

Retinoid Signaling in Progenitors Controls Specification and Regeneration of the Urothelium

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<http://dx.doi.org/10.1016/j.devcel.2013.07.017>

SUMMARY

The urothelium is a multilayered epithelium that serves as a barrier between the urinary tract and blood, preventing the exchange of water and toxic substances. It consists of superficial cells specialized for synthesis and transport of uroplakins that assemble into a tough apical plaque, one or more layers of intermediate cells, and keratin 5-expressing basal cells (K5-BCs), which are considered to be progenitors in the urothelium and other specialized epithelia. Fate mapping, however, reveals that intermediate cells rather than K5-BCs are progenitors in the adult regenerating urothelium, that P cells, a transient population, are progenitors in the embryo, and that retinoids are critical in P cells and intermediate cells, respectively, for their specification during development and regeneration. These observations have important implications for tissue engineering and repair and, ultimately, may lead to treatments that prevent loss of the urothelial barrier, a major cause of voiding dysfunction and bladder pain syndrome.

INTRODUCTION

The urothelium is a stratified epithelium derived from endoderm (Wells and Melton, 1999) that extends from the renal pelvis to the proximal urethra that serves as a crucial barrier between the blood and urine. The mature urothelium consists of a layer of keratin 5-expressing basal cells (K5-BCs), intermediate cells (I cells), and a luminal layer of superficial cells (S cells). S cells are terminally differentiated and are specialized for synthesis

and transport of uroplakins (Upks), a family of molecules that assemble into apical crystalline plaque that is waterproof and damage resistant (reviewed in Khandelwal et al., 2009; Wu et al., 2009). Damage to the urothelial barrier can compromise bladder function, lead to inflammation, and expose suburothelial nerve fiber receptors to urinary toxins, a possible mechanism behind chronic bladder pain or interstitial cystitis (Wyndaele and De Wachter, 2003). Thus, identification of urothelial progenitors and the signaling pathways that regulate them will be important for designing strategies for tissue augmentation and regeneration.

The urothelium is distinguishable in the mouse embryo on E11.5 when the bladder begins to form at the anterior aspect of the urogenital sinus. It is thought to assemble in a linear sequence, beginning with K5-BC progenitors that produce I cells and S cells that populate upper layers (Shin et al., 2011). The adult urothelium is quiescent but can rapidly regenerate in response to acute damage such as urinary tract infection or exposure to drugs and toxins (reviewed in Khandelwal et al., 2009). The injury response begins with desquamation of the damaged urothelium, followed by a massive wave of proliferation that reconstitutes the urothelial barrier within 72 hr, observations that suggest the existence of a progenitor population. Fate mapping studies using a tamoxifen (TM)-inducible *Shh^{CreERT2};mTmG* to indelibly label *Shh⁺* cells support the existence of a population of *Shh*-expressing progenitors in the adult that are proposed to be K5-BCs (Shin et al., 2011). It remains unclear, however, whether these progenitors are also important for generating the urothelium during embryonic development.

Retinoic acid (RA) is a potent signaling molecule that regulates self-renewal and pluripotency and specification in embryonic stem (ES) cells and other progenitors, by inducing chromatin modifications in regulatory regions of RA-responsive genes (Kashyap et al., 2011). Retinoids are important in adults for vision and fertility, maintaining a wide variety of specialized epithelia (Wolbach and Howe, 1925), and are critical regulators of

organogenesis. RA is synthesized from retinol, an inactive precursor that is taken up by cells and converted to RA in a two-step process by retinol dehydrogenase-10 (Rdh10) and retinaldehyde dehydrogenase-2 (Raldh2), enzymes that are selectively expressed in cells where active RA signaling is required (Duester, 2008; Niederreither and Dollé, 2008). Once available, RA regulates transcription by binding to and activating RA receptors (Rars), a family of eight transcription factors that are widely expressed in adults and embryos. Rars control transcription by binding to RA-response elements in promoter regions of target genes in association with Rxrs, a second family of nuclear receptors. In the absence of RA, Rar/Rxr heterodimers are frozen in an inactive conformation; however, RA binding to the Rar/Rxr heterodimer induces a conformational change, converting the inactive complex to a transcriptionally active state (Samarut and Rochette-Egly, 2012).

The observations that RA regulates the adult steady-state urothelium (Liang et al., 2005), together with recent studies showing that RA can induce ES cells to differentiate into urothelial cells (Mauney et al., 2010), suggest that retinoids may be important regulators of urothelial differentiation in vivo. To address this, we examined the requirement for RA signaling in urothelial cells by expressing a dominant inhibitory form of Retinoic acid receptor alpha (*RaraT403*) in urothelial progenitors. *RaraT403* lacks the ligand-dependent activation domain that is critical for recruiting histone modifiers (Kashyap et al., 2011) and is thus a potent inhibitor of endogenous RA signaling in vivo and in vitro (Blumberg et al., 1997; Damm et al., 1993). *RaraDN* has been inserted into the *Rosa26* locus (Soriano, 1999) after a floxed STOP sequence to generate (*Gt(ROSA)26Sor*) mice (hereafter called *RaraDN* mice). We showed previously that Cre-dependent expression of *RaraDN* generates a collection of defects that are virtually identical to those observed in RA deficiency and in mutants lacking components of the RA-signaling pathway (Table S1 available online) that increase the severity of phenotypes in a dose-dependent manner (Chia et al., 2011; Rosselot et al., 2010). Importantly, defects induced by expression of *RaraDN* appear to be specific for Rar signaling because we have not observed abnormalities that could be linked to inhibition of transcription via other nuclear receptor family members (Table S1).

The *Shh*-expressing population in the adult urothelium contains progenitors that have long-term regenerative capacity and that have been proposed to be K5-BCs (Shin et al., 2011). We show here that the *Shh*-expressing population in embryos contains K5-BCs as well as two additional cell types: P cells, which are present in the embryonic urothelium, but not in the adult; and I cells, which are present in the embryonic and adult urothelium. Lineage studies using a *Krt5^{CreERT2}* line to indelibly label K5-BCs and their daughters indicate that K5-BCs are unlikely to be progenitors in the embryo or in adults. On the other hand, we find that P cells, a transient urothelial cell type, are progenitors in the embryo, and I cells are progenitors in the adult regenerating urothelium, and we show that retinoids are required both in P cells and I cells for their specification. These observations could have important implications for tissue engineering and repair and may lead to treatments for patients with voiding dysfunctions and/or painful bladder syndrome that are associated with loss of the urothelial barrier function.

RESULTS

Shh-Expressing Cells Are Progenitors in the Embryonic Urothelium

The mature urothelium is composed of a layer of basal cells that are positive for Krt5 and P63 (K5-BCs), one to two layers of I cells that express Upk and P63, but not Krt5, and a luminal layer of S cells that express Upk, but not Krt5 or P63 (Figures 1A and 1F; in this figure and in subsequent figures, yellow arrowheads designate S cells, purple arrowheads designate I cells, and green arrowheads designate K5-BCs). Recent fate mapping studies using *Shh^{CreERT2+/-};mTmG* mice to indelibly label *Shh⁺* cells and their daughters support the existence of a population of *Shh*-expressing progenitors with long-term regenerative potential (Shin et al., 2011). Based on the colocalization of *Shh* and Krt5, a marker of K5-BCs, it was proposed that the urothelial progenitor is a K5-BC. An interesting question, however, is whether this progenitor population also participates in de novo urothelial formation in the embryo.

Shh^{CreERT2+/-} mice, which harbor a TM-inducible form of Cre (Harfe et al., 2004), were crossed with *Gt(ROSA)26Sor^{tdTomato,-EGFP}* (*Rosa26*-membrane-*Tomato*/membrane-*GFP* reporter mice; hereafter called *mTmG* mice). In TM-treated *Shh^{CreERT2+/-};mTmG* mice, membrane-bound *GFP* is expressed in cells that undergo Cre-mediated recombination, and membrane-bound *Tomato* is expressed constitutively from the *Rosa26* promoter in cells where recombination has not taken place (Muzumdar et al., 2007). We used this reporter line in fate mapping experiments to evaluate the potential of the *Shh⁺* population in the developing urothelium. We first examined the specificity of Cre-dependent recombination by comparing the distribution of *Shh* mRNA with the *GFP* lineage tag in *Shh^{CreERT2};mTmG* embryos. In situ hybridization analysis indicates that *Shh* mRNA is expressed in virtually all urothelial cells between E10 and E13, becoming restricted to the basal and intermediate layers by E14, when S cells begin to form in the upper layer (Figures S1A–S1C). To evaluate the initial distribution of Cre recombination, we analyzed the urothelium in TM-treated *Shh^{CreERT2};mTmG* embryos after a short chase. TM was administered at E11, when the urothelium begins to form, and at E14, when the urothelium is stratified, and embryos were analyzed 24 hr later. In E12 *Shh^{CreERT2};mTmG* embryos exposed to TM at E11, *GFP* labeling was throughout the developing urothelium in a pattern that overlaps well with endogenous *Shh* mRNA (Figures 1B, 1G, and S1; compare Figures S1A and S1D). In E15 *Shh^{CreERT2};mTmG* embryos exposed to TM on E14, *GFP* labeling was present in the intermediate and basal layers where *Shh*-mRNA is expressed but was undetectable in the S cell layer, where *Shh* mRNA is downregulated (Figures S1B and S1E–S1I). Together, these findings indicate that Cre-dependent recombination in *Shh^{CreERT2};mTmG* embryos is restricted to *Shh*-expressing cells.

To evaluate whether *Shh⁺* cells can generate S cell daughters, *Shh^{CreERT2};mTmG* embryos were exposed to TM on E11 or E14 and analyzed at E18 when the urothelium is stratified and mature S cells occupy the luminal layer. In E18 embryos exposed to TM at E11, *GFP* expression was present in 70% of urothelial cells, including the S cell compartment where labeling was in 45% of the population (Figures 1C, 1D, and 1H–1K). In E18 embryos

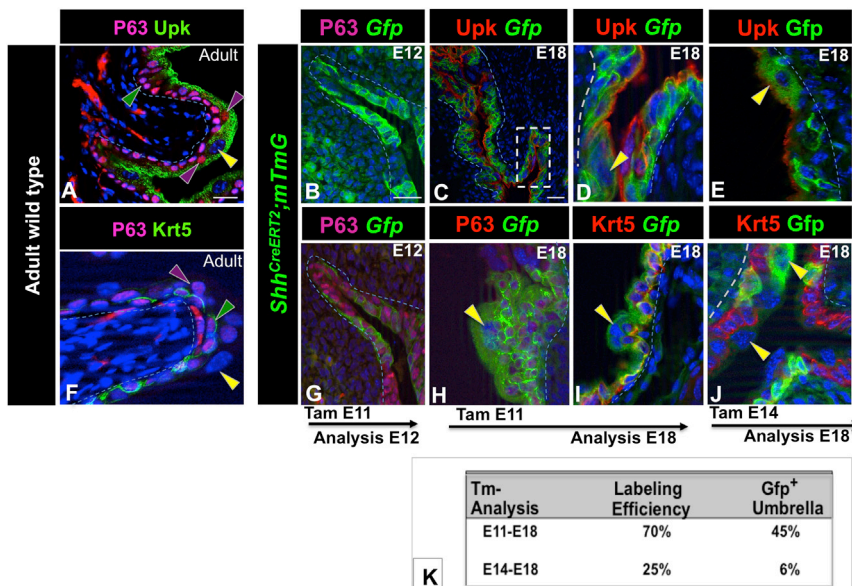


Figure 1. *Shh*-Expressing Cells Are Progenitors in the Developing Urothelium

(A) A section from an adult urothelium stained with Upk (green) and P63 (pink). (B) A section from an E12 *Shh^{CreERT2};mTmG* embryo treated with TM at E11. (C) Upk expression (red) in an E18 *Shh^{CreERT2};mTmG* embryo exposed to TM on E11. (D) Higher magnification of (C). (E) Upk expression (red) in a section from an E18 *Shh^{CreERT2};mTmG* embryo exposed to TM on E14. (F) A section from an adult urothelium stained with Krt5 (green) and P63 (pink). (G) P63 expression (pink) in the urothelium from an E12 *Shh^{CreERT2};mTmG* embryo treated with TM on E11. (H) P63 expression (pink) in an E18 *Shh^{CreERT2};mTmG* embryo exposed to TM on E11. (I) Krt5 expression (red) in an E18 *Shh^{CreERT2};mTmG* embryo exposed to TM on E11. (J) Krt5 expression (red) in an E18 *Shh^{CreERT2};mTmG* embryo exposed to TM on E14. (K) A table showing the labeling efficiency after TM treatment at E11 versus E14, and the

percentage of S cells in E18 *Shh^{CreERT2};mTmG* embryos expressing the *GFP* lineage tag 7 and 4 days after TM treatment, respectively. Yellow arrowheads point to S cells, green arrowheads indicate K5-BCs, and purple arrowheads show I cells. *mTmG* GFP-positive cells are green. Magnifications, 20× (C) and 40× (A, B, and D–J). Scale bars, 50 μm. See also Figure S1.

exposed to TM at E14, 25% of urothelial cells were *GFP* labeled, including 6% of the S cell population (Figures 1E, 1J, and 1K). Because Cre-mediated recombination peaks between 6 and 48 hr after TM exposure (Hayashi and McMahon, 2002), these observations suggest that *Shh*-expressing progenitors are present in the urothelium between E11.5 and E16.

The Urothelium Stratifies in a Unique Manner

According to the current thinking, the urothelium stratifies in a similar fashion, as does the skin, beginning with K5-BC progenitors that produce mature cell types that progressively populate the upper layers. A surprising observation, however, is that *Krt5*, an early marker of K5-BCs, is barely detectable prior to E15, a stage when S cells and I cells have already formed (Figures S2A–S2I). We therefore examined the composition of the *Shh*⁺ population to determine the ontogeny of different cell types and to identify potential progenitor populations. *Shh* is secreted, and *Upk*, the definitive marker of both I cells and S cells, is expressed on the apical surface making it difficult to distinguish individual positive cells (e.g., Figures S2G–S2L). We therefore used *Shh^{GFP/Cre}* and *Shh^{nLacZ}* reporter mice (Harfe et al., 2004; Lewis et al., 2004) to define cell types present in the *Shh*⁺ population, and we generated *Up2-Cfp* reporter mice that express *Cfp* driven by *Up2* regulator sequences to evaluate the distribution of *Upk*-expressing cells (Figures S2M and S2N).

Marker analysis of *Shh^{GFP/Cre}* and *Shh^{nLacZ}* mice revealed that the *Shh*-expressing population in the embryonic urothelium contains four cell types: an undifferentiated endodermal population (**Foxa2⁺ Upk⁻ P63⁺ Shh⁺ Krt5⁻**); P cells (**Foxa2⁺ Upk⁺ P63⁺ Shh⁺ Krt5⁻**), which are a transient cell type abundant between E11 and E13 but undetectable at later stages (Figures 2A–2E); I cells (**Foxa2⁻ Upk⁺ P63⁺ Shh⁺ Krt5⁻**), which are abundant in the basal and intermediate layers at E14 and in adults, reside

in the intermediate layer where they comprise 5% of the urothelial population (Figures 2H, 2I, 2K, and 2O); and K5-BCs (**Foxa2⁻ Upk⁻ P63⁺ Shh⁺ Krt5⁺**), which are first detected between E14 and E15 and by E18, are the majority of cells in the urothelium (Figures 2J, 2K, 2N, and 2O). S cells, which are negative for *Shh* expression (**Foxa2⁻ Upk⁺ P63⁻ Shh⁻ Krt5⁻**), are first detectable in an immature mononucleated form at E14 (Figure 2F) and by E18, are multinucleated, resembling their mature counterparts (Figure 2G). Analysis of the distribution of *UP2-Cfp* activity confirmed these observations: *Up2-Cfp*⁺ P cells coexpressing *Foxa2* were detected between E11 and E13, whereas *Up2-Cfp* expression was restricted to I cells and S cells at later stages (Figures 2L and 2M; data not shown). At birth, 90% of cells in the urothelium are K5-BCs, which occupy the basal layer, 5% are I cells, and 5% are S cells (Figure 2P).

Fate Mapping Indicates that the K5-BCs Are Not Urothelial Progenitors in the Embryonic or Adult Urothelium

The observations that (1) K5-BCs are undetectable in the urothelium between E11 and E14 when progenitor potential is high, and (2) K5-BCs form after S cells, I cells, and P cells, suggest that K5-BCs are unlikely to be urothelial progenitors during development. To directly address this question, we performed fate mapping studies using Cre-lox recombination to indelibly label K5-BCs and their daughters. *Tg(KRT5CreERT2)* mice (hereafter referred to as *K5^{CreERT2}* mice) express a transgene containing *Krt5* regulatory sequences fused to the TM-inducible *Cre/ERT2* cassette that drives Cre-dependent recombination in *Krt5*-expressing cells, including epidermis (Indra et al., 1999). Based on the distribution of *Krt5* expression, K5-BCs appear between E14 and E15. We therefore exposed *Krt5^{CreERT2};mTmG* embryos to TM on E14 and analyzed the distribution of *GFP*-positive cells after 4 days,

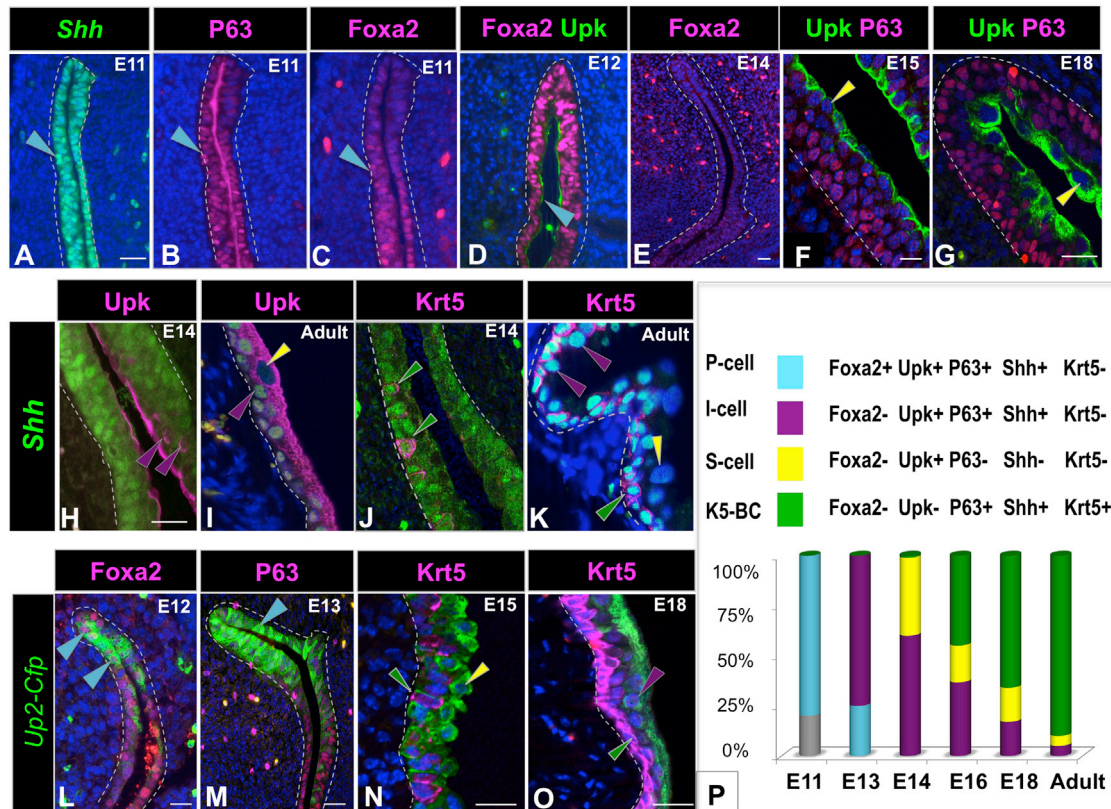


Figure 2. The *Shh* Population Contains Multiple Cell Types

(A) A section from an E11 *Shh^{GFP/Cre}* embryo immunostained for expression of GFP (green nuclear staining). (B) A serial section from the same embryo as in (A) stained for expression of P63 (pink). (C) A serial section from the same embryo as in (A) stained for expression of Foxa2. (D) A section from an E12 embryo showing P cells expressing Foxa2 (pink) and Upk (green). (E) A section from an E14 embryo stained with Foxa2 antibody (pink), which is undetectable. (F) A section from an E14 embryo stained for expression of Upk (green) and P63 (pink). (G) A section from the urothelium of an E18 embryo stained for expression of P63 (pink) and Upk (green). (H) A section from an E14 *Shh^{GFP/Cre}* embryo (GFP is green nuclear staining) stained for expression of Upk (pink). (I) A section from an adult *Shh^{nIacZ}* embryo (*nIacZ* is green nuclear staining) stained with Upk antibody (pink). (J) A section from an E14 *Shh^{GFP/Cre}* embryo (GFP is green nuclear staining) stained for expression of Krt5 (pink). (K) A section from an adult *Shh^{nIacZ}* embryo (*nIacZ* is green nuclear staining) stained for expression Krt5 (pink). (L) A section from an E12 *Up2-Cfp* embryo (*Cfp* detected with anti-GFP antibody is shown in green) stained for expression of Foxa2 (pink). (M) A section from an E13 *Up2-Cfp* embryo stained for expression of P63 (pink). *Cfp* detected with anti-GFP antibody is shown in green. (N) A section from an E15 *Up2-Cfp* embryo stained for expression of Krt5 (*Cfp* detected with anti-GFP antibody is shown in green). (O) A section from an E18 *Up2-Cfp* embryo stained with Krt5 antibody (pink). *Cfp* detected with anti-GFP antibody is shown in green. (P) A schematic showing the color code for different urothelial cell types and the relative proportions in the embryonic and adult urothelium. In this and subsequent figures, S cells are marked with yellow arrowheads, I cells with purple arrowheads, K5-BCs with green arrowheads, and P cells with blue-green arrowheads. Magnifications, 20× (A–D, L, and M), 10× (E), and 40× (F–K, N, and O). Scale bars, 50 μm. See also Figure S2.

which in experiments with the *Shh^{CreERT2};mTmG* line as a lineage marker, was sufficient time to label 6% of the S cell population (Figures 1E, 1J, and 1K). In E18 *Krt5^{CreERT2};mTmG* embryos exposed to TM on E14, Cre-dependent recombination occurred in about 22% of urothelial cells, and labeling was confined almost exclusively to the K5-BC population (Figures 3A and 3C). Similar findings were obtained in experiments where TM was administered at E14 in utero, and embryos were analyzed after either 1 or 3 months; lineage-tagged cells were almost exclusively K5-BCs with an occasional GFP-labeled cell in the intermediate layer (Figures 3B, 3D, and 3K; data not shown). These results suggest that K5-BCs are not urothelial progenitors during development.

K5-BCs have been proposed to be progenitors with long-term regenerative capacity in the adult urothelium based on fate mapping experiments using the *Shh^{CreERT2};mTmG* line (Shin et al., 2011), which drives Cre-dependent recombination in I cells as well as in K5-BCs (Figures 2I, 2K, and S1F–S1I). To directly determine whether K5-BCs have regenerative potential in the adult urothelium, we performed parallel fate mapping experiments using the *Krt5^{CreERT2};mTmG* and *Shh^{CreERT2};mTmG* as lineage markers for K5-BCs and *Shh*-expressing cells, respectively, after treatment with cyclophosphamide (CPP), which induces a rapid cycle of injury and repair (Farsund and Dahl, 1978). To assess the kinetics of regeneration in our experimental

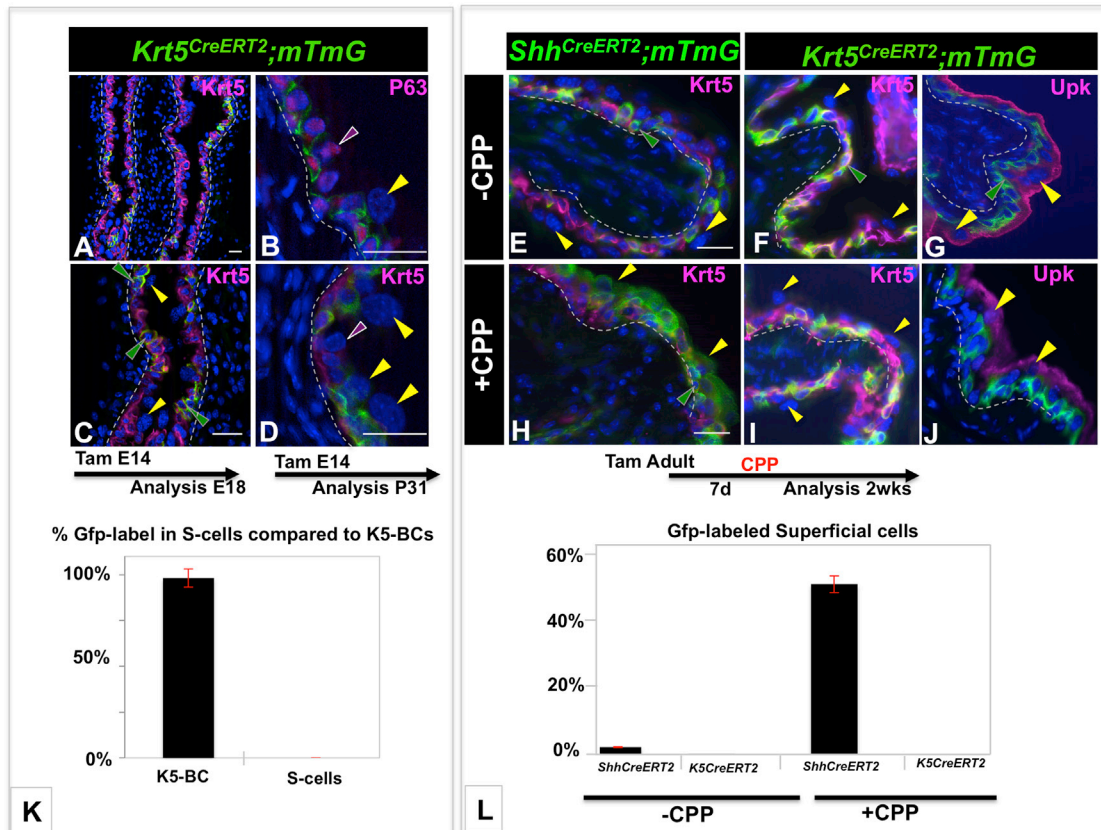


Figure 3. K5-BCs Are Unlikely to Be Urothelial Progenitors

(A–D) Lineage studies in the embryonic urothelium using the *Krt5^{CreERT2};mTmG* line to follow the fate of K5-BCs.

(A) A section from a *Krt5^{CreERT2};mTmG* E18 embryo exposed to TM at E14 stained for expression of Krt5 (pink). Cells expressing the GFP lineage marker detected with GFP antibody are green.

(B) A section from a *Krt5^{CreERT2};mTmG* embryo exposed to TM at E14 and analyzed 1 month later stained for expression of P63 (pink). Cells expressing the GFP lineage marker detected with GFP antibody are green.

(C) A higher magnification of the section in (A).

(D) A section from a *Krt5^{CreERT2};mTmG* embryo exposed to TM at E14 and analyzed after 1 month stained for expression of Krt5 (pink). Cells expressing the GFP lineage marker detected with GFP antibody are green.

(E) A section from a TM-treated adult *Shh^{CreERT2};mTmG* mouse that did not receive CPP, stained for expression of Krt5 (pink). Cells expressing the GFP lineage marker detected with GFP antibody are green.

(F and G) Sections from adult TM-treated *Krt5^{CreERT2};mTmG* mice that did not receive CPP, stained for expression of Krt5 (pink in F) and Upk (pink in G).

(H) A section from a TM-treated adult *Shh^{CreERT2};mTmG* mouse analyzed 2 weeks after CPP administration stained for expression of Krt5 (pink).

(I and J) Sections from a TM-treated adult *Krt5^{CreERT2};mTmG* mouse stained for expression of Krt5 (pink in I) or Upk (pink in J) 2 weeks after CPP treatment. Cells expressing the GFP lineage marker detected with GFP antibody are green.

(K) A graph showing the distribution of lineage-tagged cells in the K5-BC and superficial compartments in *Krt5^{CreERT2};mTmG* mice exposed to TM on E14, in utero, and analyzed at E18 or P31.

(L) A graph showing a comparison of lineage-tracing studies in *Krt5^{CreERT2};mTmG* and *Shh^{CreERT2};mTmG* mice with and without CPP treatment.

S cells are marked with yellow arrowheads, I cells with purple arrowheads, and K5-BCs with green arrowheads. For quantification, a minimum of three independent experiments were performed, and the average \pm SEM was plotted. Magnifications, 10 \times (A), 20 \times (C and E–J), and 50 \times (B–D). Scale bars, 50 μ m. See also Figure S3.

setting, CPP-treated and untreated controls were injected with EdU (5-ethynyl-2'-deoxyuridine) to label cells in S phase, and proliferation was measured at 24, 48, and 72 hr. Consistent with the low rate of turnover in the adult urothelium, few proliferating cells were present in controls that had not been treated with CPP (Figure S3A); however, in CPP-treated animals, proliferation increased after 24 hr, peaking at 48 hr when 33% of cells in the urothelium were Edu⁺ (Figures S3B and S3C). To evaluate the kinetics of urothelial regeneration during this 3-day period, we

stained CPP-treated adults and controls for expression of Upk, which labels both I cells and S cells. Analysis 24 and 48 hr after CPP treatment revealed a decreased thickness of the urothelium and downregulation of Upk expression compared to untreated controls, indicating that extensive exfoliation had taken place (Figures S3D–S3F). By 72 hr after CPP treatment, the thickness of the urothelium and expression levels of Upk distribution were similar to controls, indicating that the urothelium was reconstituted (Figures S3D and S3G).

We next performed damage and regeneration experiments with the *Shh^{CreERT2};mTmG* and *Krt5^{CreERT2};mTmG* lines. Adult mice were given three doses of TM over a 1-week period to activate Cre-dependent recombination and expression of the *GFP* lineage tag. CPP was administered 1 week after the last TM injection to induce a round of damage and repair. Analysis was performed 2 weeks after CPP exposure when regeneration is complete, and the urothelium has returned to a quiescent state. Analysis of *Shh^{CreERT2};mTmG* mice that did not receive CPP revealed a small number of lineage tag-expressing cells (Figure 3E); however, in CPP-treated *Shh^{CreERT2};mTmG* mice, *GFP* expression was present in 70% of the cells in the urothelium, including 50% of the S cell population (Figures 3H and 3L). These findings demonstrate that *Shh*-expressing cells can generate S cell daughters after CPP-induced injury. In parallel experiments with *K5^{CreERT2};mTmG* mice as a lineage marker, 60% of the urothelium was *GFP* positive after TM induction, indicating that recombination was robust; however, expression of the lineage tag was almost entirely restricted to the K5-BC population in both CPP-treated and untreated adults (Figures 3F, 3G, 3I, 3J, and 3L). The observation that K5-BCs do not generate detectable numbers of S cells during regeneration suggests that I cells rather than K5-BCs must be the superficial progenitor.

P Cells Are a Progenitor Population in the Developing Urothelium

Our studies suggest that P cells (**Foxa2⁺ P63⁺ Shh⁺ Upk⁺ Krt5⁻**) are a transient population present in the embryonic urothelium between E11 and E13; a period when fate mapping indicates that progenitor potential is high (Figure 1). To evaluate whether P cells can produce other urothelial cell types, we used a TM-inducible *Foxa2^{CreERT}* line (Frank et al., 2007) in fate mapping experiments. We first examined the specificity of Cre-dependent recombination in the *Foxa2^{CreERT};mTmG* line by exposing embryos to TM at E11 and analyzing the distribution of the *GFP* lineage marker after a short, 24 hr chase. *GFP* expression was seen in a small number of P cells that coexpress Foxa2, P63, and Upk, whereas *GFP*-labeled cells were undetectable in the urothelium of embryos that were not exposed to TM (Figures 4A and 4B; data not shown), indicating that Cre-dependent recombination is TM dependent and is initially confined to P cells. Analysis of TM-pulsed embryos after a longer, 7-day chase revealed expression of *GFP* in 10%–14% of cells in the intermediate and superficial populations (Figures 4C–4F). Although almost 90% of urothelial cells are K5-BCs at this stage, expression of the *GFP* lineage tag was rare or undetectable in the K5-BC population (Figures 4C–4F), suggesting that K5-BCs arise from a distinct progenitor cell type.

In parallel experiments, we traced the fate of P cells using the *Upk3aGCE;mCherry* line (<http://www.gudmap.org>), in which TM-inducible *mCherry* expression is detected by antibody staining (*mCherry* is shown in green in Figure 4 and in subsequent figures). Analysis of E12 *Upk3aGCE;mCherry* embryos 24 hr after TM exposure revealed *mCherry* labeling in a small number of P cells coexpressing Foxa2, Upk, and P63 (Figures 4G and 4H), indicating that recombination at this stage is restricted to the P cell compartment. Analysis after a 7-day chase period revealed expression of the *mCherry* lineage tag in about 33% of the S cell population and 10% of the I cell population (Figures

4I and 4J), but again, we did not observe expression in K5-BCs. Together, these studies suggest that P cells are I cell and S cell progenitors. However, because I cells and S cells form within 24 hr of one another (E13 and E14, respectively), it is unclear from our studies whether S cells are direct descendants of P cells or whether they are derived from I cells, which are P cell daughters.

I Cells Are Likely to Be S Cell Progenitors in the Regenerating Adult Urothelium

Fate mapping studies indicate that the *Shh*-expressing population contains urothelial progenitors in adults (Shin et al., 2011). We find that *Shh* is localized in K5-BCs, which fate mapping studies suggest are unlikely to be urothelial progenitors (Figure 3), and in I cells that have not been assessed for progenitor potential. We therefore used the *Upk3aGCE;mCherry* line in fate mapping studies to determine whether I cells can generate S cells in the adult regenerating urothelium. *Upk3aGCE;mCherry* adults were treated first with TM, then 1 week later with CPP to induce a round of regeneration, and analysis was performed 2 weeks later to evaluate the distribution of *mCherry*-expressing cells.

Analysis of TM-induced *Upk3aGCE;mCherry* control mice that had not received CPP revealed *mCherry* labeling in I cells and S cells; however, few were Edu⁺ (Figure 5A), consistent with the low rate of proliferation in the adult steady-state urothelium (Jost, 1989). However, analysis of *Upk3aGCE;mCherry* adults after CPP treatment revealed Edu labeling in 45% of I cells and in 67% of S cells (Figure 5E). CPP induces death and desquamation of the superficial layer (Figure S3); thus, the presence of Edu⁺ lineage-tagged S cells strongly suggests that they are I cell daughters. To evaluate whether I cells can self-renew and produce S cell daughters after serial CPP damage and regeneration, *Upk3aGCE;mCherry* adults were given TM three times over a 1-week period to activate Cre-dependent recombination, then CPP was administered 1, 3, and 5 weeks after the last dose of TM. Edu was given 48 hr after the first CPP dose to label cells in S phase. Analysis after three rounds of injury and repair revealed an increase in the percentage of lineage-labeled S cells (92% compared to 67% after one dose of CPP; Figures 5B–5D and 5F–5I). The observation that the numbers of lineage-marked S cells increase after serial damage and regeneration suggests that I cells are S cell progenitors and that they can self-renew. Because the Edu concentration is reduced by half each time a cell divides, the presence of S cells expressing high levels of Edu suggests that they are derived from I cell progenitors that divide slowly.

Retinoid Signaling Is Selectively Expressed in P Cells during Development and Is Upregulated in the Regenerating Urothelium

RA can induce ES cells to differentiate into urothelial cells in culture (Mauney et al., 2010), suggesting that retinoids may be important for controlling urothelial specification in vivo. To begin to address this, we analyzed wild-type embryos to assess the distribution of RA-responsive cells using the *RARE-LacZ* reporter line. *RARE-LacZ* mice harbor a transgene containing *LacZ* fused to an RA-response element that is expressed in cells where RA is available and Rar signaling is active (Rossant et al.,

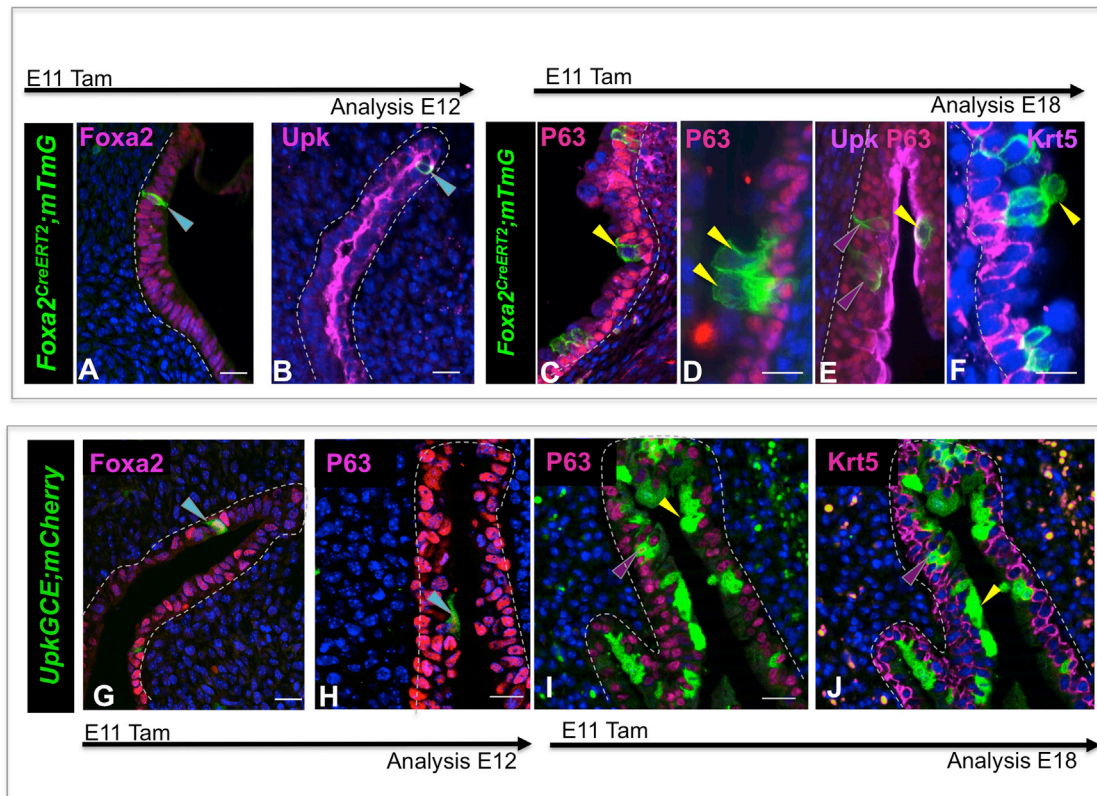


Figure 4. P Cells Are a Transient Progenitor Population in the Embryonic Urothelium

(A–F) Lineage tracing with the *Foxa2^{CreERT2};mTmG* line.

(A) Expression of the GFP lineage tag (detected with antibody and shown in green) in P cells stained for expression of *Foxa2* cells (pink) in an E12 embryo, 24 hr after TM exposure on E11.

(B) Expression of the GFP lineage tag (detected with antibody and shown in green) in P cells expressing *Upk* (pink) in an E12 embryo 24 hr after TM exposure on E11.

(C) A section from an E18 *Foxa2^{CreERT2};mTmG* embryo exposed to TM on E11 stained for expression of *P63* (pink).

(D) A section from an E18 *Foxa2^{CreERT2};mTmG* embryo exposed to TM at E11 stained for expression of *Upk* (pink) and *P63* (red).

(E) A section from an E18 *Foxa2^{CreERT2};mTmG* embryo exposed to Tam on E11 stained for expression of *Krt5* (pink).

(F) A section from an E18 *Foxa2^{CreERT2};mTmG* embryo exposed to Tam at E11, stained with *Krt5* (pink) showing a cluster of lineage-marked cells (detected with GFP antibody and shown in green).

(G) Expression of the *mCherry* lineage tag (green, detected with an antibody directed against Rfp) in P cells in an E12 *Upk3aGCE;mCherry* embryo exposed to Tam on E11 and stained for expression of *Foxa2* (pink).

(H) Expression of the *mCherry* lineage tag (green, detected with an antibody directed against Rfp) in P cells in an E12 *Upk3aGCE;mCherry* embryo exposed to Tam on E11 and stained for expression of *P63* (pink).

(I) Expression of the *mCherry* lineage tag (green, detected with an antibody directed against Rfp) in I cells and S cells in an E18 *Upk3aGCE;mCherry* embryo exposed to Tam on E11 and stained for expression of *P63* (pink).

(J) Expression of the *mCherry* lineage tag (green, detected with an antibody directed against Rfp) in I cells and S cells in an E18 *Upk3aGCE;mCherry* embryo exposed to Tam on E11 and stained for expression of *Krt5* (pink).

Magnifications, 20× (A–C, E, and G–J) and 40× (D and F). Scale bars, 50 μm.

1991). Analysis of *RARE-LacZ* expression during development revealed that *LacZ*-positive cells were most abundant between E11 and E14 and decreased to low levels at later stages (Figures 6A–6D). Analysis of the distribution of *RARE-LacZ* activity at E12 revealed expression in P cells (Figure 6E), and by E14, *LacZ* expression was localized predominantly in I cells and S cells (Figure 6K). These studies suggest that the RA-responsive cells are most abundant in the embryonic urothelium between E11 and E14, when urothelial progenitors are also present (Figure 1).

RA deficiency in mammals results in squamous metaplasia in the adult urothelium (Liang et al., 2005; Wolbach and Howe, 1925), indicating that retinoids are normally required for mainte-

nance of the adult steady-state urothelium. Analysis of the adult *RARE-lacZ* mice revealed low numbers of RA-responsive cells (Figure 6G), suggesting that low levels of RA signaling are adequate to maintain S cell renewal in the steady-state urothelium, which has a very slow rate of turnover. To evaluate whether RA signaling increases in response to injury, *RARE;LacZ* mice were treated with CPP, then analyzed during the first 3 days posttreatment to determine the numbers and distribution of *LacZ*-expressing cells. This analysis revealed a dramatic increase in the *LacZ*⁺ population, which followed similar kinetics as proliferation (Figures 6G, 6H, and S3C). Marker analysis during this 72 hr period revealed that the majority of *LacZ*⁺ cells were

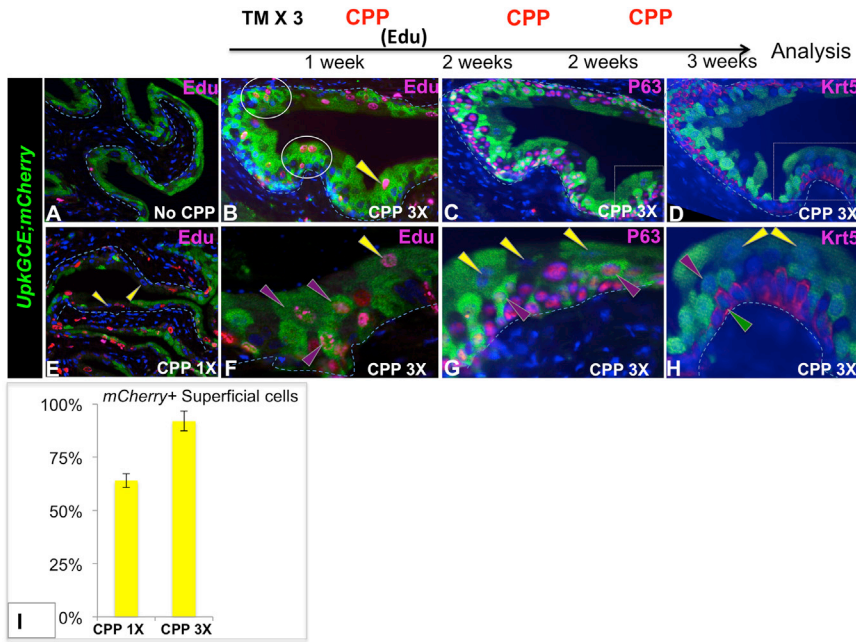


Figure 5. I Cells Are a Superficial Progenitor Population in Adults

(A) A section showing the urothelium of a *Upk3aGCE;mCherry* adult that did not receive CPP. *mCherry* detected with an antibody directed against Rfp is shown in green, and Edu-expressing cells are pink.

(B–H) Sections from a *Upk3aGCE;mCherry* adult after three rounds of CPP-induced damage and repair.

(B) Stained with Edu and *mCherry*.

(C) Stained with P63 and *mCherry*.

(D) Stained with Krt5 and *mCherry*.

(E) A section of a *Upk3aGCE;mCherry* adult after 1 round of CPP-induced damage and repair, showing the distribution of *mCherry* expression (green) and Edu (pink).

(F–H) Higher magnification of (B)–(D), respectively.

(I) Comparison of the numbers of *mCherry*-expressing superficial cells in *Upk3aGCE;mCherry* mice after one round or three rounds of CPP-induced damage and regeneration.

For quantification, a minimum of three independent experiments were performed, and the average \pm SEM was plotted. Magnifications, 20 \times (A–E), 40 \times (F–H), and 2 \times (insets in B–D and F–H). Scale bars, 50 μ M.

I cells and S cells (Figures 6I and 6J), suggesting that RA signaling may be important in these populations for regeneration after damage. These findings suggest that low levels of RA signaling maintain steady-state urothelial cell renewal, whereas high levels of RA signaling may be important for renewal of the superficial layer after injury.

Rars are only active when bound to RA, which is synthesized from retinol (vitamin A) in a temporally and spatially restricted manner by RA-synthesizing enzymes. To identify the source of RA that regulates urothelial formation and regeneration, we performed in situ hybridization analysis to assess the distribution of *Aldh1a2* (hereafter called *Raldh2*), an enzyme required for RA synthesis (Niederreither et al., 1999). These experiments reveal that *Raldh2* expression in the bladder is restricted to the mesenchyme just below the urothelium where expression was highest between E12 and E13 (Figure 6F). In adults, *Raldh2* expression persisted in the suburothelial stroma (Figure 6L), a domain important for regulating urothelial maintenance and regeneration via Wnt, Bmp, and Shh signaling (Mysorekar et al., 2009; Shin et al., 2011). These observations suggest that RA synthesized in the stromal compartment may be important for regulating Rar signaling in the embryonic and adult urothelium.

RA Signaling Is Required for Urothelial Specification

Although the above experiments demonstrated that RA signaling is active in P cells at a stage in embryonic development when progenitor potential is high, it was still unclear what role, if any, RA signaling has in urothelial specification. To directly address this question, we used Cre-Lox recombination to express *RaraDN*, a dominant inhibitory Rar, in the *Shh*-positive population in the embryo, which our studies indicate contains urothelial progenitors (Figure 1). To do this, we used the *Shh^{Cre/+}* line (Harfe et al., 2004), which drives Cre-dependent recombination in more than 90% of cells in the developing urothelium in combination

with the *Rosa26 mTmG* reporter (Muzumdar et al., 2007; Figure S1J). *RaraDN* is a truncated form of *Rara* that has been inserted in the *Rosa26* locus downstream of a floxed stop cassette where it is activated by Cre-mediated recombination. Our previous studies demonstrated that expression of the *RaraDN* mutant receptor blocks transcription by endogenous Rars, and importantly, we found that defects in embryos expressing two copies of the *RaraDN* allele are more severe than those in embryos expressing one allele (Chia et al., 2011; Rosselot et al., 2010), indicating that *RaraDN* inhibits RA signaling in a dose-dependent manner.

To evaluate whether *RaraDN* is an efficient suppressor of RA signaling in the urothelium, we generated *Shh^{Cre/+}; RaraDN^{+/+}* mutants expressing two copies of the *RaraDN*, and we examined whether expression of the *RaraDN* led to a reduction in expression of RA-responsive genes. Analysis of E18 *Shh^{Cre/+}* controls and *Shh^{Cre}; RaraDN^{+/+}* mutants revealed that *Ret* and *Arb2*, two genes whose expression is RA dependent, were downregulated in mutants compared to controls (Figures S4A, S4B, S4D, and S4E). These findings suggested that the *RaraDN* was efficiently inhibiting RA signaling. For further confirmation, we compared the distribution of RA-responsive cells in mutants and controls using the *RARE-lacZ* reporter line. Analysis of *Shh^{Cre}; RARE-LacZ* controls at E11 revealed large numbers of *LacZ⁺* cells (Figure S4C); however, in *Shh^{Cre}; RaraDN; RARE-LacZ* mutants, the number of *LacZ*-expressing cells was greatly reduced (Figures S4C and S4F). The observation that *Arb* and *Ret* are downregulated in *Shh^{Cre}; RaraDN* mutants, together with the reduction in the numbers of RA-responsive cells in the mutants, suggests that *RaraDN* driven by *Shh^{Cre}* efficiently inhibits RA signaling in urothelial cells.

In E18 *Shh^{Cre/+}* control embryos, the urothelium is a fully stratified epithelium containing K5-BCs, one to two layers of I cells, and a layer of mature, multinucleated S cells (Figure 7A).

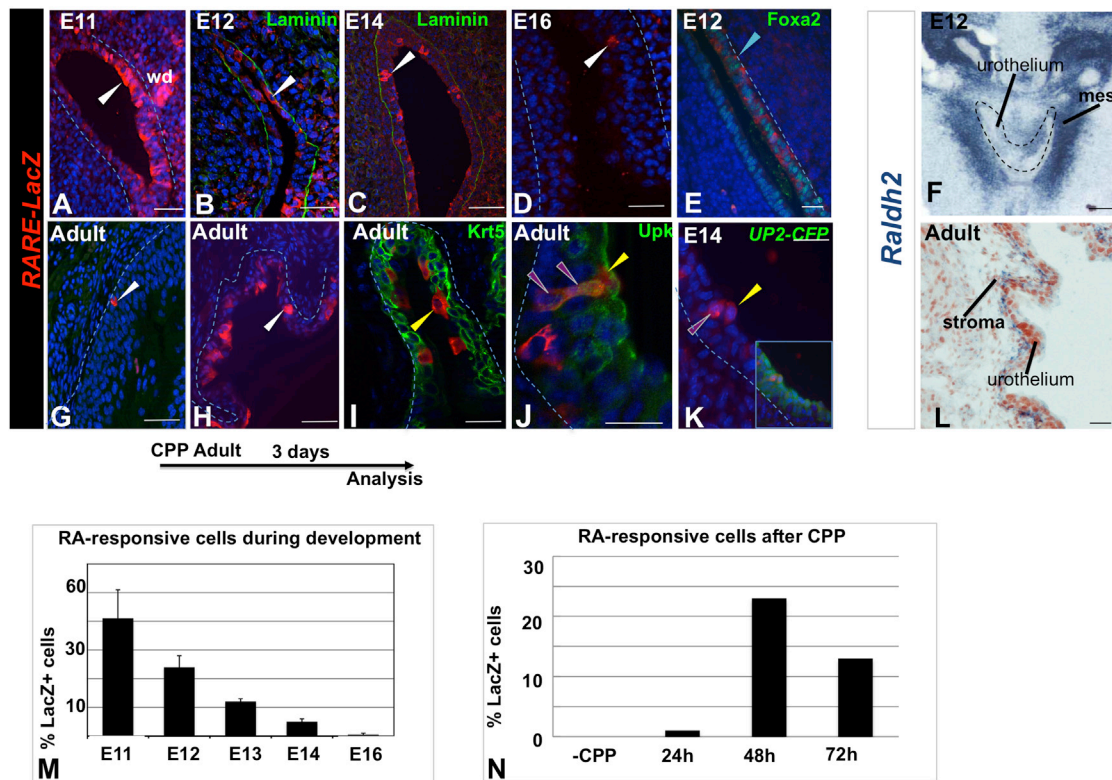


Figure 6. RA Signaling Is Selectively Upregulated in the Embryonic Urothelium and in the Adult Urothelium during Regeneration

(A) A section showing the urothelium in an E11 *RARE-lacZ* reporter embryo showing *LacZ* expression (red) detected with antibody staining. (B) A section showing the distribution of RA-responsive cells in the urothelium of an E12 *RARE-lacZ* reporter (red). (C) A section from an E14 *RARE-lacZ* reporter embryo stained for *lacZ* expression (red). (D) A section from an E16 *RARE-lacZ* embryo stained for *lacZ* expression (red). (E) A section from an E12 *RARE-lacZ* reporter embryo stained for *lacZ* expression (red) and *Foxa2* (green). (F) In situ hybridization showing expression of *Raldh2* in suburothelial mesenchyme in an E12 embryo. (G) A section from the urothelium of an adult *RARE-lacZ* reporter mouse stained for *lacZ* expression (red). (H) A section from the urothelium of an adult *RARE-lacZ* reporter mouse 48 hr after administration of CPP stained for *lacZ* expression (red). (I) A section from the urothelium of an adult *RARE-lacZ* reporter mouse 48 hr after administration of CPP, stained for *lacZ* expression (red) and *Krt5* (green). (J) A section from the urothelium of adult *RARE-lacZ* reporter mouse 48 hr after administration of CPP, stained for *lacZ* expression (red) and *Upk* (green). (K) A section from an E14 *Up2-Cfp;RARE-lacZ* reporter embryo stained for *lacZ* expression (red). Inset: Lower magnification showing *lacZ* (red) and *Up2-Cfp* (green). (L) In situ hybridization showing expression of *Raldh2* in suburothelial stroma in a wild-type adult mouse. (M) Quantitation of the numbers of *lacZ*-expressing cells in *RARE-lacZ* embryos between E11 and E16. (N) Quantitation of the numbers of *lacZ*-expressing cells in untreated (control) adult *RARE-lacZ* mice and in *RARE-lacZ* mice 24, 48, and 72 hr after CPP treatment. For quantification, a minimum of three independent experiments were performed, and the average \pm SEM was plotted. Magnifications, 10 \times (E and F), 20 \times (A–D, G–I, K, and L), and 40 \times (J). Scale bars, 50 μ m.

However, in five out of seven *Shh^{Cre}; RaraDN^{+/+}* mutants examined, there was only a single layer of P63-expressing cells, few if any morphologically distinguishable S cells, and *Upk*, a marker of I cells and S cells, was downregulated (Figure 7F). On the other hand, K5-BCs expressing *Krt5* and P63 lined the basal layer in mutants, suggesting that formation of this population is retinoid independent (Figures 7B and 7G). Transmission electron microscopy (TEM) analysis of the urothelium in controls revealed the prominent apical plaque, and fusiform vesicles that are unique features of S cells (Figure 7C, black and white arrowheads mark apical plaque and vesicles, respectively) were absent from S cells in mutants, which instead displayed microvilli (Figure 7H, black arrowhead), structures not found on the surface of wild-type S cells. These studies suggest that RA signaling is normally required for formation of I cells and S cells.

We next investigated which cell types normally mediate RA signaling. To begin to examine the temporal requirement for RA signaling, we used the TM-inducible *Shh^{CreERT2};mTmG* line to express *RaraDN* at E11, when our studies indicate that P cell progenitors are abundant. *Shh^{CreERT2};mTmG* controls and *Shh^{CreERT2};mTmG; RaraDN* mutants were exposed to TM at E11 and analyzed at E18. This analysis revealed a moderate reduction in overall numbers of I cells and S cells compared to the controls, and a dramatic reduction in the numbers of GFP-labeled S cells (Figures 7K and 7L), supporting the suggestion that RA signaling is normally required in urothelial progenitors for formation of S cells. Because *RaraDN* inhibits RA signaling in a dose-dependent manner (Blumberg et al., 1997; Damm et al., 1993; Rajaii et al., 2008), the reduced severity of the urothelial phenotype in *Shh^{CreERT2};mTmG; RaraDN* mutants compared

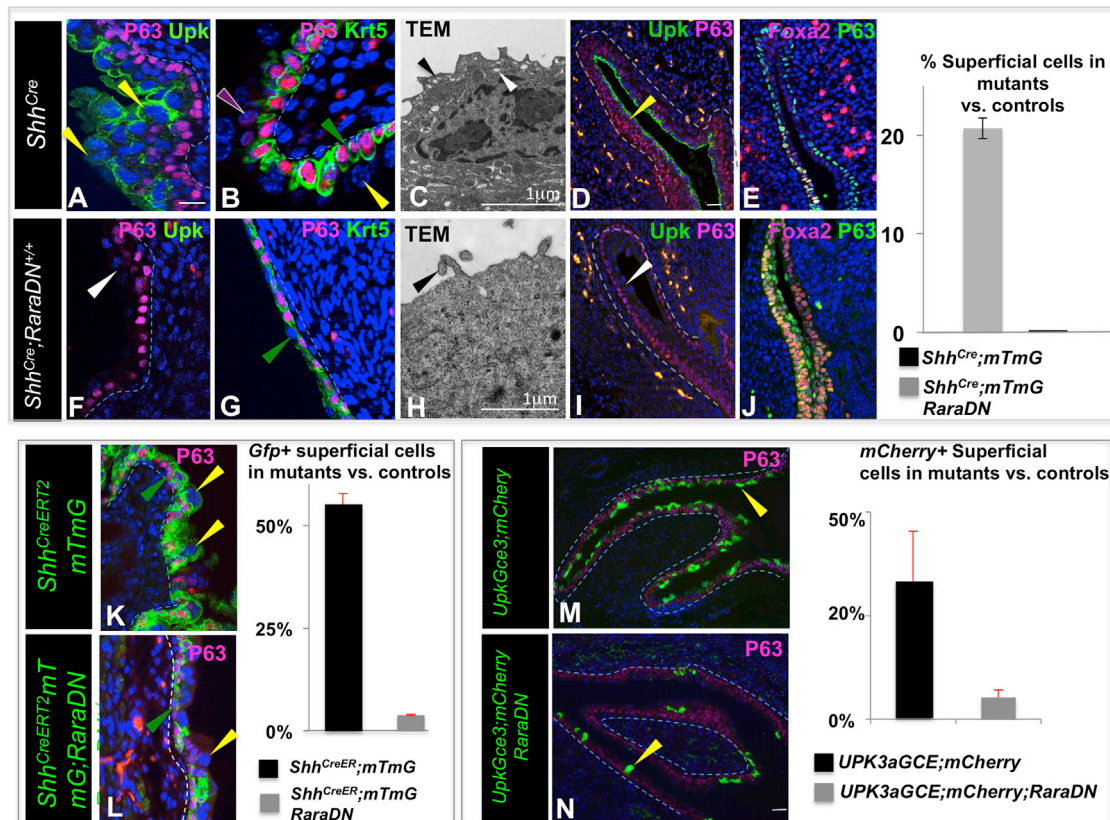


Figure 7. Retinoids Are Required for Urothelial Formation

(A) P63 (pink) and Upk (green) staining in an E18 control *Shh^{Cre/+}* embryo. (B) Krt5 (green) and P63 (pink) staining in the urothelium of an E18 control *Shh^{Cre/+}* embryo. (C) TEM showing the apical surface of an *Shh^{Cre/+}* embryo. (D) A section from an E14 *Shh^{Cre/+}* control embryo stained with Upk (green) and P63 (pink). (E) A section from an E14 *Shh^{Cre/+}* embryo stained with Foxa2 (pink) and P63 (green). (F) P63 (pink) and Upk (green) staining in a section from an E18 *Shh^{Cre/+}; RaraDN* mutant embryo. (G) Krt5 (green) and P63 (pink) staining in the urothelium of an E18 *Shh^{Cre/+}; RaraDN* mutant embryo. (H) TEM showing the apical surface of an E18 *Shh^{Cre/+}; RaraDN* mutant urothelial cell. (I) A section from an E14 *Shh^{Cre/+}; RaraDN* mutant embryo stained with Upk (green) and P63 (pink). (J) A section from an E14 *Shh^{Cre/+}; RaraDN* mutant embryo stained with Foxa2 (pink) and P63 (green). (K) P63 (pink) staining in an E18 control *Shh^{CreERT2/+}; mTmG* embryo exposed to TM on E11 (the GFP lineage tag is green). (L) P63 (pink) staining in an E18 *Shh^{CreERT2/+}; mTmG; RaraDN* mutant embryo exposed to TM on E11 (the GFP lineage tag is green). (M) P63 (pink) staining in an E18 *Upk3aGCE; mCherry* control embryo exposed to TM on E11 (*mCherry* is shown in green). (N) P63 (pink) staining in an E18 *Upk3aGCE; mCherry; RaraDN* mutant embryo exposed to TM on E11 (*mCherry* is shown in green). For quantification, a minimum of three independent experiments were performed, and the average \pm SEM was plotted. Magnifications, 20 \times (D, E, I, J, M, and N), 40 \times (A, B, F, G, K, and L), and 31,000 \times (C and H). Scale bars, 50 μ m. See also Figure S4.

to the constitutive *Shh^{Cre}; RaraDN^{+/-}* line is likely to be due to expression of one versus two copies of *DN*, respectively.

Impaired S cell formation at E18 could indicate a role for retinoids for survival of urothelial progenitors or could indicate a role for RA in specification of urothelial progenitors. We did not detect I cells or S cells in *Shh^{Cre+/-}; RaraDN^{+/-}* mutants at any stage examined (Figures 7D and 7I), suggesting that these cell types failed to form. Consistent with this, TUNEL analysis of mutants did not reveal increased apoptosis in the urothelium compared to controls (data not shown). P cells, the first urothelial cell type, are transiently present in the urothelium between E11 and E13 (Figure 4). They are distinguishable from endoderm by expression of Upk, and from other urothelial cell types by

expression of *Foxa2*, which is downregulated after E13 (Figure 2). Immunostaining of E14 *Shh^{Cre+/-}* controls revealed undetectable expression of *Foxa2*, as expected; however, E14 *Shh^{Cre+/-}; RaraDN^{+/-}* mutants contained large numbers of *Foxa2*-expressing cells, which were also positive for *Shh* and P63, but lack expression of Upk or Krt18, Krt20, and other urothelial markers (Figure 7J; data not shown). The persistence of this population expressing endodermal markers in *Shh^{Cre+/-}; RaraDN^{+/-}* mutants and absence of I cells and S cells suggest that retinoids may normally be important in endoderm for specification of P cells.

To directly examine the requirement for RA signaling in P cells, we first attempted to use the *Foxa2^{CreERT2}; mTmG* line to express

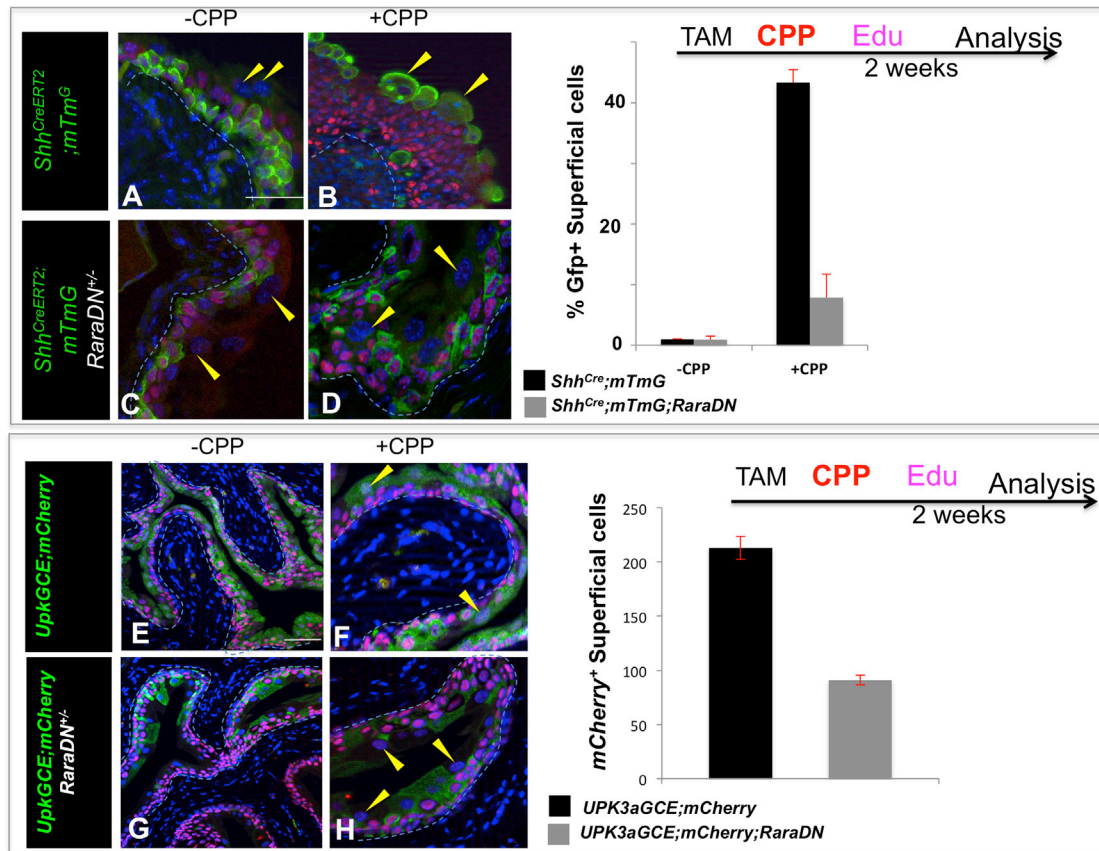


Figure 8. Retinoids Are Required for Urothelial Regeneration

(A) P63 expression in a control *Shh^{CreERT2};mTmG* adult that has not received CPP.

(B) P63 expression (pink) in an *Shh^{CreERT2};mTmG* adult analyzed 2 weeks after CPP treatment.

(C) P63 expression in a mutant *Shh^{CreERT2};mTmG; RaraDN* adult that has not received CPP.

(D) P63 (pink) expression in a CPP-treated *Shh^{CreERT2};mTmG;RaraDN* mutant adult analyzed 2 weeks after CPP treatment.

(E) P63 expression (pink) in a control *Upk3aGCE;mCherry* adult that has not received CPP (*mCherry* is shown in green).

(F) P63 (pink) expression in a CPP-treated *Upk3aGCE;mCherry* adult analyzed 2 weeks after CPP treatment. *mCherry* is shown in green.

(G) P63 (pink) expression in a *Upk3aGCE;mCherry;RaraDN* mutant adult that did not receive CPP. *mCherry* is shown in green.

(H) P63 (pink) expression in a *Upk3aGCE;mCherry RaraDN* mutant 2 weeks after CPP treatment. *mCherry* is shown in green.

For quantification, a minimum of three independent experiments were performed, and the average \pm SEM was plotted. Magnifications, 20 \times (A–H). Scale bars, 50 μ m.

a single copy of *RaraDN*, which in *Shh^{CreERT2};mTmG* mice, resulted in reduction of the number of lineage-tagged S cells. We were, however, unable to obtain *Foxa2^{CreERT2};mTmG; RaraDN* mutants, most likely due to embryonic lethality because *Foxa2^{CreERT2}* labels cells in the heart and vasculature, which are also regulated by RA signaling (Li et al., 2012). We therefore used the *Upk3aGCE* line to express the *RaraDN*, which our studies indicate selectively labels P cells after a TM pulse at E11 (Figures 4G and 4H). E11 *Upk3aGCE;mCherry* controls and *Upk3aGCE;mCherry;RaraDN* mutants were exposed to TM and analyzed at E18 to determine the distribution of lineage-tagged I cells and S cells. Analysis of controls revealed abundant *mCherry*-labeled S cells and I cells as expected (Figure 7M); however, the number of *mCherry*-labeled cells in mutants was greatly reduced (Figure 7N). This phenotype was virtually identical to that obtained in *Shh^{CreERT2};mTmG;DN* mutants, which also express one allele of *RaraDN* (compare Figures 7K and 7L).

Together, these results suggest that retinoids control urothelial formation by regulating P cell specification.

RA Signaling Is Required for Urothelial Regeneration

We found that RA signaling is selectively upregulated in the urothelium following CPP-induced injury, suggesting that retinoids may control regeneration (Figure 6). To address this further, we first used the *Shh^{CreERT2}* line, which drives expression in urothelial progenitors, to express *RaraDN*. *Shh^{CreERT2}; RaraDN;mTmG* mutants and *Shh^{CreERT2};mTmG* controls were treated with TM, and CPP was administered after 1 week to induce damage and repair. Controls and mutants were analyzed after 2 weeks to evaluate the distribution of lineage-tagged cells in the CPP-treated urothelium. In animals that had not received CPP, *GFP*-labeled cells were predominantly in the basal and intermediate layers, and a small number of lineage-tagged S cells were detectable (Figures 8A and 8C). Analysis of

Shh^{CreERT2};mTmG controls after CPP treatment revealed expression of the *GFP* lineage tag in 40% of the S cell population, indicating that these were daughters of *Shh*⁺ progenitors (Figure 8B). In *Shh^{CreERT2};RaraDN;mTmG* mutants, however, there were 10-fold fewer *GFP*-labeled S cells compared to controls (Figure 8D). These results indicate that RA signaling is important in an *Shh*-expressing cell type for urothelial regeneration.

To evaluate the requirement for RA signaling in I cells, which our studies suggest are S cell progenitors, we performed CPP-induced injury using *Upk3aGCE;mCherry* as a lineage marker. *Upk3aGCE;mCherry* mice were treated with TM, then 1 week later with CPP. Edu was administered 48 hr after CPP treatment to label proliferating cells. Analysis of *Upk3aGCE;mCherry* control mice 2 weeks after CPP treatment revealed extensive *mCherry* labeling in the I cell and S cell populations (Figures 8E and 8F). In *Upk3aGCE;mCherry; RaraDN* mutants, however, the overall numbers of S cells were reduced by about 40% compared to controls, and the proportion of *mCherry*-labeled S cells was also reduced by nearly 50% (Figures 8G and 8H), suggesting that RA signaling is normally required in I cells for regeneration of the adult urothelium. As expected, we did not observe defects in regeneration in *Krt5^{CreERT2};RaraDN* mutants (data not shown).

Previous studies suggest that K5-BCs, which are progenitors in skin and other stratified epithelia, are also progenitors in the adult urothelium (Shin et al., 2011). We show by fate mapping, however, that K5-BCs are unlikely to be progenitors either in the embryo or adult regenerating urothelium. Our studies suggest that formation and regeneration of the urothelium depend on distinct progenitor populations: P cells, a transient cell type present in the developing urothelium, and I cells, that serve as progenitors in the adult regenerating urothelium. We show that retinoids, potent signaling molecules that regulate specification and self-renewal of ES cells and other progenitor cell types, are required in P cells for their specification during development and in I cells for regeneration in response to injury. The identification of urothelial progenitors and the observation that urothelial formation and regeneration depend on retinoid signaling in these progenitors could have important implications for tissue engineering and repair. Ultimately, these findings may lead to treatments that prevent loss of the urothelial barrier associated with chronic injury, a major cause of voiding dysfunction and bladder pain syndrome in humans.

DISCUSSION

Recent studies indicate that the adult urothelium contains a population of *Shh*-expressing cells that have long-term regenerative potential, and these cells have been proposed to be K5-BCs (Kurzrock et al., 2008; Shin et al., 2011; Thangappan and Kurzrock, 2009). Our fate mapping studies, however, suggest that K5-BCs rarely if ever produce I cells or S cells and that the I cell/S cell compartment arises from a separate lineage. We show that P cells are transient progenitors in the embryonic urothelium, and we show that I cells are S cell progenitors in the regenerating adult urothelium. Retinoids are potent transcriptional regulators that can induce ES cells to form urothelial cells in vitro (Mauney et al., 2010). Our studies demonstrate that impaired RA signaling leads to loss of the I cell and S cell popu-

lations during development due to failure in P cell specification, and we find that RA signaling is also important in I cells in adults for regeneration after injury. That K5-BCs are unlikely progenitors in the embryo or adult challenges the current thinking and raises the possibility that other specialized epithelia may develop from novel progenitor populations.

K5-BCs and I Cells/S Cells Arise from a Common Endodermal Progenitor that Is Not Maintained in the Developing or Adult Urothelium

The epithelia lining a number of organs including the bladder, urethra, prostate, and gut derive from the endodermal germ layer (Wells and Melton, 1999), where P63 is localized. Recent fate mapping studies using a constitutive P63Cre line (*DeltaNp63(+)/Cre*); *ROSA26(EYFP)* to indelibly label P63-expressing cells and their daughters indicate that all cell types in the urothelium arise from this endodermal population (Pignon et al., 2013). However, our fate mapping studies using inducible Cre lines to selectively label cell types in the developing and adult urothelium indicate that K5-BCs rarely if ever generate other urothelial cell types and vice versa. Taken together, these observations suggest that K5-BCs, P cells, I cells, and S cells arise from a progenitor population that is present in endoderm but is not maintained at later stages in the developing or mature urothelium. *Krt5*-expressing cells are present in the urethra at early stages of development but are only detected in the urothelium after other urothelial cell types form. That the urothelial K5-BC population derives from these K5-expressing urethral cells is an interesting possibility.

RA-Dependent Transcription Regulates Multiple Steps of Urothelial Development and Regeneration

The endoderm is patterned along the rostral-caudal axis to generate a number of organs, including the thyroid, thymus, lung, stomach, intestine, pancreas, and the bladder, and retinoids have been shown to be important in endoderm for establishing this regional patterning and cell-type specification (Bayha et al., 2009). An example of the multiple functions of RA signaling in organ formation is the pancreas, where RA acts at the stage of specification (Martín et al., 2005; Molotkov et al., 2005), and at later stages, is required for formation of insulin-producing β cells (Dalgin et al., 2011; Stafford and Prince, 2002). In addition, RA can also induce stem cells in culture to differentiate into pancreatic cell-type culture (Shim et al., 2007).

Retinoids may act in a similar manner in the urothelium. Retinoids induce ES cells to differentiate into urothelial cell types (Mauney et al., 2010), and our studies suggest that RA signaling controls specification of P cell progenitors in the embryonic urothelium and I cell progenitors during regeneration. It would not be surprising if RA is also an important regulator of I cells in the steady-state adult urothelium, a question that we will address in future studies.

Retinoids control pluripotency and specification of progenitors and stem cell populations (Soprano et al., 2007; Wang et al., 2011; Wichterle and Peljto, 2008). Recent studies suggest that this RA regulates the state change from pluripotency/self-renewal to differentiation via an epigenetic mechanism in which RA binding to Rar/Rxr complexes in regulatory regions of target genes relieves polycomb repression by inducing a conformational change in the Rars (reviewed in Gudas and Wagner,

2011). This RA-induced conformational change is mediated by the ligand-dependent activating domain (AF2), which is deleted in the *RaraDN* mutant receptor; hence, it would not be surprising if *RaraDN* expression in urothelial progenitors inhibited their ability to undergo a state change. It will be interesting to determine whether RA signaling acts by positively regulating sets of target genes in urothelial progenitors or by relieving repression. The identification of urothelial progenitors whose specification is regulated by retinoids could have important implications for tissue engineering and repair and, ultimately, may lead to treatments that prevent loss of the urothelial barrier, a major cause of voiding dysfunction and bladder pain syndrome in humans.

EXPERIMENTAL PROCEDURES

Mice

Animals were housed in the animal facility of Irving Cancer Research Center, Columbia University; all animal works were approved by IACUC protocol. Littermates were used for all experiments in which wild-type and mutant embryos were compared, and three animals were analyzed unless otherwise specified.

Chemical Injury

For chemical injury, CPP (Sigma-Aldrich; catalog #C7397) was dissolved in PBS (15 mg/ml) and given to mice at a dose of 150 mg/kg by IP injection.

Proliferation

Mice were injected IP with EdU at a dose of 0.1 mg/20 g. Proliferating cells were detected on frozen sagittal bladder sections according to the manufacturer's protocol (Click-iT EdU cell proliferation assay kit, Invitrogen; catalog #C-10419).

Histology, Immunohistochemistry, and Nonradioactive In Situ Hybridization

Tissues were fixed overnight with 4% PFA. Cryosections were 7 and 14 μ m for immunostaining and in situ hybridization, respectively. In situ hybridization analysis with digoxigenin-labeled riboprobes was essentially as described elsewhere (Mendelsohn et al., 1999).

SUPPLEMENTAL INFORMATION

Supplemental Information includes Supplemental Experimental Procedures, four figures, and one table and can be found with this article online at <http://dx.doi.org/10.1016/j.devcel.2013.07.017>.

ACKNOWLEDGMENTS

We thank Fanghua Li and Jean-Marie Garnier for technical assistance, Indira Mysorekar, Doris Herzlinger, Frank Costantini, and Lori Sussel for discussions and critical reading of the manuscript, Xue-Ru Wu for the *Upk2* promoter construct, and Jeff Whitsett for the *Foxa2* antibody. This work was supported by grants from NIDDK and the TJ Martell foundation.

Received: January 8, 2013

Revised: June 20, 2013

Accepted: July 24, 2013

Published: August 29, 2013

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