#### Presentation 8 - Mohamed Abou-Donia

# Gene Expression Profiles Following Sarin Exposure

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### **Test Compound**

Sarin

## Sarin-Induced Neurotoxicity

### Sarin causes the following neurotoxic effects:

- 1. Cholinergic Neurotoxicity
- 2. Organophosphate-Induced Delayed Neurotoxicity (OPIDN)
- 3. Organophosphate-Induced Chronic Neurotoxicity (OPICN)
  - a. Acute, high-level exposure
  - b. Low-level Exposure

## Cholinergic System

Neurotransmitter: Acetylcholine (ACh)

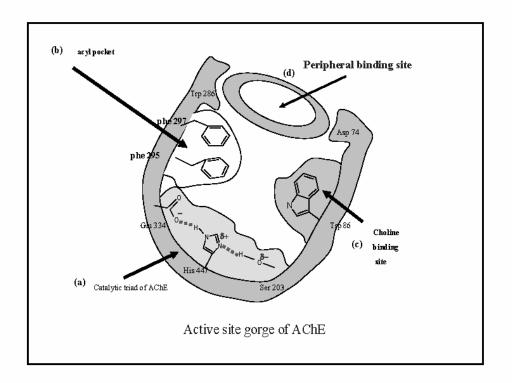
**Synthesis:** Choline acetyltransferase (ChAT)

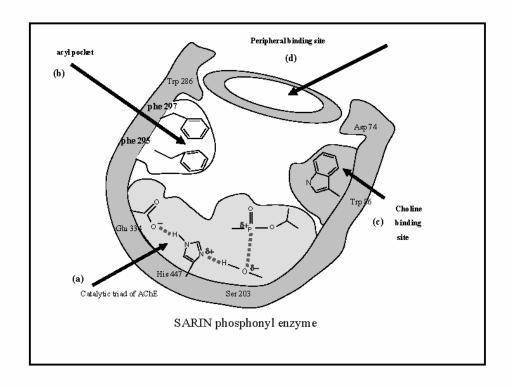
Choline + AcetylCoA + ChAT  $\rightarrow$  ACh

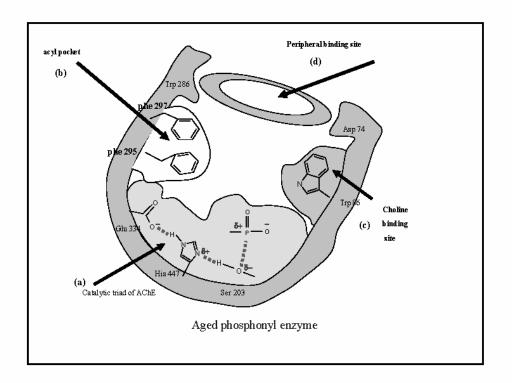
<u>Action:</u> Stimulation of *Muscarinic* and nicotinic acetylcholine receptors

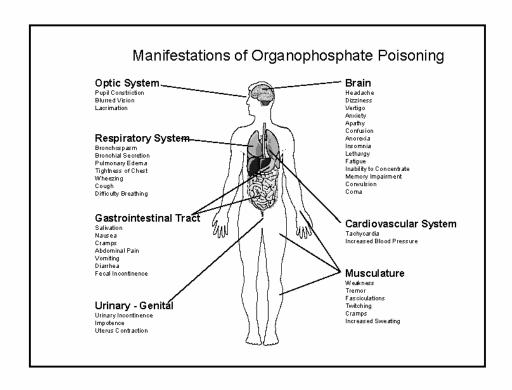
**<u>Hydrolysis:</u>** Acetylcholinesterase (AChE)

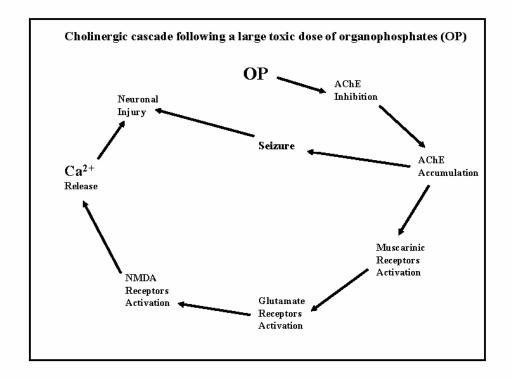
ACh + AChE → Choline + Acetic acid











## Human Exposure to Sarin

### 1. High-level (Acute) Exposure:

- a) Matsumoto City, Japan At midnight of June 27, 1994
- b) Tokyo subway trains At 8:05 AM, on March 20, 1995

### 2. <u>Low-level Exposure:</u>

In 1991 during the Persian Gulf War
U.S. military personnel were exposed to low-level sarin during the destruction of Iraqi munition-containing sarin at Khamisiyah

## Matsumoto (Cholinergic)

- 1. Sarin release was at midnight on June 27, 1994
- 2. About 600 persons were exposed
- 3. Fifty eight were admitted to hospitals
- Seven died
- 5. Miosis was the most common symptom
- 6. Severe cases developed CNS symptoms and cardiomyopathy
- 7. A few victims complained of arrhythmia and showed cardiac contraction.

# Tokyo (Cholinergic)

Patients: 58, (Zuzuki, et al. 1999)

### Severe Poisoning:

Reduced consciousness, miosis, flushing, respiratory distress, *fasciculation, tachycardia, high blood pressure* (nicotinic responses), and flaccid paralysis. Plasma AChE activity: 35% of normal. (Hospital)

#### Mild poisoning:

Headaches, dizziness, nausea, chest discomfort, abdominal cramps, marked miosis.

# Tokyo (Cholinergic)

### **Route of exposure:**

Absence of bradycardia, excessive secretions, which are common in dermal or ingestion exposure, may be related to exposure to gas.

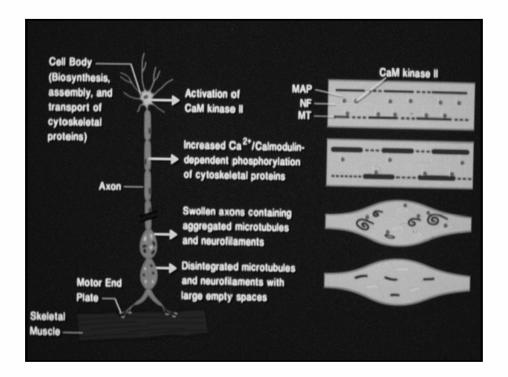
#### **Treatments:**

- 1. Atropine eye drops for marked miosis.
- 2. Pralidoxime Iodide (2-PAM)

### **OPIDN**

#### **Characteristics of OPIDN:**

- 1. A latent period, ranging between 6 and 14 days.
- 2. Neuropathological lesions are in the medulla of the brain, spinal cord, and sciatic nerve.
- 3. Primary degeneration of the axon, followed secondary degeneration of myelin (Wallerian).
- 4. Species and age sensitivity.
- 5. Inhibition of neurotoxicity target esterase (NTE).



## Sarin-Induced OPIDN

<u>The patient:</u> A 51-year man inhaled sarin in the Tokyo subway, died 15 Months later.

#### neuropathologic examination:

marked *nerve decreased* in the sural nerve, moderate *nerve fiber loss* in the sciatic nerve, unremarkable dorsal root ganglia, dorsal roots and posterior column of the spinal cord.

#### **Conclusion:**

Pathology is consistent with OPIDN.

# Sarin-Induced Chronic Neurotoxicity (OPICN)

- 1. Results from direct action of sarin on brain neuronal and glial cells.
- 2. Leads to neurologial dysfunctions characterized by:
  - a) Cognition impairment.
  - b) Locomotor and sensory deficits.
  - c) Body weakness and incoordination.
  - d) Behavioral abnormalities.

### **OPICN**

- 1. Six to eight months after Tokyo poisoning, some victims showed delayed effects on psychomotor performance, visual nervous system, and the vestibulo-cerebellar system, (Yokoyama et al., 1998).
- Females were more sensitive than males in exhibiting delayed effect on the vestibulocerebellar system.

### **OPICN**

- 1. **Three years and nine months** after the **Tokyo** attack, some victims and rescue workers complained of chronic decline of memory (Nishiwaki et al, 2001).
- 2. Three years after the Matsumoto attack, some victims complained of fatigue, shoulder stiffness, weakness, blurred vision (Nakajima et al., 1999)
- 3. Others complained of insomnia, had bad dreams, husky voice, slight fever, and palpitation.

### **OPICN**

"Chronic decline of psychomotor function and memory still exist in Tokyo subway workers, 7 years after the sarin exposure"

K. Miyaki et al., J. Occup. Health 47:,299-304 (2005)

## The Gulf War Syndrome

- 1. Between the invasion of Kuwait by Iraq on August 2, 1990, and March 1991, the U.S. had 697,000 military personnel in the Persian Gulf region.
- 2. Since their return, several thousands, complained of the following chronic symptoms:

  headache, loss of memory, fatigue, muscle and joint pain, ataxia, skin rash, respiratory difficulties, and gastrointestinal difficulties.
- 3. A recent report showed that PGW veterans are twice more likely to develop amyotrophic lateral Sclerosis (ALS) than other military personnel.

## **HYPOTHESIS**

Exposure to low level sarin, alone or in combination with other chemicals and/or stress was involved in the development of the Persian Golf War Veterans' illnesses.

# Specific Aims

To investigate the neurological deficits in the adult male rat, following exposure to sarin:

- 1. Clinical signs
- 2. Brain AChE and Plasma BChE
- 3. M2 muscarinic receptors
- 4. Integrity of the blood blood barrier (BBB)
- 5. Brain neuropathological alterations

### **Test Compound**

Sarin

The stock solution of Sarin (1.9 mg/ml) in saline was stored frozen at  $-80^{\circ}$  C prior to use.

## Experimental

#### Treatment: A dose-response, time course study

Male Sprague-Dawley rats (225 g) were given a single i.m injection of:

- 1. Saline, 0.1 ml/kg (Control)
- 2. Sarin,  $1.0 \times LD_{50}$  (100  $\mu g/kg$ )
- 3. Sarin,  $0.5 \times LD_{50} (50 \mu g/kg)$
- 4. Sarin,  $0.1 \times LD_{50}$  (10 µg/kg)
- 5. Sarin,  $0.01 \times LD_{50} (1 \mu g/kg)$
- 6. Groups of 15 animals from each treatment and control were sacrificed at: 24 hour, 7 days, 30 days, and 10 months.

## **Clinical Condition**

### Sarin at 1 x LD50:

Severe tumors, seizures, and salivation within 3-5 min. of treatment. Half of the animals died within 15 minutes.

### Sarin at 0.5 x LD50:

Tremors by 15-30 min. no animals died.

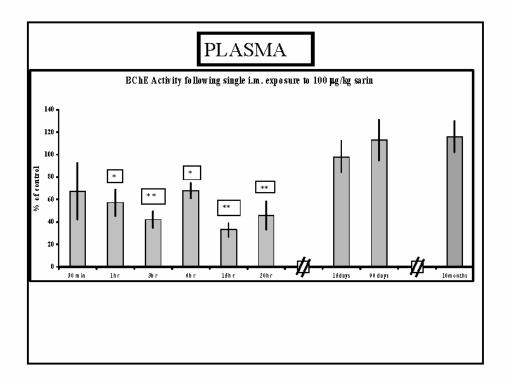
### **Sarin at 0.1 and 0.01 x LD50:**

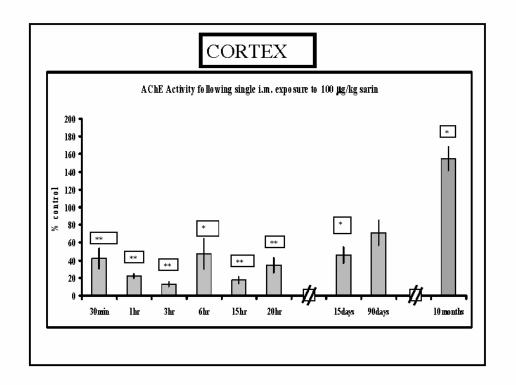
No toxicity signs.

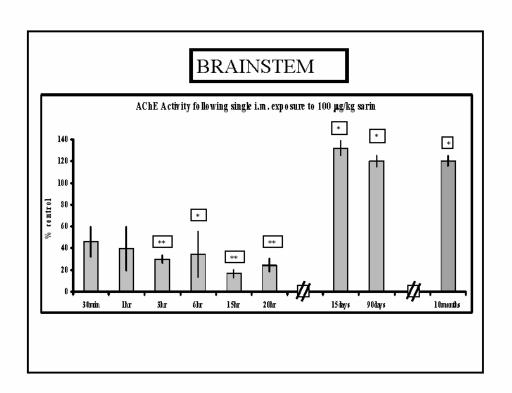
## Effect on enzymatic activity

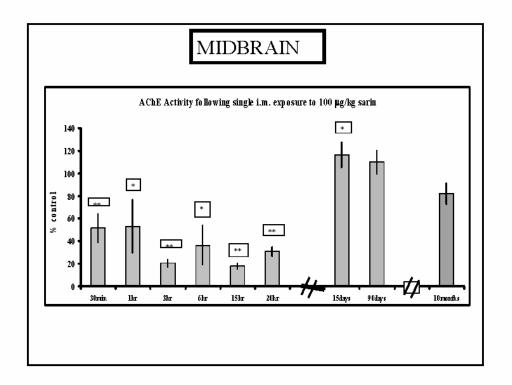
The effect of sarin exposure was determined on the following enzymes:

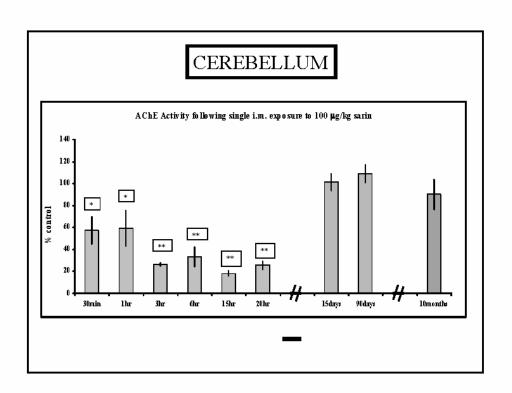
- 1. Plasma butyrylcholinesterase (BChE)
- 2. Brain acetylcholineasterase (AChE)
- 3. Brain Choline acetyltransferase (ChAT)

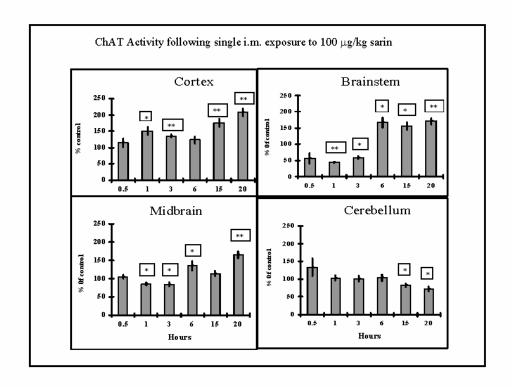




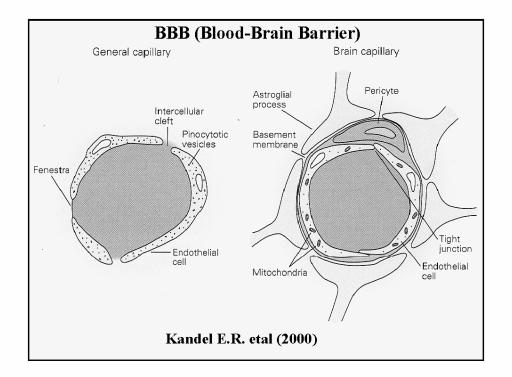








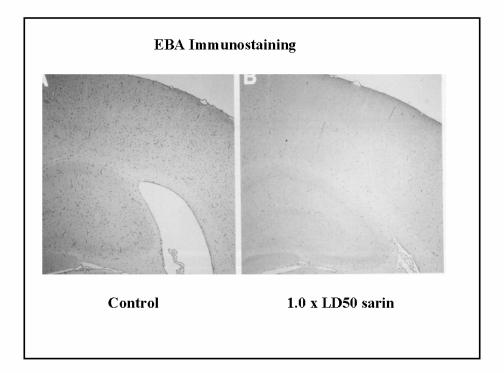
# Effect of Sarin on the Blood Brain Barrier



## Blood Brain Barrier studies

Alterations in the permeability of the BBB were assessed by immunohistchemical staining of *endothelial barrier antigen* (EBA) (using SMI-71 antibody).

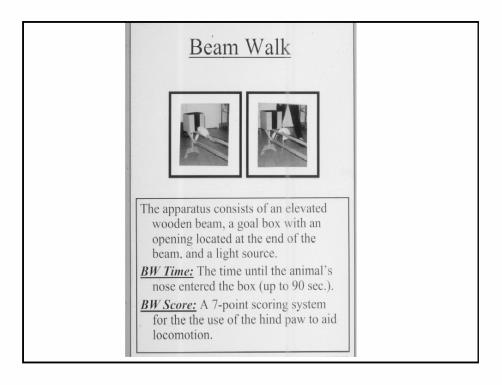
This staining visualizes BBB protein in brain capillaries and in smaller vessels invading the brain parenchyma.

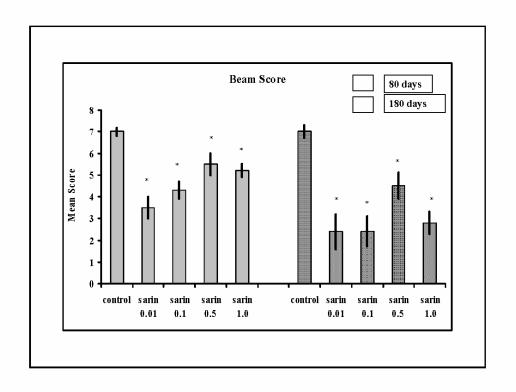


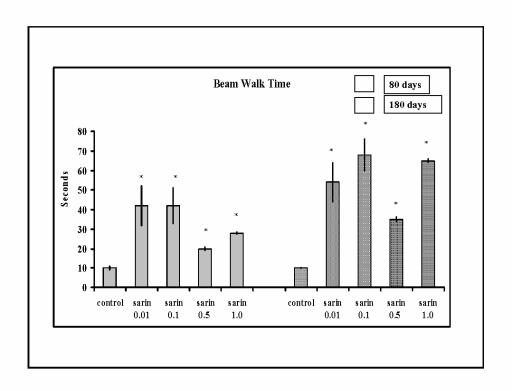
# Effect of Sarin on Sensorimotor Performance

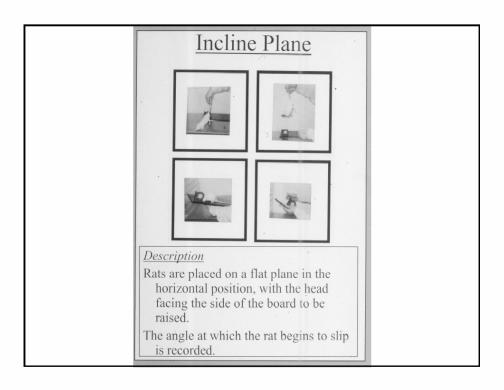
Control and treated animals were evaluated for sensorimotor performance using the following tests:

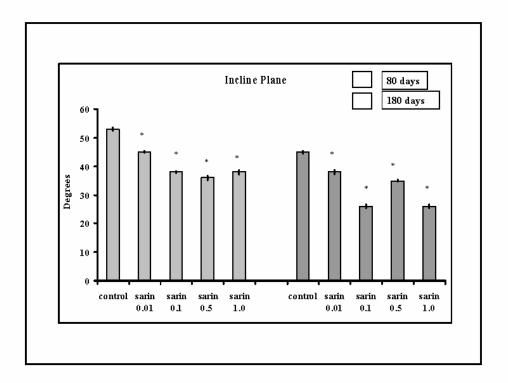
- 1. Beam walk performance and time
- 2. Incline plane performance
- 3. Forepaw grip time









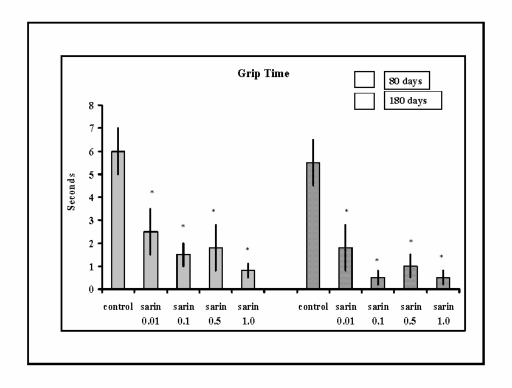


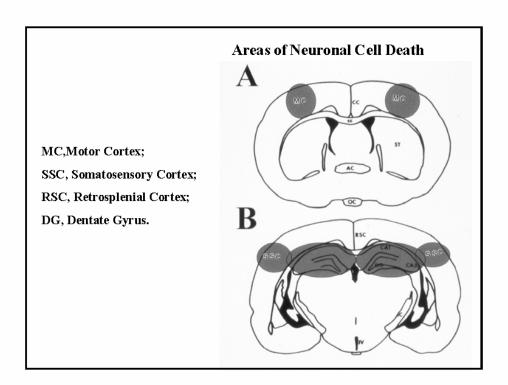
## **GRIP TIME**

PURPOSE: To assess forepaw grip strength

### PROCEDURE:

- 1. Have the rats grip a 5-mm diameter wood dowel
- 2. Time to release grip is recorded in seconds.





# Neuropathological Studies

# NEUROPATHOLOGICAL STUDIES INCLUDED:

- 1. Cerebral cortex
- 2. Hippocampus
- 3. Cerebellum

# AChE-Induced NeuronalCell Death

- An increased AChE protein, in Alzheimer disease causes aggregation of β amyloid peptide, causing neuronal cell death (Inestrosa et al., 1996; Calderon et al., 1988).
- 2. Over expression of AChE activates caspases, leading to apoptosis.

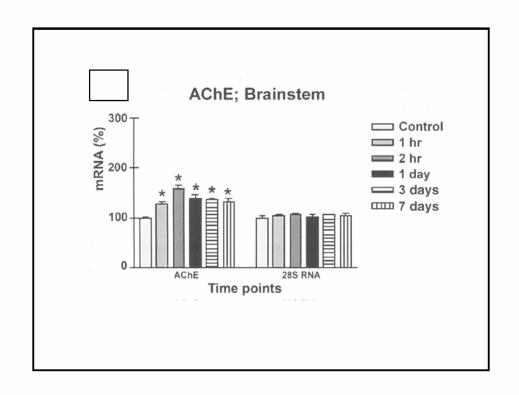
# Sarin-Induced Expression of mRNA Coding of Acetylcholinesterase

**Dose:** 0.5 x LD<sub>50</sub> im sarin

**<u>Time points:</u>** 1 and 2 hours, 1, 3, and 7 days.

### **Results:**

Sarin produced immediate and persistent induction of AChE mRNA levels in various regions of the brain.



### Introduction

Gene profiling studies have the promise to delineate global alterations in molecular expression as toxic effects and mechanisms of action of chemicals with multitude effects, such as sarin GB:

(*O*-isopropyl methylphosphonofluoridate)

# **Specific Aim**

To study sarin-induced global expression profiles at:

- 1. 15 min; after 0.5 x LD<sub>50</sub> sarin
- 2. 30 min; after 1.0 x LD<sub>50</sub> sarin (Intramuscular LD<sub>50</sub> = 100  $\mu$ g/kg)

Using Affymetrix: Rat Neurobiology U34 Chips in male Sprague-Dawley rats,

## Results: Clinical condition

### Rats given 1 X LD<sub>50</sub> exhibited:

- 1. Excessive salivation, severe tremors, seizures, and convulsions within 5-10 min.
- 2. Prolonged convulsion ensued for 3 hr.
- 3. One half of the animals died within 3 hr.
- 4. The remaining animals survived the 3-month experiment.

### **RNA** Isolation

- 1. At each time-point, animals were euthanized, brain dissected out, and separated into the cortex, cerebellum, midbrain and brainstem.
- 2. RNA was extracted using Trizol solution
- 3. About 200-250 μg/μl of total RNA was applied on RNA chip and analyzed on the Agilent Bioanalyzer 2100.

## Chips

- 1. Rat Neurobiology U34 array of the Affymetrix gene chip was used.
- 2. It allowed monitoring the relative abundance of more than 1200 mRNA transcripts.
- 3. It contains genes representing different cell types, signaling pathways, and other functional and structural groups relevant to the nervous system.

## Affymetrix chip hybridization

- 1. The double-stranded cDNA from total RNA was synthesized and isolated from the rat tissue.
- 2. Biotin-labeled cRNA was generated by *in vitro* transcription from the DNA.
- 3. The cRNAs were hybridized to the oligonucleotide probes on the probe arrays for a 16 h incubation at 45 C.
- 4. The DNA chips were scanned with the Affymetrix gene chip scanner.

## Data Analysis

Duke University Bioinformatics Shared Resources Consortium

- 1. Affymetrix Micrtoarray Software Solutions were used to identify the list of genes showing statistically significant levels of alterations.
- 2. Partek clustering and treeview analysis program was used to identify clustering of genes that showed alteration.

### **RESULTS**

Number of genes showed predominated alterations:

- 1. At 15 minutes (0.5 X LD<sub>50</sub>) a total of 65 genes
- 2. At 3 months  $(1.0 \times LD_{50})$  a total of 36

### **RESULTS: 15 Minutes**

At 15 minutes  $(0.5 \times LD_{50})$  the following classes of altered genes predominated:

- Ion channel and Cell adhesion molecule (8 genes).
- 2. Cytoskeletal proteins (8 genes).
- 3. Neuropeptides and their receptors (5 genes each).

## **RESULTS: 15 Minutes**

### The following categories had 2 genes each:

- 1. Cholinergic signaling
- 2. Energy metabolism
- 3. GABAnergic signaling
- 4. Glutamergic and aspartate signaling
- 5. Mitochondria associated proteins
- 6. Myelin proteins
- 7. Neurotransmission and related transporters
- 8. Serotonergic signaling, and
- 9. Tyrosine phosphorylation molecule

## **RESULTS: 15 Minutes**

### The following categories had 1 gene each:

- 1. ATPases and ATP-based transporters
- 2. Catecholaminergic signaling
- 3. Cyclic nucleotide signaling
- 4. Mitochondria associated proteins
- 5. Nitric Oxide signaling
- 6. TNF beta family, and
- 7. Transcription factors

# **RESULTS: 15 Minutes**

Other altered genes at 15 minutes (0.5 X LD<sub>50</sub>) were:

- 1. Cholinergic signaling
- 2. Calcium channels
- 3. Calcium binding proteins
- 4. Transporters
- 5. Chemokines
- 6. GABAnergic
- 7. Glutamatergic
- 8. Aspartate
- 9. Catecholaminergic
- 10. Nitric oxide synthase
- 11. Purinergic
- 12. Serotonergic signaling molecules

# Results: 15 Minutes (% of Control)

#### Receptors

- Nicotinic ACh receptor (150 ± 9)
- Muscarinic ACh receptor (214 ± 4)
- Glutamate receptor  $(177 \pm 2)$
- NMDA receptor-like long variant (142  $\pm$  2%)
- GABA-A receptor  $\alpha$ -subunit (130  $\pm$  5)
- Dopamine receptor  $(225 \pm 3)$
- A1 adenosine receptor  $(201 \pm 1)$
- Purinergic receptor  $(193 \pm 2)$
- Tyrosine Kinase receptor  $(238 \pm 3)$

## Results: Clinical condition

### Rats given 0.5 X LD<sub>50</sub> exhibited:

- 1. Did not develop any of the signs seen in animals given.
- 2. They were inactive 1 X LD<sub>50</sub>.
- 3. All animals survived the experimental period

## Results: 15 Minutes

Down-regulated genes (4 out of 27) ranging from  $46 \pm 11\% - 38\%$ 

- 1. Cyclic nucleotide signaling
- 2. Detoxification molecules
- 3. Mitoch ondria associated proteins
- 4. Neurotransmission and neurotransmitter transporters

## Results: 15 Minutes

- 1. Metabolism Enzyme: Cytochrome P-450 (65% ± 4%)
- 2. Detoxification Enzyme:Glutathione S-transferase (71% ± 2)

## Results: 15 Minutes

### Mitochondrial Associated Proteins:

Bax apoptosis exposure  $(75 \pm 5)$ 

Bcl-2-related ovarian killer protein (BOK, 70 ± 7).

### Nitric oxide signaling:

Nitric oxide synthase (Nos-2, 167% ±1)

## Results: 3 Months

- A total of 38 genes were altered
- An equal number of gene showed upregulation and down regulation (50%)

## Results: 3 Months

Calcium/calmodulin Protein Kinase II	
Brain Region	% of control
Brainstem	$140 \pm 5$
Cerebellum	$182 \pm 2$
Cortex	$35 \pm 3$
<u>Midbrain</u>	62 ± 6

## Results: 3 Months

### Receptors

- 1. GABA A receptor (166 ± 2)
- Glutamate receptor, AMPA subtype (236 ± 1).

## **RESULTS: 3 Months**

At 3 months (1.0 X LD<sub>50</sub>) the following classes of altered genes predominated:

- 1. Calcium channels
- 2. Calcium binding proteins
- 3. Cytoskeletal proteins
- 4. Cell adhesion molecule
- 5. GABAnergic signaling molecules

