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自噬泛素样系统在肿瘤中的研究进展*

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摘要: 自噬是细胞中一种重要的代谢过程,主要负责蛋白质与受损细胞器的降解,并将分解产物用于细胞能量供应和蛋白质合成。细胞自噬水平在一定范围内维持动态平衡以适应外周环境,自噬过度激活或抑制会造成自噬水平失衡,进而导致包括肿瘤在内的多种疾病的发生。近年来研究表明,自噬对肿瘤的发生发展和化疗敏感性具有复杂的调控作用,而自噬过程中的关键步骤受到自噬泛素样结合系统的严密调控。本综述将总结近年来有关自噬泛素样结合系统在肿瘤发生、发展与化疗敏感性中的研究进展,以期为以自噬为靶点的肿瘤研究提供新的视野与策略。

关键词: 自噬; 肿瘤; 化疗敏感性; 肿瘤发生

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Research progress of autophagy ubiquitin-like conjugation system in cancer*

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Abstract: Autophagy is an important cellular metabolic process, which is mainly responsible for the degradation of proteins and damaged organelles, as well as the degradation products for energy supply and protein synthesis. Autophagy is finely regulated to adapt the environment. Excessive activation or inhibition of autophagy can lead to the imbalance of autophagy level, and then lead to the development of a variety of diseases including tumors. Recent studies have shown that autophagy has a complex regulatory role in the occurrence and development of tumors and the sensitivity to radiotherapy and chemotherapy, while the key steps in the process of autophagy are strictly regulated by the autophagy ubiquitin-like conjugation system. Our review is aimed to summarize the effect of autophagy ubiquitin-like conjunction system on the occurrence and development of tumors and the sensitivity to radiotherapy and chemotherapy, so as to provide new perspectives and strategies for future tumor research based on autophagy.

Keywords: Autophagy; Cancer; Chemotherapy; Tumorigenesis

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0 前言

细胞自稳态平衡是有机体进行各种生命活动的前提,细胞合成与代谢过程是维持自稳态平衡的关键。细胞可以感知外界环境变化,进而调控自身合成代谢或分解代谢反应速率,帮助细胞适应环境变化^[1]。细胞内主要有两个降解系统,分别为泛素-蛋白酶体降解系统与自噬系统,两者相互区别又互有联系。泛素-蛋白酶体系统主要负责细胞内短寿蛋白的降解,该系统降解蛋白前需要一类被称为泛素的小分子蛋白与目标蛋白结合,被标记蛋白随后进入蛋白酶体完成降解。泛素与目标蛋白的结合对于后续目标蛋白的降解至关重要。泛素首先在泛素活化酶(ubiquitin-activating enzyme, E1)的作用下被激活,随后转移至泛素结合酶(ubiquitin-conjugating enzyme, E2),经泛素连接酶(ubiquitin ligase, E3)催化,与目标蛋白连接后进入蛋白酶体完成降解^[2-4]。自噬主要负责胞质内长寿蛋白与受损细胞器的降解,其场所为溶酶体。自噬降解产物可用于细胞能量循环供应与蛋白合成,这对于细胞在应激环境中维持自稳态平衡具有重要意义^[5-6]。

自噬由三个连续的过程组成,分别是:自噬小体膜生成、自噬小体发育及溶酶体融合,其中自噬小体发育与成熟是关键调控步骤^[7]。自噬过程受多种信号通路的严密调控,一类由自噬相关基因(autophagy-related gene, ATG)编码的蛋白在其中扮演了重要角色。根据编码蛋白的功能不同,ATGs可分为以下几类:(1) ULK1 蛋白复合物;(2) Beclin-1/PI3K 复合物;(3) ATG8 泛素样结合系统;(4) ATG12-ATG5 泛素样结合系统;(5) ATG9 循环系统。其中 ATG8 泛素样结合系统与 ATG12-ATG5 泛素样结合系统在调控自噬小体形成与成熟中发挥着重要作用^[8-9]。

自噬水平失衡与自身免疫性疾病、神经退行性疾病、心血管疾病和肿瘤等多种疾病的发生发展有关^[6, 10]。其中,自噬在肿瘤的发生、发展与治疗抵抗中同样发挥了重要而复杂的作用^[5, 11-12]。本综述旨在概括自噬泛素样结合系统在肿瘤发生、发展与放疗化疗敏感性中的研究进展。

1 自噬泛素样结合系统

1.1 ATG12-ATG5 泛素样结合系统

ATG12 与泛素蛋白编码基因序列无明显同源

性,但具有与泛素类似的蛋白质三维结构。ATG12 需要一系列类似 E1、E2 与 E3 的酶的催化才能发挥其生物学功能,调控自噬的发生发展^[13-14]。ATG12 泛素样结合系统由 ATG7、ATG10 和 ATG5 构成。ATG7 的功能与 E1 相似,可将 ATG12 的羧基端羟基催化形成硫代酸酯,进而将其激活。ATG10 的功能与 E2 类似,可与激活的 ATG12 结合,随后与半胱氨酸结合进行催化反应。最后,ATG12 被传递到 ATG5,并与其赖氨酸残基以异构肽的形式结合^[15]。目前研究表明,ATG12-ATG5 泛素样结合系统中可能缺少与 E3 功能类似的蛋白,ATG10 可能直接负责催化 ATG12 与 ATG5 的结合。ATG12-ATG5 结合后会立刻与 ATG16 结合形成蛋白复合物,ATG16 中的卷曲螺旋结构域会进一步促进自身同源体聚合^[16]。新形成的 ATG12-ATG5-ATG16 复合物经过低聚化处理后生成包含四亚基蛋白的复合物,后者将与新生的自噬小体膜结合,促进自噬小体的延伸^[17]。而破坏 ATG12-ATG5 泛素样结合系统可以抑制多种细胞的自噬水平^[9, 18-20]。

1.2 ATG8 泛素样结合系统

ATG8-磷脂酰乙醇胺(phosphatidylethanolamine, PE)泛素样结合系统由 ATG8、ATG4、ATG7 和 ATG3 构成。ATG8 是一种分布于胞质的可溶性蛋白,经过类似泛素系统的反应后与自噬小体内膜上的 PE 以共轭形式结合,促进自噬小体的发育与成熟。ATG4 家族成员属于半胱氨酸水解酶,新合成的 ATG8 蛋白需要在 ATG4 家族成员的催化下水解羧基端多余的氨基酸残基,暴露羧基端上的甘氨酸残基,才能完成后续反应。ATG7、ATG3 分别作为 E1、E2 样酶,先后与 ATG8 以硫酯键的形式结合。ATG8 在上述蛋白的参与下传递至自噬小体内膜,与 PE 氨基酸残基以酰胺键的形式发生共轭结合。ATG8-PE 在细胞中分布广泛,几乎存在于所有的自噬相关结构。ATG8-PE 在自噬调控中具体的分子机制并不十分清楚。相关研究提示,ATG8-PE 可能在自噬小体膜的闭合与发育中发挥调控作用^[21-25]。此外,有研究表明,ATG8 突变会导致自噬小体体积减少和膜闭合障碍,抑制自噬小体形成^[26]。同样,另一项研究显示,干扰 ATG8 表达可导致自噬小体体积减少^[27]。

1.3 ATG12-ATG5 与 ATG8 的相互调控

ATG12-ATG5 与 ATG8-PE 泛素样结合系统间存在相互调控作用。既往研究表明,敲除 ATG12、

ATG5 或 ATG10 的表达,可导致 ATG8 泛素样结合系统功能缺陷^[28-29]。同时,细胞外研究表明,利用 PE-脂质体、ATP 及纯化的 ATG8、ATG7、ATG3 蛋白可以促使 ATG8-PE 结合^[30]。此外,有研究对大肠杆菌进行 ATG12、ATG5、ATG7 和 ATG10 过表达后提取到 ATG12-ATG5 复合物,将 ATG12-ATG5 复合物加入细胞外 ATG8 体系中可以促使 ATG8-PE 结合^[31]。

2 ATG12-ATG5 泛素样结合系统与肿瘤

2.1 ATG12-ATG5 泛素样结合系统与肿瘤的发生发展

自噬在肿瘤的发生发展与治疗抵抗中发挥着复杂的调控作用。一方面,抑制自噬可能会导致正常细胞发生恶性转化;另一方面,放疗、化疗及靶向药物治疗会刺激肿瘤细胞自噬水平升高。抑制肿瘤细胞自噬活性可以提高肿瘤细胞的放化疗敏感性。笔者从 ATG8 泛素样结合系统和 ATG12-ATG5 泛素样结合系统出发,着重概括自噬泛素样系统中 ATG 蛋白在肿瘤发生发展与放化疗敏感性中的功能与机制。

自噬可以通过多方面抑制肿瘤的发展。相关研究表明,干扰 ATG12 可促进肝癌细胞凋亡,并抑制黑色素瘤与胶质母细胞瘤的侵袭^[32-33]。自噬还可通过影响宿主代谢水平抑制肿瘤的生长与发展。Poillet-Perez 等^[34]研究表明,敲除小鼠的 ATG7 基因,可使小鼠血浆精氨酸酶降低,进而导致精氨酸水平降低;而精氨酸是肿瘤生长与发展的必要氨基酸,其水平降低可直接抑制小鼠体内多种肿瘤的生长。如前所述,ATG12 经过 ATG7 的传递后与 ATG5 结合形成复合物,而干扰 ATG5 表达会破坏蛋白复合物的形成,显著抑制细胞自噬水平。因此,干扰 ATG5 表达可抑制多种肿瘤的发生发展,并提高放化疗敏感性^[34-40]。KIT 基因突变是 AML 患者常见的基因突变,相比于非突变患者,KIT 突变患者预后较差。Larrue 等^[41]研究表明,KIT^{D816V} 突变可以通过 STAT3 激活自噬,进而促进白血病细胞增殖;而干扰 ATG7 表达可抑制 KIT^{D816V} 驱使的自噬活性增加,并逆转肿瘤细胞的生长与增殖。

2.2 ATG12-ATG5 泛素样结合系统与肿瘤治疗敏感性

化疗与放疗是临床治疗肿瘤的重要手段,放化疗敏感性对肿瘤患者的预后具有重要影响。自噬是影响放化疗敏感性的重要因素之一,抑制细胞自

噬可以提高肿瘤的放化疗敏感性。既往研究表明,干扰 ATG5 表达可以增强顺铂、吉非替尼和埃罗替尼对肿瘤的杀伤效果^[42-44]。同时,干扰 ATG5 也可以提高肺癌细胞对放疗的敏感性^[45]。此外,ATG5 对血液系统恶性肿瘤的化疗敏感性也有调控作用。相关研究表明,干扰 ATG5 表达可抑制白血病的发展,并提高其化疗敏感性^[40, 46-47]。Sumitomo 等^[48]研究发现,在急性髓系白血病(acute myeloid leukemia, AML)小鼠模型中敲除 ATG7 或 ATG5 基因可以抑制肿瘤细胞的自噬水平,敲除 ATG7 表达还可以提高 AML 小鼠对阿糖胞苷的化疗敏感性,并显著改善小鼠的预后。Piya 等^[49]研究同样表明,ATG7 表达与 AML 细胞的化疗敏感性显著相关,干扰 ATG7 表达可以提高白血病细胞对化疗药物的敏感性。进一步动物实验结果显示,干扰 ATG7 表达可以增强阿糖胞苷的抗肿瘤活性。值得注意的是,虽然大部分研究显示抑制细胞自噬水平可以遏制肿瘤的发生发展,但也有研究提示自噬在肿瘤的发生发展和治疗敏感性中可能扮演了不同角色。例如,有研究发现干扰 ATG12-ATG5 泛素样结合系统中的基因表达可以促进肿瘤的发生^[50-53];破坏 ATG5-ATG12 泛素结合系统可促进肿瘤细胞的迁移和侵袭^[54-59]。上述研究共同提示,自噬在肿瘤中的作用重要且复杂,在不同条件下对不同肿瘤的作用可能完全不同,未来还需要进一步的研究探索自噬在肿瘤中的具体作用与分子机制。

3 ATG8 泛素样结合系统与肿瘤

3.1 ATG8 泛素样结合系统与肿瘤的发生发展

ATG8 泛素样结合系统成员包括 ATG8、ATG4、ATG7 和 ATG3。其中 ATG4 家族共包含四个成员,分别是 ATG4A、ATG4B、ATG4C 和 ATG4D,分别在自噬中发挥相似又不同的调控功能^[22]。ATG8 在哺乳动物细胞中的同源体基因是 MAP1LC3 (LC3)。MAP1LC3 共有 3 个亚型,分别为 MAP1LC3A (LC3A)、MAP1LC3B (LC3B) 和 MAP1LC3C (LC3C),其中 LC3B 被认为是最重要的亚型。在自噬小体形成过程中,LC3B 与自噬小体膜上的 PE 结合,参与自噬小体膜的发育与成熟。此外,自噬研究中常把 LC3B 作为自噬标志物^[16]。

既往研究表明,干扰 LC3 表达可抑制乳腺癌细胞的增殖、迁移与侵袭^[60],并促进乳腺癌与肝癌的化疗敏感性^[61-62]。ATG4B 被认为是 ATG4 家族中酶

活性最强的成员,干扰 ATG4B 表达可抑制多种肿瘤的发生发展,并提高其化疗敏感性^[34, 38, 63-65]。既往体外酶活性研究发现,相比于 ATG4A 与 ATG4B, ATG4C 与 ATG4D 的酶活性较低,可能在自噬调控中功能有限,但最新的研究认为 ATG4C 与 ATG4D 在自噬中亦发挥了各自的作用^[22]。相关研究表明,干扰 ATG4C 可以抑制胶质母细胞瘤的发展与乳腺癌干细胞的易感性^[66-67];干扰 ATG4D 可以抑制白血病细胞的分化^[68]。此外,干扰 ATG3 表达可以抑制肝癌的发生与侵袭^[69-70],还可抑制白血病细胞的分化并促进肿瘤细胞凋亡^[68]。

3.2 ATG8 泛素样结合系统与肿瘤治疗敏感性

ATG8 泛素样结合系统在肿瘤治疗敏感性中同样发挥着重要的调控作用。Huang 等^[38]研究表明,干扰 ATG4B 表达可以促进替莫唑胺和放疗对胶质瘤的杀伤作用。干扰 ATG3 表达可以提高包括鼻咽癌、肺癌、鳞状细胞癌在内的多种肿瘤的放化疗敏感性^[35, 71-72]。

4 总结

自噬在肿瘤的发生发展及放化疗敏感性中扮演着重要角色。作为自噬过程中的关键步骤,自噬小体形成与发育受到 ATG8 泛素样结合系统和 ATG12-ATG5 泛素样结合系统的严密调控,并在肿瘤的发生发展与治疗抵抗中扮演重要角色。破坏 ATG8 泛素样结合系统与 ATG12-ATG5 泛素样结合系统功能将抑制多种肿瘤的发展,并提高其放化疗敏感性。虽然过往研究提示自噬泛素样调控系统可能是肿瘤治疗的潜在重要靶点,但考虑到自噬对肿瘤调控的复杂性,有关自噬在肿瘤治疗与预防中的应用仍然需要未来大量的研究进一步探索与明确。

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