostate cancer lines. *J Biol Chem* 1999;274:21528–32. [PubMed: 10419456]
57. Davies MA, Stemke-Hale K, Tellez C, Calderone TL, Deng W, Prieto VG, et al. A novel AKT3 mutation in melanoma tumours and cell lines. *Br J Cancer* 2008;99:1265–8. [PubMed: 18813315]
58. Chen ML, Xu PZ, Peng XD, Chen WS, Guzman G, Yang X, et al. The deficiency of Akt1 is sufficient to suppress tumor development in Pten^{+/-} mice. *Genes Dev* 2006;20:1569–74. [PubMed: 16778075]
59. Stambolic V, Woodgett JR. Functional distinctions of protein kinase B/Akt isoforms defined by their influence on cell migration. *Trends Cell Biol* 2006;16:461–6. [PubMed: 16870447]
60. Zhou GL, Tucker DF, Bae SS, Bhatheja K, Birnbaum MJ, Field J. Opposing roles for Akt1 and Akt2 in Rac/Pak signaling and cell migration. *J Biol Chem* 2006;281:36443–53. [PubMed: 17012749]
61. Irie HY, Pearline RV, Grueneberg D, Hsia M, Ravichandran P, Kothari N, et al. Distinct roles of Akt1 and Akt2 in regulating cell migration and epithelial-mesenchymal transition. *J Cell Biol* 2005;171:1023–34. [PubMed: 16365168]
62. Liu H, Radisky DC, Nelson CM, Zhang H, Fata JE, Roth RA, et al. Mechanism of Akt1 inhibition of breast cancer cell invasion reveals a protumorigenic role for TSC2. *Proc Natl Acad Sci U S A* 2006;103:4134–9. [PubMed: 16537497]
63. Yoeli-Lerner M, Yiu GK, Rabinovitz I, Erhardt P, Jauliac S, Toker A. Akt blocks breast cancer cell motility and invasion through the transcription factor NFAT. *Mol Cell* 2005;20:539–50. [PubMed: 16307918]
64. Arboleda MJ, Lyons JF, Kabbinar FF, Bray MR, Snow BE, Ayala R, et al. Overexpression of AKT2/protein kinase Bbeta leads to up-regulation of beta1 integrins, increased invasion, and metastasis of human breast and ovarian cancer cells. *Cancer Res* 2003;63:196–206. [PubMed: 12517798]
65. Hutchinson JN, Jin J, Cardiff RD, Woodgett JR, Muller WJ. Activation of Akt-1 (PKB-alpha) can accelerate ErbB-2-mediated mammary tumorigenesis but suppresses tumor invasion. *Cancer Res* 2004;64:3171–8. [PubMed: 15126356]
66. Dillon RL, Marcotte R, Hennessy BT, Woodgett JR, Mills GB, Muller WJ. Akt1 and Akt2 Play Distinct Roles in the Initiation and Metastatic Phases of Mammary Tumor Progression. *Cancer Res*. 2009
67. Maroulakou IG, Oemler W, Naber SP, Tschlis PN. Akt1 ablation inhibits, whereas Akt2 ablation accelerates, the development of mammary adenocarcinomas in mouse mammary tumor virus (MMTV)-ErbB2/neu and MMTV-polyoma middle T transgenic mice. *Cancer Res* 2007;67:167–77. [PubMed: 17210696]
68. Heron-Milhavet L, Franckhauser C, Rana V, Berthenet C, Fisher D, Hemmings BA, et al. Only Akt1 is required for proliferation, while Akt2 promotes cell cycle exit through p21 binding. *Mol Cell Biol* 2006;26:8267–80. [PubMed: 16982699]
69. Vander Heiden MG, Cantley LC, Thompson CB. Understanding the Warburg effect: the metabolic requirements of cell proliferation. *Science* 2009;324:1029–33. [PubMed: 19460998]

70. Gingras AC, Kennedy SG, O'Leary MA, Sonenberg N, Hay N. 4E-BP1, a repressor of mRNA translation, is phosphorylated and inactivated by the Akt(PKB) signaling pathway. *Genes Dev* 1998;12:502–13. [PubMed: 9472019]
71. Wang D, Sul HS. Insulin stimulation of the fatty acid synthase promoter is mediated by the phosphatidylinositol 3-kinase pathway. Involvement of protein kinase B/Akt. *J Biol Chem* 1998;273:25420–6. [PubMed: 9738010]
72. Wofford JA, Wieman HL, Jacobs SR, Zhao Y, Rathmell JC. IL-7 promotes Glut1 trafficking and glucose uptake via STAT5-mediated activation of Akt to support T-cell survival. *Blood* 2008;111:2101–11. [PubMed: 18042802]
73. Wieman HL, Wofford JA, Rathmell JC. Cytokine stimulation promotes glucose uptake via phosphatidylinositol-3 kinase/Akt regulation of Glut1 activity and trafficking. *Mol Biol Cell* 2007;18:1437–46. [PubMed: 17301289]
74. Majewski N, Nogueira V, Bhaskar P, Coy PE, Skeen JE, Gottlob K, et al. Hexokinase-mitochondria interaction mediated by Akt is required to inhibit apoptosis in the presence or absence of Bax and Bak. *Mol Cell* 2004;16:819–30. [PubMed: 15574336]
75. Deprez J, Vertommen D, Alessi DR, Hue L, Rider MH. Phosphorylation and activation of heart 6-phosphofructo-2-kinase by protein kinase B and other protein kinases of the insulin signaling cascades. *J Biol Chem* 1997;272:17269–75. [PubMed: 9211863]
76. Buzzai M, Bauer DE, Jones RG, DeBerardinis RJ, Hatzivassiliou G, Elstrom RL, et al. The glucose dependence of Akt-transformed cells can be reversed by pharmacologic activation of fatty acid beta-oxidation. *Oncogene* 2005;24:4165–73. [PubMed: 15806154]
77. DeBerardinis RJ, Lum JJ, Hatzivassiliou G, Thompson CB. The biology of cancer: metabolic reprogramming fuels cell growth and proliferation. *Cell Metab* 2008;7:11–20. [PubMed: 18177721]
78. Vander Heiden MG, Plas DR, Rathmell JC, Fox CJ, Harris MH, Thompson CB. Growth factors can influence cell growth and survival through effects on glucose metabolism. *Mol Cell Biol* 2001;21:5899–912. [PubMed: 11486029]
79. Engelman JA, Chen L, Tan X, Crosby K, Guimaraes AR, Upadhyay R, et al. Effective use of PI3K and MEK inhibitors to treat mutant Kras G12D and PIK3CA H1047R murine lung cancers. *Nat Med* 2008;14:1351–6. [PubMed: 19029981]
80. Mende I, Malstrom S, Tschlis PN, Vogt PK, Aoki M. Oncogenic transformation induced by membrane-targeted Akt2 and Akt3. *Oncogene* 2001;20:4419–23. [PubMed: 11466625]

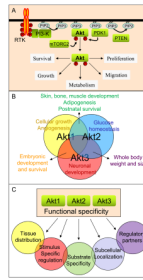
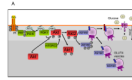


Figure 1.

Regulation of Akt signaling. A. Growth factor-mediated Akt activation. In response to numerous growth factors and cytokines Akt is activated downstream of PI3-kinase following a multistep mechanism. Activated PI3-kinase converts PIP2 into PIP3 providing sites of recruitment at the plasma membrane of proteins containing PH domains, including Akt and PDK1 kinases. Upon translocation to the plasma membrane Akt is phosphorylated by PDK1 within the catalytic domain and mTORC2 within the hydrophobic motif, which renders Akt catalytically active. Activated Akt, through the phosphorylation of numerous downstream targets located throughout the cell, regulates a wide array of cellular functions. B. Overlapping and specific functions of the Akt family members. Summarized are common and distinct Akt isoform functions elucidated from the phenotypic analysis of single and double Akt isoform knockout mice. C. Potential mechanisms dictating Akt isoform functional specificity.

**Figure 2.**

Akt2 signaling specificity in insulin-mediated glucose uptake. Insulin binding to the insulin receptor at the surface of adipocytes leads to the activation and the autophosphorylation of the receptor, followed by recruitment and phosphorylation of insulin receptor substrate proteins (IRS). Phosphorylated IRS create docking sites for the recruitment of PI3-kinase which converts PIP2 into PIP3, providing sites for the recruitment of Akt kinases to the plasma membrane. Both Akt1 and Akt2 translocate to the plasma membrane in response to PI3-kinase activation and both kinases are activated by phosphorylation through PDK1 and the mTORC2. Using Akt1 and Akt2 reporters and total internal reflection fluorescence (TIRF) microscopy we found that upon insulin stimulation Akt2 accumulates at the plasma membrane environment (TIRF zone) to a larger degree than Akt1. This distinct subcellular distribution facilitates Akt2 phosphorylation and inactivation of the Rab GAP AS160 possibly located on GLUT4 containing vesicles. Inactivation of AS160 allows the subsequent docking and fusion of GLUT4 vesicles with the plasma, and consequently the entrance of glucose into the cells.