



Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



## Letter to the Editor

### Inhibition of endocytic recycling of ACE2 by SARS-CoV-2 S protein partially explains multiple COVID-19 related diseases caused by ACE2 reduction

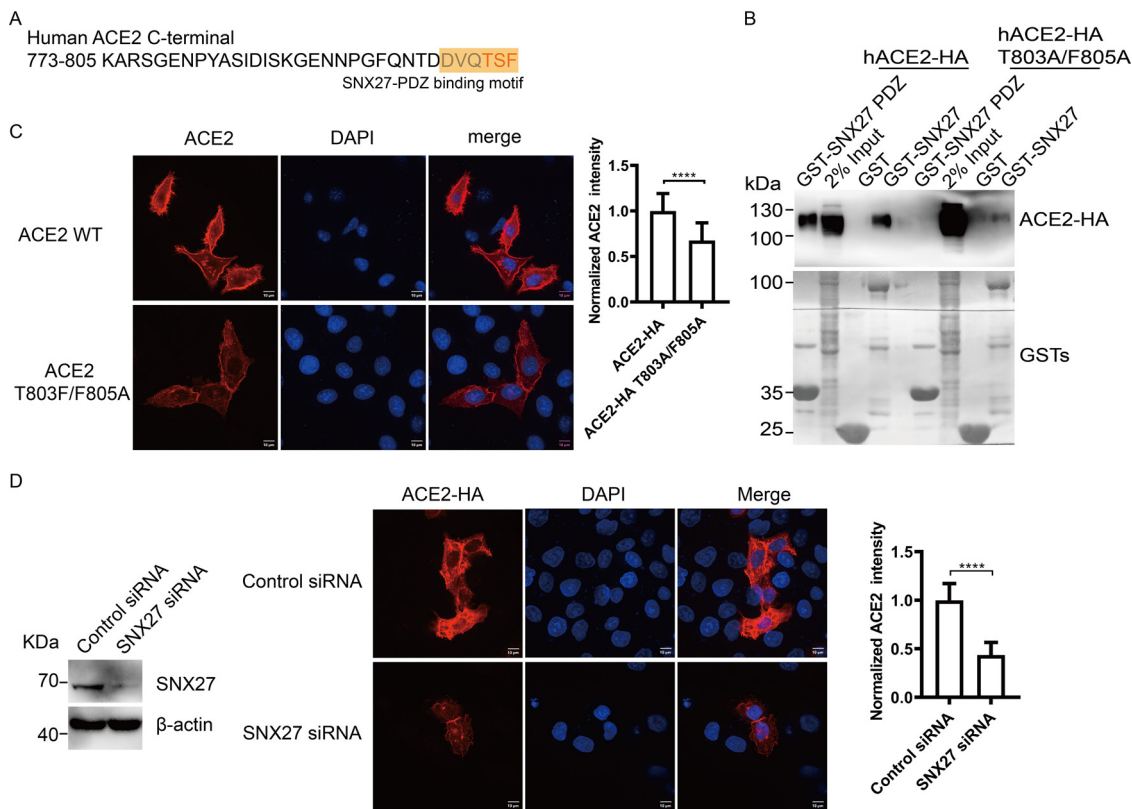


Dear editor

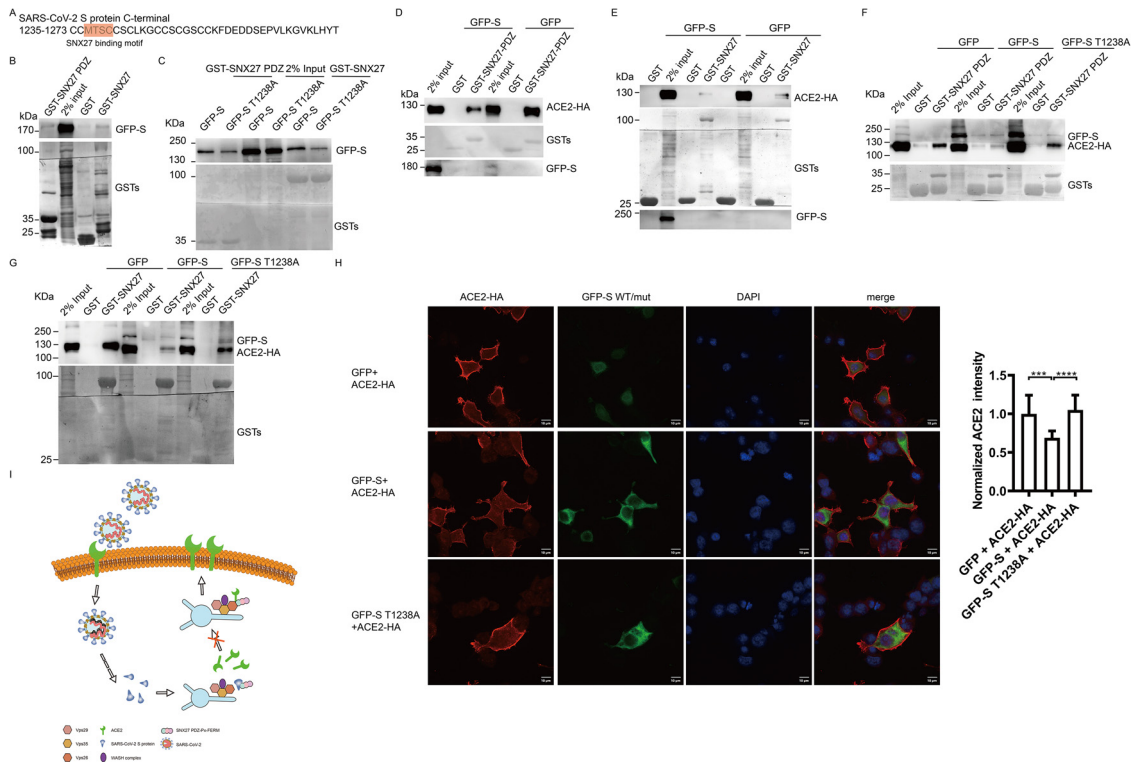
In this Journal, Li and colleagues described the comparative biology of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) receptor ACE2 and provided some explanation of the host range.<sup>1</sup> Reduction of ACE2 protein level leads to a variety of diseases, such as lung injury, hypertension and abnormal coagulation.<sup>2</sup> It has been reported that the protein level of ACE2 decreases

during SARS-CoV-2 infection.<sup>3</sup> To explain this phenomenon, we hypothesize that SARS-CoV-2 disrupts the homeostasis of ACE2 by interfering its trafficking to plasma membrane.

Sorting nexin 27 (SNX27) mediates endocytic recycling of cargo proteins containing C-terminal PSD95/Dlg1/ZO-1 (PDZ)-binding sequences from endosomes to the plasma membrane, preventing their lysosomal degradation.<sup>4</sup> Human ACE2 (hACE2) contains a SNX27-PDZ domain binding motif DVQTSF in its C terminus (Fig. 1A), indicating that ACE2 may interact with SNX27. Indeed, GST pull-down experiments demonstrated that hACE2 but not hACE2T803A/F805A associated with both PDZ domain of SNX27 and full length SNX27 (Fig. 1B). Immunofluorescence staining



**Fig. 1.** Endocytic recycling of ACE2 is mediated by SNX27. (A) Human ACE2 contains a SNX27 PDZ binding motif in the C-terminus. (B) Both SNX27 and its PDZ domain associate with ACE2 but not T803A/F805A mutant of ACE2 in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing HA-tagged wild type hACE2 and T803A/F805A mutant of hACE2 were pulled down by GST-SNX27, GST-SNX27 PDZ or GST. Input represents 2% of total cell lysates. (C) Surface level of T803A/F805A mutant of ACE2 is weaker than that of wild type ACE2. HeLa cells transfected with the constructs expressing HA-tagged wild type hACE2 and T803A/F805A mutant of hACE2 were stained with HA antibody. ACE2-HA and T803A/F805A mutant of ACE2-HA are in red. Nucleus stained with DAPI is in Blue. Scale bar: 10  $\mu$ M. Relative ACE2 intensity was normalized by quantifying at least 20 cells through Image J. \*\*\*\*,  $p$  value < 0.0001. (D) Silencing SNX27 by siRNA reduces surface level of ACE2. HeLa cells treated with siRNA against SNX27 for 3 days and then transfected with the construct expressing HA-tagged wild type hACE2 were stained with HA antibody. ACE2-HA is in red. Nucleus stained with DAPI is in Blue. Scale bar: 10  $\mu$ M. Relative ACE2 intensity was normalized by quantifying at least 20 cells through Image J. \*\*\*\*,  $p$  value < 0.0001. HeLa cells were treated with siRNA against SNX27 for 3 days and then blotted with antibodies against SNX27 or  $\beta$ -actin.



**Fig. 2.** SARS-CoV-2 S protein reduces the surface level of ACE2 by associating with SNX27. (A) SARS-CoV-2 S protein contains a SNX27 binding motif in the C-terminus. (B) Both SNX27 and its PDZ domain associate with SARS-CoV-2 S. Lysates from 293T cells transfected with the constructs expressing GFP-tagged SARS-CoV-2 S were pulled down by GST-SNX27, GST-SNX27 PDZ or GST. Input represents 2% of total cell lysates. (C) Both SNX27 and its PDZ domain associate with SARS-CoV-2 S but not T1238A mutant of SARS-CoV-2 S in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing GFP-tagged SARS-CoV-2 S or T1238A mutant of SARS-CoV-2 S were pulled down by GST-SNX27 or GST-SNX27 PDZ. Input represents 2% of total cell lysates. (D) SARS-CoV-2 S inhibits the interaction between ACE2 and SNX27 PDZ domain in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing HA-tagged ACE2 with GFP-tagged SARS-CoV-2 S or GFP were pulled down by GST-SNX27 PDZ or GST. Input represents 2% of total cell lysates. (E) SARS-CoV-2 S suppresses the interaction between ACE2 and SNX27 in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing HA-tagged ACE2 with GFP-tagged SARS-CoV-2 S or GFP were pulled down by GST-SNX27 or GST. Input represents 2% of total cell lysates. (F) SARS-CoV-2 S but not T1238A mutant of SARS-CoV-2 S inhibits the interaction between ACE2 and SNX27 PDZ domain in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing HA-tagged ACE2 with GFP-tagged SARS-CoV-2 S, T1238A mutant of SARS-CoV-2 S, or GFP were pulled down by GST-SNX27 PDZ or GST. Input represents 2% of total cell lysates. (G) SARS-CoV-2 S but not T1238A mutant of SARS-CoV-2 S suppresses the interaction between ACE2 and SNX27 in GST pull-down experiments. Lysates from 293T cells transfected with the constructs expressing HA-tagged ACE2 with GFP-tagged SARS-CoV-2 S, T1238A mutant of SARS-CoV-2 S, or GFP were pulled down by GST-SNX27 or GST. Input represents 2% of total cell lysates. (H) Compared with GFP, GFP-S but not GFP-S-T1238A mutant reduces the surface level of ACE2. HeLa cells transfected with the constructs expressing HA-tagged ACE2 with GFP-tagged SARS-CoV-2 S, T1238A mutant of SARS-CoV-2 S, or GFP were stained with HA antibody. ACE2-HA is in red. SARS-CoV-2 S, T1238A mutant of SARS-CoV-2 S, and GFP are in green. Nucleus stained with DAPI is in blue. Scale bar: 10  $\mu$ M. Relative ACE2 intensity was normalized by quantifying at least 20 cells through Image J. \*\*\*,  $p$  value < 0.001; \*\*\*\*,  $p$  value < 0.0001. (I) Model of how SARS-CoV-2 S blocks ACE2 transport mediated by SNX27. Endocytic recycling of ACE2 is mediated by SNX27. SARS-CoV-2 S could inhibit plasma membrane targeting of ACE2 by suppressing the association of SNX27 and ACE2, leading to the reduction of ACE2.

showed that the surface signal of ACE2T803A/F805A was weaker than that of wild type ACE2, suggesting that binding to SNX27 was crucial for the plasma membrane targeting of ACE2 (Fig. 1C). Moreover, silencing SNX27 by siRNA reduced the surface level of ACE2, confirming that ACE2 was delivered to the cell surface through SNX27 (Fig. 1D). Taken together, those results demonstrated that endocytic recycling of ACE2 was mediated by SNX27.

SARS-CoV-2 spike (S) protein also contains a potential SNX27 binding motif MTSC in the cytoplasmic tail (Fig. 2A), indicating that S may associate with SNX27. GST pull-down experiments confirmed that S interacted with both PDZ domain of SNX27 and full length SNX27 (Fig. 2B). Further GST pull-down experiments showed that S but not T1238A mutant of S associated with both PDZ domain of SNX27 and full length SNX27, suggesting T1238 in S was critical for its SNX27 association (Fig. 2C). Since both S and ACE2 interacted with PDZ domain of SNX27, we hypothesized that SARS-CoV-2 S competed with ACE2 for associating with SNX27. To test this hypothesis, we performed GST pull-down experiments and found that overexpression of GFP-S but not GFP reduced the binding ability of ACE2 to PDZ domain of SNX27 or full length SNX27 (Fig. 2D and E). However, when overexpressing SARS-CoV-2 S-T1238A in

which the SNX27 binding affinity was abolished, the association of ACE2 with SNX27 PDZ or SNX27 was recovered, suggesting that S blocked SNX27-ACE2 interaction through its association with SNX27 (Fig. 2F and G). Compared with GFP, GFP-S but not GFP-S-T1238A mutant reduced the surface level of ACE2, which suggested that S suppressed the endocytic recycling of ACE2 through SNX27 (Fig. 2H). Taken together, SARS-CoV-2 S inhibited the endocytic recycling of ACE2 mediated by SNX27.

Consistent with our study, recent studies found that ACE2 surface localization was mediated by SNX27 and SARS-CoV-2 S associated with SNX27.<sup>5–8</sup> However, those studies did not explore the role for SARS-CoV-2 S in the endocytic recycling of ACE2. Our finding advanced our understanding of many phenomena caused by ACE2-deficiency. In the last two years, long COVID concept has been gradually accepted.<sup>9</sup> Upon SARS-CoV-2 infection, endocytic recycling of ACE2 mediated by SNX27 could be suppressed by SARS-CoV-2 S and surface level of ACE2 would be decreased (Fig. 2I), which could lead to many long COVID diseases due to the deficiency of ACE2. Meanwhile, some side effects of S-based SARS-CoV-2 vaccine may due to the reduction of ACE2 recycling by S. For instance, myocarditis and pericarditis appeared after administra-

tion of BNT162b2 from BioNTech and mRNA-1273 from Moderna.<sup>10</sup> It is possible that ACE2-deficiency by SARS-CoV-2 S causes those side effects. Because T1238A mutant of SARS-CoV-2 S no longer suppresses endocytic recycling of ACE2, this mutant could be a better design for mRNA vaccine against SARS-CoV-2.

In this study, we revealed the mechanism how SARS-CoV-2 S protein lowered the surface level of ACE2. SARS-CoV-2 S decreased the surface level of ACE2 by inhibiting endocytic recycling of ACE2 mediated by SNX27. ACE2 reduction by SARS-CoV-2 is considered as a critical driver for COVID-19 pathology, which could cause multiple diseases, such as lung injury, hypertension and abnormal coagulation. Our study provided new ideas for understanding some symptoms of SARS-CoV-2 infection, which could help the treatment of various diseases caused by SARS-CoV-2.

#### Declaration of Competing Interest

The authors declare that there are no conflicts of interest.

#### Acknowledgments

This work was supported by grants from National Natural Science Foundation of China [82072270 and 81871663], and Academic promotion program of Shandong First Medical University [2019LJ001].

#### References

- Li R, Qiao S, Zhang G. Analysis of angiotensin-converting enzyme 2 (ACE2) from different species sheds some light on cross-species receptor usage of a novel coronavirus 2019-nCoV. *J Infect* 2020;**80**:469–96.
- Angeli F, Zappa M, Reboldi G, Trapasso M, Cavallini C, Spanevello A, Verdecchia P. The pivotal link between ACE2 deficiency and SARS-CoV-2 infection: one year later. *Eur J Intern Med* 2021;**93**:28–34.
- Lei Y, Zhang J, Schiavon CR, He M, Chen L, Shen H, Zhang Y, Yin Q, Cho Y, Andrade L, Shadel GS, Hepokoski M, Lei T, Wang H, Zhang J, Yuan JX, Malhotra A, Manor U, Wang S, Yuan ZY, Shyy JY. SARS-CoV-2 spike protein impairs endothelial function via downregulation of ACE2. *Circ Res* 2021;**128**:1323–6.
- Steinberg F, Gallon M, Winfield M, Thomas EC, Bell AJ, Heesom KJ, Tavaré JM, Cullen PJ. A global analysis of SNX27-retromer assembly and cargo specificity reveals a function in glucose and metal ion transport. *Nat Cell Biol* 2013;**15**:461–71.
- Kliche J, Kuss H, Ali M, Ivarsson Y. Cytoplasmic short linear motifs in ACE2 and integrin  $\beta(3)$  link SARS-CoV-2 host cell receptors to mediators of endocytosis and autophagy. *Sci Signal* 2021;**14**:eabf1117.
- Yang B, Jia Y, Meng Y, Xue Y, Liu K, Li Y, Liu S, Li X, Cui K, Shang L, Cheng T, Zhang Z, Hou Y, Yang X, Yan H, Duan L, Tong Z, Wu C, Liu Z, Gao S, Zhuo S, Huang W, Gao GF, Qi J, Shang G. SNX27 suppresses SARS-CoV-2 infection by inhibiting viral lysosome/late endosome entry. *Proc Natl Acad Sci U S A* 2022;**119**:e2117576119.
- Zhang Q, Geffer J, Sneddon WB, Mamonova T, Friedman PA. ACE2 interaction with cytoplasmic PDZ protein enhances SARS-CoV-2 invasion. *iScience* 2021;**24**:102770.
- Zhao L, Zhong K, Zhao J, Yong X, Tong A, Jia D. SARS-CoV-2 spike protein harnesses SNX27-mediated endocytic recycling pathway. *MedComm* (2020) 2021;**2**:798–809.
- Alwan NA. The road to addressing long covid. *Science* 2021;**373**:491–3.
- Patone M, Mei XW, Handunnetthi L, Dixon S, Zaccardi F, Shankar-Hari M, Watkinson P, Khunti K, Harnden A, Coupland CAC, Channon KM, Mills NL, Sheikh A, Hippisley-Cox J. Risks of myocarditis, pericarditis, and cardiac arrhythmias associated with COVID-19 vaccination or SARS-CoV-2 infection. *Nat Med* 2022;**28**:410–22.

Yongwen Ren

Department of Clinical Laboratory Medicine, The First Affiliated Hospital of Shandong First Medical University and Shandong Provincial Qianfoshan Hospital, Jinan, Shandong, China

Department of Pathogen Biology, School of Basic Medical Sciences, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China  
Medical Science and Technology Innovation Center, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China

Lu Lv, Peng Li

Department of Pathogen Biology, School of Basic Medical Sciences, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China  
Medical Science and Technology Innovation Center, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China

Leiliang Zhang\*

Department of Clinical Laboratory Medicine, The First Affiliated Hospital of Shandong First Medical University and Shandong Provincial Qianfoshan Hospital, Jinan, Shandong, China  
Department of Pathogen Biology, School of Basic Medical Sciences, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China  
Medical Science and Technology Innovation Center, Shandong First Medical University and Shandong Academy of Medical Sciences, Jinan, Shandong, China

\*Corresponding author at: Department of Clinical Laboratory Medicine, The First Affiliated Hospital of Shandong First Medical University and Shandong Provincial Qianfoshan Hospital, Jinan, Shandong, China.

E-mail address: armzhang@hotmail.com (L. Zhang)